## Patient Contacts

## Patient Contact 1

Date	01/01/2020				
ACR / PCR/ Incident number	Number redacted				
CPG organisation	Organisation redacted				
Injury presented	Female age 25yrs fainted while standing during speeches at College Graduation . As patient became weak, 2 male colleagues on either side caught her and stopped her from falling to the ground. Probable cause - prolonged standing.				
Treatment	Primary survey - A,B, C check. V response and return to A on AVPU within 1 min. Pale, cool, clammy skin, slow pulse rate. Removed casualty to indoor area. Loosen neck tie, and unbutton tunic, remove cap. Lay casualty down and raise legs. Administered with 15lts O2 via Non RB mask until 96-98 sp02. Secondary survey - No injuries sustained as caught before she fell. Diagnostics:				
	Diagnostic tests (1)	1pm	1.10pm		
	Temperature	37.5	37		
	Blood Glucose Levels	5mml			
	Pupils	Pupils Equal, round, reactive to light			
	Respirations per min	20 resps/min	16rpm		
	Pulse	52 bpm	60bpm		
	SP02	92	98		
	BP	110/70	120/80		
	Cap Refill	<2			
	AVPU V and returning to A within 1 min.				
	CSM's Normal				
	A-No known allergies. M-Not on any medications. P- No past pertinent medical history disclosed. L- Ate breakfast at 9am.				
	Patient transferred to onsite Medical Centre, and received further care by Medical personnel.				

## Patient Contact 2

Date	01/01/2020			
ACR / PCR/ Incident number	Number redacted			
CPG organisation	Organisation redacted			
Injury presented	76 yr old man presented to me with large laceration to the top of left hand torn by branch of a tree - Injured party lost balance on low ladder while felling tree branches, and snagged his hand in the branch as he fell.			
Treatment	Patient presented conscious and sitting down. Alert on AVPU. Primary survey. Secondary survey No indications of spinal injury or broken bones. Large laceration to the top of left hand. No other injury sustained. Expose the wound to examine. Presented with large laceration extending from medial 1st tarsal bone to third metatarsal. Needed stitches. Treatment- Wound dressing applied. Elevated arm sling. CSM's -normal. FAST Assessment -Negative. Glucometer reading 5.7mml. SAMPLE S/S - laceration to top of hand, open wound, in need of cleaning and stitches. No major blood loss, patient calm and no sign of shock, no major pain.  Diagnostic tests (1) 10:05am Temperature 36.9 Blood Glucose Levels 5.7 Pupils Equal, round, reactive to light Respirations per min 20 resps/min Pulse 68bpm SP02 97 BP - Cap Refill <2 AVPU A CSM's Normal  A-No known allergies . M-Not on any medications. P- No past pertinent medical history disclosed. L- Ate breakfast at 8am. Event - Patient was cutting tree branches when he lost his balance on a low ladder , snagging his hand as he lost balance and fell.  Advised to go to Hospital, but patient went with family member to his GP. Doctor administered 15 stitches, with local anesthetic, was prescribed antibiotics and administered Tetanus Shot. Discharged from Doctors Surgery with Family member			

## Patient Contact 3 – Good Samaritan

Date	01/01/2020				
ACR / PCR/ Incident number	Number redacted				
CPG organisation	Not applicable				
Injury presented	Illness. Male aged 66 yrs, ordering lunch in Garden Centre Restaurant. Sudden collapse in public area witnessed by me and colleagues all EMT trained. Patient presented with sudden unconsciousness collapsing to the ground as he ordered lunch. Verbal on AVPU Scale and returned to Alert within 1 minute.  Primary survey.  Secondary survey.  Patient was very pale. Patient experienced lightheaded and dizzy before he collapsed.  Feeling weak.				
Treatment	Temperature Blood Glucose Levels Pupils Respirations per min Pulse 6 SP02 RP Cap Refill AVPU FAST Assessment - Neg A- No known allergies M- Cancer treatment med P- Medical history - und L- Ate small breakfast 10	lications. lergoing treatment to am.	12 rpm 72 bpm  for cancer of bowel and liver.  Ambulance. Verbal handover given to		