

## **PATIENT ASSESSMENT & MANAGEMENT OF ACUTE SITUATIONS**

### **PRIMARY ASSESSMENT (FIRST PRIORITY – ABCs)**

#### **A – Airway**

- Is it open and clear?
- Look for obstruction (vomit, tongue, foreign body)

#### **B – Breathing**

- Rate, depth, effort
- Use of accessory muscles?
- Cyanosis?

#### **C – Circulation**

- Pulse (rate, rhythm, strength)
- Skin color, temperature
- Capillary refill (<2 sec normal)

If any are compromised → **intervene immediately**

### **PHYSIOLOGIC NEEDS (MASLOW PRIORITY)**

1. **Airway**
2. **Breathing**
3. **Circulation**
4. Oxygenation
5. Fluid balance
6. Temperature regulation

## **TAKING A PATIENT HISTORY**

### **SAMPLE Method**

- **S** – Signs & Symptoms
- **A** – Allergies
- **M** – Medications
- **P** – Past medical history
- **L** – Last oral intake
- **E** – Events leading up

### **OPQRST (Pain Assessment)**

- Onset
- Provocation
- Quality
- Region/Radiation
- Severity
- Time

## ASSESSING CURRENT PHYSICAL STATUS

- Level of consciousness (LOC)
- Skin (color, temp, moisture)
- Breathing effort
- Mobility
- Pain/distress level

### VITAL SIGNS (ALL AGE RANGES)

Age Group	HR (Pulse)	RR	BP
Newborn	110–160	30–60	60–80 systolic
Infant (1 yr)	100–150	30–50	70–100
Toddler	90–140	24–40	80–110
Child	80–120	20–30	90–115
Adolescent	60–100	12–20	100–120
Adult	60–100	12–20	90–120 systolic

#### Temperature:

- Normal: **97.7–99.5°F (36.5–37.5°C)**

#### Oxygen Saturation:

- Normal: **95–100%**

### PULSE SITES & LOCATIONS

- **Carotid** – neck (emergency)
- **Radial** – wrist (most common)
- **Brachial** – inside upper arm (infants)
- **Femoral** – groin
- **Popliteal** – behind knee
- **Posterior tibial** – ankle
- **Dorsalis pedis** – top of foot
- **Apical** – heart (auscultation)

### ACUTE SITUATIONS (GENERAL RESPONSE)

1. Stay calm
2. Call for help
3. Assess ABCs
4. Provide oxygen
5. Monitor vitals
6. Prepare emergency equipment

## EMERGENCY SUPPLIES & EQUIPMENT

- Oxygen tank & flowmeter
- Nasal cannula, masks
- Suction machine
- Bag-valve mask (BVM)
- AED/defibrillator
- Airway adjuncts (OPA/NPA)
- Crash cart
- Gloves, PPE

## OXYGEN & SUCTION

### Oxygen Delivery Devices:

- **Nasal cannula:** 1–6 L/min (24–44%)
- **Simple mask:** 6–10 L/min
- **Non-rebreather:** 10–15 L/min (up to 100%)

### Suction:

- Removes secretions
- Prevent aspiration
- Use  $\leq 10$ –15 seconds per attempt

## RESPIRATORY EMERGENCIES

### Signs:

- Dyspnea
- Wheezing
- Cyanosis
- Retractions

### Reactive Airway Disease (Asthma)

- Bronchospasm → narrowed airways
- **Treatment:**
  - Oxygen
  - Bronchodilator (inhaler/nebulizer)
  - Sit upright

### Airway Obstruction

#### Mild:

- Can cough → encourage coughing

#### Severe:

- Cannot speak/breathe → **Heimlich maneuver**

## CARDIAC EMERGENCIES

### Signs:

- Chest pain (radiating)
- Shortness of breath
- Diaphoresis
- Nausea

**Interventions:**

- Oxygen
- Monitor vitals
- AED if needed
- Position: semi-Fowler's

**TRAUMA****Types:**

- Blunt
- Penetrating

**Management:**

- Stabilize spine
- Control bleeding
- Immobilize fractures
- Treat for shock

**MEDICAL EMERGENCIES****Drug Reactions****Mild:**

- Rash, itching

**Severe (Anaphylaxis):**

- Airway swelling
- Hypotension

**Treatment:**

- Oxygen
- Epinephrine (if available)
- Call emergency response

**Diabetic Emergencies****Hypoglycemia (LOW sugar)**

- Confusion
- Sweating
- Tachycardia

Give glucose if conscious

**Hyperglycemia (HIGH sugar)**

- Polyuria
- Fruity breath
- Slow onset

**Cerebrovascular Accident (Stroke)****FAST Acronym:**

- **F** – Face drooping
- **A** – Arm weakness
- **S** – Speech difficulty
- **T** – Time to call

### **Transient Ischemic Attack (TIA)**

- Temporary stroke symptoms
- Warning sign of future stroke

### **Seizures**

#### **What to DO:**

- Protect head
- Turn patient to side
- Loosen tight clothing
- Time seizure

#### **DO NOT:**

- Put anything in mouth
- Restrain

### **Epistaxis (Nosebleed)**

#### **DO:**

- Lean forward
- Pinch nose 10–15 min

#### **DO NOT:**

- Tilt head back

### **Nausea & Vomiting**

#### **DO:**

- Position side-lying
- Provide emesis basin

#### **DO NOT:**

- Leave patient unattended (aspiration risk)

