

CYCLE _____

TEAM _____

NO	POINTS	NOT DONE	SCENE/PRIMARY SURVEY
Y 250	10	0	Did the team TAKE CHARGE of the situation? (remained calm themselves?)
Y 251	10	0	Did the team wear protective GLOVES?
Y 252	10	0	Did the team ASSESS for HAZARDS? <i>ting has stopped, Bloody spit on floor</i>
Y 253	20	0	Did the team IMMEDIATELY CALL FOR SECURITY assistance?
Y 254	10	0	Did the team CALL OUT for HELP? <i>Other players in the bar</i>
Y 255	20	0	Did the team ASK for SITUATION HISTORY from Conscious Casualty?
Y 256	10	0	Did the team DETERMINE the MECHANISM OF INJURY? <i>Punched in Face</i>
Y 257	10	0	Did the team DETERMINE the NUMBER OF CASUALTIES? <i>2</i>
Y 258	10	0	Did the team ID SELF and OBTAIN CONSENT? <i>Given</i>
Y 259	10	0	Did the team WARN THE CASUALTY NOT TO MOVE?
Y 260	20	0	Did the team RULE OUT C-SPINE INJURY?
Y 261	10	0	Did the team ASSESS LEVEL OF CONSCIOUSNESS? <i>Conscious</i>
Y 262	10	0	Did the team ASSESS AIRWAY? <i>Open</i>
Y 263	10	0	Did the team ASSESS BREATHING? (in supine position) <i>22 Shallow & Regular</i>
Y 264	10	0	Did the team ASSESS SKIN CONDITION? (Circulation) <i>Pink, Warm & Dry</i>
Y 265	10	0	Did the team PERFORM A RAPID BODY SURVEY? <i>sing of the RIGHT eye, cheek and spit blood</i>
Y 266	10	0	Did the team ensure ACTIVATION of EMS/AMBULANCE?
Y 267	20	0	Did the team ensure ACTIVATION of POLICE (bar fight)?
	210		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 - " JETS 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 DONE	HISTORY OF THE PATIENT - SAMPLE
Y 268	10	0	Did the team determine SYMPTOMS? <i>Pain in Right Cheek & Jaw, > with MVT</i>
Y 269	10	0	Did the team ask about ALLERGIES? <i>Environmental</i>
Y 270	10	0	Did the team ask about MEDICATIONS? <i>Coversyl</i>
Y 271	10	0	Did the team ask about MEDICAL HISTORY? <i>High Blood Pressure</i>
Y 272	10	0	Did the team ask about LAST ORAL INTAKE? <i>A beer & Snack when fight occurred</i>
Y 273	10	0	Did the team determine INCIDENT HISTORY? <i>Punched in the RIGHT face</i>
FIRST SET OF VITALS			
Y 274	10	0	Did the team check LEVEL OF CONSCIOUSNESS? <i>Conscious</i>
Y 275	10	0	Did the team check RESPIRATIONS? <i>22 Shallow & Regular</i>
Y 276	10	0	Did the team check PULSE? <i>84 Strong & Regular</i>
Y 277	10	0	Did the team check SKIN CONDITION/TEMP? <i>Pink, Warm & Dry</i>
Y 278	10	0	Did the team check PUPILS? <i>Equal & Reactive @ 4mm</i>
HEAD TO TOE EXAMINATION			
Y 279	10	0	Check SCALP/HEAD? <i>No Findings</i>
Y 280	10	0	Check both EYES? <i>Left Eye = Bruise, blood shot & blurred vision</i>
Y 281	10	0	Check NOSE? <i>No Findings</i>
Y 282	10	0	Check CHEEBONES? <i>Right Cheek red, pain on palp</i>
Y 283	10	0	Check MOUTH? <i>Spit blood on team arrival</i>
Y 284	10	0	Check JAW? <i>Right jaw red, pain with movement</i>
Y 285	10	0	Check both EARS? <i>No Findings</i>
Y 286	10	0	Check NECK? <i>No Findings</i>
Y 287	10	0	Check both COLLARBONES? <i>No Findings</i>
Y 288	10	0	Check both SHOULDERS? <i>No Findings</i>
Y 289	10	0	Check RIGHT UPPER ARM? <i>No Findings</i>
Y 290	10	0	Check RIGHT LOWER ARM? <i>No Findings</i>
Y 291	10	0	Check RIGHT HAND and FINGERS? <i>No Findings - Good Distal Circulation</i>
Y 292	10	0	Check LEFT UPPER ARM? <i>No Findings</i>
Y 293	10	0	Check LEFT LOWER ARM? <i>No Findings</i>
Y 294	10	0	Check LEFT HAND and FINGERS? <i>No Findings - Good Distal Circulation</i>
Y 295	10	0	Check CHEST? <i>No Findings</i>
Y 296	10	0	Check ABDOMEN? <i>No Findings</i>
Y 297	10	0	Check BACK? <i>No Findings</i>
Y 298	10	0	Check PELVIS? <i>No Findings</i>
Y 299	10	0	Check RIGHT UPPER LEG? <i>No Findings</i>
Y 300	10	0	Check RIGHT LOWER LEG? <i>No Findings</i>
Y 301	10	0	Check RIGHT ANKLE and FOOT? <i>No Findings - Good Distal Circulation</i>
Y 302	10	0	Check LEFT UPPER LEG? <i>No Findings</i>
Y 303	10	0	Check LEFT LOWER LEG? <i>No Findings</i>
Y 304	10	0	Check LEFT ANKLE and FOOT? <i>No Findings - Good Distal Circulation</i>
370			Total of SECONDARY SURVEY (Page 6)

