

Scenario #1 - "Big Wheels Keep on Churnin' "

CYCLE # \_\_\_\_\_

TEAM # \_\_\_\_\_

NO.	DONE	NOT DONE	SCENE/PRIMARY SURVEY	
1	✓	✗	Did the team TAKE CHARGE of the situation?	
2	✓	✗	Did the team wear protective GLOVES?	
3	✓	✗	Did the team ASSESS for HAZARDS?	
4	✓	✗	Did the team use Wheel Chock to prevent further movement of truck?	
5	✓	✗	Did the team verbalize to turn off the truck?	
6	✓	✗	Did the team CALL OUT FOR HELP?	
7	✓	✗	Did the team ASK for SITUATION HISTORY?	
8	✓	✗	Did the team DETERMINE the NUMBER OF CASUALTIES?	2
9	✓	✗	Did the team ID SELF and OBTAIN CONSENT?	
10	✓	✗	Did the team WARN THE CASUALTY NOT TO MOVE?	
11	✓	✗	Did the team ASSESS LEVEL OF CONSCIOUSNESS?	Fully Conscious
12	✓	✗	Did the team ASSESS AIRWAY?	Open
13	✓	✗	Did the team ASSESS BREATHING?	28 shallow & irreg. crying
14	✓	✗	Did the team APPLY OYXGEN APPROPRIATELY? (NRB 15LPM)	
15	✓	✗	Did the team ASSESS PULSE? (Circulation)	130 bounding & rapid
16	✓	✗	Did the team ASSESS SKIN CONDITION (Circulation)	Pale, cool & clammy
17	✓	✗	Did the team PERFORM A RAPID BODY SURVEY?	Major R arm injuries
18	✓	✗	Did the team lightly cover all 3 open bone ends to prevent further infection?	
19	✓	✗	Did the team IMMEDIATELY COVER WITH A BLANKET for shock and warmth?	
20	✓	✗	Did the team ACTIVATE EMS/AMBULANCE?	
21	✓	✗	Did the team ACTIVATE POLICE? (Workplace Injury)	

JUDGES NOTE:

This section is active for the first 3 minutes of the scenario only! During these first 3 minutes, the competitor may perform the actions that are both listed here and in the Secondary Survey. After the 3 minutes, the competitor is eligible to receive marks only in the Secondary Survey and no marks may be awarded in this Primary Survey. Actions in this section may be done in any order.

**Score Sheet for Patient #1 - "Crushed Arm"**

Scenario #1 - "Big Wheels Keep on Churnin' "

SECONDARY SURVEY

Actions in this section may be performed by the competitor in the first 3 minutes of the scenario as well as the Primary Survey.  
After the 3 first minutes, this is the only section that points shall be awarded to.

Actions in this section may be done in any order.

