

**Chief Mike Haygood
Broward Invitational ALS Competition
2016 Final Scenario**

TEAM NAME: _____

LEAD JUDGE: _____

	<u>Patient Total</u>	<u>Max Available</u>
Patient 1 (p. 5)	_____	54
Patient 2 (p. 7)	_____	49
Patient 3 (p. 9)	_____	41
Patient 4 (p. 11)	_____	52
Patient 5 (p. 13)	_____	55
Patient 6 (p. 15)	_____	61
Patient 7 (p. 17)	_____	39
Patient 8 (p. 19)	_____	53
Patient 9 (p. 21)	_____	53
Patient 10 (p. 23)	_____	50
Team (p. 24)	_____	14
Total Score	_____	521

Score Talled by: _____

Score Verified by: _____

Broward Invitational ALS Competition

2016 Final Scenario

12-Minute Time Limit

Scenario Summary

The scenario takes place at the Hollywood Sportatorium at “**The Final Grateful Dead Show on Earth!**” You are a medical team assigned to the stage and back stage area of the concert.

Initial Presentation

Security calls you to the back stage room where a group of partiers have started a fight. Stand by for scene clearance. Security calls you back: “code 3, scene is safe, multiple people down!”

EMS Team is met by Patient # 1 Debbie Downer at the door, who wants to give information on how this joyous occasion has gone array because all her friends and family have gotten too stoned!!!!

There are 10 total patients including Debbie with 1 Feedback/Scoring judge each. All 10 patients are already in the den of inequity. **ALL PATIENTS ARE DRINKING AND SMOKING POT!**

Distracters

Patient #11 – Adult Male (Flakka Hal) – At 11 minutes, he makes his appearance finally finding his friends after a 2 day frenzy on FLAKKA and will run around for 1 minute, no scoring on him.

10 Scored Patients

Patient #1 – Adult Female (Debbie Downer) – TCA OD will “pass out” and have low BP and EKG changes.

Patient #2 – Adult Female (Angel Soot) – PCP OD goes in status seizures and will remain in and out of seizures until TX properly.

Patient #3 – Adult Female (Kay Whole) – Ketamine OD will “pass out” from low BP and becomes unresponsive, until TX properly.

Patient #4 – Adult Female (Janis Joplin) – Heroin OD not breathing.

Patient #5 – Adult Male (Gary Downer) – Beta Blocker OD / Hypoglycemia. They have until 10 minutes to TX properly or he codes.

Patient #6 – Adult Male (Moonshine George) – Isopropyl and Methanol OD will become unresponsive and begin seizures until TX properly.

Patient #7 – Adult Male (Timothy Leary) – LSD OD, Hallucinations / Hyperthermia, reciting his best political, religious and Grateful Dead stories.

Patient #8 – Adult Male (Casey Jones) – Cocaine OD / AMI / LV Pacer.

Patient #9 – Adult Male (Terry Downer) – Amphetamine / Calcium Channel Blocker OD. If TX for hypotension, patient will be stable, but still stoned.

Patient #10 – Adult Male (Randy Mandies) – Quaalude OD, will stop breathing and become unresponsive. They have until 10 minutes to TX properly or he codes.

**Broward Invitational ALS Competition
2016 Final Scenario
Time Line**

0 Minutes

Patient #1 – 10 (all 10 Scored Patients) present initial impressions.

5 Minutes

Patient #2 (Angel Soot) goes in status seizures and will remain in and out of seizures until TX properly.

Patient #3 (Kay Whole) will “pass out” from low BP and become unresponsive, until TX properly.

Patient #6 (Moonshine George) will become unresponsive with seizures, until TX properly.

Patient #8 (Casey Jones) if team does not find normal ECG in pocket, patient pulls it out for team.

Patient #10 (Randy Mandies) will stop breathing and become unresponsive.

10 Minutes

Patient #1 (Debbie Downer) will “pass out” and have low BP and EKG changes.

Patient #4 (Janis Joplin) will revert back to initial vital signs until second TX is administered.

Patient #5 (Gary Downer) will code if not TX properly.

11 Minutes

Patient #11 (Flakka Hal) will make his appearance finally finding his friends after a 2 day frenzy on FLAKKA and will run around for 1 minute, no scoring on him.

12 Minutes

Scenario ends.

2016 Final ALS Scenario
Patient # 1 (Female Debbie Downer – TCA OD)

<p style="text-align: center;">Initial Vitals <i>Patient presents ambulatory</i></p> <ul style="list-style-type: none"> - 65 year old - LOC – Awake & oriented - GCS – 15 (eyes-4 spontaneous, verbal-5 oriented, motor-6 obeys) - C/C – none - Pulse / ECG – 98 / normal sinus rhythm - B/P – 142 / 88 - Resp – 22 non-labored - BBS – clear bilaterally - Pupils – equal & reactive 3mm - Skin – warm & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 95% - ETCO₂ – 35 - Glucose – 120 - 12 Lead ECG – Normal Sinus Rhythm 	<p style="text-align: center;">Head-to-Toe</p> <p>HEENT:</p> <ul style="list-style-type: none"> - <u>Head</u>: unremarkable - <u>Face</u>: unremarkable - <u>Nose</u>: unremarkable - <u>Ears</u>: unremarkable - <u>Neck</u>: trachea midline <p>Chest: unremarkable Back: unremarkable Abdomen: soft Pelvis: stable & intact Skin: warm & moist Upper Extremities: unremarkable +PMS Lower Extremities: unremarkable +PMS</p> <p>Other: has backstage pass, Amitriptyline and her husband's Inderal in her fanny pack</p>
<p style="text-align: center;">Secondary Vitals <i>At 10 minutes</i></p> <ul style="list-style-type: none"> - LOC – Lethargic - GCS – 13 (eyes-3 to voice, verbal-4 confused, motor-6 obeys) - C/C – Syncope - Pulse / ECG – 60 / sinus rhythm - B/P – 60 / 40 - Resp – 22 non-labored - BBS – clear bilaterally - Pupils – equal & dilated 6mm - Skin – pale, cool & moist - Neck Veins – normal - Cap Refill – 3 seconds - O₂ sat – 95% - ETCO₂ – 35 - Glucose – 120 - 12 Lead ECG – Sinus Rhythm with wide QRS 	

2016 Final ALS Scenario
Patient # 1 (Female *Debbie Downer* – TCA OD)

INITIAL & DETAILED ASSESSMENT POINTS (possible 25 points)

