



## GENERAL: Scene Assessment

- a. An initial scene assessment will help protect emergency medical personnel, assist with a more rapid identification of possible injury or illness, and facilitate a more rapid determination of patient treatment needs. Examples of scene considerations include:
- Position of the patient at the scene
  - Possible hazardous materials or mechanical dangers
  - Drug or chemical containers
  - Weapons involved and / or presence of possible assailants

When entering the scene bring the appropriate equipment based on dispatch information and scene assessment (including a portable radio, if available).

- b. Assess and ensure the scene is safe for all responding personnel, bystanders, and the patient prior to entering the scene. If the scene is hazardous or dangerous, EMS personnel should immediately leave the scene and relocate to a position of safety and not return to the scene until all hazards have been removed and safety has been assured by the appropriate response agency(ies). EMS personnel should remain together until the scene is considered safe. The desire to help patients should take second priority to the need for EMS personnel to assure their own personal safety.

A police response is suggested if the scene involves violence and or suspicious or criminal circumstances. Whenever possible, take all appropriate actions necessary to preserve evidence at a possible crime scene and record the location of any evidence that is moved or disturbed during patient assessment and treatment.

Continuously monitor and update the safety status of any scene, as conditions may change rapidly.

- c. If there are multiple patients, a patient destination plan should be initiated so that one receiving facility is not overwhelmed by multiple patients. All potential receiving facilities should be contacted by dispatch to determine their capacity and capability to handle one or more patients.
- d. A number of scenes require that personnel with specialized training or equipment conduct the initial access and movement of the patient. Appropriate assistance should be requested if help is required to gain safe access to the patient.

When gaining access to the patient, an organized plan needs to be used so as not to place EMS personnel in jeopardy or cause further injury to the patient. EMS personnel should establish a safe triage and treatment location where the rescue personnel can bring the patient(s).

- e. BSI – Body Substance Isolation, PPE – Personnel Protective Equipment
- f. Refer to appropriate Emergency Treatment Guideline for a complete description and/or application.
- g. EMS personnel should self-identify and seek permission to treat where appropriate.
- h. Obtain information on the situation from relatives, witnesses, and other response personnel.
- i. On scene times should be kept to a minimum with transport to the nearest appropriate health care facility. Monitor, assess and treat en route, as per appropriate Emergency Treatment Guideline(s). Notify and report patient status and all findings to the receiving facility staff and document all actions on the patient care report including the decision to initiate load and go (if applicable).
- j. Other life threatening complications should be treated if possible and may need to be attended to while en route.