NO.	DONE	NOT DONE	HISTORY OF THE PATIENT	
22	✓	✗	Did the team ask about SYMPTOMS	<i>Severe pain R arm</i>
23	✓	✗	Did the team ask about ALLERGIES?	<i>None</i>
24	✓	✗	Did the team ask about MEDICATIONS?	<i>None</i>
25	✓	✗	Did the team ask about MEDICAL HISTORY?	<i>Previously healthy</i>
26	✓	✗	Did the team ask about LAST ORAL INTAKE?	<i>Ate meal as normal</i>
27	✓	✗	Did the team determine INCIDENT HISTORY?	<i>Truck check, rolled over arm</i>
<b>1st Set of VITAL SIGNS</b>				
28	✓	✗	Did the team check LEVEL OF CONSCIOUSNESS?	<i>Fully Conscious</i>
29	✓	✗	Did the team check RESPIRATIONS?	<i>28 shallow &amp; irreg (crying)</i>
30	✓	✗	Did the team check PULSE?	<i>130 bounding &amp; rapid</i>
31	✓	✗	Did the team check BLOOD PRESSURE	<i>190/110</i>
32	✓	✗	Did the team check SKIN CONDITION/TEMP?	<i>Pale, Cool &amp; Clammy</i>
33	✓	✗	Did the team check PUPILS?	<i>Equal/Reactive</i>
<b>HEAD TO TOE EXAMINATION</b>				
34	✓	✗	Check SCALP/HEAD?	<i>No Findings</i>
35	✓	✗	Check both EYES?	<i>No Findings</i>
36	✓	✗	Check NOSE?	<i>No Findings</i>
37	✓	✗	Check CHEEKBONES?	<i>No Findings</i>
38	✓	✗	Check MOUTH?	<i>No Findings</i>
39	✓	✗	Check JAW?	<i>No Findings</i>
40	✓	✗	Check both EARS?	<i>No Findings</i>
41	✓	✗	Check NECK?	<i>No Findings</i>
42	✓	✗	Check both COLLARBONES?	<i>No Findings</i>
43	✓	✗	Check both SHOULDERS?	<i>No Findings</i>
44	✓	✗	Check RIGHT ARM?	<i>Open Fx R Upper, Open Fx R 2x Lower, Crushed hand, tire marks across arm</i>
45	✓	✗	Check LEFT ARM?	<i>No Findings</i>
46	✓	✗	Check CHEST?	<i>No findings</i>
47	✓	✗	Check ABDOMEN?	<i>No Findings</i>
48	✓	✗	Check BACK?	<i>No Findings</i>
49	✓	✗	Check PELVIS?	<i>No Findings</i>
50	✓	✗	Check RIGHT LEG?	<i>No Findings</i>
51	✓	✗	Check LEFT LEG?	<i>No Findings</i>

**Score Sheet for Patient #1 - "Crushed Arm"**

Scenario #1 - "Big Wheels Keep on Churnin' "

FIRST AID / TREATMENT

Actions in this section may be performed by the competitor at any point in the scenario.

NO.	DONE	NOT DONE		
<b>RIGHT ARM ASSESSMENT - OPQRST</b>				
52	✓	✗	Did the team ASK about ONSET?	<i>truck rolled over arm</i>
53	✓	✗	Did the team ASK about PROVOKES?	<i>any movement &gt; (++)</i>
54	✓	✗	Did the team ASK about QUALITY?	<i>Severe ache/ crushing</i>
55	✓	✗	Did the team ASK about REGION/RADIATION/RELIEF?	<i>From shoulder to fingers</i>
56	✓	✗	Did the team ASK about SEVERITY?	<i>10/10, mvt &gt; to 20/10</i>
57	✓	✗	Did the team ASK about TIME?	<i>a few min before team came</i>
<b>Care for Right UPPER ARM - Open Fracture with 1 protruding bone</b>				
58	✓	✗	Did the team CHECK CIRCULATION BEFORE BANDAGING	
59	✓	✗	Did the team APPROPRIATELY DRESS Bone end with padding?	
60	✓	✗	Did the team ELEVATE the arm using a STANDARD ARM SLING?	
61	✓	✗	Did the team SECURE the ARM to the CHEST using 2 WIDE BANDAGES?	
62	✓	✗	Did the team RE-CHECK CIRCULATION AFTER BANDAGING	
<b>Care for Right LOWER ARM - Open Fracture with 2 protruding bones</b>				
63	✓	✗	Did the team CHECK CIRCULATION BEFORE BANDAGING ?	
64	✓	✗	Did the team APPROPRIATELY DRESS Bone end with padding?	
65	✓	✗	Did the team SECURE with 1 ABOVE & 1 BELOW to an APPROPRIATE size SPLINT?	
66	✓	✗	Did the team ELEVATE the arm using a STANDARD ARM SLING?	
67	✓	✗	Did the Splint used extend beyond the end of elbow to beyond end of fingers?	
68	✓	✗	Did the team RE-CHECK CIRCULATION AFTER BANDAGING	
<b>Care for CRUSH INJURY to Right HAND</b>				
69	✓	✗	Did the team CHECK CIRCULATION BEFORE BANDAGING	
70	✓	✗	Did the team PLACE DRESSING BETWEEN EACH FINGER?	
71	✓	✗	Did the team WRAP/BANDAGE all DRESSINGS APPROPRIATELY?	
72	✓	✗	Did the team SECURE HAND to an APPROPRIATE size SPLINT?	
73	✓	✗	Did the team ELEVATE the arm using a STANDARD ARM SLING?	
74	✓	✗	Did the team RE-CHECK CIRCULATION AFTER BANDAGING	
<b>SHOCK &amp; GENERAL CARE</b>				
75	✓	✗	Did the team REASSURE the patient about their OWN CARE?	
76	✓	✗	Did the team RE-check LEVEL OF CONSCIOUSNESS?	<i>Fully Conscious</i>
77	✓	✗	Did the team RE-check RESPIRATIONS?	<i>24 Shallow &amp; irreg. crying</i>
78	✓	✗	Did the team RE-check PULSE?	<i>118 Bounding &amp; Rapid</i>
79	✓	✗	Did the team RE-check BLOOD PRESSURE?	<i>188/122</i>
80	✓	✗	Did the team RE-check SKIN CONDITION/TEMP?	<i>Pale, Cool &amp; Clammy</i>
81	✓	✗	Did the team RE-check PUPILS?	<i>Equal/Reactive</i>
82	✓	✗	Were GLOVES EFFECTIVE THROUGHOUT? (Torn gloves MUST be replaced!)	