## **SHOCK (LIFE-THREATENING)**

### **Types & Symptoms**

#### **Hypovolemic**

- Blood/fluid loss
- Tachycardia, pale, cool skin

#### **Cardiogenic**

- Heart failure
- Weak pulse, pulmonary edema

#### **Anaphylactic**

- Allergic reaction
- Airway swelling, hypotension

#### **Septic**

- Infection
- Fever, warm skin (early)

#### **Neurogenic**

- Spinal injury
- Hypotension + bradycardia

### **General Shock Management:**

- Oxygen
  - Keep patient warm
  - Elevate legs (if no trauma)
  - Monitor vitals
  - Rapid transport
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- **Airway ALWAYS comes first**
  - **Oxygen is first-line for most emergencies**
  - **Hypoglycemia = fast acting and reversible**
  - **Stroke = time-sensitive (FAST)**
  - **Shock = poor perfusion = treat early**
  - **Never leave unstable patient alone**

**1. What is the FIRST step in patient assessment?**

- A. Obtain history
- B. Check airway
- C. Take blood pressure
- D. Assess pain

**2. A patient is unconscious. What is your priority?**

- A. Check pulse
- B. Assess airway
- C. Take temperature
- D. Ask history

**3. Normal adult respiratory rate is:**

- A. 8–10
- B. 10–12
- C. 12–20
- D. 20–30

**4. Which pulse site is used in emergencies?**

- A. Radial
- B. Apical
- C. Carotid
- D. Pedal

**5. A patient presents with wheezing and shortness of breath. This suggests:**

- A. Cardiac arrest
- B. Reactive airway disease
- C. Stroke
- D. Shock

**6. What is the normal adult heart rate?**

- A. 40–60
- B. 60–100
- C. 100–140
- D. 120–160

**7. What does the “A” in SAMPLE stand for?**

- A. Airway
- B. Allergies
- C. Assessment
- D. Activity

**8. A patient cannot speak but is clutching their throat. What should you do?**

- A. Give water
- B. Encourage coughing
- C. Perform Heimlich maneuver
- D. Lay them flat

**9. Which oxygen device delivers the highest concentration?**

- A. Nasal cannula
- B. Simple mask
- C. Non-rebreather mask
- D. Venturi mask

**10. A blood pressure of 80/50 indicates:**

- A. Hypertension
- B. Normal
- C. Hypotension
- D. Bradycardia

**11. Early sign of hypoglycemia:**

- A. Dry skin
- B. Slow pulse
- C. Sweating
- D. Cyanosis

**12. What is the correct action during a seizure?**

- A. Restrain patient
- B. Put object in mouth
- C. Protect head
- D. Give water

**13. FAST acronym is used for:**

- A. Cardiac arrest
- B. Stroke recognition
- C. Trauma
- D. Shock

**14. A patient with facial droop and slurred speech likely has:**

- A. Seizure
- B. Stroke
- C. Hypoglycemia
- D. Asthma

**15. What is the normal oxygen saturation?**

- A. 85–90%
- B. 90–94%
- C. 95–100%
- D. 100–110%

**16. First sign of shock:**

- A. Bradycardia
- B. Tachycardia
- C. Hypertension
- D. Slow breathing

**17. What is the correct position for a patient with breathing difficulty?**

- A. Supine
- B. Trendelenburg
- C. Semi-Fowler's
- D. Prone

**18. What should you do for epistaxis (nosebleed)?**

- A. Tilt head back
- B. Lay flat
- C. Lean forward and pinch nose
- D. Blow nose

**19. What is the purpose of suction?**

- A. Deliver oxygen
- B. Remove secretions
- C. Increase heart rate
- D. Reduce fever

**20. A patient with chest pain and sweating is likely experiencing:**

- A. Stroke
- B. Cardiac emergency
- C. Seizure
- D. Hypoglycemia

**21. Which condition causes airway swelling and hypotension?**

- A. Septic shock
- B. Neurogenic shock
- C. Anaphylactic shock
- D. Cardiogenic shock

**22. What is the priority in trauma care?**

- A. Pain control
- B. ABCs
- C. History
- D. Documentation

**23. A patient is vomiting. What is the safest position?**

- A. Supine
- B. Standing
- C. Side-lying
- D. Prone

**24. What is the normal adult systolic BP?**

- A. 60–80
- B. 80–100
- C. 90–120
- D. 130–160

**25. Which is a late sign of hypoxia?**

- A. Restlessness
- B. Tachycardia
- C. Cyanosis
- D. Anxiety

**26. A TIA is best described as:**

- A. Permanent stroke
- B. Temporary loss of blood flow to brain
- C. Seizure disorder
- D. Heart attack

**27. What should NOT be done during a seizure?**

- A. Protect head
- B. Turn to side
- C. Restrain patient
- D. Monitor time

**28. Hypovolemic shock is caused by:**

- A. Infection
- B. Blood/fluid loss
- C. Allergic reaction
- D. Spinal injury

**29. A patient with fruity breath likely has:**

- A. Hypoglycemia
- B. Hyperglycemia
- C. Stroke
- D. Seizure

**30. What is the FIRST intervention for most emergencies?**

- A. Medication
- B. Oxygen
- C. IV fluids
- D. Surgery