

HOSPITAL CORPSMAN SKILLS BASIC (HMSB)

Performance Check List (PCL)

Clinical Skill: **Patient Assessment Part 1- Trauma**

Circle One: **Initial Evaluation Re-Evaluation**

Command: _____



Member's Name: _____

Date: _____

Rank: _____

Objective:

- Perform a rapid trauma assessment on a **responsive** patient.
- Perform an assessment of a trauma patient to include vital signs.

Safety Guidelines:

- Members will follow universal precautions and wear proper PPE
- Ensure a 1:1 Evaluator/member ratio

Evaluator Assistance: No more than three (3) evaluator assists are allowed. *Note: Evaluator Assist: Any assistance provided by the evaluator during the skill demonstration whether verbally or physically, which aids the member in the successful completion of the skill or the parts of the skill identified by the objective.*

Performance Standard:

- All skills will be graded either **PASS/FAIL**. Member must complete **80%** of all parts with no critical items (*) missed. Failure to successfully complete a critical item (*) will result in a failure of the skill and remediation will be required.

Condition: Groups of two (2) Members

Equipment:

- Stethoscope
- Sphygmomanometer
- Pen Light
- Watch

SCENE SIZE-UP	PASS	FAIL
1. Takes or verbalizes appropriate body substance isolation precautions		
2. Determines the scene/situation is safe		
3. Determines the mechanism of injury/nature of illness		
4. Determines the number of patients		
5. Request additional assistance if necessary		
6. Considers stabilization of the spine		
PRIMARY SURVEY/ RESUSCITATION	PASS	FAIL
1. Verbalizes general impression of the patient		
2. Determines responsiveness/level of consciousness.		
3. *Determines chief complaint and apparent life threats		
AIRWAY	PASS	FAIL
4. Opens and assesses airway -Inserts adjunct as indicated		
BREATHING	PASS	FAIL
5. Assesses breathing -Assures adequate ventilation -Initiates appropriate oxygen therapy -Treat any injury which may compromise breathing/ventilation		
CIRCULATION	PASS	FAIL

6. *Checks pulse -Assesses skin [either skin color, temperature or condition] *Perform quick head-to- toe blood sweep and treat major bleeding if discovered.		
7. Initiates shock management [positions patient properly, conserves body heat]		
8. Identifies patient priority and makes treatment/ transport decision (based on calculated Glasgow Coma Scale)		
HISTORY TAKING	Pass	Fail
*Attempts to obtain SAMPLE history		
SECONDARY ASSESSMENT	Pass	Fail
1. *Head -Inspects mouth, nose and assesses facial area -Inspects and palpates scalp and ears -Assesses eyes		
2. *Neck -Checks position of trachea -Checks jugular veins -Palpates cervical spine		
3. *Chest -Inspects chest -Palpates chest -Auscultates chest		
4. *Abdomen/pelvis -Inspects and palpates abdomen -Assesses pelvic -Verbalizes assessment of genitalia/perineum as needed		
5. Lower extremities -Inspects, palpates and assesses motor, sensory and distal circulatory functions		
6. Upper extremities -Inspects, palpates and assesses motor, sensory and distal circulatory functions		
7. Posterior thorax, lumbar and buttocks -Inspects and palpates posterior thorax, lumbar and buttocks areas		
VITAL SIGNS	Pass	Fail
8. *Obtain baseline vital signs [must include BP, P, R]		
9. Manages secondary injuries and wounds appropriately		
REASSESSMENT	Pass	Fail
10. Reassess all interventions and any changes in patient status		

Print and sign below:

Evaluator: _____ Date: _____

Member: _____ Date: _____

Member Passed: ___/25	Calculated %:
Circle: PASS / FAIL	Evaluators Initials:

Comments:

HOSPITAL CORPSMAN SKILLS BASIC (HMSB)

Performance Check List (PCL)

Clinical Skill: **Patient Assessment Part 2- Medical**

Circle One: **Initial Evaluation Re-Evaluation**

Command: _____



Member's Name: _____ Date: _____

Rank: _____

Objective:

- Perform a focused physical exam.
- Perform an assessment of a medical patient to include vital signs, and detailed history.

Safety Guidelines:

- Members will follow universal precautions and wear proper PPE
- Ensure a 1:1 Evaluator/member ratio

Evaluator Assistance: No more than three (3) evaluator assists are allowed. *Note: Evaluator Assist: Any assistance provided by the evaluator during the skill demonstration whether verbally or physically, which aids the member in the successful completion of the skill or the parts of the skill identified by the objective.*

Performance Standard:

- All skills will be graded either **PASS/FAIL**. Member must complete **80%** all parts with no critical items (*) missed. Failure to successfully complete a critical item (*) will result in a failure of the skill and remediation will be required.

Condition: Group of two (2) members

Equipment:

- Stethoscope
- Sphygmomanometer
- Pen Light
- Watch

SCENE SIZE-UP	PASS	FAIL
1. *Takes or verbalizes appropriate body substance isolation precautions		
2. *Determines the scene/situation is safe		
3. Determines the mechanism of injury/nature of illness		
4. Determines the number of patients		
5. Requests additional EMS assistance if necessary		
6. *Considers stabilization of the spine		
PRIMARY SURVEY/RESUSCITATION	PASS	FAIL
7. Verbalizes the general impression of the patient		
8. *Determines responsiveness/level of consciousness (AVPU)		
9. *Determines chief complaint/apparent life-threats		
10. Airway & breathing -Assesses breathing -Assures adequate ventilation -Initiates appropriate oxygen therapy		
11. Circulation -Assesses/controls major bleeding -*Checks pulse -Assesses skin [color, temperature, condition]		
12. Identifies patient priority and makes treatment/transport decision		
HISTORY TAKING	PASS	FAIL
13. * History of the present illness - Onset - Quality - Severity		

- Provocation - Radiation - Time		
14. *Allergies		
15. *Medications		
16. *Past pertinent medical history		
17. Last oral intake		
18. Events leading to present illness		
SECONDARY ASSESSMENT	PASS	FAIL
19. *Neurological		
20. *Cardiovascular		
21. *Pulmonary		
22. *Gastrointestinal and Genitourinary		
23. *Musculoskeletal		
24. Integumentary		
25. Psychological/Social		
VITAL SIGNS	PASS	FAIL
26. * Vital signs [must include BP, P, R]		
27. *States field impression of patient		
REASSESSMENT & TRANSPORT	PASS	FAIL
28. Reassess all interventions and any changes in patient status		
29. Provide verbal report to arriving EMS unit		

Member Passed: ___/29	Calculated %:
Circle: PASS / FAIL	Evaluators Initials:

Print and sign below:

Evaluator: _____ **Date:** _____

Member: _____ **Date:** _____

Comments:

Patient Assessment Part 1 & 2:

Member Passed: ___/54	Calculated %:
Circle: PASS / FAIL	Evaluators Initials: