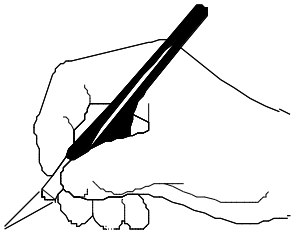
Secondary Survey

(ALERT 77-78, CLSM 6:5-7)

1. Vitals (LOC PRES)
2. History (CHAMMIP)
3. Head to Toe



1. Vitals - Looking at the vital signs of a patient can tell you how to better care for them. It can also tell you if they are improving or not. Therefore, it is important to _____ of a patient when you check them so that you can compare to the results of the next check.

LOC - Level Of Consciousness -

How to check:
Two Stimuli
1. _____
2. _____

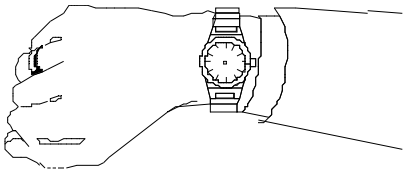
What to assess:
Three Responses
1. _____
2. _____
3. _____

P - Pulse -

Check for three things:
1. _____
2. _____
3. _____

On a conscious patient, the pulse should be checked on the wrist (radial) for at least 10 seconds, using the fingers and not the thumb.

Normal Pulse Rate (bpm)	
Adults	60-80
Children	80-100
Infants	100-120



R - Respirations -

Check for three things:
1. _____
2. _____
3. _____

To assess the victim's respiratory rate, you should look, listen and feel the breathing for at least 15 seconds, and time the number of times the chest rises. Normal resting breathing rate is 12-20 bpm.

E -Eyes -

Check three things:
1. _____
2. _____
3. _____

(constricted=small, dilated=large) Note any differences between the left and right pupil, and remember here the possibility of a natural eye condition (ex. glass eye).

S - Skin

Check for three things:
1. _____
2. _____
3. _____

Check any exposed part of skin. Check fingernail beds and lips as well. Compare temperature with your own.

Time
LOC - Level of Consciousness
P - Pulse
R - Respirations
E - Eyes
S - Skin

2 History -CHAMMIP

-_____ (ex. What hurts?)

This one is usually pretty obvious. The chief complaint is usually what you see first, as you approach the victim. If someone is yelling at you that they broke their leg, you must ignore this however, to assess the scene and check ABC's and vitals before looking to their chief complaint.

The chief complaint does not need to be in the victim's own words, and should not include a diagnosis.

-_____ (ex. How did it happen?)

It is important to find out what happened to cause the injury because it may change how you deal with the patient.

If the victim is unconscious, you can find out what happened from a bystander.

-_____ (ex. Allergic to that bee that just stung you?)

This question is very important, especially if the patient is experiencing any symptoms that could be an allergic reaction. You also want to know if they are allergic to any medications that EMS may later want to administer.

-_____ (ex. Any medication for bee stings with you?)

Perhaps your patient is having an angina attack, and they haven't taken their medication because they left it somewhere. You may be able to send a bystander to get it. Remember that you can NOT administer medication to any victim, they must do it themself.

-_____ (ex. Has this ever happened before?)

It can be very useful to find out if the patient has experienced the same thing before. It may be helpful to ask how they were treated the last time.

It is also important to find out if the patient has any conditions life diabetes or epilepsy. If the victim is unconscious, look for medical bracelets, anklets or necklaces.

-_____ (ex. Name, Phone #, Age...)

If the victim is unconscious, look through their pockets for a wallet or look for a purse, or even a bystander that might know them.

-_____ **- PQRST**

- _____ Where exactly is the pain originating from?
- _____ What does the pain feel like? (ex. sharp, dull, squeezing, etc.)
- _____ Is the pain radiating out to other parts of the body?
- _____ Rate the pain on a scale of 1 to 10.
- _____ When did the pain start? Is it getting better or worse?

3 Head to Toe

(CLSM 6:7 has an excellent picture of a head to toe examination)

- q Head & Neck: *around eyes, cheekbones, jaw, through hair, in & behind ears, trachea and neck*
- q Chest & Back: *sternum, around ribs, along the spine, kidneys*
- q Abdomen & Hips: *four quadrants of the abdomen, push gently on hips*
- q Legs & Feet: *check carefully down each limb, pulse, cap refill, and pain response*
- q Arms & Hands: *check carefully down each limb, pulse, cap refill, and pain response*