

Unconscious “Large” medical patient. Signs of cardiac compromise. Goes into arrest, AED/CPR. Recovery and transport

Scenario	You are working at your desk and hear something fall. You go to your co-workers desk and find him lying on the floor with a stranger standing over him. Finally recognize him as the new vendor rep. He is obviously in a panic. You activate your emergency response team.	
Equipment	BSI Equipment Run Sheet O ₂ Tank w/Liter flow regulator Bag Valve Mask Suction – Hard/soft catheters Pocket Mask	Stethoscope Non-Rebreather Mask BP Cuff Reeves Stretcher Airways – oral/nasal

Your Actions		Findings - Unconscious
Scene Size-up:	<ul style="list-style-type: none"> • Scene Safety 	Check for any hazards to you – including smoke, chemicals, unusual odors, strangers and pets
	<ul style="list-style-type: none"> • BSI 	Minimum of gloves
	<ul style="list-style-type: none"> • Mechanism of Injury/Illness 	Apparent medical emergency. Rep says he was talking to him and he just collapsed
	<ul style="list-style-type: none"> • Additional Resources (beyond normal response) 	Yes. Pt weighs approx 300 pounds and stands 6’ 6”. Will need additional personnel to transport down stairs to lobby
	<ul style="list-style-type: none"> • Number of patients 	1
	<ul style="list-style-type: none"> • Advanced care required 	Yes – unresponsive pt.
Initial Assessment (Treat Life Threats)	<ul style="list-style-type: none"> • General Impression/Chief Complaint 	Poor – Unresponsive, clothing is wet with sweat
	<ul style="list-style-type: none"> • Assess Mental Status (AVPU) (PPT) 	Unresponsive
	<ul style="list-style-type: none"> • Assess airway 	Open airway with Head-tilt/Chin-Lift
	<ul style="list-style-type: none"> • Assess Breathing 	Breathing – about 6 breaths/minute Begin mouth-to-mask rescue breathing - 1 breath every 3 seconds Switch to BVM w/O ₂ and oral airway on ERT arrival Breathing improves to about 10-12 respirations/min Assist with O ₂ at high flow using non-rebreather/airway
	<ul style="list-style-type: none"> • Assess circulation 	Check Pulse/Signs of Circulation – Yes (breathing, so has pulse) Weak, rapid
<ul style="list-style-type: none"> • Determine priority 	HIGH – Cardiac/Respiratory Arrest may be imminent	

Unconscious Medical Patient	<ul style="list-style-type: none"> • Rapid Physical Exam 	<ul style="list-style-type: none"> • Head: Cyanotic • Neck: Cyanotic • Chest Sounds: reduced lung sounds – “wet” • Abdomen: Normal • Pelvis: Normal • Extremities: Weak radial pulses, swelling at ankles • Posterior: wet w/sweat 	
	<ul style="list-style-type: none"> • Obtain baseline vitals 	Pulse: 110 BP: 100/70 Respirations: 10	Diaphoretic Skin cool and moist Pale
	<ul style="list-style-type: none"> • ALS 	Yes	
	Focused History / Physical Exam <ul style="list-style-type: none"> • From ByStanders: • Obtain a Present illness history • O P Q R S T 	Onset: Sitting at desk Provokes: No idea – just happened Quality: Complained of chest pain Radiation: Center of chest Severity: Unkn Time: About 15 min ago	
<ul style="list-style-type: none"> • From ByStanders: • Obtain a SAMPLE history 	Signs and Symptoms: C/O Chest pain/discomfort Allergies: Unkn Medications: Unkn Pertinent Past history: Unkn Last Oral Intake: Coffee Break – 30 Min ago Events leading up to injury or illness: Talking to vendor		
Transport	<ul style="list-style-type: none"> • Load/Prepare for Transport 	Use Reeves to carry pt to where stretcher access is available	
Ongoing Assessment	<ul style="list-style-type: none"> • Repeat Initial assessment 	No new findings - condition seems to be deteriorating	
	<ul style="list-style-type: none"> • Reassess Vitals 	Breathing at 8 Respirations/min – be prepared for rescue breathing/respiratory arrest	
	<ul style="list-style-type: none"> • Check Interventions 	O ₂ -OK, Airway-OK, Call for AED if not on scene	
Ongoing Assessment TREAT LIFE THREATS	<ul style="list-style-type: none"> • Repeat Initial assessment 	RESPIRATORY ARREST/CARDIAC ARREST	
	<ul style="list-style-type: none"> • Airway 	Check/maintain with Head tilt-Chin lift	
	<ul style="list-style-type: none"> • Breathing 	Check for breathing – NONE – give two breaths using BVM w/O ₂	
	<ul style="list-style-type: none"> • Circulation 	Check pulse/Signs of circulation – NONE Connect AED If 2 persons, 1 starts CPR while AED is set up Follow AED Protocol - SHOCK “NO SHOCK INDICATED” message – on check, patient has a pulse	
	<ul style="list-style-type: none"> • Check Breathing 	Not breathing adequately Ventilate at 1 breath every 5 sec using BVM w/O ₂ Pt. “gurgling” – SUCTION Breathing returns to normal range Assist breathing with O ₂ at 15 lpm	
Ongoing Assessment	<ul style="list-style-type: none"> • Reassess Vitals 	Monitor vitals. Be prepared for additional rescue breathing/CPR/AED	
	<ul style="list-style-type: none"> • Check Interventions 	O ₂ -OK, Airway-OK, AED remains attached	