Score Sheet for Patient #1 - " JETS Player"

ASSESSMENT / FIRST AID TREATMENT			
Actions in this section may be performed by the competitor at any point in the scenario.			
NO	POINTS	NOT DONE	Care for Possible RIGHT Orbital Fracture
Y 305	30	0	Did the team ATTEMPT a VISUAL TEST? Blurred Vision in the Right eye only
Y 306	20	0	Did the team PROVIDE ICE PACK (with Cover) 15 minutes on, 15 minutes off
Care for Possible RIGHT Cheekbone and Jaw Fracture			
Y 307	20	0	Did the team PROVIDE ICE PACK (with Cover) 15 minutes on, 15 minutes off
Y 308	30	0	Did the team ADVISE the patient to LIMIT JAW MOVEMENT/ Limit talking?
Care for KNOCKED OUT TEETH (2)			
Y 309	20	0	Did the team ENCOURAGE the patient to SPIT out BLOOD as necessary?
Y 310	30	0	Did the team PROVIDE A CONTAINER for the patient to SPIT INTO?
Y 311	10	0	Did the team PROVIDE small GAUZE for patient to BITE DOWN ON (collect blood from socket)
Y 312	10	0	Did the team COLLECT the 2 KNOCKED OUT TEETH and avoid touching ROOT?
Y 313	20	0	Did the team PLACE the 2 TEETH into either A) a cup of milk , B) a cup of Saline or C) a cup of the patients s
ONGOING CARE/ CONTINUED VITAL SIGNS			
Y 314	10	0	Did the team REASSURE the patient?
Y 315	10	0	Did the team Re-check LEVEL OF CONSCIOUSNESS? (2nd Set) Conscious
Y 316	10	0	Did the team Re-check RESPIRATIONS? (2nd Set) 24 Shallow & Regular
Y 317	10	0	Did the team Re-check PULSE? (2nd Set) 78 Strong & Regular
Y 318	10	0	Did the team Re-check SKIN CONDITION/TEMP? (2nd Set) Pink, Warm & Dry
Y 319	10	0	Did the team Re-check PUPILS? (2nd Set) Equal & Reactive @ 4mm
Y 320	10	0	Did the team Re-check LEVEL OF CONSCIOUSNESS? (3rd Set) Conscious
Y 321	10	0	Did the team Re-check RESPIRATIONS? (3rd Set) 24 Shallow & Regular
Y 322	10	0	Did the team Re-check PULSE? (3rd Set) 80 Strong & Regular
Y 323	10	0	Did the team Re-check SKIN CONDITION/TEMP? (3rd Set) Pink, Warm & Dry
Y 324	10	0	Did the team Re-check PUPILS? (3rd Set) Equal & Reactive @ 4mm
Y 325	30	0	Were GLOVES EFFECTIVE THROUGHOUT? (Torn gloves MUST be replaced!)
	330		Total of AMFR ASSESSMENT / FIRST AID TREATMENT (Page 3)

