

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

HPI

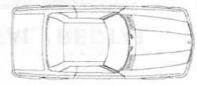
chief complaint: MVC motorcycle / ATV _____
 injury to: _____

onset / duration: just PTA today yesterday _____ min / hrs / days ago	position in vehicle: driver passenger front back
--	--

context: car collision overturned vehicle
 single / ___ car accident (lost control / fell asleep / unknown cause)
 motorcycle / ATV accident _____

location of pain / injuries: head face mouth neck chest abdomen back upper mid lower radiating to (R/L) thigh / leg	-right- shldr hip arm thigh elbow knee f-arm leg wrist ankle hand foot	-left- shldr hip arm thigh elbow knee f-arm leg wrist ankle hand foot
--	---	--

severity of pain: mild moderate severe (1/10) _____
associated symptoms: dizziness light-headedness seizure
 lost consciousness: yes no unknown duration: _____ sec / min
 remembers: event coming to hospital _____

site of impact: "P" = primary "S" = secondary  force low mod. high direct glancing	restraints: none lap / shoulder doesn't recall air bag deployed car seat helmeted thrown from vehicle long extrication ambulated at scene
--	--

ROS

CONST - recent illness / fever _____	LYMPH - ankle swelling (R/L) _____
NEURO - weakness / numbness _____	EYE - problems with vision _____
MS - neck / back pain _____	ENT - nasal drainage _____
RESP - shortness of breath / cough _____	SKIN - rash _____
GI - nausea / vomiting _____	PSYCH - depression / hallucinations _____
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 _____ CVA / TIA (R/L) _____
 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 _____

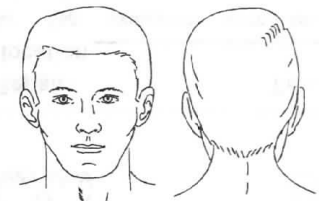
SOCIAL HX smoker ___ppd / never / past / quit: _____ ago
 tobacco: use / dependence _____ nicotine: use / dependence _____
 drugs _____ alcohol (recent / heavy / occasional) screening _____
FAMILY HX ___negative

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 _____

HEAD
 ___no evidence of trauma ___see diagram _____
 ___raccoon eyes / Battle's sign (R/L) _____



(see next page for legend)

NECK
 ___non-tender ___see diagram _____
 ___painless ROM ___decreased / limited ROM _____
 ___trachea midline ___pain on movement of neck _____

Nexus criteria neg ___midline tenderness / distracting injury _____
 ___altered mental status / recent ETOH _____
 ___focal neuro deficit _____

EYES
 ___PERRL ___unequal pupils R- _____ mm L- _____ mm
 ___EOMI ___EOM entrapment / palsy (R/L) _____
 ___subconjunctival hemorrhage (R/L) _____

ENT
 ___nml ext inspection ___hemotympanum (R/L) _____
 ___airway nml ___TM obscured by wax (R/L) _____
 ___no dental / oral inj ___clotted nasal blood (R/L) _____
 ___dental injury / malocclusion _____

XRAYS: Head, Extremities & Spine (Torso on pg 4)

Xrays done: skull facial spine: C T L S
 R shoulder clavicle humerus elbow f-arm wrist hand
 L shoulder clavicle humerus elbow f-arm wrist hand

R hip femur knee lower leg ankle foot toes
 L hip femur knee lower leg ankle foot toes

Interpretation: By me Viewed by me Discsd w/ radiologist
 ___ nml / NAD ___ no fracture ___ nml alignment ___ no FB
 abnml: fracture / dislocation (see below) STS effusion fat pad sign
 DJD FB

Skull / Facial 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

Upper Extremity Fracture:

Clavicle: proximal shaft distal : nondisplaced displaced: ant post
 R/L

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
 n/d

Radius: proximal: head neck torus
 R/L shaft: transverse oblique spiral segmental comminuted
 Galeazzi's greenstick "bent bone"
 distal: Colle's Smith's Barton's intra-articular torus styloid
 n/d

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

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

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

Upper Extremity 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
 carpometacarpal: 1st 2nd 3rd 4th 5th

Spine Fracture:

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 S: wedge teardrop burst spinous process
 # : stable unstable nondisplaced displaced

C T L S: wedge teardrop burst spinous process
 # : stable unstable nondisplaced displaced

Lower Extremity Fracture:

Femur: head: articular surface neck: subcapital transcervical base
 R/L intertrochanteric greater troch lesser troch subtroch
 shaft: transverse oblique spiral segmental comminuted
 distal: supracondylar: w/ intercondylar
 condyle: medial lateral transcondylar
 n/d

Patella: longitudinal transverse comminuted osteochondral
 R/L n/d

Tibia: proximal: spine tuberosity condyle: medial lateral
 R/L shaft: transverse oblique spiral segmental comminuted
 distal: med malleolus pilon torus
 n/d

