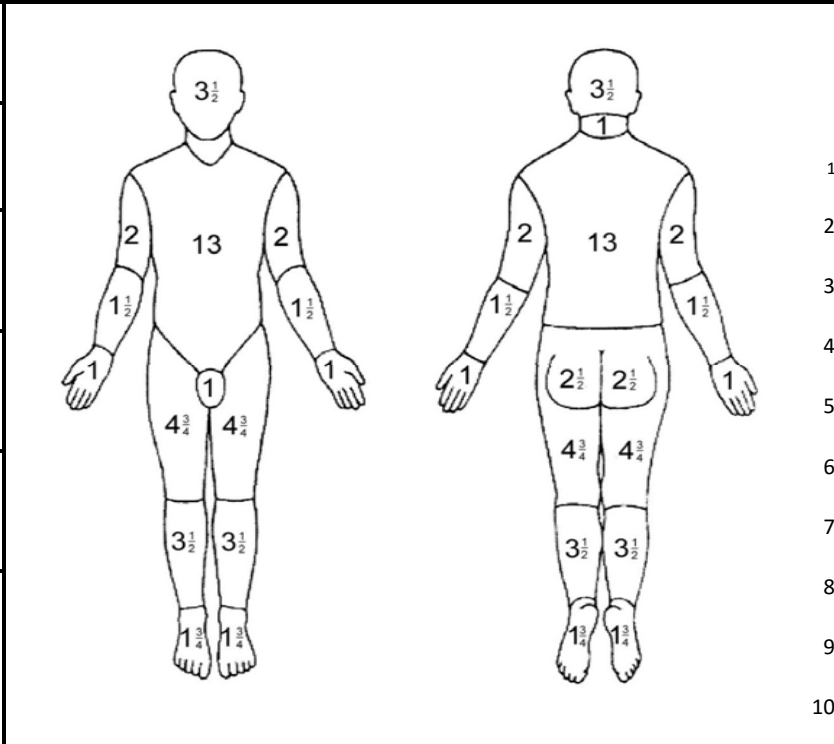


## Prolonged Field Care Flowsheet v.21.1 (16 Jan 2018)

Name:	Date:	Time:	Weight:	Blood type:	EVAC Category: <b>I D M E</b>
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S:
A:
M:
P:
L:
E:



M.I.S.T. Report:	
MOI:	
Stable or Unstable	
Injuries / Illness / Problems	Treatments - Plans
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

TQ 1 time on:	TQ 2 time on:	TQ 3 time on:	TQ 4 time on:	TXA Dose 1 on:
TQ 1 Converted:	TQ 2 Converted:	TQ 3 Converted:	TQ 4 Converted:	TXA Dose 2 on:

Notes:

**Teleconsult Call Script and Patient Handover Info Time:**

This is \_\_\_\_\_, an \_\_\_\_\_ (Job Position)  
 I have a patient with \_\_\_\_\_ who I think has \_\_\_\_\_ and I need \_\_\_\_\_ Chief

Complaint \_\_\_\_\_ Brief  
 History \_\_\_\_\_ Vitals  
 HR \_\_\_\_\_ RR \_\_\_\_\_ BP \_\_\_\_\_ Temp \_\_\_\_\_ Pulse  
 O<sub>2</sub> \_\_\_\_\_ UOP \_\_\_\_\_ AVPU \_\_\_\_\_ Exam

Findings \_\_\_\_\_

**Recommendations**

Fluids/Meds \_\_\_\_\_  
 Interventions \_\_\_\_\_ Red-Flags \_\_\_\_\_

**Prolonged Field Care Flowsheet v.21.1 (16 Jan 2018)**

Day																		D	Checklist	Y
Hour																		H	Reassess Tx	
Minute																		M	Expose	
Time Zone:	Other																	Other	Detailed Exam	
BP Systolic $\nabla$ Diastolic $\wedge$	200																	200	Send MIST Report	
	190																	190	Monitors	
	180																	180	2nd IV/IO	
	170																	170	GCS/Neuro/MACE	
	160																	160	Analgesia	
	150																	150	Sedation	
	140																	140	NG / OG	
	130																	130	Upgrade Airway	
	120																	120	Post Cric Checklist	
	110																	110	Vent w/ PEEP	
Temp X	100																	100	Hypothermia Tx	
	95																	95	Recalc TBSA and Fluids	
SPO2 $\diamond$	90																	90	Ultrasound eFast	
	85																	85	Fluid Challenge	
Pulse $\bullet$	80																	80	1st TXA dose (ASAP)	
	75																	75	Blood Type Card	
	70																	70	FWB Transfusion	
MAP $\Delta$	65																	65	Convert TQ <4hrs	
	60																	60	Foley / Bladder Tap	
	55																	55	Adjust Vent Settings	
	50																	50	UA Dipstick	
	45																	45	Clear C-Spine	
ETCO2 $\blacksquare$	40																	40	Position Pad Patient	
	35																	35	Peripheral Pulses	
	30																	30	Compartment Syndrome	
Respirations $\circ$	25																	25	Escharotomy	
	20																	20	Reduce / Splint Fx	
	15																	15	DVT Prophylaxis	
	10																	10	Antibiotic War Wound Tx	
	5																	5	Tetanus	
	0																	0	Teleconsult	
	No Read																	No Read	Labs	
Output																			X-Ray / Imaging	
Fluid Input																			PreOp Eval	
Pain scale/RASS																			Debridement	
AVPU/Neuro/MACE																				
Eye response	4																		Nursing Care Reminders	Y
Oral Response	5																		Vitals/Assessment q1h	
Motor Response	6																		Flush Saline Locks q8hrs	
GCS Total	15																		Suction ET Tube PRN	
Drug/Intervention:	Dose:																		Reposition q2hrs	
																			Change Blood Tubing q4hrs	
																			Oral Care q12hrs	
																			Foley Care q24hrs	
																			Sponge Bath q24hrs	
																			Change IV Bag q24hrs	
																			Check BGL q8hrs	
																			Change IV Catheter q72hrs	
																			Change HME q72hrs	
																			Change Tape q24hrs	
																			Perform LE Massage q2hrs	
																			Perform ROM q8hrs	