

## SOAP NOTE

*This is a SOAP Note to use in reporting an accident/incident. This is a common format that all rescue personnel use. **S: Subjective**—What you found, how the patient currently is, and what the patient has said to you (Scene Survey; Initial Assessment); **O: Objective**—What you have found (Head to Toe Exam, Vital Signs, SAMPLE—OPQRST); **A: Assessment** (Problems & Anticipated Problems); **P: Plan** for Treatment*

### Scene Survey (safety, initial impression, gloves)

# of patients	MOI (if observed):	Location:	Time:	Description of Scene:
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### Initial Assessment (ABCDE) —Stop & Fix immediate threats to life

Airway:	Breathing:	Circulation:	Decision:	Environment/Expose:
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### Patient Information

Patient Name: _____	Age: _____	Sex: _____	Phone #: _____	Address: _____
City, State, Zip: _____			Emergency Contact Name/Phone: _____	

### Focused Exam & Patient History (Head to Toe, Vital Signs, SAMPLE)

If Trauma, start with Head to Toe; If Medical, start with SAMPLE

#### Head to Toe Exam

(palpate; look for DOTS—Deformities, Open Wounds, Tenderness, Swelling & check CSM's—Circulation, Sensation, Movement in all extremities)

Head, Face, Neck
Shoulders
Chest
Abdomen, Pelvis
Lumbar Region
Upper & Lower Extremities
Back & Spine

#### SAMPLE

S: Symptoms:
A: Allergies:
M: Medications:
P: Past History
L: Last Intake/Output
E: Events

#### OPQRST

O: Onset:
P: Preventative/Palliative:
Q: Quality
R: Radiates/Refers
S: Severity (1-10)
T: Time:

#### Vitals

Norms	AOx3 or 4	60-100 (sr)	12-16(ru)	PERRL	PWD
Time	LOC's	HR	RR	Pupils	SCTM

### Focused Spinal Assessment (FSA): To be done only after a complete Focused Exam & Patient History has been done.

Yes	No	One or more hour from definitive care
Yes	No	Currently AOx3 or 4?
Yes	No	No distracting injuries?
Yes	No	No alcohol/drugs: recreational, OTC's, prescription?
Yes	No	Normal CSM's in all extremities?
Yes	No	No spinal pain or tenderness upon palpation of spine?

**Important! Only do this step if you have been trained to do so. If you have not been trained in FSA you must maintain spinal precautions. If the answer to each of these 5 questions is "Yes" you *may* release spinal precautions. If the answer to ANY of these 5 questions is "No" you *must* maintain spinal precautions.**

#### Verbal Report for radio transmission. Complete all information.

I have a \_\_\_\_\_ year old \_\_\_\_\_ (male, female). Patient's **chief complaint** is: \_\_\_\_\_.

Patient states \_\_\_\_\_.

(what patient said in their own words.)

Patient is currently: \_\_\_\_\_ (most current LOC).

Patient found in \_\_\_\_\_ (position).

Patient exam reveals (results of head to toe exam, read from above). Then state, "No other injuries found."

**Give vitals:** give one set of vitals. If nothing has changed since your first set, simply say "vitals unchanged since original assessment."

**SAMPLE:** If anything relevant was found in sample let them know what is relevant only.

**Assessment (Problem List) & Anticipated Problems & Plan:** Info you wrote on back page