Score Sheet for Patient #1 - "Crushed Arm"

## Scenario #1 - "Big Wheels Keep on Churnin' "

NO.	DONE	NOT DONE	RECORDING for Patient #1 - Crushed Arm
83	✓	✗	Was ALL of the patients PERSONAL INFORMATION recorded?
84	✓	✗	Was the INCIDENT TIME AND DATE recorded?
85	✓	✗	Was the INCIDENT LOCATION recorded?
86	✓	✗	Was the INCIDENT HISTORY (Accurately) recorded?
87	✓	✗	Was the patients ALLERGIES (None) recorded?
88	✓	✗	Was the patients MEDICATIONS (None) recorded?
89	✓	✗	Was the patients MEDICAL HISTORY (Previously Healthy) recorded?
90	✓	✗	Was the LAST ORAL INTAKE (Ate last normal meal time) recorded?
91	✓	✗	Was the OPEN FRACTURE to UPPER Right arm recorded?
92	✓	✗	Was the OPEN FRACTURE to LOWER Right arm recorded?
93	✓	✗	Was the CRUSH INJURY to the Right HAND recorded?
94	✓	✗	Was the ONSET (arm run over by heavy truck tire) recorded?
95	✓	✗	Was the PROVOCATION (movement) recorded?
96	✓	✗	Was the QUALITY (severe ache/crushing) recorded?
97	✓	✗	Was the REGION (right arm) recorded?
98	✓	✗	Was the RADIATION (Shoulder to finger tips) recorded?
99	✓	✗	Was the RELIEF (None) recorded?
100	✓	✗	Was the SEVERITY (10/10) recorded?
<b>Vital Signs MUST be the CORRECTED #s &amp; HAVE the TIME recorded, to be awarded points !!!</b>			
101	✓	✗	Was 1st set of vital signs - LEVEL OF CONSCIOUSNESS recorded?
102	✓	✗	Was 1st set of vital signs - RESPIRATIONS recorded?
103	✓	✗	Was 1st set of vital signs - PULSE recorded?
104	✓	✗	Was 1st set of vital signs - BLOOD PRESSURE recorded?
105	✓	✗	Was 1st set of vital signs - SKIN CONDITION recorded?
106	✓	✗	Was 1st set of vital signs - PUPILS recorded?
107	✓	✗	Was 2nd set of vital signs - LEVEL OF CONSCIOUSNESS recorded?
108	✓	✗	Was 2nd set of vital signs - RESPIRATIONS recorded?
109	✓	✗	Was 2nd set of vital signs - PULSE recorded?
110	✓	✗	Was 2nd set of vital signs - BLOOD PRESSURE recorded?
111	✓	✗	Was 2nd set of vital signs - SKIN CONDITION recorded?
112	✓	✗	Was 2nd set of vital signs - PUPILS recorded?
113	✓	✗	Was the APPLICATION OF OXYGEN recorded?
114	✓	✗	Was the TYPE OF OXYGEN DELIVERY DEVICE & FLOW RATE recorded?
115	✓	✗	Was the PRE-BANDAGING CIRCULATION of the RIGHT ARM recorded?
116	✓	✗	Was the POST-BANDAGING CIRCULATION of the RIGHT ARM recorded?
117	✓	✗	Was the BANDAGING of the UPPER ARM OPEN FRACTURE accurately recorded?
118	✓	✗	Was the BANDAGING of the LOWER ARM OPEN FRACTURE accurately recorded?
119	✓	✗	Was the BANDAGING of the CRUSHED RIGHT HAND accurately recorded?
120	✓	✗	Was the Application of a BLANKET recorded?
121	✓	✗	Was the NOTIFICATION OF POLICE WITH TIME recorded?
122	✓	✗	Was the NOTIFICATION OF EMS WITH TIME recorded?
123	✓	✗	Was the Name(s) of the first aid team LEGIBLY recorded?