- | | |
|--------------------------------------|-------------------------------------------------------------|
| ___ (1) Assess LOC | ___ (1) Inspects Abdomen |
| ___ (1) Assess Airway Patency | ___ (1) Palpates Abdomen |
| ___ (1) Assess Resp Rate | ___ (0) Palpates Pelvis |
| ___ (1) Assess Resp Effort & Quality | ___ (0) Assess Upper Extremities |
| ___ (1) Assess Pulse Rate | ___ (0) Assess Lower Extremities |
| ___ (1) Assess Pulse Quality | ___ (1) Check for Medic Alert Tag |
| ___ (0) Assess for Major Bleeding | ___ (0) Assess the Back |
| ___ (1) Assess Head | ___ (1) Assess Skin Color/Condition |
| ___ (1) Assess Pupils | ___ (1) Assess B/P |
| ___ (0) Assess Ears | ___ (1) Assess Cap Refill |
| ___ (0) Assess Nose | ___ (1) S None initially (at 10 min syncope) |
| ___ (1) Assess Trachea | ___ (1) A None |
| ___ (1) Assess JVD | ___ (1) M Amitriptyline (carrying husband's Inderal) |
| ___ (1) Inspects Chest | ___ (1) P Depression |
| ___ (1) Palpates Chest | ___ (1) L Sandwich an hour ago |
| ___ (1) Auscultates Chest | ___ (1) E Partying backstage at the concert |

PROCEDURE POINTS (possible 29 points)

- ___ (1) Administers oxygen
- ___ (2) Monitors ECG
- ___ (2) Establishes IV NS
- ___ (5) Finds both Amitriptyline & husband's Inderal
- ___ (5) Recognizes TCA
- ___ (2) Reassess ECG after 10 minutes
- ___ (2) Administers fluid challenge NS 250-500ml IV
- ___ (5) Identifies wide QRS
- ___ (5) Administers Sodium Bicarbonate 8.4% 50ml IV

Total _____ / 54

2016 Final ALS Scenario
Patient # 2 (Female *Angel Soot* – PCP OD)

<p align="center">Initial Vitals <i>Patient presents ambulatory</i></p> <ul style="list-style-type: none"> - 65 year old - LOC – Agitated & hallucinating - GCS – 12 (eyes-4 spontaneous, verbal-3 inappropriate words, motor-5 localizes pain) - C/C – Hallucinating - Pulse / ECG – 130 / sinus tachycardia - B/P – 169 / 118 - Resp – 20 non-labored - BBS – clear bilaterally - Pupils – equal & constricted 2mm - Skin – warm & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 95% - ETCO₂ – 35 - Glucose – 120 - 12 Lead ECG – Sinus Tachycardia 	<p align="center">Head-to-Toe</p> <p>HEENT:</p> <ul style="list-style-type: none"> - <u>Head</u>: unremarkable - <u>Face</u>: unremarkable - <u>Nose</u>: unremarkable - <u>Ears</u>: unremarkable - <u>Neck</u>: trachea midline <p>Chest: unremarkable Back: unremarkable Abdomen: soft Pelvis: stable & intact Skin: warm & moist Upper Extremities: unremarkable +PMS Lower Extremities: unremarkable +PMS</p>
<p align="center">Secondary Vitals <i>At 5 minutes (with seizure)</i></p> <ul style="list-style-type: none"> - LOC – Unresponsive - GCS – 6 (eyes-1 none, verbal-1 none, motor-3 decerebrate with tonic/clonic movements) - C/C – Active seizure - Pulse / ECG – 130 / sinus tachycardia - B/P – 169 / 118 - Resp – 8 shallow & labored - BBS – clear bilaterally - Pupils – equal & constricted 2mm - Skin – warm & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 92% - ETCO₂ – 35 - Glucose – 120 - 12 Lead ECG – Sinus Tachycardia 	<p align="center">Tertiary Vitals <i>After Seizure TX (Valium 5-10mg)</i></p> <ul style="list-style-type: none"> - LOC – Disoriented - GCS – 14 (eyes-4 spontaneous, verbal-4 confused, motor-6 obeys) - C/C – Postictal - Pulse / ECG – 130 / sinus tachycardia - B/P – 169 / 118 - Resp – 22 non-labored - BBS – clear bilaterally - Pupils – equal & constricted 2mm - Skin – warm & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 95% - ETCO₂ – 35 - Glucose – 120 - 12 Lead ECG – Sinus Tachycardia

2016 Final ALS Scenario
Patient # 2 (Female *Angel Soot* – PCP OD)

INITIAL & DETAILED ASSESSMENT POINTS (possible 25 points)

- | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>___ (1) Assess LOC</p> <p>___ (1) Assess Airway Patency</p> <p>___ (1) Assess Resp Rate</p> <p>___ (1) Assess Resp Effort & Quality</p> <p>___ (1) Assess Pulse Rate</p> <p>___ (1) Assess Pulse Quality</p> <p>___ (0) Assess for Major Bleeding</p> <p>___ (1) Assess Head</p> <p>___ (1) Assess Pupils</p> <p>___ (0) Assess Ears</p> <p>___ (0) Assess Nose</p> <p>___ (1) Assess Trachea</p> <p>___ (1) Assess JVD</p> <p>___ (1) Inspects Chest</p> <p>___ (1) Palpates Chest</p> <p>___ (1) Auscultates Chest</p> | <p>___ (1) Inspects Abdomen</p> <p>___ (1) Palpates Abdomen</p> <p>___ (0) Palpates Pelvis</p> <p>___ (0) Assess Upper Extremities</p> <p>___ (0) Assess Lower Extremities</p> <p>___ (1) Check for Medic Alert Tag</p> <p>___ (0) Assess the Back</p> <p>___ (1) Assess Skin Color/Condition</p> <p>___ (1) Assess B/P</p> <p>___ (1) Assess Cap Refill</p> <p>___ (1) S Agitated & hallucinating (at 5 min seizure)</p> <p>___ (1) A None</p> <p>___ (1) M None (“The Dipper – Phencyclidine”)</p> <p>___ (1) P Recreational drug usage</p> <p>___ (1) L Sandwich an hour ago</p> <p>___ (1) E Partying backstage at the concert</p> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

PROCEDURE POINTS (possible 24 points)

