

DATE: _____ TIME SEEN: _____ on arrival RM: _____ EMS Arrival
 HISTORIAN: patient spouse paramedics _____
 ___HX / ___EXAM LIMITED BY: _____
 unable to obtain

HPI

chief complaint: injury to: R / L collar-bone area shoulder
 arm elbow forearm wrist hand

onset / duration: just prior to arrival
 today / yesterday _____
 _____ min / hrs / days ago

where: home school neighbor's
 park work street

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

context: fall blow incision crush burn

associated symptoms: tingling / numbness distally
 loss feeling / power R / L arm _____

modifying factors: _____
 none
 pain on movement _____

ROS

MS - neck / back pain _____ GI - nausea / vomiting _____
 CONST - recent illness / fever _____ NEURO - headache _____
 CVS - chest pain _____ LYMPH - ankle swelling (R/L) _____
 RESP - shortness of breath / cough _____ SKIN - rash _____
 GU - problems urinating _____ PSYCH - anxiety / depression _____
 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 R / L HANDED

cardiac disease Afib CAD CHF MI hypertension
 diabetes Type 1 Type 2 hepatitis / HIV
 diet / oral / insulin prior injury
 ___old records reviewed / summary: _____

Tetanus immun. UTD / given in ED
 Meds- ___none / see nurses note
 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 cardiac disease _____

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 _____

EXTREMITIES

HAND

___nml inspection ___see diagram
 ___non-tender ___tenderness soft-tissue / bony (R/L)
 ___swelling / ecchymosis (R/L)
 ___deformity (R/L)

WRIST

___nml inspection ___see diagram
 ___non-tender ___tenderness soft-tissue / bony (R/L)
 ___nml ROM ___tenderness in anatomical snuff box (R/L)
 ___wrist pain on axial thumb load (R/L)
 ___swelling / ecchymosis (R/L)
 ___limited ROM (R/L)
 ___deformity (R/L)

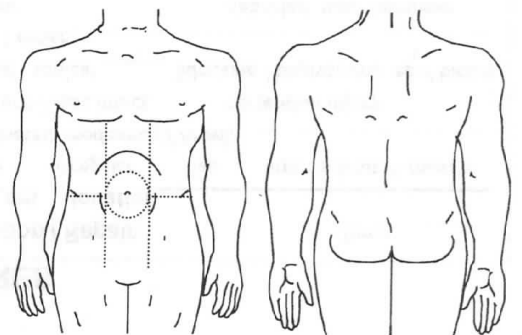
FOREARM / ELBOW

___nml inspection ___see diagram
 ___non-tender ___tenderness soft-tissue / bony (R/L)
 ___nml ROM ___swelling / ecchymosis (R/L)
 ___limited ROM (R/L)
 ___deformity (R/L)

ARM / SHOULDER

___nml inspection ___see diagram
 ___non-tender ___tenderness soft-tissue / bony (R/L)
 ___nml ROM ___swelling / ecchymosis (R/L)
 ___limited ROM (R/L)
 ___deformity (R/L)

- A=Abrasion
- B=Burn
- C=Contusion
- E=Ecchymosis
- FB= Foreign Body
- L=Laceration
- M=Muscle spasm
- PtT=Point Tenderness
- PW=Puncture Wound
- S=Swelling
- T=Tenderness
- Ø=without
- m=mild
- mod=moderate
- sv=severe



NEURO / VASC / TENDON
 sensation nml
 sensory deficit (R/L)
 motor deficit (R/L)
 weakness (R/L)
 no vascular
 pulse deficit (R/L) radial ulnar
 pallor / abnml cap refill (R/L)
 tendon function
 deficit in tendon function (R/L)
 limited extension limited flexion
 tendon injury: abrasion lac: complete partial
 location: R/L : f-arm wrist hand digit
 involving:
 R/L brachioradialis FCR FCU
 palmaris longus FPL FPB
 FDP: 2nd 3rd 4th 5th
 FDS: 2nd 3rd 4th 5th
 ECR longus ECR brevis ECU common ext
 EPL EPB ext digitorum: 2nd 3rd 4th 5th
 APL APB ext indicis ext digiti minimi

SKIN
 warm, dry
 intact
 diaphoretic / cool / cyanotic
 pressure ulcer: location
 depth / stage: 1 2 3 4

HEAD / ENT
 nml inspection
 pharynx nml
 nml inspection
 swelling / ecchymosis

NECK / BACK
 nml inspection
 non-tender
 tenderness
 swelling / ecchymosis

RESPIRATORY
 chest non-tender
 breath sounds nml
 tenderness
 swelling / ecchymosis / abrasions
 crepitus / subcutaneous emphysema
 decreased breath sounds (R/L)
 wheezes / rales / rhonchi (R/L)

CVS
 heart sounds nml
 tachycardia / bradycardia

ABDOMEN / GU
 non-tender
 no organomegaly
 tenderness / guarding :
 generalized RUQ LUQ RLQ LLQ
 catheter present

