# Anaphylaxis



Call details:

Called to an eight-year-old female with pain in her foot and difficulty breathing.

### Instructions to role-players:

You are an eight-year-old female who stepped on something sharp while playing in your backyard. You are having difficulty breathing, and your face and arms are itchy. You are scared and don't like it when this happens. This has happened before at school, and your teacher had to help you stick yourself with a needle. You don't like needles.

# MARINE

Call details: None

### Instructions to role-players:

You are a 20-year-old female relaxing on the deck of your fishing boat when you suddenly become short of breath. You begin to have difficulty breathing, and your face and arms are itchy. You are scared and don't like it when this happens. This has happened before, and a nurse had to give you a needle. You don't like needles.

# WORKPLACE

Call details: None

### Instructions to role-players:

You are a five-year-old female on a company-wide family day with your dad and 10-year-old brother. You've just had a picnic and are taking a tour of the quarry when you begin to have difficulty breathing. Your face and arms are itchy. You are scared and don't like it when this happens. This has happened before at home, and your dad had to stick you with a needle. You don't like needles.



			Findings/Actions Successfully Identified/Demonstrated				
	Findings	Actions	Yes	No	Notes/Supporting Comments		
Scene Survey				1			
Environment	Outside, safe; warm summer day						
Hazards	None						
Mechanism/Chief Complaint	Itchy, SOB						
Number of Patients	1						
Additional Resources	None						
Primary Survey			<u> </u>				
Introduction		Apply PPE, introduce self and obtain consent					
Appearance	Pale						
Level of Consciousness	Alert						
Spine	Clear						
Airway	Open, swelling to face	Administer medication using auto-injector					
Breathing/Circulation	Wheezy/rapid	Oxygen via NRB, 10–15 Ipm					
Shock							
Rapid Body Survey							
Head-to-Toe Check	Rashes on face, neck, chest, abdomen, legs, and arms Bee stinger in bottom of left foot	Remove stinger					
Intervention	Oxygen Medication administration	NRB, 10–15 lpm Epinephrine					
Transport Decision		1					
Decision	Load and go						

						js/Actions Successfully tified/Demonstrated
	Find	ings	Actions	Yes	No	Notes/Supporting Comments
Secondary Survey		I				1
Interview						
Chief Complaint	Itchy, SOB, so	re foot				
Signs/Symptoms	SOB, rashes					
Allergies	Bee stings					
Medications	Auto-injector					
Past Medical History	None					
Last Meal	1 hour ago					
Events Prior	See scenario					
Vital Signs						
Pulse	140/rapid/ weak	100/regular/ full				
Respirations	28/rapid/ shallow	20/rapid/ deep				
Blood Pressure	70/Palp	100/60				
Pupils	4 mm/equal, round, and reactive to light	4 mm/equal, round, and reactive to light				
Skin	Pale, clammy 15	Pale, warm				
GCS	92%	15				
SPO <sub>2</sub>	N/A	98%				
Blood Glucose		N/A				
Head-to-Toe Check						If medication is given prior
Head/Face	Hives					to the head-to-toe check,
Neck	Hives, no JVD					marked improvement will be
Chest	Hives, wheeze expansion	es, B/L chest				seen in patient's rashes and wheezes
Abdomen/Pelvis	Rashes to abo	domen				
Back	As found					
Upper Extremities	Rashes, Medi	cAlert®				
Lower Extremities	Rashes, sting	er site				
Neurological	As found					
Secondary Transport D	ecision					
Decision	Load and go					

ime completed:
Overall comments:

Steps shaded in dark grey are critical actions/findings. If a critical action/finding is not successfully demonstrated/ identified, the scenario is incomplete. If the scenario is marked incomplete, supporting comments are required.

Complete

Incomplete

# Fire



### Call details:

Called to a house fire where firefighters have brought a 28-year-old male out to the sidewalk.

### Instructions to role-players:

You are a 28-year-old man whose house is on fire. You were cooking on the stove when the oil in a pot caught fire, causing the kitchen curtains to catch on fire. You attempted to remove the pot from the stove, but it was so hot you dropped it, burning yourself and causing other articles to catch fire.

# MARINE

### Call details:

Called to the scene of a fire in the galley on board a tanker ship. Early reports say a 28-year-old male has been burned. The on-board fire teams are working on extinguishing the fire. The fire has been contained, and the area is now safe to enter. A fire-team member leads you to the burned male.

### Instructions to role-players:

You are a 28-year-old man working in the galley. You were cooking on the stove when the oil in a pot caught fire. You attempted to remove the pot from the stove, but it was so hot you dropped it, burning yourself and causing a towel to catch fire.

### WORKPLACE

### Call details:

Called to the scene of a fire at the oil-field camp where you work. The cook, who is 25 years old, has been burned by hot oil. A fire team is working on extinguishing the fire. The fire has been contained, and the area is now safe to enter.

#### Instructions to role-players:

You are a 25-year-old male cook at an oil-field camp. You were cooking lunch on the stove when the oil in the pot caught fire. You attempted to remove the pot from the stove, but it was so hot you dropped it, burning yourself and causing a towel to catch fire.

CANADIAN RED CROSS

			Findings/Actions Successfully Identified/Demonstrated				
	Findings	Actions	Yes	No	Notes/Supporting Comments		
Scene Survey				1			
Environment	Safe, evidence of fire (including smoke)						
Hazards	Fire						
Mechanism/Chief Complaint	Burned (see description)						
Number of Patients	1						
Additional Resources	Fire/police						
Primary Survey							
Introduction		Apply PPE, introduce self and obtain consent					
Appearance	Significant burns on hands, severe burns on chest, some smoke inhalation						
Level of Consciousness	Conscious						
Spine	Clear						
Airway	Clear						
Breathing/Circulation	Wheezy/rapid	Oxygen via NRB, 12–15 lpm Administer Ventolin®					
Shock							
Rapid Body Survey							
Head-to-Toe Check	Chest: severe burns Back: stable, no pain Upper extremities: tender; significant burns on hands						
Intervention		Treat burns Monitor					
Transport Decision							
Decision		Transport					

				Findings/Actions Successfully Identified/Demonstrated			
	Fin	dings	Actions	Yes	No	Notes/Supporting Comments	
Secondary Survey							
Interview							
Chief Complaint	Burns/difficu	lty breathing					
Signs/Symptoms	Pain						
Allergies	Penicillin						
Medications	None						
Past Medical History	None						
Last Meal	None						
Events Prior	Preparing m hot oil	eal, dropped					
Vital Signs							
Pulse	100/rapid/ full	100/rapid/ full					
Respirations	22/rapid/ shallow	22/rapid/ shallow					
Blood Pressure	130/80	130/80					
Pupils	4 mm	4 mm					
Skin							
GCS	15	15					
SPO <sub>2</sub>	98%	98%					
Blood Glucose	N/A	N/A					
Head-to-Toe Check		1					
Head/Face	Abrasions, s	noky	Dress burns				
Neck	Severe burns	5					
Chest	Wheezing		Administer 2nd dose				
Abdomen/Pelvis	Abrasions		of Ventolin <sup>®</sup>				
Back	N/A						
Upper Extremities	Significant b	urns on hands					
Lower Extremities	N/A						
Neurological	Alert/oriente	d					
Secondary Transport De	ecision						
Decision			Transport				
Time completed: Overall comments:							
			lings. If a critical actic	on/findin	ig is no	t successfully demonstrated	
identified, the scenario	is incomplete	e. If the scena				comments are required.	
Complete		ncomplete					

# Head and/or Spine Injury



### **PRE-HOSPITAL**

### Call details:

Called to a single motor vehicle collision involving a motorcycle. You arrive to find a responsive male, whom you estimate to be in his late 20s, lying on the side of the road.