- ___ (2) Administers oxygen
- ___ (2) Monitors ECG
- ___ (2) Establishes IV NS
- ___ (5) Finds spray bottle marked “The Dipper – Phencyclidine”
- ___ (5) Recognizes PCP overdose
- ___ (3) Secures PCP bottle for police
- ___ (2) Administers Benzodiazepine (Valium 5-10mg, Ativan 2-4mg, Versed 2-10mg) Intranasal, IM or IV
- ___ (3) Secures PCP bottle for police

Total _____ / 49

2016 Final ALS Scenario
Patient # 3 (Female Kay Whole – Ketamine OD)

<p align="center">Initial Vitals <i>Patient presents ambulatory</i></p> <ul style="list-style-type: none"> - 65 year old - LOC – Agitated & hallucinating - GCS – 12 (eyes-4 spontaneous, verbal-3 inappropriate words, motor-5 localizes pain) - C/C – Hallucinating, itchy arms – patient states “This was such a great K-hole!” - Pulse / ECG – 104 / sinus tachycardia - B/P – 108 / 68 - Resp – 18 non-labored - BBS – clear bilaterally - Pupils – equal & dilated 6mm - Skin – warm & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 95% - ETCO₂ – 35 - Glucose – 120 - 12 Lead ECG – Sinus Tachycardia 	<p align="center">Head-to-Toe</p> <p>HEENT:</p> <ul style="list-style-type: none"> - <u>Head</u>: unremarkable - <u>Face</u>: eyes are twitching - <u>Nose</u>: unremarkable - <u>Ears</u>: unremarkable - <u>Neck</u>: trachea midline <p>Chest: unremarkable Back: unremarkable Abdomen: soft Pelvis: stable & intact Skin: warm & moist Upper Extremities: white paste on both forearms (K-paste), patient is scratching forearms +PMS Lower Extremities: unremarkable +PMS</p>
<p align="center">Secondary Vitals <i>At 5 minutes (passed out)</i></p> <ul style="list-style-type: none"> - LOC – Unconscious - GCS – 7 (eyes-1 none, verbal-2 moans, motor-4 withdraws to pain) - C/C – passed out - Pulse / ECG – 112 / sinus tachycardia - B/P – 78 / 40 - Resp – 10 non-labored - BBS – clear bilaterally - Pupils – equal & dilated 6mm - Skin – pale, cool & moist - Neck Veins – normal - Cap Refill – 3 seconds - O₂ sat – 92% - ETCO₂ – 35 - Glucose – 120 - 12 Lead ECG – Sinus Tachycardia 	<p align="center">Tertiary Vitals <i>After TX (Oxygen & IV Fluid)</i></p> <ul style="list-style-type: none"> - LOC – Unconscious - GCS – 7 (eyes-1 none, verbal-2 moans, motor-4 withdraws to pain) - C/C – passed out - Pulse / ECG – 104 / sinus tachycardia - B/P – 108 / 68 - Resp – 18 non-labored - BBS – clear bilaterally - Pupils – equal & dilated 6mm - Skin – pale, cool & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 97% - ETCO₂ – 35 - Glucose – 120 - 12 Lead ECG – Sinus Tachycardia

2016 Final ALS Scenario
Patient # 3 (Female *Kay Whole* – Ketamine OD)

INITIAL & DETAILED ASSESSMENT POINTS (possible 25 points)

- | | |
|--------------------------------------|-----------------------------------------------------------------|
| ___ (1) Assess LOC | ___ (1) Inspects Abdomen |
| ___ (1) Assess Airway Patency | ___ (1) Palpates Abdomen |
| ___ (1) Assess Resp Rate | ___ (0) Palpates Pelvis |
| ___ (1) Assess Resp Effort & Quality | ___ (0) Assess Upper Extremities |
| ___ (1) Assess Pulse Rate | ___ (0) Assess Lower Extremities |
| ___ (1) Assess Pulse Quality | ___ (1) Check for Medic Alert Tag |
| ___ (0) Assess for Major Bleeding | ___ (0) Assess the Back |
| ___ (1) Assess Head | ___ (1) Assess Skin Color/Condition |
| ___ (1) Assess Pupils | ___ (1) Assess B/P |
| ___ (0) Assess Ears | ___ (1) Assess Cap Refill |
| ___ (0) Assess Nose | ___ (1) S Agitated & hallucinating (at 5 min passed out) |
| ___ (1) Assess Trachea | ___ (1) A None |
| ___ (1) Assess JVD | ___ (1) M None |
| ___ (1) Inspects Chest | ___ (1) P Recreational drug usage |
| ___ (1) Palpates Chest | ___ (1) L Sandwich an hour ago |
| ___ (1) Auscultates Chest | ___ (1) E Partying backstage at the concert |

PROCEDURE POINTS (possible 16 points)

- ___ (2) Administers oxygen
- ___ (2) Monitors ECG
- ___ (2) Establishes IV NS
- ___ (5) Recognizes Ketamine overdose
- ___ (2) Administers fluid challenge NS 250-500ml IV
- ___ (3) Secures K paste for police

