SCENARIO #1 - "The Goon" OMFRC 2020 ZONE

AMFR/PRO

CYCLE	TFAM	

NO	POINTS	NOT DONE	SCENE/PRIMARY SURV	EY	
A 1	10	0	Did the team TAKE CHARGE of the situation? (remained calm themselves?)		
A 2	10	0	Did the team wear protective GLOVES?		
A 3	10	0	Did the team ASSESS for HAZARDS?	ce Surface, Ensure Game has stopped	
A 4	10	0	Did the team CALL OUT for HELP?	Trainer Available	
A 5	20	0	$\label{thm:condition} \mbox{Did the team ASK for SITUATION HISTORY from Trainer on site?}$		
A 6	10	0	Did the team DETERMINE the MECHANISM OF INJURY?	Knocked to ground, high speed into boards	
A 7	10	0	Did the team DETERMINE the NUMBER OF CASUALTIES?	2	
A 8	10	0	Did the team ID SELF and OBTAIN CONSENT?	Implied	
A 9	10	0	Did the team WARN THE CASUALTY NOT TO MOVE?		
A 10	20	0	Did the team IMMEDIATELY CONTROL C-SPINE to prevent move	ment?	
A 11	10	0	Did the team ASSESS LEVEL OF CONSCIOUSNESS?	Unconscious, Moans when touched in face	
A 12	10	0	Did the team ASSESS AIRWAY?	Unable to Assess in Position found	
A 13	20	0	Did the team RECOGNIZE unable to PROPERLY ASSESS AIRWAY i	n the position found?	
A 14	20	0	Did the team LOG ROLL the patient as a SINGLE UNIT while PROT	TECTING C-SPINE CONTROL properly?	
A 15	20	0	Did the team LOG ROLL the patient DIRECTLY onto a BACKBOARI	O (avoid future movement & off cold ice)?	
A 16	20	0	Did the team RE-ASSESS AIRWAY?	Blood in the mouth/Spit	
A 17	20	0	Did the team PROVIDE SUCTION to clear airway APPROPRIATELY	? No more than 15 seconds	
A 18	10	0	Did the team ASSESS BREATHING? (in supine position)	10 Shallow &Irregular	
A 19	10	0	Did the team APPLY OYXGEN APPROPRIATELY?	NRB @ 12-15 LPM	
A 20	10	0	Did the team ASSESS PULSE? (Circulation)	124 Bounding & Regular	
A 21	10	0	Did the team ASSESS SKIN CONDITION? (Circulation)	Flushed & Sweaty	
A 22	10	0	Did the team PERFORM A RAPID BODY SURVEY?	No findings	
A 23	10	0	Did the team IMMEDIATELY COVER with a BLANKET for shock ar	nd warmth?	
A 24	10	0	Did the team ensure ACTIVATION of EMS/AMBULANCE?		
	310		Total of SCENE/PRIMARY SURVEY (Page 1)		

JUDGE'S NOTES

This section is active for the first 3 minutes of the scenario only!

During these first 3 minutes, the competitor may perform the actions that are both listed here and in the Secondary Survey. After the 3 minutes, the competitor is eligible to receive marks only in the Secondary Survey and no marks may be awarded in this Primary

JUDGES DO NOT TALLY MARKS FROM YOUR OWN SHEETS!

Judges MUST circle EITHER the POINT VALUE OR "0" on EACH LINE!

Score Sheet for Patient #1 - "Player"

SECONDARY SURVEY

Actions in this section may be performed by the competitors at ANY point in the scenario. After the 3 first minutes, this section and beyond are the only areas that points shall be awarded