#### Instructions to role-players:

You are a 28-year-old downhill mountain biker out for a recreational ride. You hit a piece of debris and go over your handlebars, hitting your face on the bike as you fall. You are wearing a full face helmet with no visor. You are moaning and are not able to get up off the ground. The blood from your nose and mouth injuries is running into your throat, and you are having trouble breathing.

### MARINE

### Call details:

Called to a 32-year-old male who slipped on the stairs in the bow of the ship and hit his face against the stair railing. He is responsive but not getting up.

#### Instructions to role-players:

You are a 32-year-old man working as a crew member on board a ship. You are running down a flight of stairs to guickly deliver a message, and you slip and fall. You hit your face against the railing as you fall. You have been loading transport bins so you are wearing a full face helmet without a visor. You are moaning and are not able to get up off the ground. The blood from your nose and mouth injuries is running into your throat, and you are having trouble breathing.

### WORKPLACE

### Call details:

Called to a 28-year-old surveyor out on a quad (an all-terrain vehicle) who was thrown against the front bar. He is responsive but not getting up.

#### Instructions to role-players:

You are a 28-year-old and surveying on a quad. As you take a sharp turn, you hit a large bump hidden in the dirt road. You are thrown forward and hit your face against the front bar as you fall. You are wearing a full face helmet without a visor. You are moaning and are not able to get up off the ground. The blood from your nose and mouth injuries is running into your throat, and you are having trouble breathing. You are a 28-year-old man surveying on a quad. As you take a sharp turn, you hit a large bump hidden in the dirt

				Findings/Actions Successfully Identified/Demonstrated			
	Findings	Actions	Yes	No	Notes/Supporting Comments		
Scene Survey	-						
Environment	See scenario						
Hazards	None						
Mechanism/Chief Complaint	Fall						
Number of Patients	1						
Additional Resources	None						
Primary Survey							
Introduction		Apply PPE, introduce self and obtain consent					
Appearance	Blood on face						
Level of Consciousness	Verbal						
Spine	Clear	Apply manual stabilization					
Airway	Blood in throat	Clear airway					
Breathing/Circulation	Regular/present	Oxygen via NRB, 12–15 lpm					
Shock							
Rapid Body Survey							
Head-to-Toe Check	Blood from mouth and nose Abrasions to legs, lacerations to arms						
Intervention	Spinal immobilization	Remove helmet Apply cervical collar, place on backboard					
Transport Decision							
Decision	Load and go						

					gs/Actions Successfully tified/Demonstrated	
	Find	ings	Actions	Yes	No	Notes/Supporting Comments
Secondary Survey						
Interview						
Chief Complaint	Pain, unable t	o get up				
Signs/Symptoms	Blood on face	1				
Allergies	Peanuts					
Medications	None					
Past Medical History	None					
Last Meal	Breakfast					
Events Prior	See scenario					
Vital Signs						
Pulse	82/regular/ full	82/regular/ full				
Respirations	14/regular/ deep	14/regular/ deep				
Blood Pressure	140/90	140/90				
Pupils	Unequal	Unequal				
Skin	Warm, moist	Warm, moist				
GCS	12	14				
SPO <sub>2</sub>	97%	97%				
Blood Glucose	5.6	5.6				
Head-to-Toe Check						
Head/Face	Blood from no mouth	ose and	Bandage wounds			
Neck	No JVD					
Chest	As found					
Abdomen/Pelvis	As found					
Back	As found					
Upper Extremities	Lacerations					
Lower Extremities	Abrasions					
Neurological	As found					
Secondary Transport D	ecision				1	
Decision	Load and go					
Fime completed:					1	I
Steps shaded in dark g	grey are critical	actions/find	ings. If a critical act			t successfully demonstrated g comments are required.
Complete	🗌 In	complete				

# Stabbing

# **PRE-HOSPITAL**

### Call details:

Called to a local bar for a 22-year-old male who was involved in a fight and now has difficulty breathing.

### Instructions to role-players:

You are a 22-year-old man who just got into a fight with another person, who has left the scene. You have scratches and small cuts on your face and arms, and you are having difficulty breathing with sharp pain on inhalation.

# MARINE

### Call details:

Called to the deck of a fishing boat where two crew members have been in a fight; one has left the scene, and another, a 22-year-old male, remains at the scene and has cuts and difficulty breathing.

### Instructions to role-players:

You are a 22-year-old man who got into an argument with another crew member on board a crab fishing vessel. Stress levels are high, and the argument escalated into a fight. The other crew member left the scene. You have scratches and small cuts on your face and arms, and you are having difficulty breathing with sharp pain on inhalation.

# WORKPLACE

### Call details:

Called to the factory floor where a fight broke out between two workers. One has left the scene, and the other, a 25-year-old male, has cuts and is having difficulty breathing.

### Instructions to role-players:

You are a 25-year-old male working in a factory where chain-link fences are assembled. You got into a disagreement with another worker, who thought you were working too slowly. Things escalated, and it turned into a physical fight. The other worker has left the scene. You have scratches and small cuts on your face and arms, and you are having difficulty breathing with sharp pain on inhalation.