**Score Sheet for Patient #1 - "Crushed Arm"**

Scenario #1 - "Big Wheels Keep on Churnin' "

CYCLE # \_\_\_\_\_

TEAM # \_\_\_\_\_

NO.	DONE	NOT DONE	SCENE/PRIMARY SURVEY
124	✓	✗	Did the team TAKE CHARGE of the situation?
125	✓	✗	Did the team wear protective GLOVES?
126	✓	✗	Did the team ASSESS for HAZARDS?
127	✓	✗	Did the team use Wheel Chock to prevent further movement of truck?
128	✓	✗	Did the team verbalize to turn off the truck?
129	✓	✗	Did the team CALL OUT FOR HELP?
130	✓	✗	Did the team ASK for SITUATION HISTORY?
131	✓	✗	Did the team DETERMINE the NUMBER OF CASUALTIES? <span style="float: right;">2</span>
132	✓	✗	Did the team ID SELF and OBTAIN CONSENT?
133	✓	✗	Did the team WARN THE CASUALTY NOT TO MOVE?
134	✓	✗	Did the team IMMEDIATELY provide C-SPINE SUPPORT?
135	✓	✗	Did the team ASSESS LEVEL OF CONSCIOUSNESS? <span style="float: right;"><i>Fully Conscious</i></span>
136	✓	✗	Did the team ASSESS AIRWAY? <span style="float: right;"><i>Open</i></span>
137	✓	✗	Did the team ASSESS BREATHING? <span style="float: right;"><i>30 Shallow &amp; rapid</i></span>
138	✓	✗	Did the team APPLY OYXGEN APPROPRIATELY? (NRB 15LPM)
139	✓	✗	Did the team ASSESS PULSE? (Circulation) <span style="float: right;"><i>132 Bounding &amp; Rapid</i></span>
140	✓	✗	Did the team ASSESS SKIN CONDITION (Circulation) <span style="float: right;"><i>Pale, warm and dry</i></span>
141	✓	✗	Did the team PERFORM A RAPID BODY SURVEY? <span style="float: right;"><i>LAC to head, LEFT leg injuries</i></span>
142	✓	✗	Did the team Place an absorbant Gauze on the LAC to the head?
143	✓	✗	Did the team IMMEDIATELY COVER WITH A BLANKET for shock and warmth?
144	✓	✗	Did the team ACTIVATE EMS/AMBULANCE?
145			Did the team ACTIVATE POLICE? (Workplace Injury)

JUDGES NOTE:

**This section is active for the first 3 minutes of the scenario only!** During these first 3 minutes, the competitor may perform the actions that are both listed here and in the Secondary Survey. After the 3 minutes, the competitor is eligible to receive marks only in the Secondary Survey and no marks may be awarded in this Primary Survey.  
 Actions in this section may be done in any order.

