


COMPLEX EXTRICATION CHALLENGE						MEDICAL ASSESSOR		NENAGH FIRE STATION 2018			
ASSESSOR:								TEAM:			
CHALLENGE LOCATION:								TIME:			
GENERAL									S		
Scene Assessment	Safe Approach		360° Survey		Identifies Casualties		Liaises with IC		Assesses Mechanism of Impact	25	
	1	3	5	1	3	5	1	3	5		1
Initial Casualty Contact	Gives Safety Instructions		Safe and Rapid Access		Effective Access and Position		Identifies themselves to casualty		Identifies any Entrapment	25	
	1	3	5	1	3	5	1	3	5		1
Protection from Environment	Aware of Hazards		Hard/Soft Protection		Correct Gloves		Personal/Casualty Safety		Situational Awareness	15	
	1	2	3	1	2	3	1	2	3		1
Use of Equipment	Appropriate PPE/BSI		Correct and Appropriate Equipment		Equipment Positioning		Oxygen Delivery		Reassesses	15	
	1	2	3	1	2	3	1	2	3		1
COMMENTS :											
TIME CRITICAL CASUALTY ASSESSMENT AND MANAGEMENT									S		
Airway	Responsiveness		Airway status		Check mouth		Airway manoeuvre		Reassesses	25	
	1	3	5	1	3	5	1	3	5		1
Breathing	Ventilatory rate		Inspects Chest		Respiratory Effort/Depth/Rhythm		Oxygen		Reassesses	25	
	1	3	5	1	3	5	1	3	5		1
Circulation	Massive haemorrhage		Skin		Pulses		Capillary refill		Reassesses	25	
	1	3	5	1	3	5	1	3	5		1
Disability	Consciousness Level		Assesses Pupils		Sensory function		Motor function		Reassesses	15	
	1	2	3	1	2	3	1	2	3		1
Examine & Exposure	Head and neck		Chest		Back		Abdomen		Pelvis	15	
	1	2	3	1	2	3	1	2	3		1
Examine & Exposure	Lower limbs		Upper limbs		Pelvis		Relevant medical information		Prevent heat loss	15	
	1	2	3	1	2	3	1	2	3		1
Spinal Care	Prevents active movement		In-line stabilization		Handover between carers		Pelvic stabilization		Alignment of the body	25	
	1	3	5	1	3	5	1	3	5		1
Management	Appropriate emergency and full plan		Plan informed by casualty injuries		Timely management for casualty release		Utilises 2nd medic and team appropriately		Casualty centred	25	
	1	3	5	1	3	5	1	3	5		1
Extrication	Timing		Supervision and leadership		Casualty handling (IA)		Correct movement to transfer device		Correctly aligned / positioned on device	25	
	1	3	5	1	3	5	1	3	5		1
COMMENTS :											
STANDARD CASUALTY ASSESSMENT AND MANAGEMENT									S		
Survey	Airway		Breathing		Circulation		Disabilities		Head-to-toe	25	
	1	3	5	1	3	5	1	3	5		1
Extrication	Appropriate emergency and full plan		Correct movement to transfer device		Casualty centred		Handover between carers		Correctly aligned / positioned on device	25	
	1	3	5	1	3	5	1	3	5		1
COMMENTS :											
COMMUNICATION									S		
With IC	On Approach		On Plan(s)		On Casualty Condition		On Treatment		Maintains	15	
	1	2	3	1	2	3	1	2	3		1
With Second Medic	Identification of second medic verbalised		Appropriate use of second medic		Allocation of appropriate tasks		Two way communication		3-way communication with medics and IC	15	
	1	2	3	1	2	3	1	2	3		1
With Team	Clear Instructions		Assigns Roles		Informs of Casualty Condition		Directs when Required		Maintains	15	
	1	2	3	1	2	3	1	2	3		1
With Casualty	On Approach (IA)		Listens, Reacts, On Warnings (IA)		Language (Avoids Jargon, etc.) (IA)		On Treatment Given (IA)		Maintains (IA)	15	
	1	2	3	1	2	3	1	2	3		1
Handover	Incident & mechanism of injury		Injuries and initial status		Treatment / interventions		Current status		Other appropriate information - AMP	15	
	1	2	3	1	2	3	1	2	3		1
COMMENTS :											
DEBRIEF SUMMARY:											
ASSESSORS SIGNATURE:								TOTAL SCORE (Max 400)		400	
A total of 20 points are awarded from the Interior Assessor (IA) and 400 points from the Medical Assessor making a maximum total of 420								SCORE CHECKER'S INITIALS			

Marking Criteria
0 = Not done, done incorrectly or an unsafe practice demonstrated;
1 = Performed out of sequence or at a basic standard;
2/3 = Performed in sequence and at an appropriate time;
3/5 = Performed in sequence, at an appropriate time and with attention to detail.