

DATE: \_\_\_\_\_ TIME SEEN: \_\_\_\_\_ on arrival RM: \_\_\_\_\_ EMS Arrival  
 HISTORIAN: patient spouse paramedics \_\_\_\_\_  
 \_\_\_ HX / \_\_\_ EXAM LIMITED BY: \_\_\_\_\_  unable to obtain

**HPI**

**chief complaint:** injury to: head \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 face mouth / lip / chin / nose / forehead

<b>onset / duration:</b> just prior to arrival today yesterday _____ _____ min / hrs / days ago	<b>where:</b> home school neighbor's park work street
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<b>timing:</b> still present better gone now	<b>timing:</b> pain intermittent / lasting _____ worse / persistent since _____
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**context:** fall direct blow incision stab burn

**severity of pain:** mild moderate severe (1/10)

**associated symptoms:** seizure memory impairment  
 lost consciousness: yes no unknown duration: \_\_\_\_\_ sec / min  
 remembers: event coming to hospital \_\_\_\_\_  
 nausea / vomiting neck pain other injuries \_\_\_\_\_

**ROS**

CONST - recent illness / fever _____	CVS - chest pain _____
EYE - problems with vision _____	RESP - shortness of breath / cough _____
ENT - nasal drainage / congestion _____	LYMPH - ankle swelling ( R / L ) _____
MS - back pain _____	SKIN - rash _____
NEURO - numbness / weakness _____	GI - abdominal pain _____
GU - problems urinating _____	
LNMP _____ preg post-menop _____	

except as marked positive, all systems above reviewed and found negative

• NEURO / MS components also addressed in HPI

**PAST HX** \_\_\_no chronic diseases

cardiac disease Afib CAD CHF MI hypertension  
 diabetes Type 1 Type 2 hepatitis / HIV  
 diet / oral / insulin asthma / COPD  
 \_\_\_old records reviewed / summary: \_\_\_\_\_

Tetanus immun. UTD / given in ED

Meds- \_\_\_none / see nurses note aspirin coumadin clopidogrel

Allergies- \_\_\_NKDA / see nurses note

**SOCIAL HX** smoker \_\_\_ppd / never / past / quit: \_\_\_\_\_ ago  
 tobacco: use / dependence \_\_\_\_\_ nicotine: use / dependence \_\_\_\_\_  
 drugs \_\_\_\_\_ alcohol (recent / heavy / occasional) screening \_\_\_\_\_

**FAMILY HX** \_\_\_negative

Nursing Assessment Reviewed  Vitals Reviewed \_\_\_\_\_  
 V/S BP \_\_\_\_\_ HR \_\_\_\_\_ RR \_\_\_\_\_ Temp \_\_\_\_\_

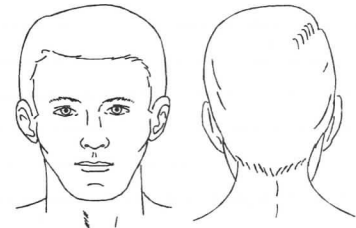
**PHYSICAL EXAM**

**General Appearance**

\_\_\_no acute distress \_\_\_c-collar / backboard ( PTA / in ED )  
 \_\_\_alert \_\_\_mild / moderate / severe distress  
 \_\_\_anxious / lethargic  
 \_\_\_unconscious / unresponsive

**HEAD**

\_\_\_non-tender \_\_\_see diagram  
 \_\_\_no swelling \_\_\_raccoon eyes / Battle's sign ( R / L )  
 \_\_\_no obvious injury



(see next page for legend)

**NECK**

\_\_\_non-tender \_\_\_see diagram  
 \_\_\_painless ROM \_\_\_decreased / limited ROM  
 \_\_\_trachea midline \_\_\_pain on neck movement / axial compression

\_\_\_Nexus criteria neg \_\_\_midline tenderness / distracting injury  
 \_\_\_altered mental status / recent ETOH  
 \_\_\_focal neuro deficit

**EYES**

\_\_\_PERRL \_\_\_EOM palsy / entrapment ( R / L )  
 \_\_\_EOMI \_\_\_subconjunctival hemorrhage ( R / L )  
 \_\_\_hyphema ( R / L )  
 \_\_\_corneal abrasion ( R / L )  
 \_\_\_periorbital edema / ecchymosis ( R / L )  
 \_\_\_visual field deficit / decreased vision ( R / L )  
 \_\_\_unequal pupils R \_\_\_mm L \_\_\_mm

**ENT**

\_\_\_nml external \_\_\_hemotympanum ( R / L )  
 inspection \_\_\_TM obscured by wax ( R / L )  
 \_\_\_pharynx nml \_\_\_nasal septal hematoma ( R / L )  
 \_\_\_clotted nasal blood ( R / L )  
 \_\_\_dental injury / malocclusion  
 \_\_\_poor gag reflex



**XRAYS / CT**

**Xrays done:** skull facial spine: C T L \_\_\_\_\_

**Interpretation:**  By me  Viewed by me  Discsd w/ radiologist  
 \_\_\_ nml / NAD \_\_\_ no fracture \_\_\_ nml alignment \_\_\_ no FB  
 abnml: fracture (see below) STS DJD FB