Fibula: proximal: linear avulsion stress Maisonneuve torus
 R/L shaft: transverse oblique spiral segmental comminuted
 distal: lat malleolus comminuted torus
 n/d

Ankle: lat malleolus med malleolus
 R/L bimalleolar trimalleolar distal tibial pilon
 n/d

Foot: calcaneus: body ant process tuberosity
 R/L extra-articular intra-articular
 talus: head neck body dome post process lat process
 extra-articular intra-articular avulsion chip fx
 navicular cuboid cuneiform: medial middle lateral
 metatarsal: 1st 2nd 3rd 4th 5th
 toe: 1st 2nd 3rd 4th 5th : prox phalanx middle distal
 n/d

Lower Extremity Dislocation:

R/L Hip: central posterior anterior: obturator pubic iliac
 R/L Patella: medial lateral
 R/L Knee: anterior posterior medial lateral rotatory
 R/L Ankle / Foot: subtalar midtarsal transmetatarsal Lisfranc
 R/L Toe: 1st 2nd 3rd 4th 5th : MTP PIP IP DIP

(n=nondisplaced d=displaced)

BP Screen - ≥ 18 y / screening / follow-up documented
Minor head trauma - 2y - 17y / ≥ 18 y / GCS 15 / PECARN nsk: high low
measure exclusions: not eligible / refused / not indicated / contraindicated
/ CT head see PECARN rule on quality addendum template #200

PROGRESS-Continued

Time _____ unchanged _____ improved _____ re-examined _____

RHYTHM STRIP Rate: _____ Rhythm: NSR
EKG Intep. by me Viewed by me Discd w/ cardiologist
nml / NAD nml intervals nml axis nml QRS nml ST/T
Rate: _____ Rhythm: NSR sinus tach A-fib
not / changed from: _____ repeat EKG: unchanged / _____

EKG

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

LABS

Ultrasound / FAST Exam: heart / pericardium abdomen
Interpretation: By me By radiologist
nml / NAD dbnmI:

Fracture: Rib: R/L single multiple
Sternum: body manubrium xiphoid
Pelvis: R/L pubic: superior ramus inferior ramus
R/L ischium: avulsion ramus tuberosity: displaced
R/L acetabulum: ant wall medial post dome: displaced
R/L ilium: wing ant sup spine ant inf spine
avulsion comminuted linear: displaced
Sacrum: transverse: displaced: ant post upper-comminuted
vertical fx thru: ala foramen spinal canal: displaced: mild sv

Xrays done: CXR nb sternum abdomen pelvis
Interpretation: By me Viewed by me Discd w/ radiologist
nml / NAD no pneumothorax nml heart size nml mediastinum
dbnmI: fracture (see below) STS DJD FB
R/L hemothorax pneumothorax tension pulm. contusion
CT done: head chest abdomen pelvis
Interpretation: By me Viewed by me Discd w/ radiologist
nml / NAD dbnmI:

XRAYS / CT cont

Circle positives backslash negatives, check normals

6230.148.07-18 ♦ Reportable Measure

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 # _____)

Abdomen / GI / GU Hemoperitoneum Liver: contusion lac: _____ cm stellate multiple
Spleen: contusion: <2cm >2cm lac: <1cm 1-3cm >3cm
Pancreas: head: contusion lac: sm med lg
body: contusion lac: sm med lg
tail: contusion lac: sm med lg
Kidney: R / L :
contusion: <2cm >2cm lac: <1cm 1-3cm >3cm
Neuro (See HPI & PE)
Concussion R / L Cerebral: contusion lac
traumatic hemorrhage R / L Epidural Subdural Traumatic SAH
LOC: unknown few sec < min
sec / mins unk time
Cord injury: incomplete complete
level C: # _____ T: # _____ L: # _____ sacral
Seizure
Other Diaphragm rupture Shock: traumatic hypovolemic
Crush injury to: Amputation: partial complete :
to: at level of: Tooth # _____ : fx avulsion sublux
Skin (**R/L; FB: specify anatomy) Laceration: _____
Abrasion: _____
Contusion: _____
Burn: thermal electrical chemical:
accident self-harm assault unk
1st, area: _____ %
2nd, area: _____ %
3rd, area: _____ %
Total BSA = _____ %
Strain (**R/L; specify anatomy) Spine: C T L
Spiral (**R/L; except for spine specify joint & ligament)
Ortho (See Xrays / CT) Fracture / Dislocation : closed / open
CV / Resp (See Xrays / CT) Aorta transection: abd thoracic
Cardiac arrest Cardiac contusion
R / L Hemothorax R / L Pneumothorax tension
R / L Pulmonary: contusion lac Respiratory arrest

CLINICAL IMPRESSION

Initial visit unless marked: subsequent sequelae

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