

1. Person with a chest wound, wake, hold their chest ..
→ immediate
2. A child with a bone sticking out
→ Delayed
3. Unconscious, severe burns, head wound
→ Expectant
4. A pregnant woman sitting on the ground, medium lacerations to the leg, alert and oriented, normal vitals (Remember not to over triage pregnant women)
→ Minimal
5. Anaphylactic reactions from
→ food, bugs, medicine , shellfish, peanuts, bee stings, latex NOT green beans
6. How to assess airway
→ see if it patent, listen to breathing, respirations, chest rise and fall, check for cyanosis, check speech, check for signs of choking
7. Primary survey on emergency nursing slide
→ airway, breathing, circulation, disability, evolution(change in condition)
8. Symptoms of anaphylaxis
→ stridor, hives, pruritus, angioedema, wheezing, chest tightness, cyanotic, sweaty, pale, blue , LOW BP, HIGH HR, STABLE TEMP
9. Heat stroke
→ issue with thermoregulation , stop sweating (major difference from heat exhaustion) , HIGH TEMP (105), thirsty, altered mental status
10. Pt with heroin overdose priority
→ airway & ways to protect airway : elevated HOB, make sure head in alignment, give them Oxygen, Naloxone , check respiratory rate Q15 mins after Naloxone
11. Carbon Monoxide poisoning test
→ Carboxyhemoglobin / Normal levels : 1 - 10
12. Complaints for MILD carbon monoxide poisoning
→ Headache / red flag when more than one family member complains of HA
13. Alcohol withdrawal :
→ seizure precautions, Benzodiazepine to calm down
→ airways is compromised
→ hallucinations
→ respiratory depression
→ risk for aspiration
14. Weapons of Terrors (Anthrax etc.)
15. Triage priority. 3 ppl come to ED all at once. 1 has a hive, breathing okay. 2 deformed forearm and is yelling in pain . 3 has oxygen on and smoked a cigarette and it blew up in his face
→ Take the 3rd pt first because their airway is compromised
16. In a blast injury
→ primary : original force of blast

Secondary : Debris hits you

Tertiary : When you get slammed up against something

17. What do you measure to make sure someone is getting enough fluid
→ I & O , skin turgor , weight, electrolytes, BUN, Urine output, BP (low), HR (high)
 18. PT with extensive 3rd degree burn AFTER airway
→ check secondly you replace all fluid that is lost, Potassium (high), Sodium (decreases), hematocrit (high)
 19. PT's with muscle / tissue damage or burns will have Myoglobinuria (protein in urine)
→ if urine looks dark and concentrated its a sign of myoglobinuria
 20. Rules of 9's
→ circumferential burn of the entire right leg : 18 %
→ Entire left arm : 9 %
→ trunk front and back : 36 %
→ giggly bits : 1 %
 21. Baxter's formula for IV fluids (Ex.10 L in 24 hrs : give 5 L in 1st 8 hrs , then 2.5 L in the 2nd 8 hrs , 2.5 L in the 3 rd 8 hrs) remember you have to put in what goes in the pump
→ $\frac{1}{2}$ of volume in the first 8 hours
→ $\frac{1}{4}$ of volume in the second 8 hours
→ $\frac{1}{4}$ of volume in the last 8 hours
HAVE TO PUT ANSWER IN ML/HR
 22. Circumferential burns you worry about compartment syndrome
→ Look for 5 P's (pain, pallor, paralysis, paresthesia, pulselessness)
 23. RACE for fire
→ Rescue, alarm, confine, extinguish
 24. Tylenol overdose (review slide in the emergency nurse powerpoints)
 25. Will be a question where you have to put in order : remember ABC's
 26. People partying and a person overdose , the person is left alone, when the nurse sees PT it is IMPLIED consent . Make sure you DOCUMENT
 27. Compartment syndrome tx
→ fasciotomy to relieve pressure
→ done around the chest to allow the chest to expand
 28. 1st degree burn :sunburn
2nd degree burn : through epidermal layer and includes dermal (blister)
3rd degree burn : goes into the fat layer and the muscle and bone
- when people have burns it's not just ONE type of burn. Always document correctly