**Score Sheet for Patient #2 - "Crushed Leg"**

Scenario #1 - "Big Wheels Keep on Churnin' "

SECONDARY SURVEY

Actions in this section may be performed by the competitor in the first 3 minutes of the scenario as well as the Primary Survey. After the 3 first minutes, this is the only section that points shall be awarded to.

Actions in this section may be done in any order.

NO.	DONE	NOT DONE	HISTORY OF THE PATIENT	
146	✓	✗	Did the team ask about SYMPTOMS	<i>Dizziness, headache &amp; Leg pain</i>
147	✓	✗	Did the team ask about ALLERGIES?	<i>None</i>
148	✓	✗	Did the team ask about MEDICATIONS?	<i>None</i>
149	✓	✗	Did the team ask about MEDICAL HISTORY?	<i>Previously Healthy</i>
150	✓	✗	Did the team ask about LAST ORAL INTAKE?	<i>Ate (breakfast/lunch) as normal</i>
151	✓	✗	Did the team determine INCIDENT HISTORY?	<i>Trying to help worker, truck rolled on foot</i>
<b>1st Set of VITAL SIGNS</b>				
152	✓	✗	Did the team check LEVEL OF CONSCIOUSNESS?	<i>Fully Conscious</i>
153	✓	✗	Did the team check RESPIRATIONS?	<i>30 Shallow &amp; Rapid</i>
154	✓	✗	Did the team check PULSE?	<i>132 Boundings &amp; Rapid</i>
155	✓	✗	Did the team check BLOOD PRESSURE	<i>156/96</i>
156	✓	✗	Did the team check SKIN CONDITION/TEMP?	<i>Pale, warm &amp; Dry</i>
157	✓	✗	Did the team check PUPILS?	<i>Equal &amp; Reactive</i>
<b>HEAD TO TOE EXAMINATION</b>				
158	✓	✗	Check SCALP/HEAD?	<i>!" LAC to back of head with moderate bleed</i>
159	✓	✗	Check both EYES?	<i>No Findings</i>
160	✓	✗	Check NOSE?	<i>No Findings</i>
161	✓	✗	Check CHEEKBONES?	<i>No Findings</i>
162	✓	✗	Check MOUTH?	<i>No Findings</i>
163	✓	✗	Check JAW?	<i>No Findings</i>
164	✓	✗	Check both EARS?	<i>No Findings</i>
165	✓	✗	Check NECK?	<i>No Findings</i>
166	✓	✗	Check both COLLARBONES?	<i>No Findings</i>
167	✓	✗	Check both SHOULDERS?	<i>No Findings</i>
168	✓	✗	Check RIGHT ARM?	<i>No Findings</i>
169	✓	✗	Check LEFT ARM?	<i>No Findings</i>
170	✓	✗	Check CHEST?	<i>No Findings</i>
171	✓	✗	Check ABDOMEN?	<i>No Findings</i>
172	✓	✗	Check BACK?	<i>No Findings</i>
173	✓	✗	Check PELVIS?	<i>No Findings</i>
174	✓	✗	Check RIGHT LEG?	<i>No Findings</i>
175	✓	✗	Check LEFT LEG?	<i>CLOSED Fx Tib/Fib &amp; Crushed L Foot</i>

Score Sheet for Patient #2 - "Crushed Leg"

Scenario #1 - "Big Wheels Keep on Churnin' "

FIRST AID / TREATMENT

Actions in this section may be performed by the competitor at any point in the scenario.