			Findings/Actions Successfully Identified/Demonstrated				
	Findings	Actions	Yes	No	Notes/Supporting Comments		
Scene Survey	-	11		1			
Environment	See scenario						
Hazards	Location of attacker	Call law enforcement and treat as a crime scene					
Mechanism/Chief Complaint	Assault						
Number of Patients	1						
Additional Resources	Police						
Primary Survey		·					
Introduction		Apply PPE, introduce self and obtain consent					
Appearance	Pale						
Level of Consciousness	Alert						
Spine	Clear	Examine spine					
Airway	Open/clear						
Breathing/Circulation	Laboured/weak	Oxygen via NRB, 10–15 lpm					
Shock							
Rapid Body Survey		·					
Head-to-Toe Check	Small cuts to face, sucking wound to right side of chest, breath sounds decreased to right side, small lacerations to arms	Apply occlusive dressing to chest					
Intervention	Oxygen	NRB, 10–15 lpm					
	Sucking chest wound	Apply occlusive dressing					
Transport Decision							
Decision	Load and go						

				Findings/Actions Successfully Identified/Demonstrated			
	Find	ings	Actions	Yes	No	Notes/Supporting Comment	
Secondary Survey	1		L	-	1		
Interview							
Chief Complaint	Difficulty brea	athing					
Signs/Symptoms	Cuts, scratche	25					
Allergies	Erythromycin						
Medications	None						
Past Medical History	None						
Last Meal	Dinner						
Events Prior	Assaulted						
Vital Signs							
Pulse	120/rapid/ weak	120/rapid/ weak					
Respirations	22/rapid/ laboured	22/rapid/ laboured					
Blood Pressure	120/60	120/60					
Pupils	3 mm/equal, round, and reactive to light	3 mm/equal, round, and reactive to light					
Skin	Pale, cool, clammy	Pale, cool, clammy					
GCS	15	15					
SPO <sub>2</sub>	92%	95% (with administra- tion of oxygen)					
Blood Glucose	N/A	N/A					
Head-to-Toe Check							
Head/Face	Small cuts		Bandage				
Neck	No JVD						
Chest	Sucking wour unequal brea		Apply an occlusive bandage				
Abdomen/Pelvis	As found						
Back	As found						
Upper Extremities	Lacerations, r	ninor bleeding					
Lower Extremities	As found						
Neurological	As found						
Secondary Transport D	ecision						
Decision	Load and go						

me completed:	Time completed:
verall comments:	Overall comments: _
eps shaded in dark grey are critical actions/findings. If a critical action/finding is not successfully demonstrated/ entified, the scenario is incomplete. If the scenario is marked incomplete, supporting comments are required.	identified, the scenar

Complete

Incomplete

# Asthma

# **PRE-HOSPITAL**

**Call details:** Called to a workplace where a 32-year-old female is experiencing shortness of breath.

### Instructions to role-players:

You are a 32-year-old female with a history of asthma. You are sitting in a chair, leaning forward, and are struggling to breathe even though you have used your inhaler once.

### MARINE

### Call details:

Called to a cabin on board a vessel where a 32-year-old female is experiencing shortness of breath.

#### Instructions to role-players:

You are a 32-year-old female with a history of asthma. You are sitting in a chair, learning forward, and are struggling to breathe even though you have used your inhaler once.

### WORKPLACE

### Call details:

Called to a workplace where a 32-year-old female is experiencing shortness of breath.

#### Instructions to role-players:

You are a 32-year-old female with a history of asthma. You are sitting in a chair, leaning forward, and are struggling to breathe even though you have used your inhaler once.



			Findings/Actions Successfully Identified/Demonstrated			
	Findings	Actions	Yes	No	Notes/Supporting Comments	
Scene Survey					1	
Environment	See scenario					
Hazards	None					
Mechanism/Chief Complaint	SOB					
Number of Patients	1					
Additional Resources	None					
Primary Survey		1 1				
Introduction		Apply PPE, introduce self and obtain consent				
Appearance	Pale					
Level of Consciousness	Alert					
Spine	Clear					
Airway	Open					
Breathing/Circulation	Wheezing/present	Oxygen via NRB, 12–15 lpm				
Shock						
Rapid Body Survey				1		
Head-to-Toe Check	Wheezing on exhalation	Auscultation				
Intervention	Oxygen	NRB, 12–15 lpm				
	Medications	Ventolin <sup>®</sup> (as per local protocol)				
Transport Decision						
Decision	Load and go					
Secondary Survey	_				1	
Interview						
Chief Complaint	SOB					
Signs/Symptoms	SOB					
Allergies	Pollen, ASA					
Medications	Ventolin®					
Past Medical History	Asthma					
Last Meal	Lunch					
Events Prior	Patient sitting in chair					

Secondary Survey (Cont			Findings/Actions Identified/Dem			
Secondary Survey (Cont	Findings		Actions	Yes	No	Notes/Supporting Comments
	inued)					
Vital Signs						
Pulse	110/regular/ full	100/regular/ full				
Respirations	26/rapid/ laboured	18/regular/ full				
Blood Pressure	and shallow					
Pupils	156/96	130/84				
	4 mm/equal, round, and reactive to	4 mm/equal, round, and reactive to				
Skin	light Pale, moist,	light Pink, warm,				
GCS	warm	dry				
SPO <sub>2</sub>	15	15				
Blood Glucose	93%	98%				
	N/A	N/A				
Head-to-Toe Check						
Head/Face	As found					
Neck	As found					
Chest	Wheezing up	on exhalation				
Abdomen/Pelvis	As found					
Back	As found					
Upper Extremities	As found					
Lower Extremities	As found					
Neurological	As found					
Secondary Transport De	cision				<u> </u>	
Decision	Load and go					
me completed:				- I	<u> </u>	1
verall comments:						
						t successfully demonstrated
entified, the scenario	is incomplete.	If the scenario	is marked incon	nplete, sup	porting	g comments are required.
Complete	🗌 In	complete				
_ · · P		1				

# **Cardiac Arrest**



### Call details:

Called to a workplace for a 49-year-old unresponsive male who has collapsed.

### Instructions to role-players:

You are a 49-year-old male who is unresponsive. Your co-worker is performing CPR on you. Your co-worker relays the information that you have heart trouble and are in the process of being scheduled for surgery. Your co-worker notes that you drink and smoke. "I heard him groan and then heard a thump. I ran out of my office to see him lying on the floor. I called for help."

### MARINE

**Call details:** Called to the bridge for a 49-year-old unresponsive male who has collapsed.

### Instructions to role-players:

You are a 49-year-old male who is unresponsive. Your co-worker is performing CPR on you. Your co-worker relays the information that you have heart trouble and are waiting for surgery. Your co-worker notes that you drink and smoke. "I heard him groan and then heard a thump. I ran here and found him lying on the ground. I called for help."

### WORKPLACE

### Call details:

Called to a workplace for a 49-year-old unresponsive male who has collapsed.

#### Instructions to role-players:

You are a 49-year-old male who is unresponsive. Your co-worker is performing CPR on you. Your co-worker relays the information that you have heart trouble and are in the process of being scheduled for surgery. Your co-worker notes that you drink and smoke. "I heard him groan and then heard a thump. I ran out of my office to find him lying on the floor. I called for help."



