

# Heart Throbs

## First Aid Form

Patient Name: \_\_\_\_\_

Age: \_\_\_\_\_ Gender: M F Phone #: \_\_\_\_\_

Mechanism of Injury			
Delicate Spine?	Yes	No	Oxygen, Oral Airway, Blanket
			Yes No

Vitals									
Time	1.			2.			3.		
LOC	Fully Conscious Confused Responsive to Pain No Response			Fully Conscious Confused Responsive to Pain No Response			Conscious Confused Responsive to Pain No Response		
Pulse	10s check x6		Weak Strong Irregular	10s check x6		Weak Strong Irregular	10s check x6		Weak Strong Irregular
Resp.	15s check x4		Laboured Shallow Stridor	15s check x4		Laboured Shallow Stridor	15s check x4		Laboured Shallow Stridor
Eyes	Equal Unequal	Reactive Slow React Unreactive	Dilated Constricted Size: _____	Equal Unequal	Reactive Slow React Unreactive	Dilated Constricted Size: _____	Equal Unequal	Reactive Unreactive	Dilated Constricted
Skin	Normal Grey Red	Normal Cool Hot	Normal Sweaty Dry	Normal Grey Red	Normal Cool Hot	Normal Sweaty Dry	Normal Grey Red	Normal Cool Hot	Normal Sweaty Dry

5 x 6 = 30  
 6 x 6 = 36  
 7 x 6 = 42  
 8 x 6 = 48  
 9 x 6 = 54  
 10 x 6 = 60  
 11 x 6 = 66  
 12 x 6 = 72  
 13 x 6 = 78  
 14 x 6 = 84  
 15 x 6 = 90  
 16 x 6 = 96  
 17 x 6 = 102  
 18 x 6 = 108  
 19 x 6 = 114  
 20 x 6 = 120  
 21 x 6 = 126  
 22 x 6 = 132  
 23 x 6 = 138  
 24 x 6 = 144  
 25 x 6 = 150  
 26 x 6 = 156  
 27 x 6 = 162  
 28 x 6 = 168  
 29 x 6 = 174  
 30 x 6 = 180

3 x 4 = 12  
 4 x 4 = 16  
 5 x 4 = 20  
 6 x 4 = 24  
 7 x 4 = 28  
 8 x 4 = 32  
 9 x 4 = 36  
 10 x 4 = 40

History	
Chief Complaint <i>What hurts?</i>	
History of CC <i>What happened?</i>	
Medical Hx <i>Occurred before?</i>	
Medications? <i>Including tylenol, etc.</i>	
Allergies? <i>To medication and foods</i>	

Pain	
Position	Where does the pain originate from?
Quality	Sharp Dull Squeezing Other:
Radiating	Yes No Where?
Severity	1 2 3 4 5 6 7 8 9 10
Timing	What time did the pain start?