NO	POINTS	NOT DON	E STORY OF THE PATIENT - If the team does not ask Trainer fo	r Medical Record = "Unknown"& ZERO POIN
A 25	10	0	Did the team determine SYMPTOMS?	ad/Mouth Trauma, Seizure, Unequal Pupils
A 26	10	0	Did the team ask <u>Trainer</u> about ALLERGIES?	None
A 27	* 10 *	0	Did the team ask $\underline{Trainer}$ about MEDICATIONS?	Lantus 10 IU (am), Toronto 18 IU (pm), Ventolin MDI (prn), Flovent MDI (daily)
A 28	* 10 *	0	Did the team ask <u>Trainer</u> about MEDICAL HISTORY?	Diabetic, Asthma
A 29	10	0	Did the team ask <u>Trainer</u> about LAST ORAL INTAKE?	Unknown
A 30	10	0	Did the team determine INCIDENT HISTORY?	Pushed into ground, head first into boards
A 31	10	0	Did the team SEEK OUT a MEDICAL ALERT DEVICE?	None
A 32	* 20 *	0	Did the team ask Trainer for a PLAYER MEDICAL RECORD?	> Give to Team ONLY if asked!
			FIRST SET OF VITALS	
A 33	10	0	Did the team check LEVEL OF CONSCIOUSNESS?	Unconscious
A 34	10	0	Did the team check RESPIRATIONS?	10 Shallow & Irregular
A 35	10	0	Did the team check PULSE?	124 Bounding & Regular
A 36	10	0	Did the team check BLOOD PRESSURE	134/88
A 37	10	0	Did the team check SKIN CONDITION/TEMP?	Flushed, Sweaty
A 38	10	0	Did the team check PUPILS?	Right=3, Left=5 & Non-reactive
			HEAD TO TOE EXAMINATION	
A 39	10	0	Check SCALP/HEAD?	No Findings
A 40	10	0	Check both EYES?	No Findings
A 41	10	0	Check NOSE?	No Findings
A 42	10	0	Check CHEEKBONES?	No Findings
A 43	10	0	Check MOUTH?	nd & Spit in mouth; <u>I F NOT</u> already suctioned AND Cut Lip (No Active Bleeding)
A 44	10	0	Check JAW?	No Findings
A 45	10	0	Check both EARS?	No Findings
A 46	10	0	Check NECK?	No Findings
A 47	10	0	Check both COLLARBONES?	No Findings
A 48	10	0	Check both SHOULDERS?	No Findings
A 49	10	0	Check RIGHT UPPER ARM?	No Findings
A 50	10	0	Check RIGHT LOWER ARM?	No Findings
A 51	10	0	Check RIGHT HAND and FINGERS?	No Findings
A 52	10	0	Check LEFT UPPER ARM?	No Findings
A 53	10	0	Check LEFT LOWER ARM?	No Findings
A 54	10	0	Check LEFT HAND and FINGERS?	No Findings
A 55	10	0	Check CHEST?	No Findings
A 56	10	0	Check ABDOMEN?	No Findings
A 57	10	0	Check BACK?	No Findings
A 58	10	0	Check PELVIS?	No Findings
A 59	10	0	Check RIGHT UPPER LEG?	No Findings
A 60	10	0	Check RIGHT LOWER LEG?	No Findings
A 61	10	0	Check RIGHT ANKLE and FOOT?	No Findings
A 62	10	0	Check LEFT UPPER LEG?	No Findings
A 63	10	0	Check LEFT LOWER LEG?	No Findings
A 64	10	0	Check LEFT ANKLE and FOOT?	No Findings
	370		Total of SECONDARY SURVEY (Page 2)	

