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# Standard Guide for Training the Emergency Medical Technician (Basic) to Perform Patient Secondary Assessment<sup>1</sup>

This standard is issued under the fixed designation F 1253; the number immediately following the designation indicates the year of original adoption or, in the case of revision, the year of last revision. A number in parentheses indicates the year of last reapproval. A superscript epsilon ( $\epsilon$ ) indicates an editorial change since the last revision or reapproval.

## 1. Scope

1.1 This guide establishes the minimum training standard for the secondary assessment of ill or injured patients of all ages.

1.2 Frequently repeated primary surveys are an essential and integral part of the complete care of the acutely ill or injured patient.

1.3 This guide identifies the components of patient secondary assessment.

1.4 This guide is one of a series which together describe the minimum training standard for the emergency medical technician (basic).

1.5 This standard may involve hazardous materials, operations, and equipment. This standard does not purport to address all of the safety problems associated with its use. It is the responsibility of the user of this standard to establish appropriate safety and health practices and determine the applicability of regulatory limitations prior to use.

## 2. Referenced Documents

2.1 ASTM Standards:

- F 1031 Practice for Training the Emergency Medical Technician (Basic)<sup>2</sup>
- F 1219 Guide for Training the Emergency Medical Technician (Basic) to Perform Patient Primary Assessment<sup>2</sup>

## 3. Terminology

3.1 Descriptions of Terms:

3.1.1 pertinent patient information—information obtained from all available resources that relates to the patient's condition and problems. This information must be continuously updated. All information must be recorded and reported.

3.1.2 secondary assessment—identification of the patient's real or perceived problem(s) by means of documentation and evaluation of additional data from the secondary survey and pertinent patient information.

3.1.3 *secondary survey*—the methodical physical examination of the patient to evaluate conditions discovered during the primary survey and to find conditions not previously identified.

## 4. Significance and Use

4.1 This guide establishes a minimum national standard

for training the emergency medical technician (basic) in the performance of the secondary assessment of ill and injured patients of all ages.

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4.2 This guide shall be used by those who wish to identify the minimum training standard of the emergency medical technician (basic) as it relates to patient secondary assessment.

4.3 This guide shall be used as the basis to revise Practice F 1031.

4.4 Every person who is identified as an emergency medical technician (basic) shall be trained in accordance with this guide.

#### 5. Secondary Survey

5.1 The components of the secondary survey should be performed following the completion of the primary survey. (See Guide F 1219.) The selection and sequence of the components are dictated by the patient's condition and existing circumstances. The components of the primary survey will be monitored during the secondary assessment. The components of the secondary survey are:

5.1.1 Stabilize the cervical spine as indicated until in-line immobilization can be performed.

5.1.2 Assess for altered mental status.

5.1.3 Determine vital signs:

5.1.3.1 Determine rate, rhythm and quality of the respirations.

5.1.3.2 Determine rate, regularity and quality of the pulse.

5.1.3.3 Measure blood pressure.

5.1.4 Examine the head:

5.1.4.1 Inspect and palpate head for any signs of injury or other abnormalities.

5.1.4.2 Inspect for blood, fluid or foreign objects in ears, nose and mouth.

5.1.4.3 Examine the eyes for signs of injury or other abnormalities.

5.1.5 Examine the skin-mucous membranes for any signs of injury or edema and for color, temperature, and moistness.

5.1.6 Inspect and palpate the neck for any signs of injury or other abnormalities.

5.2.7 Examine the chest:

5.1.7.1 Inspect and palpate the chest for any signs of injury or other abnormalities.

5.1.7.2 Assess breath sounds, including auscultation of the chest.

5.1.8 Inspect and palpate the abdomen for any signs of injury or other abnormalities.

5.1.9 Assess integrity of the pelvis.

5.1.10 Examine the perineal area:

<sup>&</sup>lt;sup>1</sup> This guide is under the jurisdiction of ASTM Committee F-30 on Emergency Medical Services and is the direct responsibility of Subcommittee F30.02 on Personnel, Training, and Education.

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<sup>&</sup>lt;sup>2</sup> Annual Book of ASTM Standards, Vol 13.01.