				Findings/Actions Successfully Identified/Demonstrated		
	Findings	Actions	Yes	No	Notes/Supporting Comments	
Scene Survey						
Environment	Safe, co-workers					
Hazards	None					
Mechanism/Chief Complaint	Unresponsive: cardiac arrest					
Number of Patients	1					
Additional Resources	Co-worker					
Primary Survey			-			
Introduction						
Appearance	Pale, cool, cyanotic lips/ earlobes					
Level of Consciousness	Unresponsive					
Spine	Clear					
Airway	Clear	OPA				
Breathing/Circulation	Absent/Absent	CPR, prepare AED as soon as possible				
Shock	Cyanotic lips					
Rapid Body Survey			-			
Head-to-Toe Check	No deficits if assessed					
Intervention	Effective two-responder CPR	Use AED, after 2 minutes of CPR switch responders				
Transport Decision		· ·		1		
Decision		Rapid transport upon completion of AED protocol				
Secondary Survey						
Interview	Bystander interviewed					
Chief Complaint	Cardiac arrest					
Signs/Symptoms	No vitals					
Allergies	Unknown					
Medications	Unknown					
Past Medical History	Heart surgery Heart ailment					
Last Meal Events Prior	Breakfast Groan heard prior to collapse					

						gs/Actions Successfully tified/Demonstrated
	Fin	dings	Actions	Yes	No	Notes/Supporting Comments
Secondary Survey (Conti	nued)					
Vital Signs						
Pulse	Absent	Absent	Reassess every			
Respirations	Absent	Absent	2 minutes			
Blood Pressure	Absent	Absent				
Pupils	Dilated 8 mm	Dilated 8 mm				
Skin	Cyanotic	Cyanotic				
GCS	3	3				
SPO <sub>2</sub>	0%	0%				
Blood Glucose	N/A	N/A				
Head-to-Toe Check						
Head/Face	Cyanotic, lip	os/earlobes				
Neck	Pale					
Chest	Blotching of	f skin				
Abdomen/Pelvis	As found					
Back	As found					
Upper Extremities	As found					
Lower Extremities	As found					
Neurological	As found					
Secondary Transport Dec	ision					
Decision			Transport if not already done so			

Time completed: \_\_\_\_\_

Overall comments: \_\_\_\_

Steps shaded in dark grey are critical actions/findings. If a critical action/finding is not successfully demonstrated/ identified, the scenario is incomplete. If the scenario is marked incomplete, supporting comments are required.

Complete

Incomplete

# **Chest Pain**



Call details:

Called to a park for a 50-year-old male complaining of chest pain.

### Instructions to role-players:

You are a 50-year-old man who has chest pain radiating into your neck and jaw. The pain started while you were exercising in the park just after lunch. You are sitting on a bench, clutching your chest, and feeling anxious. You had chest pain like this a couple of years ago, for which the doctor gave you nitroglycerin. You have allergies to penicillin.

# MARINE

Call details: None

### Instructions to role-players:

You are a 50-year-old officer on the bridge who has chest pain radiating into your neck and jaw. The pain started just after lunch. You are sitting on a bench, clutching your chest, and feeling anxious. You had chest pain like this a couple of years ago, for which the doctor gave you nitroglycerin. You have allergies to penicillin.

# WORKPLACE

### Call details:

Called to the loading dock of the factory for a 50-year-old male complaining of chest pain.

### Instructions to role-players:

You are a 50-year-old man working in the loading dock of a furniture manufacturer, and you have chest pain radiating into your neck and jaw. The pain started just after lunch, while you were loading heavy boxes. You are sitting on a bench, clutching your chest, and feeling anxious. You had chest pain like this a couple of years ago, for which the doctor gave you nitroglycerin. You have allergies to penicillin.



					gs/Actions Successfully tified/Demonstrated
	Findings	Actions	Yes	No	Notes/Supporting Comments
Scene Survey				1	
Environment	Safe	Note bystanders			
Hazards	None	Apply PPE			
Mechanism/Chief Complaint	SOB/chest pain				
Number of Patients	1				
Additional Resources	Police				
Primary Survey				1	
Introduction		Apply PPE, introduce self and obtain consent			
Appearance	Patient is sweaty and SOB, two-word responses	Place in comfortable position			
Level of Consciousness	Conscious, alert, oriented				
Spine	Clear				
Airway	Clear	Assess airway			
Breathing/Circulation	Present/rapid	Oxygen via NRB, 12–15 lpm			
Shock		Place patient in comfortable position			
Rapid Body Survey		II		1	
Head-to-Toe Check	Pale, diaphoretic				
Intervention		Oxygen, monitor			
Transport Decision					
Decision		Ready for transport			
Secondary Survey					
Interview					
Chief Complaint	Chest pain—sternal				
Signs/Symptoms	Pale				
Allergies	Penicillin, ASA				
Medications	Nitroglycerin				
Past Medical History	Angina				
Last Meal	Lunch: 2 hours ago				
Events Prior	Ate lunch, thought it was indigestion				

					Findings/Actions Successfully Identified/Demonstrated			
	Find	lings	Actions	Yes	No	Notes/Supporting Comments		
Secondary Survey (Co	ontinued)							
Vital Signs								
Pulse	70/regular/ full	80/regular/ full	Provide nitroglycerin No erectile					
Respirations	30/regular/ shallow	26/regular/ shallow	dysfunctional drugs in past 24 hours					
Blood Pressure	146/110	140/104						
Pupils	3 mm	3 mm						
Skin	Pale	Pale						
GCS	15	15						
SPO <sub>2</sub>	96%	99%						
Blood Glucose	N/A	N/A						
Head-to-Toe Check		1						
Head/Face								
Neck								
Chest	Good air ent	ry	Auscultate—no wheezing					
Abdomen/Pelvis								
Back								
Upper Extremities								
Lower Extremities								
Neurological	Alert/oriente person, place							
Secondary Transport	Decision							
Decision			Transport if not already done so					

Time completed: \_\_\_\_\_

Overall comments: \_\_\_\_\_

Steps shaded in dark grey are critical actions/findings. If a critical action/finding is not successfully demonstrated/ identified, the scenario is incomplete. If the scenario is marked incomplete, supporting comments are required.

Complete

Incomplete

# **Diabetic Emergency**



### **PRE-HOSPITAL**

### Call details:

Called to a hotel lobby for an unresponsive 40-year-old female.

### Instructions to role-players:

You are a 40-year-old female with a history of diabetes. You are insulin dependent. Your co-worker is with you and knows your medical history. You were in the hotel lobby waiting for a taxi when you slumped down and began to feel very unwell, and you are now lying on the ground, unresponsive. You haven't been eating well lately. You forgot to take your insulin this morning.

### MARINE

### Call details:

Called to the engine room for an unresponsive 40-year-old female.

#### Instructions to role-players:

You are a 40-year-old female with a history of diabetes and are insulin dependent. Your co-worker is with you and knows your medical history. You were in the engine room about to go on break when you slumped down and began to feel very unwell, and you are now lying on the ground, unresponsive. You forgot to take your insulin this morning.

