


<b>COMPLEX TRAUMA CHALLENGE</b>						<b>TRAUMA ASSESSOR</b>		<b>Newbridge</b>					
								<b>2023</b>					
<b>ASSESSOR:</b>								<b>TEAM:</b>					
<b>CHALLENGE LOCATION:</b>								<b>TIME:</b>					
<b>GENERAL APPROACH</b>													
<b>Approach</b>	Identifies hazards		Mitigates hazards		Role allocation		Identifies themselves		Mechanism of Injury	<b>S</b>			
	1	3	5	1	3	5	1	3	5	1	3	5	25
<b>COMMENTS :</b>													
<b>SURVEY - CRITICAL CASUALTY</b>													
<b>Airway</b>	Responsiveness		Airway status		Check mouth		Airway manoeuvre		Reassesses	<b>S</b>			
	1	3	5	1	3	5	1	3	5	1	3	5	25
<b>Breathing</b>	Ventilatory rate		Inspects Chest		Respiratory Effort/Depth/Rhythm		Oxygen		Reassesses	<b>S</b>			
	1	3	5	1	3	5	1	3	5	1	3	5	25
<b>Circulation</b>	Massive haemorrhage		Skin		Pulses		Capillary refill		Reassesses	<b>S</b>			
	1	3	5	1	3	5	1	3	5	1	3	5	25
<b>Disability</b>	Consciousness Level		Assesses Pupils		Sensory function		Motor function		Reassesses	<b>S</b>			
	1	2	3	1	2	3	1	2	3	1	2	3	15
<b>Examine &amp; Exposure</b>	Head		Neck		Chest		Back		Abdomen	<b>S</b>			
	1	2	3	1	2	3	1	2	3	1	2	3	15
<b>Examine &amp; Exposure</b>	Pelvis		Lower limbs		Upper limbs		Relevant medical information		Prevent heat loss / dignity	<b>S</b>			
	1	2	3	1	2	3	1	2	3	1	2	3	15
<b>COMMENTS :</b>													
<b>CASUALTY CARE - CRITICAL CASUALTY</b>													
<b>Initial Spinal / Pelvic Care</b>	Management position		Prevents active movement		In-line stabilization		Pelvic stabilization		Alignment of the body	<b>S</b>			
	1	3	5	1	3	5	1	3	5	1	3	5	25
<b>Management and progression</b>	Time critical aspects		Treatment without delay		Reacts to change		Use of resources		Equipment use	<b>S</b>			
	1	3	5	1	3	5	1	3	5	1	3	5	25
<b>Treatment of injuries</b>	Prioritization		Correct choice of equipment		Correct techniques		Care and protection of injuries		Reassesses	<b>S</b>			
	1	3	5	1	3	5	1	3	5	1	3	5	25
<b>Ongoing Spinal / Pelvic Care</b>	Supervision and Leadership		Aware of injuries before movement		Movement to transfer device		Position on device		Reassesses	<b>S</b>			
	1	2	3	1	2	3	1	2	3	1	2	3	15
<b>BLS / AED</b>	Chest compressions		Minimal interruptions		Ventilation		No delay in AED use		Correct and safe AED	<b>S</b>			
	1	3	5	1	3	5	1	3	5	1	3	5	25
<b>COMMENTS :</b>													
<b>NON-CRITICAL CASUALTY</b>													
<b>Survey</b>	Airway		Breathing		Circulation		Disabilities		Head-to-toe	<b>S</b>			
	1	3	5	1	3	5	1	3	5	1	3	5	25
<b>Ongoing treatment</b>	Positioning		Care and protection of injuries		Reassess		Relevant medical information		Communication with casualty	<b>S</b>			
	1	3	5	1	3	5	1	3	5	1	3	5	25
<b>COMMENTS :</b>													
<b>COMMUNICATION</b>													
<b>With Team</b>	Plan of action		Advanced help		Informs of casualty condition		Clear instructions		Maintains	<b>S</b>			
	1	2	3	1	2	3	1	2	3	1	2	3	15
<b>With Casualty</b>	Listens, Reacts		Appropriate questions		Keep casualty informed		Language (avoids jargon, etc.)		Maintains	<b>S</b>			
	1	2	3	1	2	3	1	2	3	1	2	3	15
<b>Handover</b>	Incident & mechanism of injury		Injuries and initial status		Treatment / interventions		Current status		Other appropriate information - AMP	<b>S</b>			
	1	2	3	1	2	3	1	2	3	1	2	3	15
<b>COMMENTS :</b>													
<b>DEBRIEF SUMMARY:</b>													
<b>ASSESSORS SIGNATURE:</b>								<b>TOTAL SCORE (Max 355)</b>					
								<b>SCORE CHECKER'S INITIALS</b>					

**Marking Criteria**

Individual Subsection

- 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.