Total _____ / 41

2016 Final ALS Scenario
Patient # 4 (Female Janis Joplin – Heroin OD)

<p style="text-align: center;">Initial Vitals</p> <p style="text-align: center;"><i>Patient presents unresponsive</i></p> <ul style="list-style-type: none"> - 65 year old - LOC – Unresponsive - GCS – GCS – 3 (eyes-1 none, verbal-1 none, motor-1 none) - C/C – unresponsive & apneic - Pulse / ECG – 104 / sinus tachycardia - B/P – 98 / 60 - Resp – Not breathing - BBS – absent (assisted – clear bilaterally) - Pupils – equal & pinpoint - Skin – cyanotic, cool & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 92% - ETCO₂ – 35 - Glucose – 120 - 12 Lead ECG – Sinus Tachycardia 	<p style="text-align: center;">Head-to-Toe</p> <p>HEENT:</p> <ul style="list-style-type: none"> - <u>Head</u>: unremarkable - <u>Face</u>: unremarkable - <u>Nose</u>: unremarkable - <u>Ears</u>: unremarkable - <u>Neck</u>: trachea midline <p>Chest: unremarkable</p> <p>Back: unremarkable</p> <p>Abdomen: soft</p> <p>Pelvis: stable & intact</p> <p>Skin: cyanotic, cool & moist</p> <p>Upper Extremities: unremarkable, +P, negative MS</p> <p>Lower Extremities: syringe with needle in foot, +P, negative MS</p>
<p style="text-align: center;">Secondary Vitals</p> <p style="text-align: center;"><i>After first TX (Oxygen & Narcan 0.4-2mg)</i></p> <ul style="list-style-type: none"> - LOC – Agitated & combative - GCS – 11 (eyes-4 spontaneous, verbal-3 inappropriate words, motor-4 withdraws) - C/C – agitation - Pulse / ECG – 120 / sinus tachycardia - B/P – 130 / 90 - Resp – 24 non-labored - BBS – clear bilaterally - Pupils – equal & sluggish 4mm - Skin – flushed, cool & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 94% - ETCO₂ – 35 - Glucose – 120 - 12 Lead ECG – Sinus Tachycardia 	<p style="text-align: center;">Tertiary Vitals</p> <p style="text-align: center;"><i>After second TX (Oxygen & Narcan 0.4-2mg)</i></p> <ul style="list-style-type: none"> - LOC – Agitated & confused - GCS – 13 (eyes-4 spontaneous, verbal-4 confused, motor-5 localizes pain) - C/C – agitation - Pulse / ECG – 104 / sinus tachycardia - B/P – 120 / 70 - Resp – 18 non-labored - BBS – clear bilaterally - Pupils – equal & reactive 4mm - Skin – pink, cool & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 97% - ETCO₂ – 35 - Glucose – 120 - 12 Lead ECG – Sinus Tachycardia

Note: Must reassess patient after initial treatment – patient will revert to initial vitals at 10 minute mark unless second treatment is administered.

2016 Final ALS Scenario
Patient # 4 (Female *Janis Joplin* – Heroin OD)

INITIAL & DETAILED ASSESSMENT POINTS (possible 25 points)

- | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>___ (1) Assess LOC</p> <p>___ (1) Assess Airway Patency</p> <p>___ (1) Assess Resp Rate</p> <p>___ (1) Assess Resp Effort & Quality</p> <p>___ (1) Assess Pulse Rate</p> <p>___ (1) Assess Pulse Quality</p> <p>___ (0) Assess for Major Bleeding</p> <p>___ (1) Assess Head</p> <p>___ (1) Assess Pupils</p> <p>___ (0) Assess Ears</p> <p>___ (0) Assess Nose</p> <p>___ (1) Assess Trachea</p> <p>___ (1) Assess JVD</p> <p>___ (1) Inspects Chest</p> <p>___ (1) Palpates Chest</p> <p>___ (1) Auscultates Chest</p> | <p>___ (1) Inspects Abdomen</p> <p>___ (1) Palpates Abdomen</p> <p>___ (0) Palpates Pelvis</p> <p>___ (0) Assess Upper Extremities</p> <p>___ (0) Assess Lower Extremities</p> <p>___ (1) Check for Medic Alert Tag</p> <p>___ (0) Assess the Back</p> <p>___ (1) Assess Skin Color/Condition</p> <p>___ (1) Assess B/P</p> <p>___ (1) Assess Cap Refill</p> <p>___ (1) S Unresponsive & apneic</p> <p>___ (1) A Unknown</p> <p>___ (1) M Unknown</p> <p>___ (1) P Unknown</p> <p>___ (1) L Sandwich an hour ago (per by-stander)</p> <p>___ (1) E Partying backstage at the concert (per by-stander)</p> |
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PROCEDURE POINTS (possible 27 points)

- ___ (4) Properly ventilates with BVM & oxygen
- ___ (2) Monitors ECG
- ___ (2) Establishes IV NS
- ___ (2) Obtains Blood Glucose
- ___ (5) Finds syringe and needle stuck in patient's foot
- ___ (3) Secures IV needle in foot with bulky dressing, if removed must secure for police
- ___ (5) Recognizes heroin overdose (verbalizes possible heroin, opioid overdose)
- ___ (2) Administers Narcan 0.4-2mg Intranasal, IV or IM
- ___ (2) Administers 2nd Narcan 0.4-2mg Intranasal, IV or IM
- ___ (0) Administers D50, IV or Glucagon IV or IM

Total _____ / 52

2016 Final ALS Scenario
Patient # 5 (Male Gary Downer – Beta Blocker OD)

<p style="text-align: center;">Initial Vitals</p> <p style="text-align: center;"><i>Patient presents unresponsive</i></p> <ul style="list-style-type: none"> - 65 year old - LOC – Unresponsive - GCS – GCS – 8 (eyes-2 to pain, verbal-2 pain, motor-4 withdraws) - C/C – unresponsive - Pulse / ECG – 42 / sinus bradycardia - B/P – 68 / 40 - Resp – 16 non-labored - BBS – clear bilaterally - Pupils – equal & dilated 6mm - Skin – pale, cool & moist - Neck Veins – normal - Cap Refill – 3 seconds - O₂ sat – 94% - ETCO₂ – 35 - Glucose – 42 - 12 Lead ECG – Sinus Bradycardia with prolonged QT interval 	<p style="text-align: center;">Head-to-Toe</p> <p>HEENT:</p> <ul style="list-style-type: none"> - <u>Head</u>: unremarkable - <u>Face</u>: unremarkable - <u>Nose</u>: unremarkable - <u>Ears</u>: unremarkable - <u>Neck</u>: trachea midline <p>Chest: unremarkable</p> <p>Back: unremarkable</p> <p>Abdomen: soft</p> <p>Pelvis: stable & intact</p> <p>Skin: warm & moist</p> <p>Upper Extremities: unremarkable +PMS</p> <p>Lower Extremities: unremarkable +PMS</p>
<p style="text-align: center;">Secondary Vitals</p> <p style="text-align: center;"><i>After TX (Oxygen, Atropine, Dopamine, Glucagon)</i></p> <p style="text-align: center;">All TX must occur before 10 minutes</p> <ul style="list-style-type: none"> - LOC – Slightly confused - GCS – 14 (eyes-4 spontaneous, verbal-4 confused, motor-6 obeys) - C/C – confused – asks “Where am I?” - Pulse / ECG – 100 / normal sinus rhythm - B/P – 130 / 90 - Resp – 24 non-labored - BBS – clear bilaterally - Pupils – equal & sluggish 4mm - Skin – flushed, cool & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 97% - ETCO₂ – 35 - Glucose – 130 - 12 Lead ECG – Normal Sinus Rhythm 	<p style="text-align: center;">Code Vitals</p> <p style="text-align: center;"><i>At 10 minutes without proper TX</i></p> <ul style="list-style-type: none"> - LOC – unconscious - GCS – GCS – 3 (eyes-1 closed, verbal-1 none, motor-1 flaccid) - C/C – unresponsive - Pulse / ECG – 0 / ventricular fibrillation - B/P – 0 / 0 - Resp – 0 - BBS – none - Chest Percussion – normal - Pupils – dilated 6mm - Skin – cyanotic, cool & moist - Neck Veins – flat - Cap Refill – absent - O₂ sat – 90% Room air / 98% with BVD - ETCO₂ – 50 - Glucose – 42 - 12 Lead ECG – Sinus Bradycardia with prolonged QT interval

