

CERT Head-to-Toe Assessment Demonstration Transcript

Well this finishes our head to toe chapter, lecture portion of the survey. We're going to do the demonstration portion of it right now, in terms of actual hands on. Do we have any questions before we get started? No questions before we get started? Well, in this portion I'm going to need a volunteer. Any volunteers? Takers for this portion of it? Anyone?

I'll do it.

Sure, come on up. Thank you very much. Now you do realize I'm going to be touching you from head to toe. Yes I just want to make sure you're in agreement with that. All right, I'm going to move this right here, and I'm going to help you onto our table.

Okay, is this a good place?

Absolutely.

All right.

Okay, you're safe here. Hang on. All right. All right. So, I'm going to use gloves, in terms of personal protection with regards to assessment. This is covered in your chapters. And again, I'm going to be doing a head to toe survey, with regards to checking for swelling, bumps, bruising, and any type of deformities. Okay, this is part of the assessment skill that will help us determine, or gather any more information with regards to the injuries and extent of injuries of our patient.

So with that being said, I'm going to talk my way through the process which helps me remember and if the person is sort of conscious or in and out, at least they know exactly what I am going to do. Okay, so I'm going to start with her head, and work my way down her body. So, here we go. I'm going to touch your head right now, see if I find any bumps, bruises or deformities, any bleeding or anything like that. Every now and again, pulling my hand back to see if I find any bleeding or any fluid on my hands. Okay, looking at the ears, the head, coming down along the face, making sure I have symmetry along the face. Okay, looking at the neck. Looking for symmetry, looking at both sides, see if anything is out of the ordinary that I may find or see. Checking the back of the neck, make sure you reach all the way around, because that one spot you may miss, may be something that is very severe.

Checking the shoulders, coming down the arm, checking it very quickly, checking for any bleeding, deformities. Every now and again, pulling your hands back, looking at your patient. Okay, walking around the side, now this is very important, because you do not want to reach over the person, or slip, trip or fall on top of the person, which will make it worse for the victim. Checking the other side as I did before. Okay, walking around the other side.

Continue on with the chest, coming right down. Checking the ribs also. Moving from the ribs onto the abdomen. We check the sides, and you want to check both sides evenly, and you are just pressing in, to see if they have, what is called rebound tenderness, or if you feel something that is completely solid in an area that should not be. Okay, so now the abdomen is done, we're going to move on down to the hips. We're going to take the hips and push down and you want to push in. Feeling for any crepitations, or any movement of the bones, or anything of that nature. And always visualizing and looking, as well as every now and again, looking at the patients face, okay? Now this is where you have to be really personal also, you have to reach in, to make sure, you're not missing any spots or any bloods by feeling around.

Okay, take the shoe off, check for warmth. Okay. Walk to the other side again. Okay, close and personal, look for any blood, deformities, abrasions, bruises. Okay, check for warmth and movement...crepitations and movement. Okay, so we've done the head to toe survey.

The last thing we want to do, is check the back. This generally requires two people, in order to assist in terms of moving the patient because you may assume that the person has a neck and back injury. So you would take the arm that you have already checked, okay, move it up over the persons head. Okay, as a unison, we'll roll towards me, to make sure I'm in control of her at all times. Okay, keeping her head, back and neck straight, roll towards me. I have her. Okay, check the back of her head again, confirming your findings initially, seeing if anything has changed along the way. No bleedings, bumps, bruises, crepitations found, roll back off, no deformities. Lay her back down, position of comfort, probably cover her up to give her some decency and keep her warm. And something to consider along the way as you're doing this, is to, if she had glasses on, or something like that, to give them a sense of security, make sure the glasses go back on the person, just to make sure.

One of the last things you want to note, is that you have to document any findings you may have. Do we have any questions? If no questions, what we're going to do right now, help you up right here. And we're going to break off into groups, in order so we can demonstrate on each other and go from there, making sure we understand the head to toe survey and the patient assessment portion of this chapter. If no questions, we'll get started on that. Okay. All right. Thank you.