PROGRESS
 Time _____
 unchanged improved re-examined

Fracture / Dislocation Care / Other:
 Time: _____
 procedural sedation (see page 4)
 local / regional anesthesia lidocaine / bupivacaine
 reduced with manipulation
 post reduction neuro / vasc intact alignment good / fair / poor

splint Velcro OCL / Plaster Aluminum-foam
 Volar Thumb spica Ulnar Wrist Sugar-Tong Cock-up Collar
 applied by ED Physician / MLP / Tech / Nurse
 examined post splint application neuro / vasc intact alignment good
 sling
 foreign body removed with forceps with incision

PROCEDURES
 Wound Description / Repair: _____ cm location _____
 Time: _____

linear stellate irregular flap into: subcut / muscle
 clean contaminated moderately / heavily
 distal NVT: neuro / vasc intact no tendon injury
 anesthesia: local topical lidocaine / bupivacaine epi / bicarb
 prep: Betadine / other
 irrigated with saline
 wound explored
 to base / in bloodless field
 foreign body identified:
 wood glass metal other
 foreign material removed
 repair: superficial deep complicated
 Wound closed with: adhesive / Dermabond / steri-strips
 SKIN- # _____ nylon / prolene / staples /
 silk / ethilon / dexon
 SUBCUT- # _____ vicryl / chromic
 OTHER- # _____

XRAYS - Upper Extremity

(CXR on pg 4)

XRays done:

R shoulder clavicle humerus elbow f-arm wrist hand
L shoulder clavicle humerus elbow f-arm wrist hand

Interpretation:

By me Viewed by me Discsd w/ radiologist
abnml: fracture / dislocation (see below) ST5 effusion fat pad sign FB

Fracture:

Clavicle: proximal shaft distal : nondisplaced displaced: ant post
Humerus: proximal: articular head surgical neck: 2 parts 3 4
R/L greater tuberosity lesser tuberosity
shaft: transverse oblique spiral segmental comminuted
distal: supracondylar: simple comminuted
condyle: medial lat intercondylar transcondylar
epicondyle: medial lateral

Radius:

proximal: head neck torus
R/L shaft: transverse oblique spiral segmental comminuted
Monteggia's greenstick "bent bone"
distal: Colles's Smith's Barton's intra-articular torus styloid

Ulna:

proximal: olecranon coronoid process : intra-articular torus
R/L shaft: transverse oblique spiral segmental comminuted
Monteggia's greenstick "bent bone"

Carpal:

navicular: prox 1/3 mid 1/3 distal 1/3 triquetrum lunate
R/L capitate hamate pisiform trapezium trapezoid

Metacarpal:

R/L 1st 2nd 3rd 4th 5th : base shaft neck head
Bennett's Rolando's
n/d

Dislocation:

R/L Shoulder: anterior posterior inferior
R/L AC joint: post inf displaced: 100% - 200% >200%
R/L Elbow: ant post med lat radial head: ant post med lat
R/L Wrist: distal radioulnar radiocarpal midcarpal
R/L MCP: 1st 2nd 3rd 4th 5th
R/L IP /PIP /DIP: 1st 2nd 3rd 4th 5th
(n=nondisplaced d=displaced)

LABS

CBC normal except
WBC normal except
Hgb Na
Hct K
Platelets Gluc serum / urine
BUN POS NEG
Creat Creat

EKG

RHYTHM STRIP Rate: Rhythm: NSR
EKG Interp. by me Viewed by me Discsd w/ cardiologist
Rate: Rhythm: NSR sinus tach A-fib
not / changed from: repeat EKG: unchanged /

PROGRESS - Continued

◆ BP Screen - ≥ 18 y / screening / follow-up documented

measure exclusions: not eligible / not indicated / contraindicated

referred to / discussed with Dr. ED / hospital / office in _____ days

will see patient in: _____

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

Initial visit unless marked: subsequent sequelae

CLINICAL IMPRESSION

Skin (**R/L; FB: specify anatomy)
Laceration: _____
Abrasion: _____
Contusion: _____
Burn: thermal electrical
chemical: _____
accident self-harm assault unk

Ortho (See Xrays)
Fracture: closed / open
Dislocation
Nerve injury: _____
Total BSA= _____ %
1st, area: _____ %
2nd, area: _____ %
3rd, area: _____ %

Strain R / L : _____
Shoulder: trapezius deltoid
pec major rotator cuff
Forearm: triceps biceps long short
ext digitorum
flexor: to 1st 2nd 3rd 4th 5th
extensor: to 1st 2nd 3rd 4th 5th
Hand intrinsic: 1st 2nd 3rd 4th 5th

Vascular
Lacerated: artery vein
R / L : brachial radial ulnar
cephalic basilic
at: up-arm f-arm wrist hand

Tendon (See P.E.)
Tendon injury
at: up-arm f-arm wrist hand

DISPOSITION DECISION TIME - home transfer
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, backslash negatives, check V normals