2016 Final ALS Scenario
Patient # 5 (Male Gary Downer – Beta Blocker OD)

INITIAL & DETAILED ASSESSMENT POINTS (possible 25 points)

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>___ (1) Assess LOC</p> <p>___ (1) Assess Airway Patency</p> <p>___ (1) Assess Resp Rate</p> <p>___ (1) Assess Resp Effort & Quality</p> <p>___ (1) Assess Pulse Rate</p> <p>___ (1) Assess Pulse Quality</p> <p>___ (0) Assess for Major Bleeding</p> <p>___ (1) Assess Head</p> <p>___ (1) Assess Pupils</p> <p>___ (0) Assess Ears</p> <p>___ (0) Assess Nose</p> <p>___ (1) Assess Trachea</p> <p>___ (1) Assess JVD</p> <p>___ (1) Inspects Chest</p> <p>___ (1) Palpates Chest</p> <p>___ (1) Auscultates Chest</p> | <p>___ (1) Inspects Abdomen</p> <p>___ (1) Palpates Abdomen</p> <p>___ (0) Palpates Pelvis</p> <p>___ (0) Assess Upper Extremities</p> <p>___ (0) Assess Lower Extremities</p> <p>___ (1) Check for Medic Alert Tag</p> <p>___ (0) Assess the Back</p> <p>___ (1) Assess Skin Color/Condition</p> <p>___ (1) Assess B/P</p> <p>___ (1) Assess Cap Refill</p> <p>___ (1) S Unresponsive</p> <p>___ (1) A None (from Debbie Downer)</p> <p>___ (1) M Glucophage, Inderal (from Debbie Downer)</p> <p>___ (1) P HTN, Diabetes, Depression (from Debbie Downer)</p> <p>___ (1) L Sandwich an hour ago (from Debbie Downer)</p> <p>___ (1) E Partying backstage at the concert</p> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

PROCEDURE POINTS (possible 30 points)

- ___ (2) Administers oxygen
- ___ (2) Monitors ECG
- ___ (2) Establishes IV NS
- ___ (5) Recognizes Beta Blocker overdose
- ___ (5) Recognizes Hypoglycemia
- ___ (4) Administers Atropine 0.5mg IV (may repeat every 5 minutes up to 3mg maximum)
- ___ (4) Administers Dopamine 5-20mcg/kg/min IV drip
- ___ (4) Administers Glucagon 5-10mg IV
- ___ (2) Administers Dextrose 50% 25g (50ml) IV

Total _____ / 55

2016 Final ALS Scenario
Patient # 6 (Male Moonshine George – Isopropyl and Methanol OD)

<p style="text-align: center;">Initial Vitals <i>Patient presents laying on couch</i></p> <ul style="list-style-type: none"> - 65 year old - LOC – Lethargic and confused - GCS – 12 (eyes-3 to voice, verbal-4 confused, motor-5 localizes pain) - C/C – “I feel comfortably numb right here on this couch” - Pulse / ECG – 78 / normal sinus rhythm - B/P – 118 / 60 - Resp – 18 non-labored - BBS – clear bilaterally - Pupils – equal & constricted 2mm - Skin – pink, cool & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 95% - ETCO₂ – 35 - Glucose – 38 - 12 Lead ECG – Normal Sinus Rhythm 	<p style="text-align: center;">Head-to-Toe</p> <p>HEENT:</p> <ul style="list-style-type: none"> - <u>Head</u>: unremarkable - <u>Face</u>: chewing on rubbing alcohol pads - <u>Nose</u>: unremarkable - <u>Ears</u>: unremarkable - <u>Neck</u>: trachea midline <p>Chest: unremarkable Back: unremarkable Abdomen: soft Pelvis: stable & intact Skin: warm & moist Upper Extremities: unremarkable +PMS Lower Extremities: unremarkable +PMS</p> <p>Other: has a bottle of windshield washer fluid next to him</p>
<p style="text-align: center;">Secondary Vitals <i>At 5 minutes (with seizure)</i></p> <ul style="list-style-type: none"> - LOC – Unresponsive - GCS – 6 (eyes-1 none, verbal-1 none, motor-3 decerebrate with tonic/clonic movements) - C/C – Active seizure - Pulse / ECG – 110 / sinus tachycardia - B/P – 90 / 60 - Resp – 8 shallow & labored - BBS – clear bilaterally - Pupils – equal & constricted 2mm - Skin – ashen gray, cool & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 90% - ETCO₂ – 35 - Glucose – 38 - 12 Lead ECG – Sinus Tachycardia 	<p style="text-align: center;">Tertiary Vitals <i>After TX (Oxygen, Valium 5-10mg, Dextrose 50% 50ml, fluid challenge NS 250-500ml)</i></p> <ul style="list-style-type: none"> - LOC – Slightly confused - GCS – 14 (eyes-4 spontaneous, verbal-4 confused, motor-6 obeys) - C/C – confused – asks “Who are you?” - Pulse / ECG – 78 / normal sinus rhythm - B/P – 118 / 60 - Resp – 18 non-labored - BBS – clear bilaterally - Pupils – equal & Reactive 3mm - Skin – pink, cool & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 97% - ETCO₂ – 35 - Glucose – 130 - 12 Lead ECG – Normal Sinus Rhythm

2016 Final ALS Scenario
Patient # 6 (Male Moonshine George – Isopropyl and Methanol OD)

INITIAL & DETAILED ASSESSMENT POINTS (possible 25 points)