			AMFR ASSESSMENT / FIRST AID TREATMENT	
			s in this section may be performed by the competitor at any point in th	
NO	POINTS	NOT DON	•	·
A 65	30	0	Did the team IMMEDIATELY RECOGNIZE the full-body SEIZURE ACTIVITY	
A 66	20	0	Did the team ATTEMPT to COUNT the DURATION of the SEIZURE?	30 Seconds
A 67	20	0	Did the team PROTECT the patient DURING the SEIZURE?	
A 68	30	0	Did the team AVOID HOLDING the PATIENT DOWN DURING the SEIZU	
A 69	30	0	Did the team MAINTAIN C-SPINE CONTROL THROUGHOUT the SEIZUR	
A 70	20	0	Did the team RE-ASSESS AIRWAY IMMEDIATELY AFTER SEIZURE?	Open, No new blood/secretions
			CARE FOR SUSPECTED HEAD & NECK INJURY	
A 71	20	0	Did the team MAINTAIN C-SPINE CONTROL, Until Fully Immobilized or	
A 72	30	0	Did the team REMOVE HELMET WITHOUT MOVEMENT of the head/no	eck - Minimal Movement Ideal
A 73	10	0	Did the team MEASURE for C-COLLAR APPROPRIATELY?	
A 74	20	0	Did the team APPLY the C-COLLAR with LIMITED MOVEMENT?	
A 75	10	0	Did the team CENTER the paitent on the boardboard?	
A 76	40	0	Did the team PLACE PADDING UNDER HEAD? (Large space after hocke	ey helmet is removed vs. shoulder pac
A 77	40	0	Did the team IMMOBILIZE the patient on the backboard APPROPRIATI	ELY?
A 78	20	0	Did the team IMMOBILIZE the HEAD as the FINAL STEP in the immobil	lization process?
A 79	20	0	Did the team CONSTANTLY MONITOR of the PATIENTS AIRWAY?	
			ONGOING CARE/ CONTINUED VITAL SIGNS	
A 80	10	0	Did the team REASSURE the unconcisous patient?	
A 81	10	0	Did the team Re-check LEVEL OF CONSCIOUSNESS? (2nd Set)	Unconcsious
A 82	10	0	Did the team Re-check RESPIRATIONS? (2nd Set)	10 Shallow & Irregular
A 83	10	0	Did the team Re-check PULSE? (2nd Set)	124 Bounding & Regular
A 84	10	0	Did the team Re-check BLOOD PRESSURE? (2nd Set)	134/88
A 85	10	0	Did the team Re-check SKIN CONDITION/TEMP? (2nd Set)	Flushed & Sweaty
A 86	10	0	Did the team Re-check PUPILS? (2nd Set)	Right=3, Left=5 & Non-Reactive
A 87	10	0	Did the team Re-check LEVEL OF CONSCIOUSNESS? (3rd Set)	Unconcsious
A 88	10	0	Did the team Re-check RESPIRATIONS? (3rd Set)	12 Shallow & Irregular
A 89	10	0	Did the team Re-check PULSE? (3rd Set)	90 Strong & regular
A 90	10	0	Did the team Re-check BLOOD PRESSURE? (3rd Set)	146/92
A 91	10	0	Did the team Re-check SKIN CONDITION/TEMP? (3rd Set)	Flushed & Sweaty
A 92	10	0	Did the team Re-check PUPILS? (3rd Set)	Right=3, Left=5 & Non-Reactive
A 93	30	0	Were GLOVES EFFECTIVE THROUGHOUT? (Torn gloves MUST be repla	aced!)
	520		Total of AMFR ASSESSMENT / FIRST AID TREATMENT (Page 3)	

Score Sheet for Patient #1 - "Player"