Score Sheet for Patient #1 - " JETS Player"

DOCUMENTATION			
NO	POINTS	NOT DONE	Initial Assessment & Care Rendered
Y 326	10	0	Was <u>ALL</u> of the patients PERSONAL INFORMATION recorded?
Y 327	10	0	Was the INCIDENT TIME AND DATE recorded?
Y 328	10	0	Was the INCIDENT LOCATION recorded?
Y 329	10	0	Was the INCIDENT HISTORY (Accurately) recorded? <i>Punched in the face (as per this patient)</i>
Y 330	10	0	Was the INITIAL (SEATED on floor) POSITION of the patient recorded?
Y 331	10	0	Was the ASSESSMENT of the AIRWAY recorded? <i>Open, but the patient spit blood.</i>
Y 332	10	0	Was the FACIAL TRAUMA FINDINGS in the RAPID BODY SURVEY recorded?
Y 333	10	0	Was the patients ALLERGIES recorded? <i>Environmental</i>
Y 334	10	0	Was the patients MEDICATIONS recorded? <i>Coversyl</i>
Y 335	10	0	Was the patients MEDICAL HISTORY recorded? <i>High Blood Pressure</i>
Y 336	10	0	Was the LAST ORAL INTAKE recorded? <i>A beer & Snack when fight occurred</i>
Judges Note: Vital Signs <u>MUST</u> be the CORRECTED #s & HAVE the TIME recorded, to be awarded points !!!			
Y 337	5	0	Was 1st set of vital signs - LEVEL OF CONSCIOUSNESS recorded? <i>Conscious</i>
Y 338	5	0	Was 1st set of vital signs - RESPIRATIONS recorded? <i>22 Shallow & Regular</i>
Y 339	5	0	Was 1st set of vital signs - PULSE recorded? <i>84 Strong & Regular</i>
Y 340	5	0	Was 1st set of vital signs - SKIN CONDITION recorded? <i>Pink, Warm & Dry</i>
Y 341	5	0	Was 1st set of vital signs - PUPILS recorded? <i>Equal & Reactive @ 4mm</i>
Y 342	5	0	Was 2nd set of vital signs - LEVEL OF CONSCIOUSNESS recorded? <i>Conscious</i>
Y 343	5	0	Was 2nd set of vital signs - RESPIRATIONS recorded? <i>24 Shallow & Regular</i>
Y 344	5	0	Was 2nd set of vital signs - PULSE recorded? <i>78 Strong & Regular</i>
Y 345	5	0	Was 2nd set of vital signs - SKIN CONDITION recorded? <i>Pink, Warm & Dry</i>
Y 346	5	0	Was 2nd set of vital signs - PUPILS recorded? <i>Equal & Reactive @ 4mm</i>
Y 347	5	0	Was 3rd set of vital signs - LEVEL OF CONSCIOUSNESS recorded? <i>Conscious</i>
Y 348	5	0	Was 3rd set of vital signs - RESPIRATIONS recorded? <i>24 Shallow & Regular</i>
Y 349	5	0	Was 3rd set of vital signs - PULSE recorded? <i>80 Strong & Regular</i>
Y 350	5	0	Was 3rd set of vital signs - SKIN CONDITION recorded? <i>Pink, Warm & Dry</i>
Y 351	5	0	Was 3rd set of vital signs - PUPILS recorded? <i>Equal & Reactive @ 4mm</i>
Continued Assessment & Treatment Rendered			
Y 352	10	0	Was the ICE PACK for the POSSIBLE RIGHT ORBITAL FRACTURE recorded?
Y 353	10	0	Was the ICE PACK for the POSSIBLE RIGHT CHEEK & JAW FRACTURE recorded?
Y 354	10	0	Was the GAUZE PAD for the BLEEDING SOCKET (Tooth) recorded?
Y 355	10	0	Was the CARE for the KNOCKED OUT TEETH recorded?
Y 356	10	0	Was the Application of a BLANKET recorded?
Y 357	10	0	Was the Notification of EMS with TIME recorded?
Y 358	10	0	Was the Notification of POLICE with TIME recorded?
Y 359	10	0	Was the Name(s) of the first aid team LEGIBLY recorded?
	265		Total of DOCUMENTATION. (Page 4)