### WORKPLACE

#### Call details:

Called to the front entrance of the office building where you work for an unresponsive 40-year-old female.

#### Instructions to role-players:

You are a 40-year-old female with a history of diabetes and are insulin dependent. You work as an executive assistant in an office building. Your co-worker is with you and knows your medical history. You've been working long hours and skipped lunch so you could leave early with your co-worker. Your co-worker was with you at the front entrance of the office building when you slumped down and began to feel very unwell. You are now lying on the ground, unresponsive. You forgot to take your insulin this morning.

					gs/Actions Successfully tified/Demonstrated
	Findings	Actions	Yes	No	Notes/Supporting Comments
Scene Survey				1	
Environment	Safe				
Hazards	None				
Mechanism/Chief Complaint	Unresponsive, seizure				
Number of Patients	1				
Additional Resources	Security staff				
Primary Survey				1	
Introduction		Apply PPE			
Appearance	Pale, cool				
Level of Consciousness	Unresponsive	Patient responds by moaning to painful stimuli			
Spine	Clear	Maintain spinal immobilization until head and/or spine injury ruled out			
Airway	Snoring	OPA			
Breathing/Circulation	Regular/weak	Oxygen via non- rebreather mask, 15 lpm			
Shock	Pale, cool				
Rapid Body Survey	•		,		
Head-to-Toe Check	Pale				
Intervention		Manage airway			
Transport Decision	•		,		
Decision		Continue to assess			

						ys/Actions Successfully tified/Demonstrated
	Find	ings	Actions	Yes	No	Notes/Supporting Comments
Secondary Survey						
Interview						
Chief Complaint	Unresponsive		Search for further			
Signs/Symptoms	Slow breathir	ng	medical information			
Allergies	None		to rule out epilepsy			
Medications	Insulin					
Past Medical History	Insulin-depen diabetes Co-worker av diabetes					
Last Meal	Co-worker ha patient eat to					
Events Prior	Co-worker sta having troubl husband, not properly	es with				
Vital Signs						
Pulse	120/regular/ weak	110/regular/ weak	Absorb glucose gel in buccal cavity of mouth			
Respirations	12/regular/ full	12/regular/ full	as per local protocol (for BC) if using			
Blood Pressure	136/90	120/80	glucometer			
Pupils	6 mm/slow to react	4 mm/slow to react				
Skin	Pale, cool	Pale, cool				
GCS	7	10				
SPO <sub>2</sub>	98%	98%				
Blood Glucose	2 mmol Consider administra- tion of glucose	5 mmol				
Head-to-Toe Check						
Head/Face	Pale skin, coo	I				
Neck						
Chest						
Abdomen/Pelvis						
Back						
Upper Extremities						
Lower Extremities	_					
Neurological	Responsive to uli	painful stim-				
Secondary Transport D	ecision				1	
Decision			Transport			

e completed:	
all comments:	
s shaded in dark grey are critical actions/findings. If a critical action/finding is not successfully dem tified, the scenario is incomplete. If the scenario is marked incomplete, supporting comments are re	

Complete

Incomplete

# Poison



Call details:

Called to an apartment for an unresponsive 17-year-old female.

### Instructions to role-players:

You are a 17-year-old female who has taken a large dose of mixed medications. You have an allergy to peanuts and a history of depression, but your mother thought you were doing well over the past few months. Your mother found you when she came home from work. She called emergency medical services and is still on the scene.

# MARINE

### Call details:

Called to the cabin of a 22-year-old female engineer, found unresponsive.

### Instructions to role-players:

You are a 22-year-old female engineer aboard a ship. You took a large dose of mixed medications. You have an allergy to peanuts and a history of depression, but your co-workers thought you were doing well over the past few months. Your co-workers were checking on you, and the head engineer found you when he came to your cabin. He called emergency medical services and is still on the scene.

### WORKPLACE

### Call details:

Called to an industrial construction site where a dump truck has backed into a loader. The female driver of the loader was found unresponsive.

### Instructions to role-players:

You are a 26-year-old female operator of a loader. A dump truck operator backed into you. The driver stopped the truck and waited, but since no one approached the cab, he got out to check and found you in the driver's seat of the loader. You had taken a large dose of mixed medications. You have an allergy to peanuts and a history of depression, but your co-workers thought you were doing well over the past few months.

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				Finding Iden	gs/Actions Successfully tified/Demonstrated
	Findings Actions Yes N		No	Notes/Supporting Comments	
Scene Survey				I	
Environment	Safe				
Hazards	None				
Mechanism/Chief Complaint	Possible overdose, drowsy				
Number of Patients	1				
Additional Resources	Co-workers				
Primary Survey					
Introduction		Apply PPE			
Appearance	Pale, cool, irritable, drowsy and clammy				
Level of Consciousness	Drowsy, responds to loud verbal commands				
Spine	Clear	Maintain spinal immobilization until head and/or spine injury ruled out			
Airway	Clear				
Breathing/Circulation	Shallow/weak	Oxygen via NRB, 12–15 lpm, prepare BVM			
Shock	Pale, cool, clammy				
Rapid Body Survey					
Head-to-Toe Check	Monitor shallow breathing				
Intervention		Prepare BVM Call Poison Control if drugs are present			
Transport Decision	_				·
Decision		Prepare for transport			

				Findings/Actions Successfully Identified/Demonstrated		
	Find	lings	Actions	Yes	No	Notes/Supporting Comments
Secondary Survey						
Interview						
Chief Complaint	Depressed C	NS	Continue to use loud			
Signs/Symptoms	Decreased co	onsciousness	verbal commands to			
Allergies	Peanuts		stimulate patient			
Medications	Epinephrine,	diazepam				
Past Medical History	Depression					
Last Meal	Unknown					
Events Prior	Went on a "	bender"				
Vital Signs			Use BVM to assist			
Pulse	140/rapid/ weak	146/rapid/ weak	breathing (second set of vitals improves)			
Respirations	6/regular/ shallow	12/regular/ full				
Blood Pressure	90/50	96/56				
Pupils	5 mm	5 mm				
Skin	Pale, cool	Pale, cool				
GCS	11	13				
SPO <sub>2</sub>	96%	98%				
Blood Glucose	N/A	N/A				
Head-to-Toe Check						
Head/Face						
Neck						
Chest	Shallow brea	thing without				
Abdomen/Pelvis	assisted BVN					
Back						
Upper Extremities						
Lower Extremities						
Neurological						
Secondary Transport De	cision					
Decision			Transport			
ïme completed:						1
-						
overall comments:						
	is incomplete					ot successfully demonstrated g comments are required.
		icompiete				

# Stroke



# **PRE-HOSPITAL**

### Call details:

Called to a home where a 68-year-old female is complaining of a severe headache.

