**Team Leader:** _____    **Instructor:** _____    **Date:** _____

## Instructor Information:

This skill station involves a street fight victim with a penetrating knife neck injury and an evident swelling on the right side of the neck, increasing in size. The patient is conscious. The primary assessment shows that the patient is hoarse and the tidal volume (VR) is 22 breaths per minute. The patient is critical and requires rapid airway management and rapid transport. Follow the written scenario and provide information to all team members as the scenario progresses or as the team members ask.

## Patient Information:

| | |
|---|---|
| Moulage: | Stab wound on the front right side of the neck with swelling |
| Position: | Awake, sitting on the ground |
| Actions: | Hoarse, complains of trouble swallowing |

## Dispatch Information:

You and your partners are working for the local transporting ambulance service. Your service has been dispatched to a park near the football stadium where a street fight took place a few minutes ago between soccer fans. A young male patient has been stabbed with a knife. Police are on the scene. It is 1600. From the scene, you are 30 minutes from a trauma center.

## Scene Assessment / Initial Observations:

It is a warm and clear spring afternoon. There are numerous fans and spectators from the game on scene. Five police officers are keeping bystanders away. The assailant is reported to be in custody.

## Primary Assessment:

| | | |
|---|---|---|
| ☐ | A: | Penetrating wound on the anterior, right side of the neck, no external hemorrhage noted, and obvious swelling on the right side |
| ☐ | B: | Slight stridor and slight tachypnea |
| ☐ | C: | No external hemorrhage, warm skin |
| ☐ | D: | Alert |
| ☐ | E: | N/A |

## Treatments / Critical Actions:    *Note: Icon indicates a Critical Action.

| | | |
|---|---|---|
| ☐ | Supplemental oxygen 100% with bag-mask | ⚠️ |
| ☐ | Rapid transport | ⚠️ |
| ☐ | Prepare for ET intubation and must have alternate plan if ETI is unsuccessful, may also need sedation | |
| ☐ | Establish IV en route | |
| ☐ | Cover to maintain body heat | |

## Notes:

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Team Leader: _____ Instructor: _____ Date: _____

| Initial Patient Impression: | ☐ Critical / Emergent |
|---|---|

**Secondary Assessment:**

**Initial Vital Signs:**

| | | | **Reassessment:** | | | | **Body Systems:** | |
|---|---|---|---|---|---|---|---|---|
| ☐ | B/P: | 150/90 | ☐ | 140/82 | | ☐ | Head: | Stridor |
| ☐ | P: | 92 | ☐ | 88 | | ☐ | Neck: | Stab wound front right side with expanding hematoma |
| ☐ | R: | 22 | ☐ | 12 | | ☐ | Chest: | No external wounds with equal bilateral lungs sounds |
| ☐ | SpO$_2$: | 90% | ☐ | 97% | | ☐ | Skin: | Warm |
| ☐ | GCS: | 15 (E-4, V-5, M-6) | ☐ | 15 (if RSI GCS 3) | | ☐ | Abd/Pelvis: | Unremarkable |
| ☐ | Glucose: | 97 mg/dl | ☐ | Unchanged | | ☐ | Extremities: | Unremarkable |

| | | |
|---|---|---|
| ☐ | Signs / symptoms: | Stab wound neck |
| ☐ | Allergies: | None |
| ☐ | Past medical history: | Appendectomy at age 13 |
| ☐ | Last oral intake: | 2 hours earlier |
| ☐ | Event leading to incident: | Street fight |

| | | |
|---|---|---|
| ☐ | Neurological: | GCS 15 (E-4, V-5, M-6) |
| ☐ | Posterior: | No external trauma |

| | | |
|---|---|---|
| ☐ | **Transport Timing:** | Rapid Transport |
| ☐ | **Destination:** | Trauma center |

**Discussion Points:**

What would you do if you tried to perform RSI but were unsuccessful?

What are the indications for performing a cricothyrotomy?

**Notes:**

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