**CT done:** skull facial spine: C T L \_\_\_\_\_

**Interpretation:**  By me  Viewed by me  Discsd w/ radiologist  
 \_\_\_ nml / NAD \_\_\_\_\_  
 abnml: \_\_\_\_\_

**Fracture:**

**Skull:** frontal parietal temporal occipital basilar: ant mid post  
 R / L linear comminuted depressed

**Facial:** nasal orbit malar maxilla zygoma Le Fort: I II III  
 R / L mandible: ramus angle body condyle subcondyle symphysis

**C1 fx:** arch: ant post burst (Jefferson fx) lateral mass  
 : stable unstable nondisplaced displaced

**C2 fx:** dens: type I II III extension teardrop  
 traumatic spondylo (hangman fx): type I II IIA III  
 : stable unstable nondisplaced displaced

**C T L:** wedge teardrop burst spinous process  
 # \_\_\_\_\_ : stable unstable nondisplaced displaced

**C T L:** wedge teardrop burst spinous process  
 # \_\_\_\_\_ : stable unstable nondisplaced displaced

**LABS**

<b>CBC</b> normal except	<b>Chemistries</b> normal except	<b>UA</b> normal except	<b>ETOH</b> TOX
WBC	Na		PT/PTT
Hgb	K	HCG	INR
Hct	CO2	serum / urine	
Platelets	Gluc	POS NEG	
	BUN		
	Creat		

**PROGRESS - Continued**

Time \_\_\_\_\_ unchanged improved re-examined

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◆ **BP Screen** - ≥ 18 y / screening / follow-up documented  
 ◆ **Minor head trauma** - 2y - 17y / ≥ 18 y / GCS 15 / PECARN risk: high low  
 / CT head \_\_\_\_\_ see PECARN rule on quality addendum template #200  
 \_\_\_ measure exclusions: not eligible / refused / not indicated / contraindicated  
 Discussed with Dr. \_\_\_\_\_ Time: \_\_\_\_\_  
 will see patient in: ED / hospital / office  
 Counseled patient / family regarding: \_\_\_\_\_ Additional history from:  
 lab / rad. results diagnosis need for follow-up family caretaker paramedics  
 \_\_\_ Rx given  
 Tobacco cessation: discussed: plan / trigger / challenges / gave Rx \_\_\_\_\_  
 Alcohol cessation: discussed: plan / risk / coping measures \_\_\_\_\_  
 CRIT CARE TIME (excluding separately billable procedures) \_\_\_\_\_ min

**CLINICAL IMPRESSION**  subsequent  sequelae

<b>Skin</b> (**R / L ; FB ; specify anatomy) Laceration: _____ Abrasion: _____ Contusion: _____ <b>Strain</b> (**R / L ; specify anatomy) Neck _____ <b>Sprain</b> (**R / L ; except for spine specify joint & ligament) Spine: C T L _____	<b>Neuro</b> Concussion Post-Concussion syndrome R / L Cerebral: contusion lac traumatic hemorrhage R / L Epidural Subdural Traumatic SAH <b>LOC:</b> unknown few sec < min ___ sec / mins unk time Cord injury: incomplete complete : level C: # _____ T: # _____ L: # _____ Seizure <b>Other</b> GSW / Stab / Penetrating injury : to: head neck: ant post thorax Pain: acute chronic : traumatic neck T-spine Shock: traumatic hypovolemic Tooth# _____: fx avulsion sublux
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**DISPOSITION DECISION TIME-** \_\_\_\_\_  home  transfer  
 admit \_\_\_ POA pressure ulcer / UTI (foley) \_\_\_\_\_  
**CONDITION-**  unchanged  improved  stable  
 Care transferred to Dr \_\_\_\_\_ Time: \_\_\_\_\_

\_\_\_\_\_ MD / DO  
 Template Complete  See Addendum (Dictated / Template # \_\_\_\_\_)  
 6230.136.07-18 ◆ Reportable Measure

Circle positives backlash negatives, check  normals

Circle positives, backslash negatives, check normals

6230.131.07-18

Template Complete  See Addendum (Dicared / Template # \_\_\_\_\_)

MD / DO \_\_\_\_\_

Multiple horizontal lines for notes or observations.

Multiple horizontal lines for notes or observations.

Time \_\_\_\_\_ unchanged improved re-examined

**PROGRESS - Continued**

Wound Description / Repair: \_\_\_\_\_ cm location \_\_\_\_\_

length \_\_\_\_\_ cm location \_\_\_\_\_

linear stellate irregular flap into: subcut / muscle

clean contaminated moderately / heavily

distal NVT: neuro / vasc intact \_\_\_\_\_

galea intact \_\_\_\_\_

anesthesia: local topical \_\_\_\_\_

lidocaine / bupivacaine epi / bicarb \_\_\_\_\_

prep: Betadine / other \_\_\_\_\_

irrigated with saline \_\_\_\_\_

wound explored \_\_\_\_\_

to base / in bloodless field \_\_\_\_\_

foreign body identified \_\_\_\_\_

foreign material removed \_\_\_\_\_

repair: Wound closed with: adhesive / Dermabond / sterri-strips \_\_\_\_\_

no closure required \_\_\_\_\_

SKIN- # \_\_\_\_\_

nylon / prolene / staples / \_\_\_\_\_

silk / ethilon / dexon \_\_\_\_\_

SUBCUT- # \_\_\_\_\_

-0 vicryl / chromic \_\_\_\_\_

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

**PROCEDURES**