GLOBAL EMERGENCY MEDICAL REGISTRY

Trauma – Traumatic Brain Injury (ALS) Skills Documentation Form

Candidate (Print): _____ Date: _____

Examiner (Instructor Name Printed): _____

Examiner Signature: _____

Note: Examiner will use a full scale simulator and manikin for this case to reflect a 16 year old baseball player who was struck in the forehead by baseball traveling at high speed. Patient is unresponsive with obvious trauma to the head and a 1- 2 centimeter depression to left temple. Patient withdraws to pain on left side/right side is flaccid. HEENT: right pupil is dilated/left pupil mid set with 1-2cm depression to left temple and minimal bleeding present, Neck: unremarkable, Chest: unremarkable with bilateral clear lung sounds with plural movement intact on ultrasound, Abdomen: unremarkable with no abnormal findings on ultrasound, Extremities: unremarkable. Vitals: Pulse = 60, RR = 4-6 with minimal tidal volume, SpO2 = 88%, EtCO2 = 50 mmHg, BP = 164/98 (120 mmHg MAP), Temperature = 37^0 C. The candidate may have two assistants (maximum of 1, EMT and 1, AEMT) and equipment as needed for the skills below.

PASS _____ FAIL _____

Task	Correct	Incorrect
Identifies critical traumatic brain injury patient		
Place cervical collar and moves patient to a flat surface on a transport device or stretcher and places patient in a 30^0 back up/head elevated position and secure patient		
Oxygenate patient with apneic oxygenation (15L nasal cannula and "open flow rate" non-rebreather mask)		
Vascular Access, Large Bore (16g, 14g, 12g), Above the level of the diaphragm with IV fluid at to keep open (TKO) attached to extension tubing from IV catheter hub.		
Endotracheal intubation with EtCO2, using a systematic approach to intubation with pharmacologic agents (such as: ketamine and succinylcholine)		
Assure 100% oxygen ventilation at 10 bpm with 6-8 ml/kg/PBW and a maximum of 30 cmH2O pressure and EtCO2 at 35-45mmHg via BVET or Ventilator.		
Emergency Ultrasound exam (RUSH) – Identifies no abnormal findings		
Administer mannitol or hypertonic saline IV with no patient improvement		
Ensure patient is kept warm and prevent any cooling.		

Total Time for simulation: ___ minutes

NOTE: Examiner may improve the vitals to the following after all care above (RR = 10 via ETBV or ET Vent, SpO2 = 94%, EtCO2 = 35 mmHg, Pulse = 60, MAP = 100)

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Critical Failure Criteria

	Failure to establish oxygenation, advanced airway, and ventilation for the patient
	Failure to take appropriate intervention, including vascular access and medications
	Failure to reduce ICP
	Failure to reach treatment goals within 15 minutes of patient management.
	Failure to manage the patient as a competent provider
	Failure to ensure all portions of the above checklist are provided for during case
	Exhibits unacceptable affect with patient or other personnel
	Uses or orders a dangerous or inappropriate intervention

NOTE: You must factually document any “incorrect” or critical failure criteria on the bottom or back of this form.