### Instructions to role-players:

You are a 68-year-old female. You are talking on the phone with your son when you suddenly experience a severe headache, arm numbness, and anxiety. You have never felt like this before, and you are very scared.

# MARINE

### Call details:

Called to the deck of a fishing boat, where a 52-year-old male is complaining of a severe headache.

### Instructions to role-players:

You are a 52-year-old male who works on a cod-fishing boat. You were pulling in the nets when you felt a sudden, severe headache come on. You also have arm numbness and anxiety. You have never felt like this before, and you are very scared.

# WORKPLACE

### Call details:

Called to the office of a 62-year-old female lawyer complaining of a severe headache.

### Instructions to role-players:

You are a 62-year-old female lawyer. You just got off the phone with a client and felt a sudden, severe headache come on. You also have arm numbness and anxiety. You have never felt like this before, and you are very scared.

Time initiated: \_\_\_\_\_

					gs/Actions Successfully tified/Demonstrated
	Findings	Actions	Yes	No	Notes/Supporting Comments
Scene Survey					
Environment	Safe	Met by patient			
Hazards	None				
Mechanism/Chief Complaint	Severe headache, anxiety, arm numbness				
Number of Patients	1				
Additional Resources	None				
Primary Survey					
Introduction		Apply PPE, introduce self and obtain consent			
Appearance	Pale, anxious				
Level of Consciousness	Alert but scared				
Spine	Clear	Maintain spinal immobilization until head and/or spine injury ruled out; patient sitting at time of event			
Airway	Clear				
Breathing/Circulation	Present/present	Oxygen via NRB, 12–15 lpm			
Shock	Pale				
Rapid Body Survey					
Head-to-Toe Check	Pale				
Intervention		Apply oxygen, position patient for transport			
Transport Decision					
Decision		Prepare for transport			

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						s/Actions Successfully tified/Demonstrated
	Find	lings	Actions	Yes	No	Notes/Supporting Comments
Secondary Survey						
Interview						
Chief Complaint	Severe heada	ache				
Signs/Symptoms		ess to left arm				
Allergies	Penicillin					
Medications	None					
Past Medical History	None					
Last Meal	Lunch					
Events Prior	See scenario					
Vital Signs						
Pulse	160/irregu- lar/weak	54/irregular/ weak				
Respirations	28/regular/ full	16/irregular/ full				
Blood Pressure	160/110	200/110				
Pupils	3 mm	3 mm				
Skin	Pale	Pale				
GCS	13	11				
SPO <sub>2</sub>	96%	98%				
Blood Glucose	N/A	N/A				
Head-to-Toe Check						
Head/Face	New onset of facial droop to smile					
Neck						
Chest	Shallow, equ	al chest rise				
Abdomen/Pelvis						
Back						
Upper Extremities	Left arm wea	ık grip				
Lower Extremities						
Neurological	Alert, scared,	, oriented				
Secondary Transport De	ecision					
Decision			Transport			
Time completed:						
Overall comments:						
						t successfully demonstrated comments are required.
Complete		ncomplete		1		,

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Scenario Evaluation—Stroke

# Assault



### Call details:

Called to a home for a domestic dispute. A 50-year-old female was hit in the head and face with a baseball bat. Law enforcement personnel are on the scene and have taken the male away from the home.

### Instructions to role-players:

You are a 50-year-old female who was hit in the head and face with a baseball bat by your husband. You are in a great deal of pain and there is blood coming from your nose.

### MARINE

### Call details:

Called to the galley after an altercation broke out between the cook and a crew member.

### Instructions to role-players:

You are a 50-year-old male cook who was hit in the head and face with a baseball bat by another crew member. You are in a great deal of pain and there is blood coming from your nose.

# WORKPLACE

### Call details:

Called to the drilling rig on the oil field where you work, after an altercation broke out between an activist and a worker.

#### Instructions to role-players:

You are a 50-year-old man working on a drilling rig. An activist approached you and started yelling and swinging a baseball bat. You had no time to react and were hit in the face and head with the baseball bat. You are in a great deal of pain and there is blood coming from your nose.

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Time initiated: \_\_\_\_\_

			Finding Ident		js/Actions Successfully tified/Demonstrated
	Findings	Actions	Yes	No	Notes/Supporting Comments
Scene Survey					
Environment	Safe, attacker not present				
Hazards					
Mechanism/Chief Complaint	Blunt force trauma, head trauma				
Number of Patients	1				
Additional Resources	Law enforcement, EMS				
Primary Survey					
Introduction		Apply PPE, introduce self and obtain consent; develop rapport with patient			
Appearance	Blood on head/face, large lacerations to head				
Level of Consciousness	Conscious				
Spine		Maintain spinal immobilization until head and/or spine injury ruled out			
Airway	Clear	Check airway			
Breathing/Circulation	No respiratory distress/ present	Oxygen via NRB, 12–15 lpm, control severe bleeding			
Shock		Take steps to mitigate, e.g., control bleeding, provide blanket and reassurance			
Rapid Body Survey					·
Head-to-Toe Check	Large laceration to back of head Bruising and swelling around both eyes Head/neck pain Blood on head, face and hands				
Intervention	Head injury	Spinal precautions			
Transport Decision					
Decision		Rapid transport			

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			Actions	Findings/Actions Successfully Identified/Demonstrated		
	Find	ings		Yes	No	Notes/Supporting Comments
Secondary Survey						
Interview						
Chief Complaint	Head/neck pain					
Signs/Symptoms	Lacerations, bruising/swel	ling				
Allergies	Codeine					
Medications	Atenolol					
Past Medical History	High BP					
Last Meal	Lunch					
Events Prior	Dispute; patie with a baseba					
Vital Signs						
Pulse	110/regular/ full	100/regular/ full				
Respirations	22/regular/ full	20/regular/ full				
Blood Pressure	150/90	140/90				
Pupils	4 mm	4 mm				
Skin	Pink, moist, cool	Pink, moist, cool				
GCS	15	15				
SPO <sub>2</sub>	98%	98%				
Blood Glucose	N/A	N/A				
Head-to-Toe Check						
Head/Face	Laceration to Pain	back of head	Treat lacerations if not already done so			
Neck			Apply cervical collar if			
Chest			not already in place			
Abdomen/Pelvis						
Back						
Upper Extremities						
Lower Extremities						
Neurological	Alert/oriented place, person		Continue to monitor for changes in neurological status			
Secondary Transport D	ecision		· · · · · · · · · · · · · · · · · · ·			I
Decision			Transport if not already done so			

ne completed:	
erall comments:	
ans shaded in dark grey are critical actions/findings. If a critical action/finding is not successfull	/ domonstrated

Steps shaded in dark grey are critical actions/findings. If a critical action/finding is not successfully demonstrated/ identified, the scenario is incomplete. If the scenario is marked incomplete, supporting comments are required.

Complete

## **Femur Fracture**



### **PRE-HOSPITAL**

Call details:

Called to a mall parking lot for a 33-year-old male hit by a car.

#### Instructions to role-players:

You are a 33-year-old man who was putting bags in your truck when a car backed into you, pinning your thighs against the tailgate of the truck. The car then pulled forward, and you fell to the ground in severe pain, unable to support your weight with your leg.

## MARINE

#### Call details:

Called to the deck of a cargo ship for a 33-year-old male crew member hit by a sea can (a shipping container).

#### Instructions to role-players:

You are a 33-year-old male crew member loading cargo onto the deck of a ship. One of the sea cans shifted, pinning your thighs between the ship's railing and the sea can. Your fellow crew members were able to push the sea can out of the way, and you fell to the deck in severe pain, unable to support your weight with your leg.

## WORKPLACE

#### Call details:

Called to the warehouse floor for a 33-year-old male hit by a forklift at the industrial site where you work.

#### Instructions to role-players:

You are a 33-year-old man loading bags of fertilizer at an industrial site. A forklift backed into you, pinning your thighs between the forklift and the skid of bags behind you. The forklift pulled forward, and you fell to the ground in severe pain, unable to support your weight with your leg.

Time initiated: \_\_\_\_\_

					gs/Actions Successfully tified/Demonstrated
	Findings	Actions	Yes	No	Notes/Supporting Comments
Scene Survey				1	
Environment	Safe	Ensure safety, engines shut off, etc.			
Hazards	Vehicles				
Mechanism/Chief Complaint	Blunt force trauma, leg pain				
Number of Patients	1				
Additional Resources	Police, EMS				
Primary Survey					
Introduction		Apply PPE, introduce self and obtain consent			
Appearance	Patient in significant pain, appears distressed				
Level of Consciousness	Conscious, alert, oriented				
Spine	Clear	Maintain spinal immobilization until head and/or spine injury ruled out			
Airway	Clear	Check airway			
Breathing/Circulation	Rapid, SOB/present	Oxygen via NRB, 12–15 lpm			
Shock	Pale, cool, diaphoretic	Take steps to mitigate, e.g., control bleeding, provide blanket and reassurance			
Rapid Body Survey					
Head-to-Toe Check	Deformity to femur; if assessed, no peripheral circulation				
Intervention		Manual stabilization			
Transport Decision		·			
Decision		Rapid transport once femur is stabilized			

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						gs/Actions Successfully tified/Demonstrated
	Find	ings	Actions	Yes	No	Notes/Supporting Comment
Secondary Survey						1
Interview						
Chief Complaint	Severe leg pa	in				
Signs/Symptoms	Deformed leg	l				
Allergies	Morphine					
Medications	None					
Past Medical History	None					
Last Meal	Breakfast					
Events Prior	See scenario					
Vital Signs						
Pulse	120/regular/ full	110/regular/ full				
Respirations	24/regular/ full	20/regular/ full				
Blood Pressure	130/86	128/80				
Pupils	3 mm	3 mm				
Skin	Pale, cool, moist	Pale, cool, moist				
GCS	15	15				
SPO <sub>2</sub>	100%	100%				
Blood Glucose	N/A	N/A				
Head-to-Toe Check						
Head/Face			Traction splint as per			
Neck			local protocol; once			
Chest			applied, circulation restored			
Abdomen/Pelvis	Pelvis stable					
Back	Denies pain					
Upper Extremities						
Lower Extremities	Deformity mi	d-femur				
Neurological	Alert/oriented place, person					
_						
Secondary Transport D	ecision					
Decision			Transport if not already done so			
ime completed:						

Overall comments:

Complete

Steps shaded in dark grey are critical actions/findings. If a critical action/finding is not successfully demonstrated/ identified, the scenario is incomplete. If the scenario is marked incomplete, supporting comments are required.

# Croup



### **PRE-HOSPITAL**

#### Call details:

Called to a house for a baby with a very loud cough. The baby's mother is at work, and the father is at home with the baby and unable to drive.

#### Instructions to role-players:

You are the father of a baby who started coughing this morning. You thought maybe it was because the house was too dry. The baby's cough continued to get louder during the afternoon. Now she is coughing very loudly (a barking cough), and she is quite hot to the touch. The baby is only three weeks old.

#### MARINE

None

#### WORKPLACE

None

Time initiated: \_\_\_\_\_

				gs/Actions Successfully tified/Demonstrated	
	Findings	Actions	Yes	No	Notes/Supporting Comments
Scene Survey					
Environment	At residence, safe				
Hazards	None				
Mechanism/Chief Complaint	Respiratory distress				
Number of Patients	1				
Additional Resources	EMS				
Primary Survey					
Introduction		Apply PPE, introduce self and obtain parental consent			
Appearance	Obvious distress				
Level of Consciousness	Alert/makes eye contact				
Spine	Clear				
Airway	Stridor, barking cough	Cautiously assess			
Breathing/Circulation	Respiratory distress/ present	Oxygen as tolerated, avoid agitating the baby; develop rapport with patient's father			
Shock					
Rapid Body Survey					
Head-to-Toe Check	Cyanosis around the face/lips				
	Sternal indrawing Accessory muscle use				
Intervention		Oxygen as tolerated			
Transport Decision					
Decision		Initiate rapid transport			

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				Findings/Actions Successfully Identified/Demonstrated		
	Find	ings	Actions	Yes	No	Notes/Supporting Comments
Secondary Survey						
Interview						
Chief Complaint	Respiratory d	istress	Consider moving baby			
Signs/Symptoms	Cyanosis		outside			
Allergies	None					
Medications	None					
Past Medical History	None					
Last Meal	Supper feedir	ng				
Events Prior	Baby coughin the morning	ig since				
Vital Signs						
Pulse	130/regular/ full	120/regular/ full				
Respirations	56/regular/ shallow	50/regular/ shallow				
Blood Pressure	N/A	N/A				
Pupils	3 mm	3 mm				
Skin	Cyanotic, hot, dry	Cyanotic, hot, dry				
GCS	15	15				
SPO <sub>2</sub>	N/A	N/A				
Blood Glucose	N/A	N/A				
Head-to-Toe Check						
Head/Face	Cyanosis arou and lips	und the face	Treatment as per local protocol			
Neck	Accessory mu	ıscle				
Chest	Sternal indrav					
	respiratory di					
	Possible belly	breathing				
Abdomen/Pelvis						
Back						
Upper Extremities						
Lower Extremities	Alert					
Neurological						
Secondary Transport D	ecision				1	1
Decision			Transport if not already done so			

ne completed:	
erall comments:	
ans shaded in dark grey are critical actions/findings. If a critical action/finding is not successfull	/ domonstrated

Steps shaded in dark grey are critical actions/findings. If a critical action/finding is not successfully demonstrated/ identified, the scenario is incomplete. If the scenario is marked incomplete, supporting comments are required.

