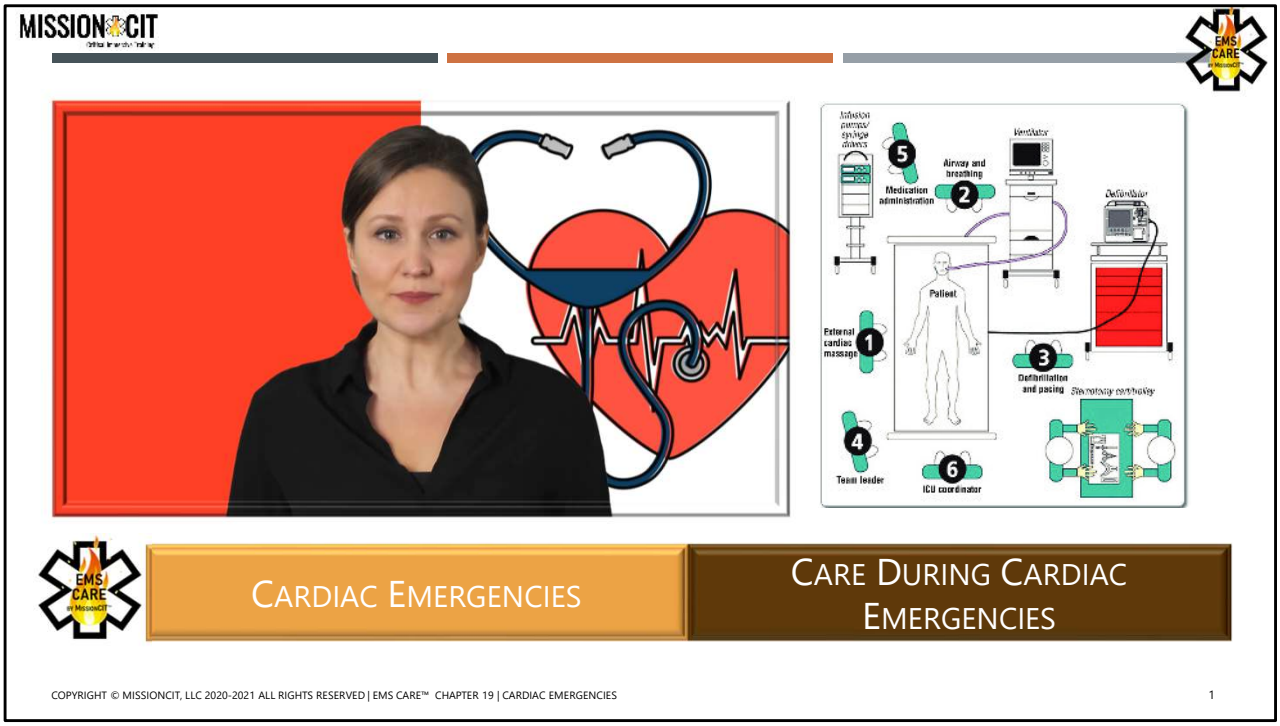


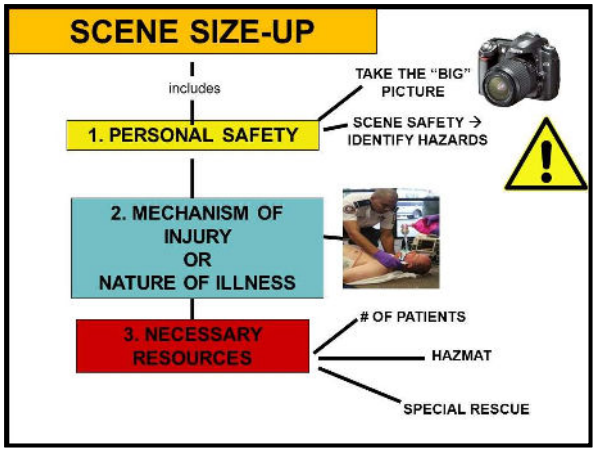
Thank you Justin!

Now we discuss starting the care for a cardiac emergency, beginning with scene size-up, then continuing with primary and secondary assessment.

Good studying

Scene Size-up

- Assess the situation
- Look for clues to determine the cause
- Ensure that the emergency is not due to a trauma
- Look at the patient's room, cleanliness, clothes, and other things to get an idea
- Evaluate the patient's condition
- Call ALS if needed



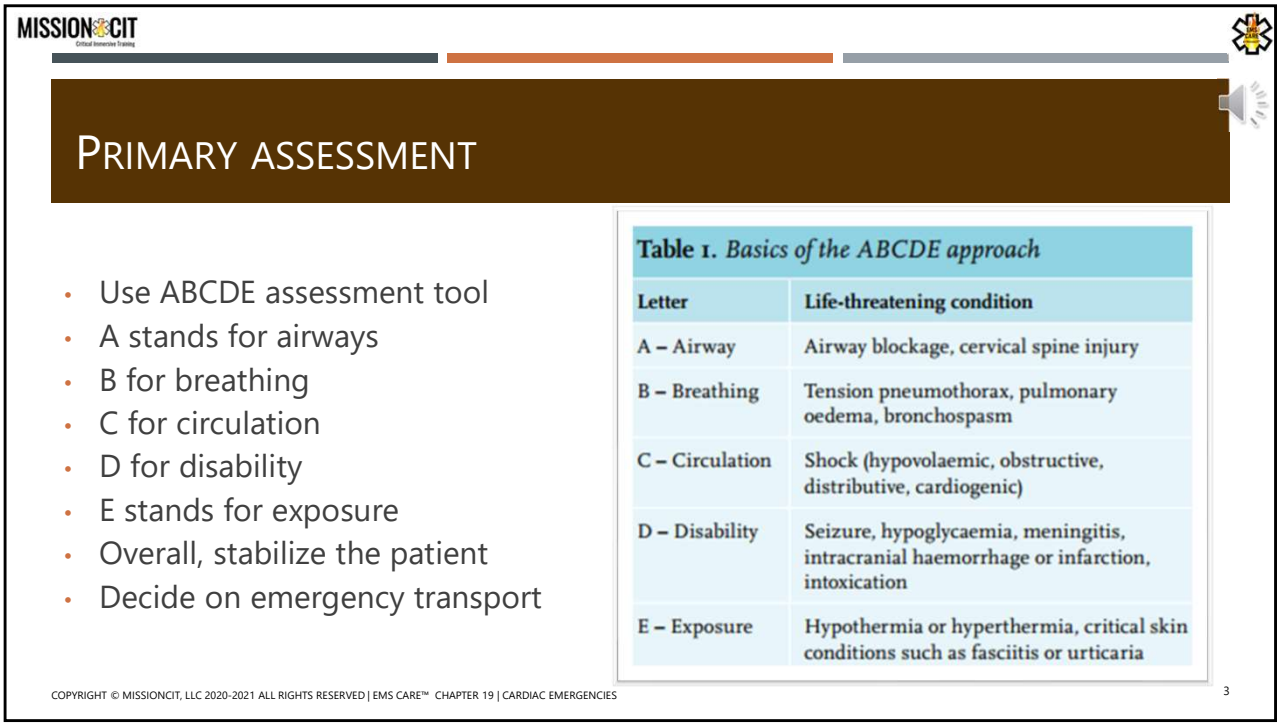
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2

When you walk into an emergency, the first thing to do is look around, and assess the situation. Specifically, look for medicine bottles, or any other clues to give you an idea of the patient's condition.

The main idea is to ensure. that the cardiac emergency is not due to a traumatic event. The room's condition, the cleanliness of the patient, the kind of clothes that he or she is wearing, and other environmental factors can help you assess the situation better.

Evaluate the patient's condition and immediately decide on emergency transport. Call A L S if you have to.



Use the A B C D E model to do the primary assessment in cardiac emergencies.

Here, A stands for airways where you ensure that there are no obstructions in the airway. B stands for breathing where you provide oxygenation and ventilation if needed to ensure that the patient is breathing. C stands for circulation where you have to check if the person's body is circulating enough blood. If you see pale or bluish skin, it's a sign that all is not well.

