

AIDE MEMOIRE

Capacity & Consent

- Consent **MUST** be voluntary & can be verbal, written or implied
- **ALWAYS** assume capacity unless you can demonstrate a lack of
- An unwise decision is **NOT** evidence of lack of capacity
- You **MUST** always give as much information and support possible to assist an individual to make an informed decision
- Decisions **MUST** be in the patient's best interests
- You **MUST** consider the least restrictive option

2 Part Capacity Assessment

1

Is there an impairment of, or disturbance in the person's mind or brain? (permanent or temporary) (This covers a range of problems, including but not limited to psychiatric illness, emotional distress, learning disability, dementia, brain damage, neurological conditions, the effects of hypoxia, pain or acute behavioural disturbance).

YES - Move To Part 2

NO - Patient Has Capacity

2

An individual is unable to make a decision for themselves if they are unable to meet **any one** of the following criteria:

- **Understand** the information relevant to the decision.
(Adjustments should be used as appropriate to assist in understanding)
- **Retain** that information
- Use or **weigh** that information as part of the decision-making process
- **Communicate** their decision (through any communicative means).

Remember to document and evidence any assessment of capacity

Primary Survey

D

SAFE APPROACH | CONSIDER EARLY CALL FOR HELP

R

ALERT | NEW CONFUSION | VOICE | PAIN | UNRESPONSIVE

C

INDIRECT/DIRECT PRESSURE | TOURNIQUETS | WOUND PACKING

A

HEAD TILT | JAW THRUST | SUCTION | DRAINAGE | OPA/NPA

B

2 BREATHS/10s - CONSIDER OXYGEN - TRAUMA OR <NORMAL RANGE
<2 BREATHS/10s - ASSISTED VENTILATIONS - 1 EVERY 6 SECONDS
0 BREATHS - COMMENCE RESUS

C

PULSE PRESENT?
RATE/RHYTHM/STRENGTH
CAP REFILL >2 = ABNORMAL

RESUS
ADULT - 30:2
INFANT/CHILD - 15:2

CONSIDER C SPINE

WHEN THINGS CHANGE - REASSESS

Secondary Survey

DO NOT START UNTIL PRIMARY COMPLETE



D

NEW NEUROLOGICAL PROBLEMS

PEARLA | GCS | ACVPU | BLOOD
GLUCOSE | SPO2 | TEMP | BE FAST

E

EXPOSE | EXAMINE | ENVIRONMENT

FIND INJURIES | TOP-TOE | THERMAL
PROTECTION IS LIFE SAVING

WHEN THINGS CHANGE – REASSESS

COMA

FOR USE IN TRAUMA WHEN RESOURCES ALLOW

C

CLOTHES OFF

O

OXYGEN ON

M

MONITORING ON

A

ACCESS 360

CAT HAEM TOOL KIT

INDIRECT PRESSURE

DIRECT PRESSURE

WOUND PACKING

TOURNIQUET

Time on

:



HYDRATE FOR A MINIMUM OF 20 MINS

GENTLE APPLICATION USING TEPID
WATER. WATER TO BE AS CLEAN AS
POSSIBLE.



MAINTAIN BODY TEMPERATURE

TAKE ALL STEPS POSSIBLE TO MAINTAIN
BODY TEMPERATURE.



DRESS USING CLING FILM

NEVER WRAP. APPLY IN SHEETS TO
ALLOW FOR SWELLING

OBS / TIME	:	:	:	:	:	:
AVPU						
RR						
SPO2						
HR						
BLOOD PRESSURE						
TEMPERATURE						

History Taking

P

Presenting Complaint (What's happened?)

S

Signs & Symptoms

A

Allergies

M

Medications

P

Past Medical History (P/MHx)

L

Last in and outs

E

Events leading up to the incident

R

Reproductive / Recent Travel

SOCRATES

S

Site of pain - where is it?

O

Onset - when did it start?

C

Character - what sort of pain / discomfort?

R

Radiating - does it radiate anywhere else?

A

Associated symptoms

T

Time - has it changed over time?

