

Central Area - Regional Competition 1997

Senior Scenario

Team Information

You are on duty at Mountain Bike Races. It is a mild spring day, quite pleasant and sunny outside. A competitor falls from his or her bicycle on a tough section of the trail. You are called to the scene to help. You have 20 minutes to complete the scenario, and there will be a warning when 10, 5 and 1 minute(s) remain. A verbal report to the ambulance as well as a Patient Care Record are required.

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Judge's Information

The team has been told the following:

You are on duty at Mountain Bike Races. It is a mild spring day, quite pleasant and sunny outside. A competitor falls from his or her bicycle on a tough section of the trail. You are called to the scene to help. You have 20 minutes to complete the scenario, and there will be a warning when 10, 5 and 1 minute(s) remain. A verbal report to the ambulance as well as a Patient Care Record are required.

The history you may give as a bystander:

The rider came around the curve very quickly, and lost control. He or she fell quite hard, and rolled down the hill about 6 feet. The bike helmet was fitted wrong and came off on the first hit, so the patient may have hit his or her head, but did not lose consciousness at all.

Time line:

The team has 20 minutes to complete the scenario. There will be a warning at 10 minutes, at which point the casualty is signaled to have an asthma attack. There are also warnings at 5 minutes and 1 minute remaining. When time is called, ensure the team stops all treatment and writing. They have 1 minute to give you a verbal report, after which you will collect their written documentation. You may check over the treatment of the casualty, and then the team is to clean up their equipment. Please remit your completed marking guide to the Head Judge before the next scenario begins. Please be aware that these marking guides will be remitted to the teams for self-improvement.

Medical History, allergies and medications:

- asthma, for which the patient takes Ventolin as needed, and has it there
- no other meds
- no known allergies
- no other medical history

Injuries:

- fracture, left wrist; patient complains of pain in this area and is unable to move, but can feel touch and has good cap. refill and circulation
- bruising, left hip; patient complains only when touched in the area, and the pain is mild - do not lead the team to think it is a fracture, but do not tell them otherwise, as they should be able to rule it out
- 6 inch laceration, right lower leg, anterior aspect, bleeding uncontrolled upon arrival, bleeds through dressing once
- at the 10 minute mark, anxiety provokes an asthma attack, which is resolved with one puff of Ventolin
- patient has LOA x 2 throughout - to person and place, not time
- patient has MEM x 2 - to past and recent but not to incident
- patient is a little dizzy, slightly nauseous throughout but does not vomit

Vitals:

To be given in accordance with the established time line so as not to mislead the competitors:

	before asthma	before asthma	after Ventolin	after Ventolin
temperature	hot, flushed, moist	warm, moist, normal colour	warm, moist, pale	cool, moist, pale
pulse	110 full, regular	120 full, regular	100 full, regular	80 bounding, regular
pupils	4 PERL brisk	4 PERL brisk	L 5mm sluggish R 3mm brisk	L 5mm fixed R 3mm brisk
respirations	22 shallow regular	24 shallow regular	16 deep regular	12 very deep regular
blood pressure	120/80	146/80	164/70	190/70

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Patient and Simulator's Information

The team has been told the following:

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Patient information:

You are confused, don't have any idea what happened or what time it is. You're upset, and the anxiety causes you to have an asthma attack at 10 minutes (you will be signaled). After the Ventolin (which you have with you) and some reassurance, you are much calmer but still as confused as before. You have broken your left wrist, and have bruised your left hip area, where you landed. These are the only places you are sore, but you are a little dizzy, and slightly nauseous. You have some scratches on your face which are not serious, but you have a gash on the front of your right lower leg which bleeds through the dressings once.

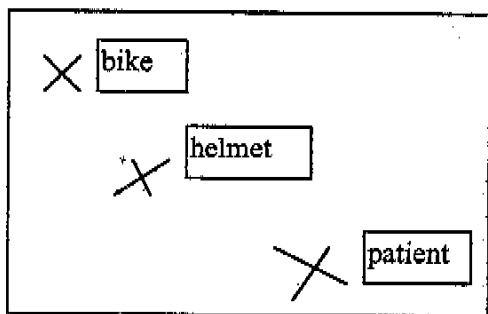
Casualty simulation:

- fracture, closed, left wrist
- minor bruising to left hip area, about 6 inches circular diameter, where the patient landed in part of the fall
- 6 inch laceration, right lower leg, anterior aspect, heavy bleeding
- moist face but no colouring because it changes during the scenario anyway
- the casualty should be wearing running shoes, sports socks, a t-shirt and track pants

Scene set up:

The casualty should lie supine, with his or her head to the left side. The left leg should be flexed from the hip about 30 degrees, and at the knee about 45 degrees. The left arm should be palm up, elbow bent about 30 degrees and out from the side. The right arm can lie bent across the upper abdomen, and the right leg can remain straight. The bike

helmet is between the patient and the bicycle, open side up. The bike itself is on its left side at the far edge of the square from the patient. The patient's head should point toward the helmet position, just below the centre of the square, with just enough space on all sides to get around.



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Marking Guide

	Item	12	6	3	0	Comments
p r i m a r y	Hazard check					
	Universal precautions					
	Consent to treat					
	Responsiveness					
	Airway - initial					
	- ongoing					
	Breathing - initial					
	- ongoing					
	Cervical spine - checked					
	Circulation - pulse initial					
	- pulse ongoing					
	- gross bleed, find lac					
	Treat bleed to leg					
	Apply second dressing over first					
v i t a l s	Temperature - first					
	- second					
	- third					
	- fourth					
	Pulse - first					
	- second					
	- third					
	- fourth					
	Pupils - first					
	- second					
	- third					
	- fourth					
	Respirations - first					
	- second					
	- third					
	- fourth					
	LOA - first					
	- second					
	- third					
	- fourth					
Memory - first						
- second						

	- third				
	- fourth				
h	what happened				
x	patient history - meds				
	- allergies				
	- past medical				
s	head, face				
e	neck, c-spine				
c	clavicles				
o	chest wall and sternum				
n	flanks				
d	abdomen - 4 quadrants, look and palpate				
a	pelvis - 3 planes, find bruising, rule out fracture				
r	scapulae				
y	back				
	spine				
	left leg - palpate full length				
	- strength				
	- sensation				
	- mobility				
	- cap refill/pulse				
	right leg - palpate full length				
	- strength				
	- sensation				
	- mobility				
	- cap refill/pulse				
	left arm - palpate full length, find fractured wrist				
	- strength				
	- sensation				
	- mobility				
	- pulse/cap refill				
	right arm - palpate full length				
	- strength				
	- sensation				
	- mobility				
	- pulse/cap refill				
	checked for medic alert				
t	Ventolin admin timely				
r	- 5 rights				
e	good coaching through asthma				

a	immobilize c-spine in primary					
	splint, ice wrist					
t	- distal circulation pre and post					
	ice hip					
m	rule out hip fracture					
e	reassurance					
n	shock treatment					
	precautions for vomiting					
t	introduction of self and partner					
	patient informed as to intent of team					
c	patient directed to assist					
o	team communicates well with one another					
m	introduction of patient					
m	chief complaint (s)					
r	history related to incident					
e	past medical history					
p	assessment findings					
o	treatment					
r	response to treatment					
t	patient history					
r	incident history					
e	medical history					
c	vital signs including time					
o	assessment					
r	treatment					
d	time, dose of ventolin admin					
	signed, dated					