- | | |
|--------------------------------------|----------------------------------------------------|
| ___ (1) Assess LOC | ___ (1) Inspects Abdomen |
| ___ (1) Assess Airway Patency | ___ (1) Palpates Abdomen |
| ___ (1) Assess Resp Rate | ___ (0) Palpates Pelvis |
| ___ (1) Assess Resp Effort & Quality | ___ (0) Assess Upper Extremities |
| ___ (1) Assess Pulse Rate | ___ (0) Assess Lower Extremities |
| ___ (1) Assess Pulse Quality | ___ (1) Check for Medic Alert Tag |
| ___ (0) Assess for Major Bleeding | ___ (0) Assess the Back |
| ___ (1) Assess Head | ___ (1) Assess Skin Color/Condition |
| ___ (1) Assess Pupils | ___ (1) Assess B/P |
| ___ (0) Assess Ears | ___ (1) Assess Cap Refill |
| ___ (0) Assess Nose | ___ (1) S “comfortably numb” |
| ___ (1) Assess Trachea | ___ (1) A None |
| ___ (1) Assess JVD | ___ (1) M None |
| ___ (1) Inspects Chest | ___ (1) P None |
| ___ (1) Palpates Chest | ___ (1) L Sandwich an hour ago |
| ___ (1) Auscultates Chest | ___ (1) E Partying backstage at the concert |

PROCEDURE POINTS (possible 36 points)

- ___ (2) Administers oxygen
- ___ (2) Monitors ECG
- ___ (2) Establishes IV NS
- ___ (5) Recognizes Isopropyl Alcohol Toxicity (overdose)
- ___ (5) Recognizes Methanol Toxicity (overdose)
- ___ (5) Recognizes Hypoglycemia
- ___ (5) Verbalizes need for alcohol dehydrogenase inhibition
- ___ (2) Administers Benzodiazepine (Valium 5-10mg, Ativan 2-4mg, Versed 2-10mg) Intranasal, IM or IV
- ___ (4) Administers fluid challenge NS 250-500ml IV
- ___ (4) Administers Dextrose 50% 25g (50ml) IV
- ___ (0) Secures bottle of windshield washer fluid for police

Total _____ / 61

2016 Final ALS Scenario
Patient # 7 (Male *Timothy Leary* – LSD OD)

Initial Vitals	Head-to-Toe
<p style="text-align: center;"><i>Patient presents ambulatory</i></p> <ul style="list-style-type: none">- 65 year old- LOC – Agitated & hallucinating- GCS – 13 (eyes-4 spontaneous, verbal-4 confused, motor-5 localizes pain)- C/C – Hallucinating- Pulse / ECG – 102 / sinus tachycardia- B/P – 110 / 58- Resp – 22 non-labored- BBS – clear bilaterally- Pupils – equal & dilated 6mm- Skin – very warm & dry- Neck Veins – normal- Cap Refill – 2 seconds- O₂ sat – 97%- ETCO₂ – 35- Glucose – 120- 12 Lead ECG – Sinus Tachycardia	<p style="text-align: center;">HEENT:</p> <ul style="list-style-type: none">- <u>Head</u>: unremarkable- <u>Face</u>: unremarkable- <u>Nose</u>: unremarkable- <u>Ears</u>: unremarkable- <u>Neck</u>: trachea midline <p>Chest: unremarkable Back: unremarkable Abdomen: soft Pelvis: stable & intact Skin: warm & moist Upper Extremities: unremarkable +PMS Lower Extremities: unremarkable +PMS</p> <p>Other: LSD paper can be found in his cigarette pack</p> <p>No change, patient will take his LSD trip all the way home!</p>

2016 Final ALS Scenario
Patient # 7 (Male *Timothy Leary* – LSD OD)

INITIAL & DETAILED ASSESSMENT POINTS (possible 25 points)

- | | |
|--------------------------------------|----------------------------------------------------|
| ___ (1) Assess LOC | ___ (1) Inspects Abdomen |
| ___ (1) Assess Airway Patency | ___ (1) Palpates Abdomen |
| ___ (1) Assess Resp Rate | ___ (0) Palpates Pelvis |
| ___ (1) Assess Resp Effort & Quality | ___ (0) Assess Upper Extremities |
| ___ (1) Assess Pulse Rate | ___ (0) Assess Lower Extremities |
| ___ (1) Assess Pulse Quality | ___ (1) Check for Medic Alert Tag |
| ___ (0) Assess for Major Bleeding | ___ (0) Assess the Back |
| ___ (1) Assess Head | ___ (1) Assess Skin Color/Condition |
| ___ (1) Assess Pupils | ___ (1) Assess B/P |
| ___ (0) Assess Ears | ___ (1) Assess Cap Refill |
| ___ (0) Assess Nose | ___ (1) S Hallucinations |
| ___ (1) Assess Trachea | ___ (1) A None |
| ___ (1) Assess JVD | ___ (1) M None |
| ___ (1) Inspects Chest | ___ (1) P Recreational drug usage |
| ___ (1) Palpates Chest | ___ (1) L Sandwich an hour ago |
| ___ (1) Auscultates Chest | ___ (1) E Partying backstage at the concert |

PROCEDURE POINTS (possible 14 points)

- ___ (1) Monitors ECG
- ___ (5) Finds LSD paper in cigarette pack
- ___ (5) Recognizes LSD overdose
- ___ (3) Secures LSD paper for police

