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| **Medical Incident Size Up Card**  |
| **Patient Location:** **Location Description: Lat/Long:** |
| **Patient Information**:  Age: Sex: Weight: | **Time of Injury:** |
| **Person making assessment:** |
| **Description of Injury/Illness (Mechanism of Injury/Chief Complaint):** |
| 1. **Airway:**

 Patent Compromised | **6. Lost Consciousness:** No Yes Unknown  |
| 1. **Breathing:**

 Normal with a rate of:\_\_\_\_\_\_\_/min Labored with a rate of:\_\_\_\_\_\_\_/min Not breathing Rescue breathing in progress | **7. Skin Color:** Normal  Pale Flushed/Red |
| 1. **Pulse:**

 Present with a rate of:\_\_\_\_\_\_\_/min Taken at: neck or wrist Absent CPR in progress | **8. Skin Moisture:** Normal Moist/Clammy Dry  |
| 1. **Bleeding:**

 Not bleeding Oozing Squirting Running **Location of bleeding:\_\_\_\_\_\_\_** **Control measures:** Direct pressure Pressure bandage Hemostatic agent Tourniquet **Control measures working:** Yes Partially (slowing not stopped) No | **9. Skin Temperature:** Normal/Warm Cold Cool Hot |
| **10. Pupils:**  Equal and reactive Dilated Unequal Constricted |
| **11. Level of Medical Provider with Patient**WFR EMREMT ParamedicOther | **12. Gear with**  **Provider** 1st Aid Kit BLS Kit ALS Kit |
| 1. **Level of Consciousness:**

 Alert and oriented to: Person Place Time Event Responsive to verbal stimulus Responsive to pain stimulus Unresponsive | **13.** **Transport Request:** Walk out/crew transport Carry out – non-critical Air Transport – non-critical Carry out – critical Air transport - critical |
| **14.** **Other Info:** |

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