CYCLE _____

TEAM _____

NO	POINTS	NOT DONE	SCENE/PRIMARY SURVEY
Y 360	10	0	Did the team TAKE CHARGE of the situation? (remained calm themselves?)
Y 361	10	0	Did the team wear protective GLOVES?
Y 362	10	0	Did the team ASSESS for HAZARDS? <i>located under a table, Fighting stopped</i>
Y 363	20	0	Did the team IMMEDIATELY CALL FOR SECURITY assistance?
Y 364	10	0	Did the team CALL OUT for HELP? <i>Other players in the bar</i>
Y 365	20	0	Did the team ASK for SITUATION HISTORY from Conscious Casualty?
Y 366	10	0	Did the team DETERMINE the MECHANISM OF INJURY? <i>Punched in Face</i>
Y 367	10	0	Did the team DETERMINE the NUMBER OF CASUALTIES? <i>2</i>
Y 368	10	0	Did the team ID SELF and OBTAIN CONSENT? <i>Given</i>
Y 369	10	0	Did the team WARN THE CASUALTY NOT TO MOVE?
Y 370	20	0	Did the team IMMEDIATELY CONTROL C-SPINE to prevent movement?
Y 371	10	0	Did the team ASSESS LEVEL OF CONSCIOUSNESS? <i>Conscious</i>
Y 372	10	0	Did the team ASSESS AIRWAY? <i>Open</i>
Y 373	10	0	Did the team ASSESS BREATHING? <i>18 Shallow & Regular</i>
Y 374	10	0	Did the team ASSESS SKIN CONDITION (Circulation) <i>Flushed, Warm & Dry</i>
Y 375	10	0	Did the team PERFORM A RAPID BODY SURVEY? <i>Bleeding 3" LAC to back of head</i>
Y 376	10	0	Did the team IMMEDIATELY COVER WITH A BLANKET for shock and warmth?
Y 377	10	0	Did the team ACTIVATE EMS/AMBULANCE?
Y 378	20	0	Did the team ensure ACTIVATION of POLICE (bar fight)?
	270		Total of SCENE / PRIMARY SURVEY (Page 5)

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 #2 - "SHARKS 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 DONE	HISTORY OF THE PATIENT
Y 379	10	0	Did the team ask about SYMPTOMS Stinging to the back of the head (LAC)
Y 380	10	0	Did the team ask about ALLERGIES? Penicillin
Y 381	10	0	Did the team ask about MEDICATIONS? "Something for stress - its new"
Y 382	10	0	Did the team ask about MEDICAL HISTORY? Anxiety
Y 383	10	0	Did the team ask about LAST ORAL INTAKE? Had a "few beers" since the last game
Y 384	10	0	Did the team determine INCIDENT HISTORY? Was pushed backward, struck head
FIRST SET OF VITALS			
Y 385	10	0	Did the team check LEVEL OF CONSCIOUSNESS? Conscious
Y 386	10	0	Did the team check RESPIRATIONS? 18 Shallow & Regular
Y 387	10	0	Did the team check PULSE? 84 Strong & Regular
Y 388	10	0	Did the team check SKIN CONDITION/TEMP? Flushed , Warm & Dry
Y 389	10	0	Did the team check PUPILS? Equal & Reactive @ 4mm
HEAD TO TOE EXAMINATION			
Y 390	10	0	Check SCALP/HEAD? 3" LAC to back of head
Y 391	10	0	Check both EYES? No Findings
Y 392	10	0	Check NOSE? No Findings
Y 393	10	0	Check CHEEKBONES? No Findings
Y 394	10	0	Check MOUTH? No Findings
Y 395	10	0	Check JAW? No Findings
Y 396	10	0	Check both EARS? No Findings
Y 397	10	0	Check NECK? No Findings
Y 398	10	0	Check both COLLARBONES? No Findings
Y 399	10	0	Check both SHOULDERS? No Findings
Y 400	10	0	Check RIGHT UPPER ARM? No Findings
Y 401	10	0	Check RIGHT LOWER ARM? No Findings
Y 402	10	0	Check RIGHT HAND and FINGERS? No Findings - Good Distal Circulation
Y 403	10	0	Check LEFT UPPER ARM? No Findings
Y 404	10	0	Check LEFT LOWER ARM? No Findings
Y 405	10	0	Check LEFT HAND and FINGERS? No Findings - Good Distal Circulation
Y 406	10	0	Check CHEST? No Findings
Y 407	10	0	Check ABDOMEN? No Findings
Y 408	10	0	Check BACK? No Findings
Y 409	10	0	Check PELVIS? No Findings
Y 410	10	0	Check RIGHT UPPER LEG? No Findings
Y 411	10	0	Check RIGHT LOWER LEG? No Findings
Y 412	10	0	Check RIGHT ANKLE and FOOT? No Findings - Good Distal Circulation
Y 413	10	0	Check LEFT UPPER LEG? No Findings
Y 414	10	0	Check LEFT LOWER LEG? No Findings
Y 415	10	0	Check LEFT ANKLE and FOOT? No Findings - Good Distal Circulation
370			Total of SECONDARY SURVEY (Page 6)

Score Sheet for Patient #2 - "SHARKS Player"

ASSESSMENT / FIRST AID TREATMENT			
Actions in this section may be performed by the competitor at any point in the scenario.			
NO	POINTS	NOT DONE	CARE for SUSPECTED HEAD AND SPINAL INJURY
Y 416	20	0	Did the team MAINTAIN C-SPINE CONTROL, Until Fully Immobilized on backboard?
Y 417	20	0	Did the team CONSTANTLY MONITOR of the PATIENT?
CARE for 3" HEAD LACERATION			
Y 418	10	0	Did the team APPLY DRESSINGS to HEAD LAC?
Y 419	20	0	Did the team SECURE the DRESSING IN PLACE (not tape in hair)?
ONGOING CARE/ CONTINUED VITAL SIGNS & CONTINUED ASSESSMENT			
Y 420	10	0	Did the team REASSURE the patient about their OWN CARE?
Y 421	10	0	Did the team Re-check LEVEL OF CONSCIOUSNESS? (2nd Set) <i>Semi-Conscious</i>
Y 422	10	0	Did the team Re-check RESPIRATIONS? (2nd Set) <i>14 Shallow & Regular</i>
Y 423	10	0	Did the team Re-check PULSE? (2nd Set) <i>80 Strong & Regular</i>
Y 424	10	0	Did the team Re-check SKIN CONDITION/TEMP? (2nd Set) <i>Flushed, Warm & Dry</i>
Y 425	10	0	Did the team Re-check PUPILS? (2nd Set) <i>Equal & Reactive @ 4mm</i>
Y 426	20	0	Did the team recognize the CHANGE IN LEVEL OF CONSCIOUSNESS (@ 2 Minute remaining)?
Y 427	20	0	Did the team RE-ASSESS AIRWAY in the unconscious patient?
Y 428	10	0	Did the team Re-check RESPIRATIONS? (3rd Set) <i>14 Shallow & Regular</i>
Y 429	10	0	Did the team Re-check PULSE? (3rd Set) <i>82 Strong & Regular</i>
Y 430	10	0	Did the team Re-check SKIN CONDITION/TEMP? (3rd Set) <i>Flushed, Warm & Dry</i>
Y 431	10	0	Did the team Re-check PUPILS? (3rd Set) <i>Equal & Reactive @ 4mm</i>
Y 432	30	0	Were GLOVES EFFECTIVE THROUGHOUT? (Torn gloves MUST be replaced!)
	240		Total of AMFR ASSESSMENT / FIRST AID TREATMENT (Page 7)

Score Sheet for Patient #2 - "SHARKS Player"

RECORDING			
Actions in this section may be performed by the competitor at any point in the scenario.			
NO	POINTS	DONE	
Y 433	20	0	Was ALL of the patients PERSONAL INFORMATION recorded?
Y 434	10	0	Was the INCIDENT TIME AND DATE recorded?
Y 435	10	0	Was the INCIDENT LOCATION recorded?
Y 436	10	0	Was the INCIDENT HISTORY (Accurately) recorded? <i>Pushed , Fell back and Struck Head</i>
Y 437	10	0	Was the patients ALLERGIES recorded? <i>Penicillin</i>
Y 438	10	0	Was the patients MEDICATIONS recorded? <i>"Something for stress - its new"</i>
Y 439	10	0	Was the patients MEDICAL HISTORY recorded? <i>Anxiety</i>
Y 440	10	0	Was the LAST ORAL INTAKE recorded? <i>Had a "few beers" since the last game</i>
Y 441	10	0	Was the Suspected Head & Spinal Injury recorded?
Y 442	10	0	Was the C-Spine Manual Control recorded?
Y 443	10	0	Was the 3" LAC to the back of the head recorded?
Judges Note: Vital Signs <u>MUST</u> be the CORRECTED #s & HAVE the TIME recorded, to be awarded points !!!			
Y 444	5	0	Was 1st set of vital signs - LEVEL OF CONSCIOUSNESS recorded? <i>Conscious</i>
Y 445	5	0	Was 1st set of vital signs - RESPIRATIONS recorded? <i>18 Shallow & Regular</i>
Y 446	5	0	Was 1st set of vital signs - PULSE recorded? <i>84 Strong & Regular</i>
Y 447	5	0	Was 1st set of vital signs - SKIN CONDITION recorded? <i>Flushed , Warm & Dry</i>
Y 448	5	0	Was 1st set of vital signs - PUPILS recorded? <i>Equal & Reactive @ 4mm</i>
Y 449	5	0	Was 2nd set of vital signs - LEVEL OF CONSCIOUSNESS recorded? <i>Semi-Conscious</i>
Y 450	5	0	Was 2nd set of vital signs - RESPIRATIONS recorded? <i>14 Shallow & Regular</i>
Y 451	5	0	Was 2nd set of vital signs - PULSE recorded? <i>80 Strong & Regular</i>
Y 452	5	0	Was 2nd set of vital signs - SKIN CONDITION recorded? <i>Flushed, Warm & Dry</i>
Y 453	5	0	Was 2nd set of vital signs - PUPILS recorded? <i>Equal & Reactive @ 4mm</i>
Y 454	5	0	Was 3rd set of vital signs - LEVEL OF CONSCIOUSNESS recorded? <i>14 Shallow & Regular</i>
Y 455	5	0	Was 3rd set of vital signs - RESPIRATIONS recorded? <i>82 Strong & Regular</i>
Y 456	5	0	Was 3rd set of vital signs - PULSE recorded? <i>118/80</i>
Y 457	5	0	Was 3rd set of vital signs - SKIN CONDITION recorded? <i>Equal & Reactive @ 4mm</i>
Y 458	5	0	Was 3rd set of vital signs - PUPILS recorded? <i>Reactive @ 4mm</i>
Continued Assessment & Treatment Rendered			
Y 459	10	0	Was the TREATMENT for the 3" LAC recorded?
Y 460	10	0	Was the MAINTENANCE OF C-SPINE CONTROL recorded?
Y 461	10	0	Was the Application of a BLANKET recorded?
Y 462	10	0	Was the ACTIVATION of EMS WITH TIME recorded?
Y 463	10	0	Was the Notification of POLICE with TIME recorded?
Y 464	10	0	Was the Name(s) of the first aid team LEGIBLY recorded?
	390		Total of DOCUMENTATION (Page 8)

SCENARIO #1 - POINTS TOTALS			
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#:			2880