Complete

# Choking



## **PRE-HOSPITAL**

#### Call details:

Called to the food court in a mall for a 24-year-old male in a wheelchair who is choking on something he was eating. The man is conscious.

#### Instructions to role-players:

You are a 24-year-old man in a wheelchair. You are having lunch in a mall food court with some friends when a french fry goes down the wrong way and you start choking. You are still conscious but are unable to breathe.

## MARINE

#### Call details:

Called to the dining area of a chartered tour boat for a 24-year-old male who is choking but is conscious.

#### Instructions to role-players:

You are a 24-year-old man in a wheelchair. You have just begun eating your lunch and suddenly you start choking on a french fry. You are still conscious but are unable to breathe.

## WORKPLACE

#### Call details:

Called to the cafeteria, where an employee, a 24-year-old male in a wheelchair, is choking. The man is still conscious.

#### Instructions to role-players:

You are a 24-year-old man in a wheelchair. You are having lunch in the office cafeteria with co-workers. A french fry goes down the wrong way and you start choking. You are still conscious but are unable to breathe.

Time initiated: \_\_\_\_\_

		Findings/Actions Successfully Identified/Demonstrated				
	Findings	Actions	Yes	No	Notes/Supporting Comments	
Scene Survey						
Environment	Safe, many people present	Ensure safety				
Hazards	None					
Mechanism/Chief Complaint	Choking					
Number of Patients	1					
Additional Resources	EMS					
Primary Survey						
Introduction		Apply PPE, introduce self and obtain consent				
Appearance	Patient showing distress signal for choking					
Level of Consciousness	Conscious, obvious distress					
Spine	Clear					
Airway	No obstruction noted	Check airway, initiate choking procedure				
Breathing/Circulation	Absent/present					
Shock	Cyanosis about the face	Treat the cause				
Rapid Body Survey						
Head-to-Toe Check	No significant findings other than the obstruction					
Intervention		Clear the obstruction				
Transport Decision			1			
Decision		Transport as per local protocol				

				Findings/Actions Successfully Identified/Demonstrated			
	Find	ings	Actions	Yes	No	Notes/Supporting Comment	
Secondary Survey							
Interview							
Chief Complaint Signs/Symptoms Allergies Medications Past Medical History Last Meal	Choking Cyanosis, no Penicillin None None Lunch: curren	t meal	Once obstruction has been cleared, administer oxygen via NRB, 12–15 lpm Continue to monitor patient				
Events Prior	While eating choking	began					
Vital Signs							
Pulse Respirations	110/regular/ full 24/regular/	90/regular/ full 18/regular/	Once the obstruction is removed, use the vital signs listed				
	full	full					
Blood Pressure	128/88	122/82					
Pupils	4 mm	4 mm					
Skin	Normal	Normal					
GCS	15	15					
SPO <sub>2</sub>	96%	100%					
Blood Glucose	N/A	N/A					
<b>Head-to-Toe Check</b> Head/Face Neck	Cyanosis clea	irs					
Chest Abdomen/Pelvis Back Upper Extremities	Good air entr	у	Auscultation if trained				
Lower Extremities							
Neurological	Alert/oriented to time, place, person						
Secondary Transport D	ecision						
Decision			Transport if not already done so				

Overall comments:

Steps shaded in dark grey are critical actions/findings. If a critical action/finding is not successfully demonstrated/ identified, the scenario is incomplete. If the scenario is marked incomplete, supporting comments are required.

Complete

# Childbirth

### **PRE-HOSPITAL**

**Call details:** Called to a home for a 29-year-old female in labour.

#### Instructions to role-players:

You are a 29-year-old female going into labour with your second child. You stayed at home, waiting for your partner so he could drive you to the hospital. Labour has progressed more quickly than you expected, and you called EMS to take you to the hospital. You are in the ambulance and there is a lot of traffic.

## MARINE

#### Call details:

Called to a ferry with a female in labour on board, en route between Newfoundland, and Labrador.

#### Instructions to role-players:

You are a 29-year-old woman going into labour with your second child. You live in Newfoundland, but the hospital where you are planning to deliver is in Labrador (due to potential complications), so you had to use the provincial ferry service.

## WORKPLACE

**Call details:** Called to the office of a 29-year-old female who has gone into labour.

#### Instructions to role-players:

You are a 29-year-old woman who is pregnant with your second child and planning to go on maternity leave in four days. You are at work at your desk when you begin to have contractions and your water breaks.



Time initiated: \_\_\_\_\_

			Findings/Actions Successfully Identified/Demonstrated						
	Findings	Actions	Yes	No	Notes/Supporting Comments				
Scene Survey									
Environment	Safe								
Hazards	None								
Mechanism/Chief Complaint	Patient in labour								
Number of Patients	1								
Additional Resources	EMS								
Primary Survey	·								
Introduction		Apply PPE, introduce self and obtain consent							
Appearance	Female patient in obvious distress								
Level of Consciousness	Conscious								
Spine	Clear								
Airway	Clear								
Breathing/Circulation	Rapid, full (patient using breathing patterns learned in prenatal class)/present	Assist patient with breathing patterns as required, administer oxygen via nasal cannula or NRB							
Shock									
Rapid Body Survey									
Head-to-Toe Check	No remarkable findings								
Intervention		Oxygen, assist with breathing by coaching, deliver baby as per local protocol if required							
Transport Decision									
Decision		Rapid transport as per protocol							

				Findings/Actions Successfully Identified/Demonstrated		
	Findings		Actions	Yes	No	Notes/Supporting Comments
Secondary Survey						
Interview						
Chief Complaint	Labour pain					
Signs/Symptoms	Sweating					
Allergies	None					
Medications	Prenatal vita					
Past Medical History	1 previous pr 1 live birth	egnancy,				
Last Meal	Breakfast					
Events Prior	See scenario					
Vital Signs						
Pulse	100/regular/ full	90/regular/ full				
Respirations	28/regular/ full	20/regular/ full				
Blood Pressure	128/80	124/78				
Pupils	4 mm	4 mm				
Skin	Pink, sweaty, cool	Pink, dry, warm				
GCS	15	15				
SPO <sub>2</sub>	98%	98%				
Blood Glucose	N/A	N/A				
Head-to-Toe Check			Prepare for delivery of			
Head/Face			baby as per current standards and local			
Neck			protocol; provide care			
Chest			to mother as required			
Abdomen/Pelvis	Distended ab	domen				
Back						
Upper Extremities Lower Extremities						
	Alert/oriented					
Neurological	place, person					
Secondary Transport Dec	cision				1	I
Decision			Transport if not already done so			
Time completed:			1	<u> </u>	1	1
Overall comments:						
						t successfully demonstrated comments are required.
Complete						