			DOCUMENTATION	
			s in this section may be performed by the competitor at any point	
		NOT DON		ndered
A 94	* 20 *	0	Was <u>ALL</u> of the patients PERSONAL INFORMATION recorded?	Only available if asked for medical record
A 95	10	0	Was the INCIDENT TIME AND DATE recorded?	
A 96	10	0	Was the INCIDENT LOCATION recorded?	
A 97	10	0	Was the INCIDENT HISTORY (Accurately) recorded?	Pushed/ head first into Referee & boards
A 98	10	0	Was the INITIAL (SUPINE) POSITION of the patient recorded?	
A 99	10	0	Was the C-Spine Manual Control recorded?	
A 100	10	0	Was the LOG ROLL of the patient RECORDED?	
101	10	0	Was the INITIAL ASSESSMENT of the AIRWAY recorded?	Blood/ Secetion
A 102	20	0	Was the use of SUCTION DEVICE recorded WITH DURATION & TY	PE of DEVICE?
A 103	10	0	Was the APPLICATION OF OXYGEN recorded?	
A 104	10	0	Was the O2 Mask Type AND O2 Flow Rate recorded?	
A 105	10	0	Was the LACK of FINDINGS in the RAPID BODY SURVEY recorded?	
es Note: "	CNO" is I	NOT ACC	EPTABLE, Points can only be awared if team has accurate info	o from Trainers "Player Medical Reco
A 106	10	0	Was the patients ALLERGIES recorded?	None - If no Medical Record= 0 points!
A 107	* 10 *		Was the patients MEDICATIONS recorded?	Lantus 10 IU (am), Toronto 18 IU (pm),
		0	The fire patients in 2010, the fire reserved.	Ventolin MDI (prn), Flovent MDI (daily
A 108	* 10 *	0	Was the patients MEDICAL HISTORY recorded?	Diabetic & Asthma
A 109	10	0	Was the LACK of MEDICAL ALERT DEVICE recorded?	
A 110	10	0	Was the LAST ORAL INTAKE recorded?	Unknown
Judge	s Note: V	/ital Signs	MUST be the CORRECTED #s & HAVE the TIME reco	orded, to be awarded points !!!
A 112	5	0	Was 1st set of vital signs - LEVEL OF CONSCIOUSNESS recorded?	Unconscious
A 113	5	0	Was 1st set of vital signs - RESPIRATIONS recorded?	10 Shallow & Irregular
A 114	5	0	Was 1st set of vital signs - PULSE recorded?	124 Bounding & Regular
A 115	5	0	Was 1st set of vital signs - BLOOD PRESSURE recorded?	134/88
A 116	5	0	Was 1st set of vital signs - SKIN CONDITION recorded?	Flushed, Sweaty
A 117	5	0	Was 1st set of vital signs - PUPILS recorded?	Right=3, Left=5 & Non-reactive
A 118	5	0	Was 2nd set of vital signs - LEVEL OF CONSCIOUSNESS recorded?	Unconcsious
A 119	5	0	Was 2nd set of vital signs - RESPIRATIONS recorded?	10 Shallow & Irregular
A 120	5	0	Was 2nd set of vital signs - PULSE recorded?	124 Bounding & Regular
A 121	5	0	Was 2nd set of vital signs - BLOOD PRESSURE recorded?	134/88
A 122	5	0	Was 2nd set of vital signs - SKIN CONDITION recorded?	Flushed & Sweaty
A 123	5	0	Was 2nd set of vital signs - PUPILS recorded?	Right=3, Left=5 & Non-Reactive
A 124	5	0	Was 3rd set of vital signs - LEVEL OF CONSCIOUSNESS recorded?	Unconcsious
A 125	5	0	Was 3rd set of vital signs - RESPIRATIONS recorded?	12 Shallow & Irregular
A 126	5	0	Was 3rd set of vital signs - PULSE recorded?	90 Strong & regular
A 127	5	0	Was 3rd set of vital signs - BLOOD PRESSURE recorded?	146/92
A 128	5	0	Was 3rd set of vital signs - SKIN CONDITION recorded?	Flushed & Sweaty
A 129	5	0	Was 3rd set of vital signs - PUPILS recorded?	Right=3, Left=5 & Non-Reactive
			Continued Assessment & Treatment Rendered	
A 130	10	0	Was the ONSET of SEIZURE ACTIVITY NOTED with START TIME red	corded?
A 131	10	0	Was the DURATION of SEIZURE ACTIVITY recorded?	30 Seconds
A 132	10	0	Was the PROTECTION of the patient DURING SEZIURE recorded?	
A 133	10	0	Was the MAINTENANCE OF C-SPINE CONTROL recorded?	
A 134	10	0	Was the C-COLLAR SIZE recorded?	
A 135	10	0	Was the APPLICATION OF C-COLLAR recorded?	
A 136	10	0	Was the IMMOBILIZATION on the backboard recorded?	
A 137	10	0	Was the Application of a BLANKET recorded?	
A 138	10	0	Was the Notification of EMS with TIME recorded?	
A 139	10	0	Was the Name(s) of the first aid team LEGIBLY recorded?	
	340		Total of DOCUMENTATION. (Page 4)	

SCENARIO # 1 - "The Goon" OMFRC 2020 ZONE

AMFR/PRO

CYCLE	TFAM	

NO	POINTS	NOT DONE	SCENE/PRIMARY SURVEY		
A 140	10	0	Did the team TAKE CHARGE of the situation? (remained calm themselves?)		
A 141	10	0	Did the team wear protective GLOVES?		
A 142	10	0	Did the team ASSESS for HAZARDS? ce Surface	e, Ensure Game has stopped	
A 143	20	0	Did the team CALL OUT FOR HELP from Bystanders?		
A 144	10	0	Did the team ASK for SITUATION HISTORY from Conscious Patient?		
A 145	10	0	Did the team Determine the MECHANISM OF INJURY?		
A 146	10	0	Did the team DETERMINE the NUMBER OF CASUALTIES?	2	
A 147	10	0	Did the team ID SELF and OBTAIN CONSENT?	Given	
A 148	10	0	Did the team WARN THE CASUALTY NOT TO MOVE?		
A 149	20	0	id the team IMMEDIATELY CONTROL C-SPINE to prevent movement?		
A 150	20	0	Did the team IMMEDIATELY CONTROL LEFT LEG to prevent movement while	id the team IMMEDIATELY CONTROL LEFT LEG to prevent movement while removing patient #1?	
A 151	10	0	Did the team ASSESS LEVEL OF CONSCIOUSNESS?	Conscious	
A 152	10	0	Did the team ASSESS AIRWAY?	Open	
A 153	10	0	Did the team ASSESS BREATHING?	30 Shallow &Regular	
A 154	10	0	Did the team ASSESS PULSE? (Circulation)	134 Bounding	
A 155	10	0	Did the team ASSESS SKIN CONDITION (Circulation)	Flushed & Sweaty	
A 156	10	0	Did the team PERFORM A RAPID BODY SURVEY?	Open Fx LEFT lower leg	
A 157	10	0	Did the team IMMEDIATELY COVER WITH A BLANKET for shock and warmth	?	
A 158	10	0	Did the team ACTIVATE EMS/AMBULANCE?		
A 159	30	0	Did the team CONTACT the ICE RINK ATTENDANT (Workplace Supervisor)?		
	250		Total of SCENE / PRIMARY SURVEY (Page 5)		

JUDGE'S NOTES

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JUDGES DO NOT TALLY MARKS FROM YOUR OWN SHEETS!

Judges MUST circle EITHER the POINT VALUE OR "0" on EACH LINE!

Score Sheet for Patient #2 - "Referee"

SECONDARY SURVEY

Actions in this section may be performed by the competitors at ANY point in the scenario. After the 3 first minutes, this section and beyond are the only areas that points shall be awarded

	HISTORY OF THE PATIENT			NO
pen Fx with Bone LEFT lower Leg, PAIN ++	Did the team ask about SYMPTOMS	0	10	A 160
None	Did the team ask about ALLERGIES?	0	10	A 161
None	Did the team ask about MEDICATIONS?	0	10	A 162
Previously Healthy	Did the team ask about MEDICAL HISTORY?	0	10	A 163
meal 2 hr ago, energy drink before game	Did the team ask about LAST ORAL INTAKE?	0	10	A 164
Player slid into leg leg, heard/felt snap	Did the team determine INCIDENT HISTORY?	0	10	A 165
	FIRST SET OF VITALS			
Conscious (No LOC post Incident)	Did the team check LEVEL OF CONSCIOUSNESS?	0	10	A 166
30 Shallow & Regular	Did the team check RESPIRATIONS?	0	10	A 167
134 Bounding	Did the team check PULSE?	0	10	A 168
144/90	Did the team check BLOOD PRESSURE	0	10	A 169
Flushed & Sweaty	Did the team check SKIN CONDITION/TEMP?	0	10	A 170
Reactive @ 4mm	Did the team check PUPILS?	0	10	A 171
	OPQRST - PAIN ASSESSMENT			
Struck by player	Did the team attempt to determine ONSET?	0	10	A 172
Movement Increases pain	Did the team attempt to determine PROVOCATION (makes worse	0	10	A 173
"Throbbing"	Did the team attempt to determine QUALITY?	0	10	A 174
Nothing relieves	Did the team attempt to determine RELIEF?	0	10	A 175
Left Lower Leg only.	Did the team determine REGION?	0	10	A 176
No Radiation	Did the team attempt to determine RADIATION?	0	10	A 177
8 out of 10	Did the team attempt to determine SEVERITY?	0	10	A 178
Just before team arrived	Did the team attempt to determine TIME?	0	10	A 179
·	HEAD TO TOE EXAMINATION			
No Findings	Check SCALP/HEAD?	0	10	A 180
No Findings	Check both EYES?	0	10	A 181
No Findings	Check NOSE?	0	10	A 182
No Findings	Check CHEEKBONES?	0	10	A 183
No Findings	Check MOUTH?	0	10	A 184
No Findings	Check JAW?	0	10	A 185
No Findings	Check both EARS?	0	10	A 186
No Findings	Check NECK?	0	10	A 187
No Findings	Check both COLLARBONES?	0	10	A 188
No Findings	Check both SHOULDERS?	0	10	A 189
No Findings	Check RIGHT UPPER ARM?	0	10	A 190
No Findings	Check RIGHT LOWER ARM?	0	10	A 191
No Findings	Check RIGHT HAND and FINGERS?	0	10	A 192
No Findings	Check LEFT UPPER ARM?	0	10	A 193
No Findings	Check LEFT LOWER ARM?	0	10	A 194
No Findings	Check LEFT HAND and FINGERS?	0	10	A 195
No Findings	Check CHEST?	0	10	A 196
No Findings	Check ABDOMEN?	0	10	A 197
No Findings	Check BACK?	0	10	A 198
No Findings	Check PELVIS?	0	10	A 199
No Findings	Check RIGHT UPPER LEG?	0	10	A 200
No Findings	Check RIGHT LOWER LEG?	0	10	A 201
No Findings - Good Distal Circulation	Check RIGHT ANKLE and FOOT?	0	10	A 202
No Findings	Check LEFT UPPER LEG?	0	10	A 203
nalll Bone from 2" Wound, trickle of blood	Check LEFT LOWER LEG?	0	10	A 204
No Findings - Good Distal Circulation	Check LEFT ANKLE and FOOT?	0	10	A 205
	Total of SECONDARY SURVEY (Page 6)		460	

Score Sheet for Patient #2 - "Referee"

			AMFR ASSESSMENT / FIRST AID TREATMENT			
		Actions	in this section may be performed by the competitor at any point in the scenario.			
NO	POINTS	NOT DON	E CARE for SUSPECTED HEAD AND SPINAL INJURY			
A 206	20	0	Did the team MAINTAIN C-SPINE CONTROL, Until Fully Immobilized on backboard	1?		
A 207	30	0	Did the team REMOVE HELMET WITHOUT MOVEMENT of the head/neck - Minimal Movement Ideal			
A 208	10	0	Did the team MEASURE for C-COLLAR APPROPRIATELY?			
A 209	20	0	Did the team APPLY the C-COLLAR with LIMITED MOVEMENT?			
A 210	20	0	Did the team LOG ROLL the patient onto a BACKBOARD as a single unit?			
A 211	10	0	Did the team CENTER the paitent on the boardboard?			
A 212	40	0	Did the team IMMOBILIZE the patient on the backboard APPROPRIATELY?			
A 213	20	0	Did the team IMMOBILIZE the HEAD as the FINAL STEP in the immobilization produced in the immo	cess?		
A 214	20	0	Did the team CONSTANTLY MONITOR of the PATIENT POST BACKBOARD IMMOB	ILIZATION?		
			Care for LEFT LOWER LEG- Open Fracture			
A 215	10	0	Did the team PLACE a TENTED DRESSING over protruding bone end?	_		
A 216	20	0	Did the team PLACE PADDING (Log Cabin) on either side for protection?			
A 217	20	0	Did the team SECURE the PADDING (Log Cabin) in Place?			
A 218	10	0	Did the team CHECK CIRCULATION BEFORE BANDAGING			
A 219	20	0	Did the team IMMOBILZE the LEFT LEG with 2 SPLINTS (or OTHER LEG with Padding between)?			
A 220	30	0	Did the team SECURE SPINT/LEG using 5 WIDE BANDAGES? r Standard First Aid Manual Standards			
A 221	10	0	Did the team RE-CHECK CIRCULATION AFTER BANDAGING			
A 222	20	0	Did the team AVOID USING ICE (Open Fracture is a contra-indication for ice)?			
			ONGOING CARE/ CONTINUED VITAL SIGNS			
A 223	10	0	Did the team REASSURE the patient about their OWN CARE?			
A 224	10	0	Did the team Re-check LEVEL OF CONSCIOUSNESS? (2nd Set)	Conscious		
A 225	10	0	Did the team Re-check RESPIRATIONS? (2nd Set)	24 Shallow & Regular		
A 226	10	0	Did the team Re-check PULSE? (2nd Set)	124 Bounding		
A 227	10	0	Did the team Re-check BLOOD PRESSURE? (2nd Set)	146/84		
A 228	10	0	Did the team Re-check SKIN CONDITION/TEMP? (2nd Set)	Flushed & Sweaty		
A 229	10	0	Did the team Re-check PUPILS? (2nd Set)	Reactive @ 4mm		
A 230	10	0	Did the team Re-check LEVEL OF CONSCIOUSNESS? (3rd Set)	Consciouis		
A 231	10	0	Did the team Re-check RESPIRATIONS? (3rd Set)	22 Shallow & Regular		
A 232	10	0	Did the team Re-check PULSE? (3rd Set) 110 Bounding			
A 233	10	0	Did the team Re-check BLOOD PRESSURE? (3rd Set)			
A 234	10	0	Did the team Re-check SKIN CONDITION/TEMP? (3rd Set) Slightly Pale			
A 235	10	0	Did the team Re-check PUPILS? (3rd Set) Reactive @ 4mm			
A 236	30	0	Did the team Re-Assess the Patients PAIN SCALE after treatment?	, ,		
A 237	30	0	Were GLOVES EFFECTIVE THROUGHOUT? (Torn gloves MUST be replaced!)			
	520		Total of AMFR ASSESSMENT / FIRST AID TREATMENT (Page 7)			

Score Sheet for Patient #2 - "Referee"

		Actions	RECORDING in this section may be performed by the competitor at any point i	in the scenario.
NO PO	INTS	NOT DON		
A 238	20	0	Was ALL of the patients PERSONAL INFORMATION recorded?	
A 239	10	0	Was the INCIDENT TIME AND DATE recorded?	
A 240	10	0	Was the INCIDENT LOCATION recorded?	
A 241	10	0	Was the INCIDENT HISTORY (Accurately) recorded?	uck in Left Leg by fallen player at fast speed
A 242	10	0	Was the patients ALLERGIES recorded?	None
A 243	10	0	Was the patients MEDICATIONS recorded?	None
A 244	10	0	Was the patients MEDICAL HISTORY recorded?	Previously Healthy
A 245	10	0	Was the LAST ORAL INTAKE recorded?	Ate 2 hr ago & Energy drink before game
A 246	10	0	Was the Suspcted Head & Spinal Injury recorded?	
A 247	10	0	Was the C-Spine Manual Control recorded?	
A 248	10	0	Was the suspected OPEN FRACTURE of the LEFT LOWER LEG reco	orded?
A 249	10	0	Was the LEFT LEG Manual Control recorded?	
A 250	10	0	Was the ONSET recorded?	Struck by playe
A 251	10	0	Was the PROVOCATION recorded?	Movement Increases
A 252	10	0	Was the QUALITY recorded?	"Throbbing
A 253	10	0	Was the RELIEF recorded?	No Relie
A 254	10	0	Was the REGION recorded?	Left Lower Leg
A 255	10	0	Was the RADIATION recorded?	No Radiation
A 256	10	0	Was the SEVERITY recorded?	8 out of 10
A 257	10	0	Was the TIME recorded?	Just before team Arrival.
Ju	dges No	te: Vital S	igns MUST be the CORRECTED #s & HAVE the TIME recorde	•
A 258	5	0	Was 1st set of vital signs - LEVEL OF CONSCIOUSNESS recorded?	Conscious (No LOC post Incident)
A 259	5	0	Was 1st set of vital signs - RESPIRATIONS recorded?	30 Shallow & Regula
A 260	5	0	Was 1st set of vital signs - PULSE recorded?	134 Bounding
261	5	0	Was 1st set of vital signs - BLOOD PRESSURE recorded?	144/90
A 262	5	0	Was 1st set of vital signs - SKIN CONDITION recorded?	Flushed & Sweat
1 263	5	0	Was 1st set of vital signs - PUPILS recorded?	Reactive @ 4mm
264	5	0	Was 2nd set of vital signs - LEVEL OF CONSCIOUSNESS recorded?	
A 265	5	0	Was 2nd set of vital signs - RESPIRATIONS recorded?	24 Shallow & Regula
A 266	5	0	Was 2nd set of vital signs - PULSE recorded?	124 Bounding
A 267	5	0	Was 2nd set of vital signs - BLOOD PRESSURE recorded?	146/84
A 268	5	0	Was 2nd set of vital signs - SKIN CONDITION recorded?	Flushed & Sweat
A 269	5	0	Was 2nd set of vital signs - PUPILS recorded?	Reactive @ 4mn
A 270	5	0	Was 3rd set of vital signs - LEVEL OF CONSCIOUSNESS recorded?	
A 271	5	0	Was 3rd set of vital signs - RESPIRATIONS recorded?	22 Shallow & Regula
A 272	5	0	Was 3rd set of vital signs - PULSE recorded?	110 Bounding
A 273 A 274	5 5	0	Was 3rd set of vital signs - BLOOD PRESSURE recorded?	134/ 90 Slightly Pal
A 275			Was 3rd set of vital signs - SKIN CONDITION recorded? Was 3rd set of vital signs - PUPILS recorded?	,
4 2/3	5	0		Reactive @ 4mn
A 276	10	_	Continued Assessment & Treatment Rendered Was the PRE-BANDAGING CIRCULATION of the Open Fracture Le	oft Log recorded?
276	10	0	Was the DRESSING/ WOUND CARE of the Open Fracture Left Leg	<u> </u>
A 277 A 278	10	0	Was the SPLINTS/ # of BANDAGES recorded?	g recorded:
A 279	10 10	0	Was the POST BANDAGING CIRCULATION of the Open Fracture L	eft Leg recorded?
A 280	10	0	Was the MAINTENANCE OF C-SPINE CONTROL recorded?	Let Leg recorded:
A 281	10	0	Was the C-COLLAR SIZE recorded?	
A 282	10	0	Was the APPLICATION OF C-COLLAR recorded?	
A 283	10	0	Was the LOG ROLL of the patient onto a BACKBOARD recorded?	
A 284	10	0	Was the IMMOBILIZATION on the backboard recorded?	
A 285	10	0	Was the Application of a BLANKET recorded?	
A 286	10	0	Was the ACTIVATION of EMS WITH TIME recorded?	
A 287	10	0	Was the CONTACT of FACILITY SUPERVISOR recorded?	
A 288	10	0	Was the Name(s) of the first aid team LEGIBLY recorded?	
		v	tras are marriers, or the mist are team trainer recondent	

SCENARIO # 1 - "The Goon" OMFRC 2020 ZONE

AMFR/PRO

	SCENARIO #1	- POINTS TOTAL	S
SCENARIO ASSESSMENT (Page #)	PATIENT #1	PATIENT #2	ASSESSMENT TOTALS:
SCENE & PRIMARY SURVEY (Page 1 & 5	0	0	0
SECONDARY SURVEY (Page 2 & 6)	0	0	0
ASSESSMENT/ CARE (Page 3 & 7)	0	0	0
DOCUMENTATION (Page 4 & 8)	0	0	0
PATIENT TOTALS:	0	0	SCENARIO TOTAL:
			0
			Out of Possible:
TEAM NAME/ TEAM#:			3200