E

Exacerbating / relieving factors

S

Severity - out of 10 pain score

ATMIST HANDOVER

AGE

INCIDENT DATE / TIME

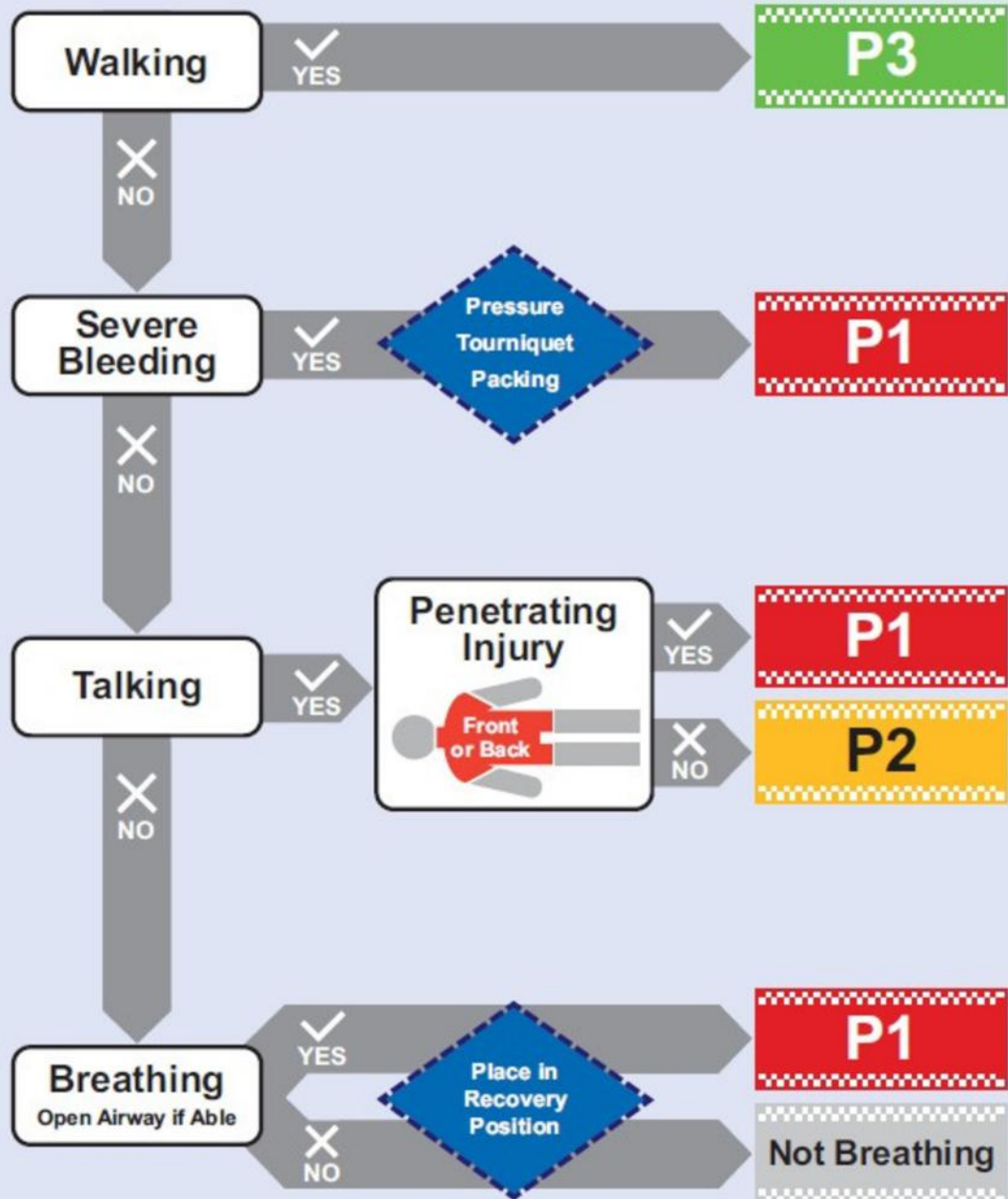
MECHANISM OF INJURY/ILLNESS

INJURIES FOUND / SUSPECTED

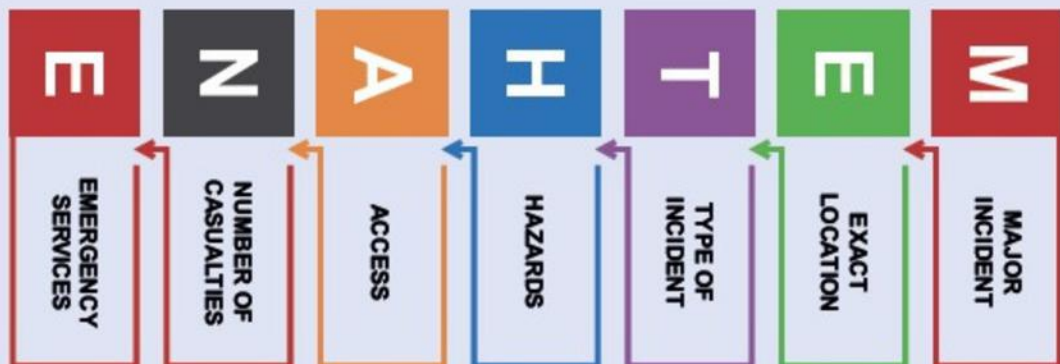
SIGNS & SYMPTOMS

TREATMENT GIVEN

Ten Second Triage (TST)



Ten Second Triage (TST)



Ten Second Triage (TST) Tally Chart

