



Assessment Name	Scenario 4 - Adult Trauma/Seizures
Level / Section:	Advanced Paramedic
Version:	Version 1 (May 2010)

Candidate Information

You are dispatched to a Motorbike Collision in which a 40 year old man lost control of the bike and hit a tree at high speed. A paramedic crew is already in attendance. On arrival you find the above patient lying on the ground, his helmet has been removed and he is actively seizing. Your paramedic colleague is supporting the c-spine, has administered 100% oxygen via a non-rebreather but was unable to insert an oropharyngeal airway due to trismus.

You note that there is blood oozing from his left ear, he has significant nasal trauma and his right femur appears shortened and rotated. There is blood around the patient's mid thigh.

Please begin your assessment and management of this patient:

Instructor information

This scenario involves the AP managing the seizure initially. They must decide that IN midazolam is inappropriate due to injury and should use buccal midazolam. Once the seizure is controlled they need to recognise 1) there is a traumatic brain injury (TBI) and 2) that the patient has hypovolaemic shock secondary to the femoral fracture. They must prioritise the control of haemorrhage first and then consider fluid replacement. The AP must demonstrate a) knowledge of the management of haemorrhagic shock in the presence of a TBI and b) the principles of managing a patient with a TBI and GCS<8.

Equipment

Adult ALS manikin, Cannulation limb, Epistatus bottle, 1 ml syringes, AP Kit, Drug bag, Oxygen cylinder, Non rebreather mask, Monitor/BP/SpO2, Collar, Long board, IV giving set, IV Cannula, Hartmann's 500ml bag of solution.

Key assessment points

New medication and volume calculations (Medication)

New route of medication administration (Skill)

Awareness of different fluid therapy regimes (Knowledge change)

Management of brain injury (New knowledge)





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Date _____

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Instructor information	Candidate key tasks	Score 0/1
Initial Management		
Candidate informed that IV route is unattainable at this moment	Verbalises need to terminate seizure	
	Identifies contraindications for IN route	
	Selects buccal Midazolam	
	Correctly states the correct dose (10mg Buccal) *	
	Correctly calculates the correct volume of Buccal Midazolam (10mg/ml) as 1ml* Critical Point - MEDICATION	
	Draws up 1 ml of solution from the bottle	
	Checks 7 rights of medication administration	
	Supports the head	
	Opens mouth by holding chin and applies downward pressure to lower lip with thumb	
	The seizure stops 1 minute after medication	Inserts syringe horizontally into mouth between lower gum and cheek
Slowly squeeze half into space and repeats on the other side of buccal cavity Critical Point - SKILL		
Verbalises that the dose can be repeated x 1 prn		
Seizure stopped		
Paramedic informs that vital signs are: A: suctioned & OPA B: Rate 24, Sats 99%, chest clear C: P120, BP 100/70 D: E1 M1 V2 GCS 4 Pupils 4 reactive E: Wound right thigh	Begins primary survey	
	Maintains C-Spine immobilisation	
	Recognises Circulation problem – haemorrhagic shock	
	Initiates or directs paramedic to control haemorrhage PEEP	
	Verbalises need to splint fracture	
	Establishes IV access	





with ++ Bleeding. + fracture. BM 5.2	Gives 500ml Hartmann's initially	
Bleeding is controlled with pressure bandage.	Then uses 250ml aliquots to maintain SBP>120mmHg Critical Point – KNOWLEDGE CHANGE	
	States that patient has a severe brain injury	
	States advanced airway inappropriate	
	State 10° Upward tilt of patient (with C-Spine immobilisation) Critical Point – NEW KNOWLEDGE	
	States aim for SBP>120mmHg	
	Verbalises need to travel. Secondary survey en route. ASHICE	

Score _____/25 = _____ %

Successful or Remediation	
A candidate must remediate if they did not complete a Critical Point or if they achieve a score < 70%	

Examiner 1:

Examiner 2:

