



SAMPLE – FALL DESCENDING

NEW MEXICO

THE STORY:

A 54 y/o male fell while descending a ridge on a peak in New Mexico. The route was considered 4th class and was a popular way to get up and down the mountain. The Pt lost his footing and tumbled down a steep snow slope, gaining speed, before cartwheeling into a rocky area at the base. The Pt was able to crawl to an overlook over the descent trail and call to another group for help. This group was 1000'(300m) below the Pt and began their 5 mile (8 km) descent to a National Park Service ranger station to seek help. Rescuers arrived 3 hrs. after the fall to find their Pt lying on his right side, alert and oriented, c/o severe pain in his right thigh, and pain in his right wrist. He stated he was allergic to morphine, took ibuprofen for chronic knee pain, had no other pertinent medical history, had some food and water 2 hrs. previously with his last urine output at that time, and remembered the fall vividly, denying a loss of consciousness. The Pt stated he was wearing a helmet at

the time of the fall. On exam, the Pt was non-tender to the head, neck, chest, abdomen, pelvis, and spine. The Pt had some significant bruising, swelling, and was very tender on the right thigh with significantly reduced range of motion due to the pain. Swelling and tenderness was noted in the right wrist with normal range of motion and although somewhat painful, the Pt was able to flex and extend against resistance. Vitals at 1600hrs. were: Pulse: 76, Resp.: 16, B/P: 134/82, Skin: warm and normal in color, Pt was awake, oriented, calm, and uncomfortable. Put the appropriate information from the story above into the correct spaces provided in the SOAP note to the right. After you've completed the Subjective and Objective sections, develop an Assessment for 1600hrs. with Anticipated Problems and an appropriate Treatment Plan listed in the columns to the right.

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Vitals were repeated at 1630hrs.: Pulse: 80, Resp.: 16, B/P: 128/78, Skin: normal, Pt was Alert and Oriented and uncomfortable from the pain in his leg. No new exam findings were noted as the Pt was

prepared for evacuation. Evacuation by NPS helicopter was completed at 1700hrs: Pulse: 72, Resp.: 14, B/P: 130/p, Skin: normal, Pt is Alert and Oriented.

→ Again, put the important information from the update above into the correct spaces in the SOAP note.

QUESTION

- 1. Based on the information you have through 1700hrs., do you think this patient is stable or critical?
- * Answers to questions featured here are not provided in the "Answers" section on the back of each story, but are meant to inspire discussion with your instructor and fellow students.

Scene: 54 y/o male fell a considerable distance down a snowfield impacting in the rocks at the base of the slope. Pt was wearing a helmet at the time of the fall and was found on his right side in rocks

1000' (300m) above the descent tail, ~2hrs. from the ranger station.

Symptoms:

SUBJECTIVE

OBJECTIVE

c/o severe pain in R thigh & some

pain in R wrist.

Allergies: *morphine*

Medications: *ibuprofen* (for chronic knee pain)

Pertinent History: n/a

Last In / Out: both 2 hrs. ago

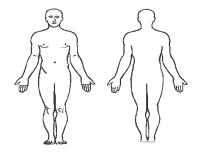
Events: *Pt denied LOC w/clear recall of events*

Physical Exam:

1600 hrs : Pt Alert & Oriented. Pt non-tender to head, neck, chest, abdomen, pelvis and spine.

Bruising, swelling and tenderness noted in right mid-thigh with positive distal circulation, sensation, and a limited range of motion due to pain. Swelling and tenderness was noted in the right wrist with positive distal CSM.

	Time	AVPU	Pulse	Resp.	Skin	Other (T	Temp, BP)	
	1600	Awake	76	16	normal	UTA	134/82	
LS	1630	Awake	80	16	normal	UTA	128/78	
VITALS	1700	Awake	72	14	normal	UTA	130/p	
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ASSESSMENT AND TREATMENT PLAN						
A = Assessment (Problem List)	A' = Anticipated Problems	P = Treatment Plan				
Unable to clear spine 2°						
distracting injury						
Unstable R upper leg injury	swelling / cord injury	stabilize/immobilize				
Stable R wrist injury	swelling / \downarrow CSM	splint/monitor				
	swelling	sling & swathe / RICE				

ADDITIONAL NOTES

Pt remained uncomfortable from the pain of his injuries, but with stable vitals throughout the course of his evacuation by NPS helicopter.