NO.	DONE	NOT DONE	LEFT LEG ASSESSMENT - OPQRST	
176	✓	✗	Did the team ASK about ONSET?	<i>truck rolled over leg</i>
177	✓	✗	Did the team ASK about PROVOKES?	<i>any movement &gt; (++)</i>
178	✓	✗	Did the team ASK about QUALITY?	<i>Moderate Throbbing pain</i>
179	✓	✗	Did the team ASK about REGION/RADIATION/RELIEF?	<i>Toes radiated up to Knee</i>
180	✓	✗	Did the team ASK about SEVERITY?	<i>6/10, mvt &gt; to 8/10</i>
181	✓	✗	Did the team ASK about TIME?	<i>a few min before team came</i>
<b>Care for BLUNT FORCE HEAD INJURY</b>				
182	✓	✗	Did the team SECURE DRESSING appropriately to head?	
183	✓	✗	Did the team MAINTAIN C-SPINE SUPPORT throughout Scenario (until fully immobilized?)	
184	✓	✗	Did the team ACCURATELY MEASURE & APPLY C-Collar?	
185	✓	✗	Did the team Log Roll the patient as a UNIT onto a Backboard?	
186	✓	✗	Did the team FULLY IMMOBILIZE the patient on the Backboard using APPROPRAITE strap tech. ?	
187	✓	✗	Did the team SECURE the HEAD as the final step of the IMMOBILIZATION process?	
188	✓	✗	Did the team REMAIN in CONSTANT Monitor of the IMMOBILIZED patient?	
<b>Care for Left LOWER LEG- Closed Fracture</b>				
189	✓	✗	Did the team CHECK CIRCULATION BEFORE BANDAGING ?	
190	✓	✗	Did the team Use 5 WIDE BANDAGES to IMMOBILIZE the Leg	
191	✓	✗	Did the team SECURE with 1 ABOVE & 1 BELOW to an APPROPRIATE size SPLINT?	
192	✓	✗	Did the team APPLY PADDING BETWEEN FRACTURE & SPLINT?	
193	✓	✗	Did the team RE-CHECK CIRCULATION AFTER BANDAGING	
194	✓	✗	Did the team APPLY AN COLD PACK with a barrier (not directly on the skin) ?	
195	✓	✗	Did the team ELEVATE the Leg (6-12") ?	
<b>Care for CRUSH INJURY to Left FOOT</b>				
196	✓	✗	Did the team CAREFULLY REMOVE CRUSHED SHOE/ FULLY EXPOSE the injury?	
197	✓	✗	Did the team CHECK CIRCULATION BEFORE BANDAGING	
198	✓	✗	Did the team PLACE DRESSING BETWEEN EACH TOE?	
199	✓	✗	Did the team WRAP/BANDAGE all DRESSINGS APPROPRIATELY?	
200	✓	✗	Did the team SECURE HAND to an APPROPRIATE PILLOW/BLANKET like SPLINT?	
201	✓	✗	Did the team ELEVATE the foot ?	
202	✓	✗	Did the team RE-CHECK CIRCULATION AFTER BANDAGING	
<b>SHOCK &amp; GENERAL CARE</b>				
203	✓	✗	Did the team REASSURE the patient about their OWN CARE?	
204	✓	✗	Did the team RE-check LEVEL OF CONSCIOUSNESS?	<i>Slow to Respond, but conscious</i>
205	✓	✗	Did the team RE-check RESPIRATIONS?	<i>24 Shallow &amp; regular</i>
206	✓	✗	Did the team RE-check PULSE?	<i>Rapid &amp; Strong</i>
207	✓	✗	Did the team RE-check BLOOD PRESSURE?	<i>144/68</i>
208	✓	✗	Did the team RE-CHECK Skin Condition/Temperature?	<i>Pale, cool &amp; Dry</i>
209	✓	✗	Did the team RE-check PUPILS?	<i>Slow to Respond, equal but reactive</i>
210	✓	✗	Were GLOVES EFFECTIVE THROUGHOUT? (Torn gloves MUST be replaced!)	

