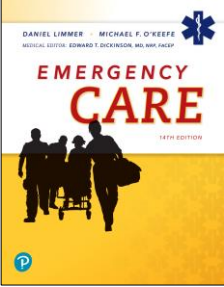



Emergency Care

Fourteenth Edition




Chapter 16
Reassessment

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Topics

- [Reassessment](#)

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Reassessment

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Reassessment (1 of 3)

- Repeat key elements of assessment procedures already performed
- Identifies changes and trends
- Must never be skipped except when lifesaving interventions prevent you from doing it

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Reassessment (2 of 3)

- Identifies
 - Changes
 - Subtle and obvious
 - Trends
 - Deterioration
 - Improvement

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Reassessment (3 of 3)

- Communicate with the patient.
 - Explain process.
 - Consider patient's feelings, such as anxiety or embarrassment.

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Components of Reassessment (1 of 4)

- Repeat the primary assessment
 - Recheck for life-threatening problems
 - Reassess mental status.
 - Maintain open airway.
 - Monitor breathing for rate and quality.
 - Reassess pulse for rate and quality.
 - Monitor skin color and temperature.
 - Reestablish patient priorities.



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Pediatric Note

- The mental status of an unresponsive child or infant can be checked by shouting (verbal stimulus) or flicking the feet (painful stimulus).
- Crying is an expected response from a child with adequate mental status.



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Components of Reassessment (2 of 4)

- Reassess and record vital signs
 - Compare results with baseline measurements.
 - Reevaluate oxygen saturation.
 - Document findings to record and identify trends.



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Think About It 1

- Think of an example of a problem that might develop into a life threat to the patient on the way to the hospital.



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Components of Reassessment (3 of 4)

- Repeat pertinent parts of the history and physical exam
 - Chief complaint may change, especially with regard to severity.
 - Ask about changes in symptoms, especially ones anticipated because of treatments administered.
 - Repeat physical exam.



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Components of Reassessment (4 of 4)

- Check interventions
 - Ensure adequacy of oxygen delivery and artificial ventilation.
 - Ensure management of bleeding.
 - Ensure adequacy of other interventions.



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Check Interventions



4. Check interventions.



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Think About It 2

- Describe an example of an intervention that might need to be reevaluated and discuss your process for examining it.



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Observing Trends (1 of 2)

- Repeat reassessment steps frequently.
- Notice and document trends.
- Trending
 - Changes in a patient's condition over time
- Trends may indicate new treatments or adjustments to ongoing treatments.



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Observing Trends (2 of 2)



2. Reassess and record vital signs.



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Reassessment for Stable and Unstable Patients (1 of 2)

- Patient's condition, as well as length of time with patient, will determine how often you reassess.
- The more serious patient's condition, the more often you will reassess.



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Reassessment for Stable and Unstable Patients (2 of 2)

- When to reassess
 - Every 15 minutes for stable patient
 - Every 5 minutes for unstable or potentially unstable patient
 - If you believe there may have been a change in patient's condition, repeat at least primary assessment.



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Chapter Review



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Chapter Review (1 of 3)

- Reassessment is the last step in your patient assessment.
- You should generally reassess a stable patient at least every 15 minutes and an unstable patient at least every 5 minutes.



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Chapter Review (2 of 3)

- Elements of reassessment include repeating the primary assessment, repeating and recording vital signs, repeating pertinent parts of the history and physical exam, and checking any treatments or interventions you performed for the patient.



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Chapter Review (3 of 3)

- Treatments you need to check include oxygen, bleeding, spinal motion restriction, and splints.



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Remember

- Reassessment is vital for noticing changes in the patient's conditions.
- Trending can help determine if a patient is improving or deteriorating.
- Reassess frequently and record new assessment data.



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Question to Consider

- How will reassessment differ for a stable patient vs an unstable patient?



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Critical Thinking (1 of 2)

- You are caring for an unstable patient who was involved in a motor vehicle accident. The patient has crush injuries to the chest, fractured bones in the lower right leg, and bleeding on the forehead. The patient is unresponsive. You have inserted an oropharyngeal airway, and your partner is manually ventilating the patient. You have also placed a spinal immobilization device on the patient's neck.



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Critical Thinking (2 of 2)

- What reassessment steps will you need to complete for this patient?



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