Total _____ / 39

2016 Final ALS Scenario
Patient # 8 (Male Casey Jones – Cocaine OD / AMI)

<p style="text-align: center;">Initial Vitals <i>Patient presents ambulatory</i></p> <ul style="list-style-type: none"> - 65 year old - LOC – Awake & oriented - GCS – 14 (eyes-3 to voice, verbal-5 oriented, motor-6 obeys) - C/C – Severe chest pain, admits to taking coke - Pulse / ECG – 70 / left ventricular pacer - B/P – 138 / 96 - Resp – 22 non-labored - BBS – clear bilaterally - Pupils – equal & dilated 6mm - Skin – pink, cool & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 93% - ET_{CO}₂ – 35 - Glucose – 120 - 12 Lead ECG – Left ventricular paced rhythm 	<p style="text-align: center;">Head-to-Toe</p> <p>HEENT:</p> <ul style="list-style-type: none"> - <u>Head</u>: unremarkable - <u>Face</u>: unremarkable - <u>Nose</u>: unremarkable - <u>Ears</u>: unremarkable - <u>Neck</u>: trachea midline <p>Chest: unremarkable Back: unremarkable Abdomen: soft Pelvis: stable & intact Skin: warm & moist Upper Extremities: unremarkable +PMS Lower Extremities: unremarkable +PMS</p> <p>Other: if asked, patient has history of one prior MI</p> <p>At 5 minutes, if team does not find normal ECG in pocket, patient pulls it out for team</p>
<p style="text-align: center;">Secondary Vitals <i>At 5 minutes with proper TX for MI (Oxygen, IV, Nitroglycerin, ASA, Morphine or Fentanyl)</i></p> <ul style="list-style-type: none"> - LOC – Awake & oriented - GCS – 15 (eyes-4 spontaneous, verbal-5 oriented, motor-6 obeys) - C/C – none - Pulse / ECG – 70 / left ventricular pacer - B/P – 128 / 70 - Resp – 18 non-labored - BBS – clear bilaterally - Pupils – equal & reactive 3mm - Skin – warm & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 98% - ET_{CO}₂ – 35 - Glucose – 120 - 12 Lead ECG – Normal Sinus Rhythm with LBBB 	

**2016 Final ALS Scenario
Patient # 8 (Male Casey Jones – Cocaine OD / AMI)**

INITIAL & DETAILED ASSESSMENT POINTS (possible 25 points)

- | | |
|--------------------------------------|-------------------------------------------------------------------|
| ___ (1) Assess LOC | ___ (1) Inspects Abdomen |
| ___ (1) Assess Airway Patency | ___ (1) Palpates Abdomen |
| ___ (1) Assess Resp Rate | ___ (0) Palpates Pelvis |
| ___ (1) Assess Resp Effort & Quality | ___ (0) Assess Upper Extremities |
| ___ (1) Assess Pulse Rate | ___ (0) Assess Lower Extremities |
| ___ (1) Assess Pulse Quality | ___ (1) Check for Medic Alert Tag |
| ___ (0) Assess for Major Bleeding | ___ (0) Assess the Back |
| ___ (1) Assess Head | ___ (1) Assess Skin Color/Condition |
| ___ (1) Assess Pupils | ___ (1) Assess B/P |
| ___ (0) Assess Ears | ___ (1) Assess Cap Refill |
| ___ (0) Assess Nose | ___ (1) S Severe chest pain (9 of 10) |
| ___ (1) Assess Trachea | ___ (1) A None |
| ___ (1) Assess JVD | ___ (1) M Admits to taking coke |
| ___ (1) Inspects Chest | ___ (1) P If patient is asked, has history of one prior MI |
| ___ (1) Palpates Chest | ___ (1) L Sandwich an hour ago |
| ___ (1) Auscultates Chest | ___ (1) E Partying backstage at the concert |

PROCEDURE POINTS (possible 28 points)

- ___ (2) Administers oxygen
- ___ (2) Monitors ECG
- ___ (2) Establishes IV NS
- ___ (5) Recognizes Cocaine overdose
- ___ (2) Recognizes Left ventricular paced rhythm
- ___ (3) Calls Cardiac Alert
- ___ (2) Administers Nitroglycerin 0.4mg SL
- ___ (2) Administers Aspirin 162mg chewable
- ___ (4) Administers Morphine 5mg IV, may repeat once in 5 minutes (maximum 10mg)
- ___ (4) OR Administers Fentanyl 50mcg slow IV, may repeat once in 5 minutes (maximum 100mcg IV) or 100mcg intranasal, may repeat once in 5 minutes (maximum 200mcg intranasal)

Total _____ / 53

2016 Final ALS Scenario
Patient # 9 (Male Terry Downer – Amphetamine / CCB OD)

<p style="text-align: center;">Initial Vitals <i>Patient presents ambulatory</i></p> <ul style="list-style-type: none"> - 65 year old - LOC – Lethargic and confused - GCS – 12 (eyes-3 to voice, verbal-4 confused, motor-5 localizes pain) - C/C – Sleepy - Pulse / ECG – 148 / sinus tachycardia - B/P – 72 / 40 - Resp – 16 non-labored - BBS – clear bilaterally - Pupils – equal & dilated 6mm - Skin – pale, cool & moist - Neck Veins – normal - Cap Refill – 3 seconds - O₂ sat – 93% - ETCO₂ – 35 - Glucose – 38 - 12 Lead ECG – Sinus Tachycardia 	<p style="text-align: center;">Head-to-Toe</p> <p>HEENT:</p> <ul style="list-style-type: none"> - <u>Head</u>: unremarkable - <u>Face</u>: unremarkable - <u>Nose</u>: unremarkable - <u>Ears</u>: unremarkable - <u>Neck</u>: trachea midline <p>Chest: unremarkable Back: unremarkable Abdomen: soft Pelvis: stable & intact Skin: warm & moist Upper Extremities: unremarkable +PMS Lower Extremities: unremarkable +PMS</p> <p>Other: if asked, patient will tell you he took a handful of Beauties, then got a headache, then squirted 3 of these under his tongue as a Paramedic friend told him to do for a rush. “Please don’t tell my Mom and Dad they are squares”</p> <p>Patient carries two baggies, one labeled “Black Beauties” and one labeled “Procardia Poppers”</p>
<p style="text-align: center;">Secondary Vitals <i>At 5 minutes with proper TX for hypotension (Oxygen, IV, fluid challenge)</i></p> <ul style="list-style-type: none"> - LOC – Awake & oriented - GCS – 13 (eyes-3 to voice, verbal-4 confused, motor-6 obeys) - C/C – none - Pulse / ECG – 96 / normal sinus rhythm - B/P – 118 / 68 - Resp – 16 non-labored - BBS – clear bilaterally - Pupils – equal & dilated 6mm - Skin – pink, warm & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 98% - ETCO₂ – 35 - Glucose – 120 - 12 Lead ECG – Normal Sinus Rhythm 	

2016 Final ALS Scenario
Patient # 9 (Male Terry Downer – Amphetamine / CCB OD)

INITIAL & DETAILED ASSESSMENT POINTS (possible 25 points)