**Score Sheet for Patient #2 - "Crushed Leg"**

## Scenario #1 - "Big Wheels Keep on Churnin' "

NO.	DONE	NOT DONE	RECORDING for Patient #2 - Crushed Leg
211	✓	✗	Was ALL of the patients PERSONAL INFORMATION recorded?
212	✓	✗	Was the INCIDENT TIME AND DATE recorded?
213	✓	✗	Was the INCIDENT LOCATION recorded?
214	✓	✗	Was the INCIDENT HISTORY (Accurately) recorded?
215	✓	✗	Was the patients ALLERGIES (None) recorded?
216	✓	✗	Was the patients MEDICATIONS (None) recorded?
217	✓	✗	Was the patients MEDICAL HISTORY (Previously Healthy) recorded?
218	✓	✗	Was the LAST ORAL INTAKE (Ate last normal meal time) recorded?
219	✓	✗	Was the 2" LAC to BACK OF HEAD & BLUNT FORCE HEAD INJURY recorded?
220	✓	✗	Was the CLOSED FRACTURE Left Leg Recorded?
221	✓	✗	Was the CRUSH INJURY to the LEFT LEG recorded?
222	✓	✗	Was the ONSET (arm run over by heavy truck tire) recorded?
223	✓	✗	Was the PROVOCATION (movement) recorded?
224	✓	✗	Was the QUALITY (moderate throbbing) recorded?
225	✓	✗	Was the REGION (Left leg) recorded?
226	✓	✗	Was the RADIATION (From toes up to the knee) recorded?
227	✓	✗	Was the RELIEF (None) recorded?
228	✓	✗	Was the SEVERITY (6/10 up to 8/10) recorded?
<b>Vital Signs MUST be the CORRECTED #s &amp; HAVE the TIME recorded, to be awarded points !!!</b>			
229	✓	✗	Was 1st set of vital signs - LEVEL OF CONSCIOUSNESS recorded?
230	✓	✗	Was 1st set of vital signs - RESPIRATIONS recorded?
231	✓	✗	Was 1st set of vital signs - PULSE recorded?
232	✓	✗	Was 1st set of vital signs - BLOOD PRESSURE recorded?
233	✓	✗	Was 1st set of vital signs - SKIN CONDITION recorded?
234	✓	✗	Was 1st set of vital signs - PUPILS recorded?
235	✓	✗	Was 2nd set of vital signs - LEVEL OF CONSCIOUSNESS recorded?
236	✓	✗	Was 2nd set of vital signs - RESPIRATIONS recorded?
237	✓	✗	Was 2nd set of vital signs - PULSE recorded?
238	✓	✗	Was 2nd set of vital signs - BLOOD PRESSURE recorded?
239	✓	✗	Was 2nd set of vital signs - SKIN CONDITION recorded?
240	✓	✗	Was 2nd set of vital signs - PUPILS recorded?
241	✓	✗	Was the APPLICATION OF OXYGEN recorded?
242	✓	✗	Was the TYPE OF OXYGEN DELIVERY DEVICE & FLOW RATE recorded?
243	✓	✗	Was the PRE-BANDAGING CIRCULATION of the Left LEG recorded?
244	✓	✗	Was the POST-BANDAGING CIRCULATION of the Left LEG recorded?
245	✓	✗	Was the BANDAGING of the LOWER LEG CLOSED FRACTURE accurately recorded?
246	✓	✗	Was the BANDAGING of the CRUSHED LEFT FOOT accurately recorded?
247	✓	✗	Was the C-Spine Support recorded?
248	✓	✗	Was the C-COLLAR SIZE and Application recorded?
249	✓	✗	Was the Spinal Immobilization Accurately recorded?
250	✓	✗	Was the Application of a BLANKET recorded?
251	✓	✗	Was the NOTIFICATION OF POLICE WITH TIME recorded?
252	✓	✗	Was the NOTIFICATION OF EMS WITH TIME recorded?
253	✓	✗	Was the Name(s) of the first aid team LEGIBLY recorded?