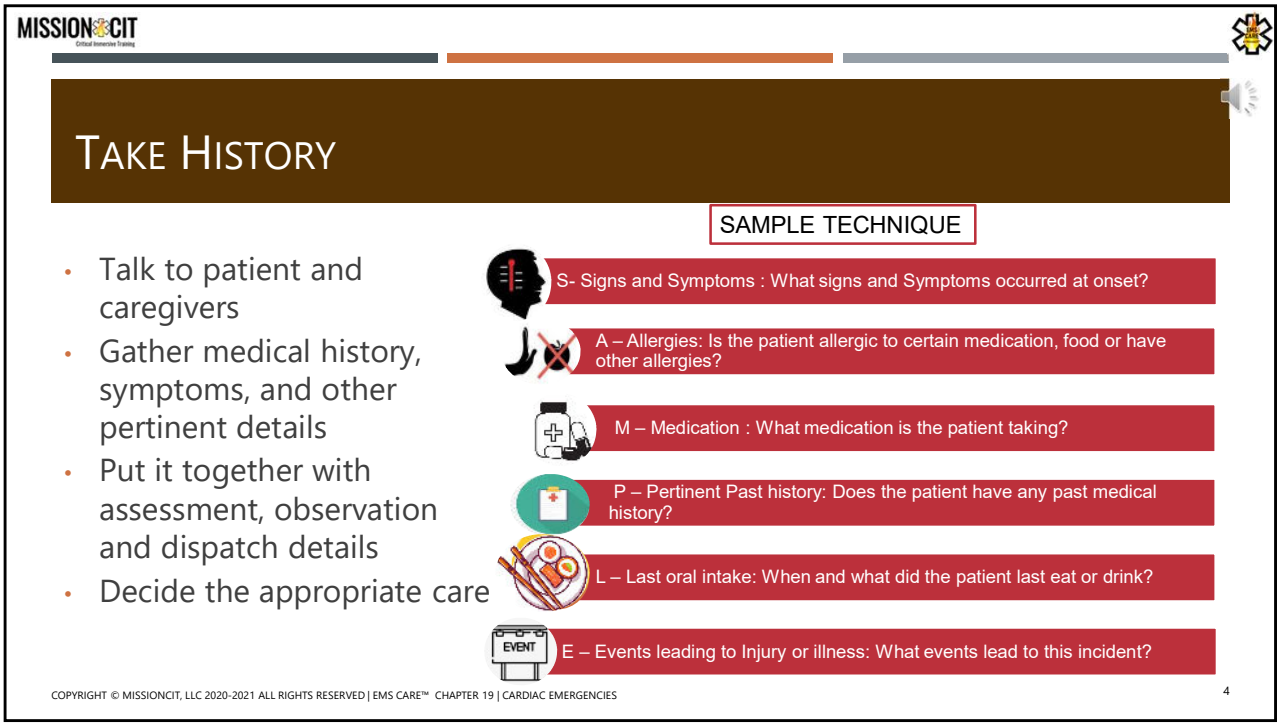
Today, experts recommend circulation, airways, and

breathing. So check your local protocols.

Next, D stands for disability where you check the patient's responsiveness using the A V P U scale

Finally, E stands for exposure where you check for signs of trauma or bleeding.

The goal of primary assessment is to stabilize the patient and decide if emergency transport is needed.



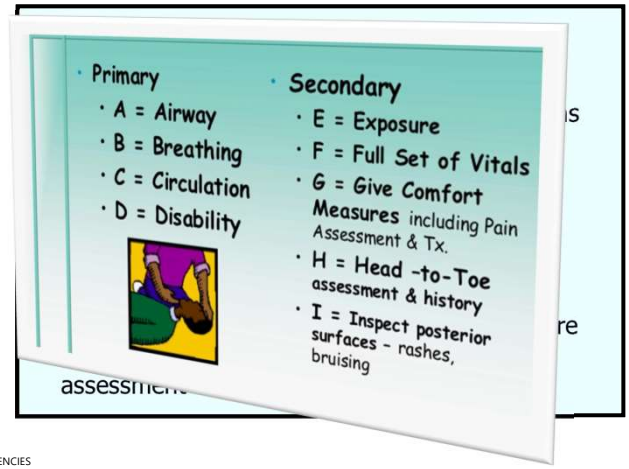
Once the patient is stable, talk to the patient if possible and to the caregivers and family members to get an idea of the medical history, symptoms, and other pertinent details.

When you put this information along with your assessment, observation, and dispatch details, you can get a better idea of the situation, so you can decide on appropriate care.

Document your findings.

Secondary Assessment and Reassessment

- Do a physical exam
- Check the vitals
- Document
- If transporting, check the vitals once every five minutes if vitals are changing rapidly
- Else, once in every 15 minutes



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After understanding the situation, do a physical examination of the patient, and check the vital signs. Include your findings in your report.

If you're transporting the patient, check the vitals once every five minutes if there are rapid changes to it. Otherwise, check vitals once every 15 minutes.

With this, we have come to the end of this lesson, and Justin will take you through the Return of Spontaneous Circulation in the next one.