- | | |
|--------------------------------------|----------------------------------------------------|
| ___ (1) Assess LOC | ___ (1) Inspects Abdomen |
| ___ (1) Assess Airway Patency | ___ (1) Palpates Abdomen |
| ___ (1) Assess Resp Rate | ___ (0) Palpates Pelvis |
| ___ (1) Assess Resp Effort & Quality | ___ (0) Assess Upper Extremities |
| ___ (1) Assess Pulse Rate | ___ (0) Assess Lower Extremities |
| ___ (1) Assess Pulse Quality | ___ (1) Check for Medic Alert Tag |
| ___ (0) Assess for Major Bleeding | ___ (0) Assess the Back |
| ___ (1) Assess Head | ___ (1) Assess Skin Color/Condition |
| ___ (1) Assess Pupils | ___ (1) Assess B/P |
| ___ (0) Assess Ears | ___ (1) Assess Cap Refill |
| ___ (0) Assess Nose | ___ (1) S Sleepy |
| ___ (1) Assess Trachea | ___ (1) A None |
| ___ (1) Assess JVD | ___ (1) M None |
| ___ (1) Inspects Chest | ___ (1) P None |
| ___ (1) Palpates Chest | ___ (1) L Sandwich an hour ago |
| ___ (1) Auscultates Chest | ___ (1) E Partying backstage at the concert |

PROCEDURE POINTS (possible 28 points)

- ___ (2) Administers oxygen
- ___ (2) Monitors ECG
- ___ (2) Establishes IV NS
- ___ (5) Finds baggies with Black Beauties and Procardia Poppers
- ___ (5) Recognizes Amphetamine (Black Beauties) overdose
- ___ (5) Recognizes Calcium Channel Blocker (Procardia) overdose
- ___ (3) Secures baggies with Black Beauties and Procardia Poppers for police
- ___ (4) Administers fluid challenge NS 250-500ml IV

Total _____ / 53

2016 Final ALS Scenario
Patient # 10 (Male *Randy Mandies* – Quaalude OD)

<p style="text-align: center;">Initial Vitals <i>Patient presents ambulatory</i></p> <ul style="list-style-type: none"> - 65 year old - LOC – Lethargic and confused - GCS – 12 (eyes-3 to voice, verbal-4 confused, motor-5 localizes pain) - C/C – Sleepy - Pulse / ECG – 98 / normal sinus rhythm - B/P – 108 / 56 - Resp – 12 non-labored - BBS – clear bilaterally - Pupils – equal & dilated 6mm - Skin – pale, cool & moist - Neck Veins – normal - Cap Refill – 3 seconds - O₂ sat – 95% - ETCO₂ – 35 - Glucose – 38 - 12 Lead ECG – Normal Sinus Rhythm 	<p style="text-align: center;">Head-to-Toe</p> <p>HEENT:</p> <ul style="list-style-type: none"> - <u>Head</u>: unremarkable - <u>Face</u>: unremarkable - <u>Nose</u>: unremarkable - <u>Ears</u>: unremarkable - <u>Neck</u>: trachea midline <p>Chest: unremarkable Back: unremarkable Abdomen: soft Pelvis: stable & intact Skin: warm & moist Upper Extremities: unremarkable +PMS Lower Extremities: unremarkable +PMS</p> <p>Other: Patient carries a tin with Lemon 714 tablets</p>
<p style="text-align: center;">Secondary Vitals <i>At 5 minutes</i></p> <ul style="list-style-type: none"> - LOC – Unresponsive - GCS – 6 (eyes-1 none, verbal-1 none, motor-1 none) - C/C – Unresponsive & apneic - Pulse / ECG – 110 / sinus tachycardia - B/P – 90 / 60 - Resp – none - BBS – absent (clear bilaterally if assisted) - Pupils – equal & sluggish 5mm - Skin – ashen gray, cool & moist - Neck Veins – normal - Cap Refill – 2 seconds - O₂ sat – 93% - ETCO₂ – 35 - Glucose – 38 - 12 Lead ECG – Sinus Tachycardia 	

2016 Final ALS Scenario
Patient # 10 (Male *Randy Mandies* – Quaalude OD)

INITIAL & DETAILED ASSESSMENT POINTS (possible 25 points)

- | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>___ (1) Assess LOC</p> <p>___ (1) Assess Airway Patency</p> <p>___ (1) Assess Resp Rate</p> <p>___ (1) Assess Resp Effort & Quality</p> <p>___ (1) Assess Pulse Rate</p> <p>___ (1) Assess Pulse Quality</p> <p>___ (0) Assess for Major Bleeding</p> <p>___ (1) Assess Head</p> <p>___ (1) Assess Pupils</p> <p>___ (0) Assess Ears</p> <p>___ (0) Assess Nose</p> <p>___ (1) Assess Trachea</p> <p>___ (1) Assess JVD</p> <p>___ (1) Inspects Chest</p> <p>___ (1) Palpates Chest</p> <p>___ (1) Auscultates Chest</p> | <p>___ (1) Inspects Abdomen</p> <p>___ (1) Palpates Abdomen</p> <p>___ (0) Palpates Pelvis</p> <p>___ (0) Assess Upper Extremities</p> <p>___ (0) Assess Lower Extremities</p> <p>___ (1) Check for Medic Alert Tag</p> <p>___ (0) Assess the Back</p> <p>___ (1) Assess Skin Color/Condition</p> <p>___ (1) Assess B/P</p> <p>___ (1) Assess Cap Refill</p> <p>___ (1) S Sleepy</p> <p>___ (1) A None</p> <p>___ (1) M None</p> <p>___ (1) P None</p> <p>___ (1) L Sandwich an hour ago</p> <p>___ (1) E Partying backstage at the concert</p> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

PROCEDURE POINTS (possible 25 points)

- ___ (4) Properly ventilates with BVM & oxygen
- ___ (2) Monitors ECG
- ___ (2) Establishes IV NS
- ___ (5) Finds tin in pocket
- ___ (5) Recognizes Quaalude (Lemon 714) overdose
- ___ (3) Secures Quaalude (Lemon 714) for police
- ___ (4) Properly places endotracheal tube (size, markings, secured) & ventilates with oxygen

Total _____ / 50

2016 Final ALS Scenario

OVERALL SCENARIO POINTS (possible 11 points)

- ___ (4) Establishes treatment area (centralizes patients)
- ___ (2) Communicates well with a defined leader
- ___ (1) All Team Members using BSI (minimum gloves & eye protection)
- ___ (2) All sharps disposed of properly
- ___ (1) Requests appropriate additional resources
- ___ (2) Verbalizes contact with Poison Information Center (Poison Control)
- ___ (2) Calls Level 1 MCI

Total _____ / 14