



First Aid

Title : 4

Lec no : 4

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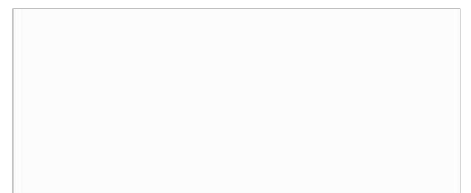
وَقُلْ رَبِّ زِدْنِي عِلْمًا

Secondary assessment

المحاضرة الماضية حكينا عن ال primary assessment
وحكينا عن ال airway و ال breathing وال circulation
والمحاضرة هاي رح نحكي عن ال secondary .

The **purpose** of a secondary assessment (composed of a **head-to-toe**, history and vitals) is to continually monitor the victims condition and **find any non-life threatening conditions** requiring treatment.

The head-to-toe should be completed **after the primary survey** (patent airway, breathing satisfactorily and with a circulation)



طبعا بنعمله بعد ال primary assessment

Head-to-toe:

ما ببلش فيه إذا عندي إشي أولى منه زي ال bleeding

It is used on victims who meet the following criteria:

1. Victim of trauma injuries (except minor injuries affecting peripheral areas)
2. Unconscious or very reduced level of consciousness victims .

What is being looked for?

الجزء الأيمن من ال chest مرتفع عن الجزء الأيسر

you should look for abnormality. ↑

For example: asymmetry; deformity; bruising;
point tenderness, minor bleeding...

عندي نقطة في ال chest مثلاً وضغت عليها وعمت ألم

عندي أمراض ومن علاماتها ال point tenderness مثل ال
custom chondritis (إلتهاب الغضروف المخصص) والألم
بكون بنقطة معينة مش defuse في كل مكان .



إذا كانت major رح تدرج

تحت ال primary

assessment ونطبق عليها يا

ال pressure يا أما ال

tourniquet زي ما حكينا في

المحاضرات السابقة

The six areas

Head and neck:

a. **Head:** Feel for indentations, look for blood or fluid and watch the victim for signs of discomfort. If it is a trauma injury, check both ears for signs of blood or fluid.

b. **Neck:** if there tenderness or deformity, then you should stop the survey and immediately **immobilize the neck**, placing one hand each side of the head, with the thumb around the ear.



* بدور على indentation لأنه
ممکن يكون عندي fracture .



-ال fluid اللي بطلع من الأذن ممكن يكون من ال cerebrospinal fluid .

2. Shoulders, chest and back

(a) Shoulders – You should try and expose the shoulders if possible, looking for obvious deformity, You should then place a hand on each shoulder, pressing along it watching for deformity or pain.



على طول بنفحص مفصل ال shoulder

مثال : واحد وقع عن دراجة نارية شو ممكن يصير معاه ؟ ممكن يصير dislocation لل shoulder joint وال head of humerus يصير في ال back أو posterior أو anterior هاي أنواع ال dislocation .

(b) Chest – The chest is ideally done exposed (*be aware of the sensitivity of females*)

You should be looking for sections of the chest which are **out of line** with the rest of it, or which are **moving differently** to the rest of the chest whilst breathing. You should also look for **obvious wounds**.



(c) Back – you can feel down their spine.

ما ينطبق على ال spine بنطبق على ال back ، بشيخ على thoracic,lumber ,sacrum and .coccyx vertebrae

ال-neck أكثر عرضة للإصابة من فقرات العمود الفقري لأنه الرقبة مش محمية ومش مثبتة.

B - chest

بتأكد إنه ما عندي wound out of the line شو يعني؟ يعني لو عندي fractures في أكثر من مكان في ال chest وإحنا بنعرف إنه في ال inhalation يرتفع الصدر وفي ال exhalation بنخفض الصدر ، ف لو عمل المريض inhalation رح نلاحظ إنه الصدر بيرتفع كاملاً ما عدى المناطق اللي فيها wound بنخفض والعكس ، هاد بنسميه paradoxical breathing.

3. Arms and hands:

run both your hands down one arm at a time, looking for deformity or pain.

مثل ال bowel وال great vessels زي ال aorta

4. Abdomen: The abdomen contains the remainder of the body's critical organs, so **should be watched for potential damage**. The abdomen is mostly **done by** gentle pushing, using the flat of your hands. Again, use symmetry, and push both sides simultaneously. Watch for the abdomen being hard or for pain caused by the palpation.

إذا كان ال pain في نقطة معينة ببلش palpation بأبعد مكان عن ال pain

- في ال examination عندي نوعين من ال palpation وهم superficial +deep .
- في ال superficial بدورح فيه على شغلتين وهم superficial masses and
- superficial tenderness .
- في ال deep بندور فيه على organ enlargement أو pain .

- في ال gentle palpitation بدور إذا في symmetry أو gardening .

- شو هو ال gardening ?

إذا فحصت البطن وشففت إنه في إشي قاسي والعضلات شادة بكون اسمه gardening أو
defensive mechanism علشان يحمي من bleeding مثلاً أو perforation أو certain
pathology وعادةً بتكون series .

5. Pelvis – The pelvis (hips) is a large bone, with potential for a fair amount of damage. gently rock the hips from side to side.

إحنا بنعرف إنه ال pelvis واحد من أهم الأجزاء في الجسم لأنه يحتوي على أهم ال organs زي ال genital organs ، كمان هو big bone ولو صار فيه fracture بصير إشي اسمه **fat embolism** وهو لما ينكسر العظم الكبير في جزء من ال fat يدخل على الدم ويعمل تسكير في مكان معين .

6. Legs and feet – As with arms, use both hands at the same time, running them down the inside and outside of each leg simultaneously. You should also look for any shortening or rotation of one leg compared to foot, check that it has normal motility (can be moved normally) and has no obvious injuries the other. Finally, you take each foot, check that it has normal motility **can be** moved normally) and has no obvious injuries

بدور إذا في خلل في ال normal range
motion

ليش حكينا shortening ؟
مثلاً وقع من مسافة عالية فصار عندي
compaction or overlap للعظم

History

ال history ممكن ما نقدر ناخذها من
المريض نفسه في هاي الحالة بتاخذها
من ال witness أو الأقارب أو المرافق
اللي معه .

CHAMPION.

C: Chief complaint

ال chief complaint ما بتكمل بدون
duration ف لو واحد معه bleeding
لازم أعرف متى بلش من نصف ساعة
ولا ساعة لأنه بفرق

H: History of chief complaint

A: Allergies

M: Medical history and medications

P: Pain assessment  From 1 to 10

I: Important Information اسم المريض عمره جنسه ومكان سكنه

O: Onset → When and how did it start?

N: Next of Kin بلش فجأة أو بالتدريج

Chief Complaint: What is the problem?

History of Chief Complaint: How did this happen? Has it ever happened before?

Allergies: Are you allergic to anything?

Medical History & Medications: Do you have any medical conditions (angina, high BP, diabetes)? Do you take any medications? What is the name of your normal doctor?

كيف ممكن نقسم ال medications؟ ممكن Acute +coronary ، ممكن كمان إذا فيه أعشاب أو
، مثلاً ممكن المريض أخذ licorice وهاد برفع ضغط الدم أو أخذ cinnamon وهاد مميع للدم أو
شرب كركديه بكمية زائدة بنزل ضغطه وعندي كمان تصنيف واللي هو describe medication
. +out of the counter

Pain Assessment:

timing: بلش الصباح أو المساء
Duration: قعد ساعة أو نص ساعة
Onset: بلش فجأة أو بالتدريج

مثلا لو حكينا heart attack به يكون heaviness ثق

Important Information: Name, date of birth, age, sex, address

Onset: When did the symptoms start?
What were you doing?

Next of Kin: Is there anyone you would like contacted?

واحد أخته heart attack به يحكي إنه الألم انتقل من الرقبة للكتف

واحد عنده muscular pain ، الراحة رح تخفف الألم وواحد ثاني عندي shortness of breath وبذل effort هون رح تزيد حالته ويصير أسوأ.

قيم الوجع من 1-10
حيث 1 أخف وجع و 10 أعلى وجع

Pain Assessment Model

S	Site	Where exactly is the pain?
O	Onset	What were they doing when the pain started?
C	Character	What does the pain feel like?
R	Radiates	Does the pain go anywhere else? بنتقل من مكان لآخر
A	Associated symptoms	e.g. nausea/vomiting
T	Time/duration	How long have they had the pain?
E	Exacerbating/ relieving factors	Does anything make the pain better or worse?
S	Severity	Obtain an initial pain score

SOCRATES

Vitals ↑

Purpose: it is important to keep a check on a victim's vital signs, and keep a record of any changes.

Assessments: The vital signs you are looking to record relate to the body's essential functions.



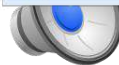
The four main vital signs routinely monitored by medical professionals and health care providers include the following: **Body temperature. Pulse rate (heart rate).** Respiration rate (rate of breathing) **Blood pressure (Blood pressure.)** → Normal (14 – 16)

مثلاً واحد ال blood pressure عنده 100/50 ممكن يكون عندي dehydration أو bleeding

Breathing: In addition to rate, you should note if the breathing is heavy or shallow, and importantly if it is regular or irregular .

المريض في حالة ال stress بتلاقي عنده rapid and shallow breathing

مثلا مريض عنده زايدة هون نفسه بكون سريع



Circulation: The two main checks are:

1. Capillary Refill – You check capillary refill by squeezing reasonably hard for about a second on the nail bed. This

should move the blood out, and the nail bed will appear white. If the pink colour returns quickly then this is normal.

If it takes longer than  **two seconds** for colour to return, then this could indicate **a problem**

2. Pulse check: When measuring a pulse you should measure the pulse rate, regular or irregular

There are three main places you might wish to check for a pulse:

(a) Radial pulse: It is located on the wrist (over the radial bone). To find it, place the victim's hand palm up and take the first two fingers of your hand (NEVER use your thumb, as it contains a pulse of its own)

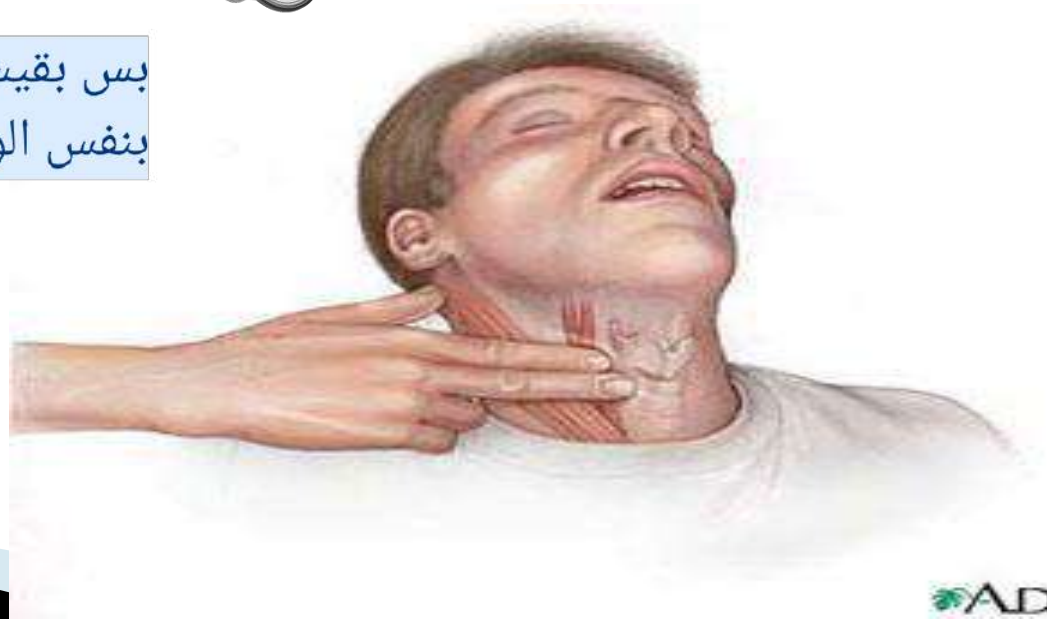
ال radial pulse هو الأكثر شيوعاً واللي إحنا بندور عليه وإذا ما
لقيناه بندور على إشي central وأقوى ف بنروح لل carotid



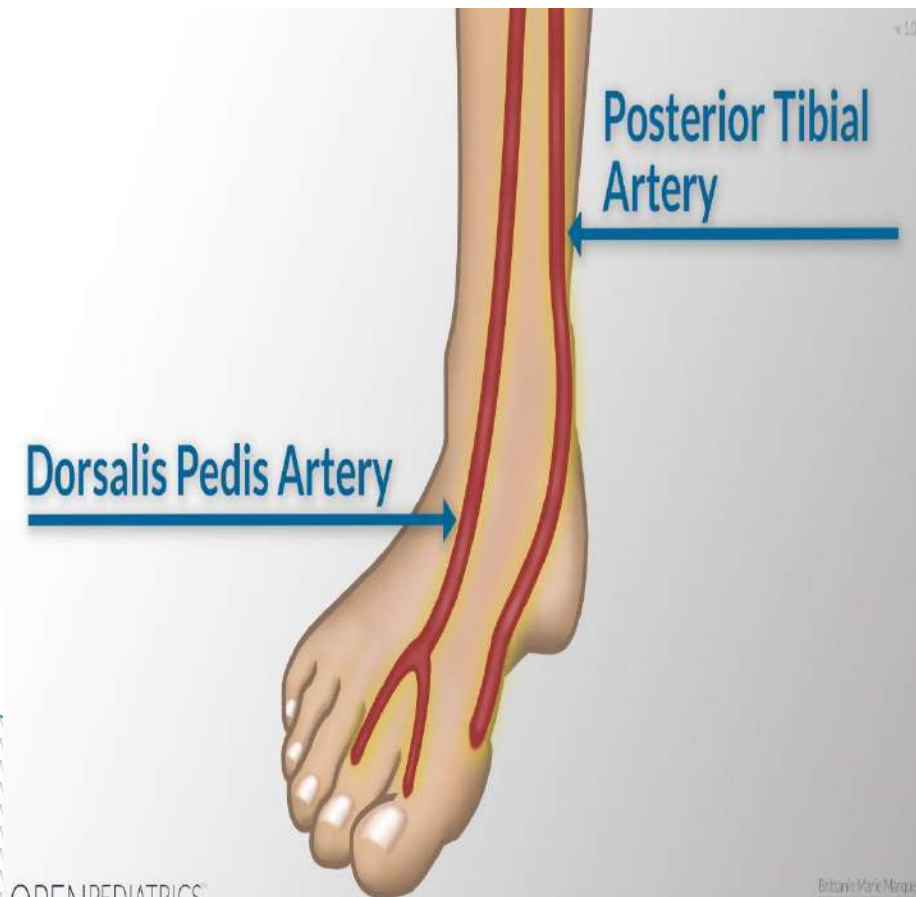
(b) Carotid Pulse – This is in the main artery which supplies the head and brain, and is located in the neck. This is best used on unconscious victims, or those victim where you are unable to find a radial pulse. To locate it, place your two fingers in to the indentation to the side of the windpipe, in line with the Adam's Apple .



بس بقيس على جهة وحدة مش على الجهتين
بنفس الوقت لأنه رح يدوخ المريض



(c) Pedal Pulse – The pedal pulse can be found in several locations on the foot



Skin Colour and Temperature: Related to circulation, is the colour of the skin. Changes in circulation will cause the skin to be different colours, and you should note if the victim is pale, or blue tinged.

It should also be noted if the victim's skin is sweaty or very dry.

عادة المريض لما يكون في stress conditions أو heart attack أو المريض بذل جهد وصار
عنده إشي بال cardiovascular يكون sweaty

لو شفت المريض pale أو bluetness بعرف إنه عنده نقص بالأكسجين

Pupils: Valuable information can be gained from looking a victim's pupils. For this purpose, first aid kits should have a penlight or small torch in them.

Ideally, the pupils of the eye should be equal and reactive to light, usually written down as **PEARL**.

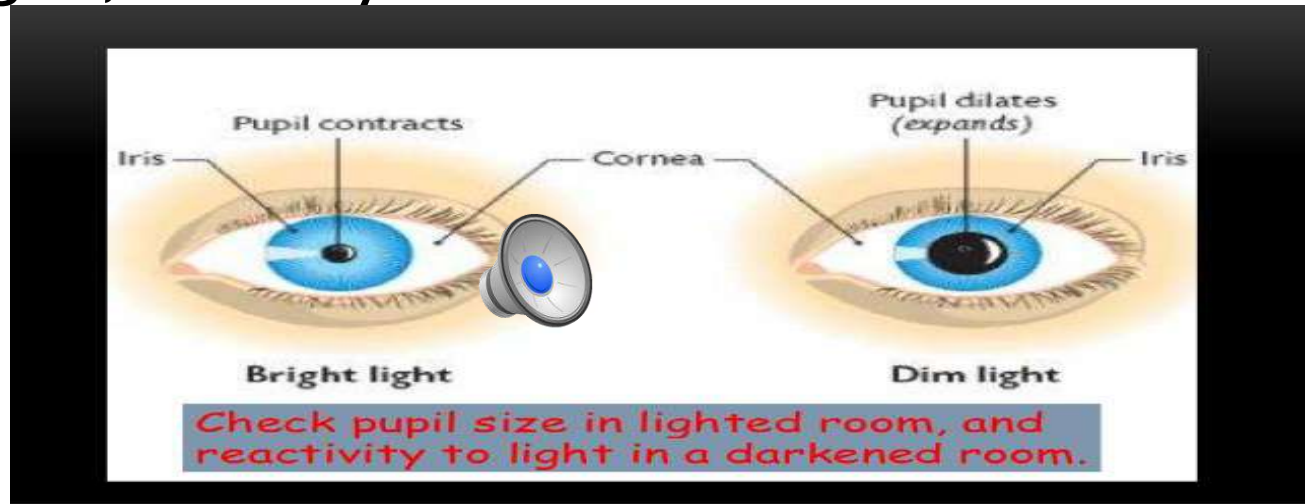
P: Pupils

E: Equal

A: And

R: Reactive to

L: Light



A normal reaction would be the pupil getting smaller quickly as the light is shown in to it. Repeat on the other eye.

-لو جبت ضو وحطيته برا العين وبعديها ركزته على العين رح ألاحظ إنه الحدقة رح تتقلص.

-ولازم يكون التقلص بنفس الوقت مع بعض وبنفس المقدار.

نحنُ في الدُّنيا جيادُ
ولنا في السَّيرِ كِبوةٌ !

كُلُّنا نضعُفُ لكنْ ..
كُلُّ ضَعْفٍ فِيهِ قوَّةٌ !

#النادي_الطبي
#معكم_خطوة_بخطوة

بالتوفيق.....♡