

For all items you are asked to circle, please instead highlight the appropriate option in red



Location: _____

Date: _____

Event: _____

Event Time: _____

Name or Tag #: _____

Pt Contact Time: _____

Student ID #: _____

Pt Transfer/Release Time: _____

DOB: _____

Age: _____

Gender: M F

Disposition (circle appropriate field):

Refused Treatment

Treated, Refused Transport

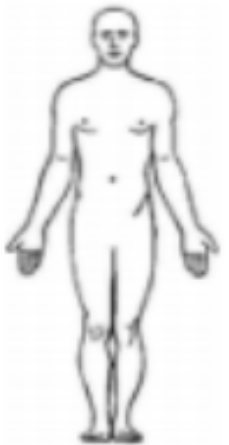
Treated, Transported by: _____

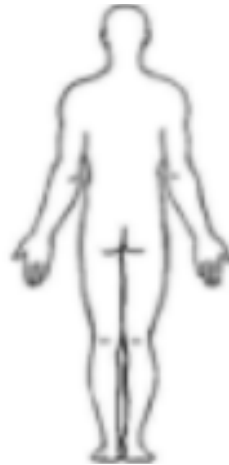
Chief Complaint: _____

Medications: _____

Past Medical History: _____

Allergies: _____

Time of Initial Assessment:			GCS Total:			Mark Injuries on Pt **You do not need to do for this practice PCR** 
Glasgow Coma Scale (circle pertinent fields)			Motor Response			
Eye Opening		Verbal Response	Follows Commands 6			
Spontaneous 4	Oriented 5	Purposeful 5				
On Command 3	Confused 4	Withdraw 4				
Painful Stimuli 2	Inappropriate 3	Extension 3				
None 1	Incomprehensible 2	Flexion 2				
	None 1	None 1				
Vital Signs						
Time	B/P	Pulse	Resps	SPO2	BSL/Pain	

<table style="width: 100%;"> <tr> <td style="text-align: center;">L</td> <td style="text-align: center;"><u>Pupils</u></td> <td style="text-align: center;">R</td> </tr> <tr> <td style="text-align: center;">☐</td> <td style="text-align: center;">Normal</td> <td style="text-align: center;">☐</td> </tr> <tr> <td style="text-align: center;">☐</td> <td style="text-align: center;">Constricted</td> <td style="text-align: center;">☐</td> </tr> <tr> <td style="text-align: center;">☐</td> <td style="text-align: center;">Dilated</td> <td style="text-align: center;">☐</td> </tr> <tr> <td style="text-align: center;">☐</td> <td style="text-align: center;">Reactive</td> <td style="text-align: center;">☐</td> </tr> <tr> <td style="text-align: center;">☐</td> <td style="text-align: center;">Non-React</td> <td style="text-align: center;">☐</td> </tr> <tr> <td style="text-align: center;">_____ mm</td> <td style="text-align: center;">Size</td> <td style="text-align: center;">_____ mm</td> </tr> </table>	L	<u>Pupils</u>	R	☐	Normal	☐	☐	Constricted	☐	☐	Dilated	☐	☐	Reactive	☐	☐	Non-React	☐	_____ mm	Size	_____ mm	<table style="width: 100%;"> <tr> <td style="text-align: center;">L</td> <td style="text-align: center;"><u>Lungs</u></td> <td style="text-align: center;">R</td> </tr> <tr> <td style="text-align: center;">☐</td> <td style="text-align: center;">Clear</td> <td style="text-align: center;">☐</td> </tr> <tr> <td style="text-align: center;">☐</td> <td style="text-align: center;">Wheezes</td> <td style="text-align: center;">☐</td> </tr> <tr> <td style="text-align: center;">☐</td> <td style="text-align: center;">Rales</td> <td style="text-align: center;">☐</td> </tr> <tr> <td style="text-align: center;">☐</td> <td style="text-align: center;">Rhonchi</td> <td style="text-align: center;">☐</td> </tr> <tr> <td style="text-align: center;">☐</td> <td style="text-align: center;">Diminished</td> <td style="text-align: center;">☐</td> </tr> <tr> <td style="text-align: center;">☐</td> <td style="text-align: center;">Absent</td> <td style="text-align: center;">☐</td> </tr> </table>	L	<u>Lungs</u>	R	☐	Clear	☐	☐	Wheezes	☐	☐	Rales	☐	☐	Rhonchi	☐	☐	Diminished	☐	☐	Absent	☐	
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<u>Activity Log</u>					
<u>Time</u>	<u>Procedure</u>	<u>Attempts</u>	<u>Successful</u>	<u>Dose/Size</u>	<u>Details</u>
			Y N		
			Y N		
			Y N		

PLEASE TYPE PCR NARRATIVE ON THE NEXT PAGE

- THE SCENARIO FOR THIS WILL BE SHOWN DURING THE TRAINING. SUPPLEMENTAL NOTES WILL BE PROVIDED IF NEEDED.

- PLEASE MAKE A COPY + RENAME THIS DOCUMENT “(INSERT LAST NAME HERE) Documentation Practice PCR/Narrative”

- WHEN DONE WITH BOTH THE PCR AND NARRATIVE, PLEASE SELECT THE SHARE BUTTON IN THE TOP RIGHT

- MAKE SURE THAT UNDER “GENERAL ACCESS,” THE OPTION IS SET TO “ANYONE WITH THE LINK” IS A “COMMENTER”

ONCE COMPLETE:

PLEASE CLICK ME TO BE REDIRECTED TO THE DOCUMENTATION PRACTICE PCR SUBMISSION PAGE

OR

HEAD TO THE COMPETENCY SECTION OF THE UMEMS WEBSITE AND SELECT THE LINK FOR “SUBMIT THE COMPLETED PRACTICE PCR/NARRATIVE HERE” ALL THE WAY AT THE BOTTOM

Narrative: