**Subjective Data:**

**Chief Complaint:**

**Injury:**
- None Noted
- Contusion Describe:
- Abrasion Describe:
- Laceration Describe:
- Fracture Describe:
- Exposure to pepper spray/tear gas - Area Exposed:

**Severity of Injury:**
- Minor
- Moderate
- Severe
- Undetermined

**Medical History:**
- None
- Asthma
- CAD
- COPD
- CVA
- DM
- HTN
- HIV
- Seizures
- Hep C

**Allergies:**

**Vital Signs:**
- B/P
- R
- P
- T
- Wt.
- O2 sat.
- FSBS:

**Associated Symptoms:**
- Burning
- Gagging
- Running nose
- Increased salivation
- Coughing
- Sneezing
- Shortness of breath
- Pain Scale 1-10

**Objective Data:**

**Respiration**
- Even
- Uneven
- Labored
- Unlabored
- Shallow
- Deep

**Lung Sounds**
- Clear
- Rhonchi
- Wheezes
- Rales
- Diminished

**Eyes**
- Redness
- Tearing
- Swelling
- Visual disturbances

**Skin**
- Pink
- Warm
- Cool
- Pale
- Cyanotic
- Mottled
- Diaphoretic

**LOC**
- Awake
- Alert
- Oriented X
- Confused
- Lethargic
- Comatose
- Incoherent

**Pupils**
- Equal
- Unequal
- PERRLA

**Neurological**
- Gait steady
- Gait unsteady
- Grips equal
- Grips unequal
- Speech normal
- Speech slurred

**Contact Health Care Provider/RN Immediately If:**

**HISTORY OF ALTERNED STATE OF CONSCIOUSNESS, ABNORMAL VITAL SIGNS OR BLEEDING**

- Wound(s) is severe /deep /requires sutures
- Laceration to the abdomen or chest
- Deformity is present
- Impaired neurological/vascular status
- Mechanism of injury suggesting hidden trauma
- Marked swelling is present
- Takes anticoagulants, over age 50

**Healthcare Provider:**

**Time Notified:**

**Orders Received for Treatment:**

**Emergency department notification time:**

**Transport time:**

**Transported to:**

**Plan: Interventions:**

- Stop bleeding with pressure
- Apply telfa pad, clean dry dressing or butterfly dressing
- Wash well with antiseptic soap, sterile water or sterile normal saline
- Arrange for dressing change, wound check and suture removal
- Pressure / sterile dressing to control bleeding
- Maintain head in a neutral position (do not adjust by flexion, hyperextension, or elevation onto support)
- Immobilize neck with cervical collar, notify health care provider
- ABC’s frequent assessed
- Acetaminophen 325 mg - 2 tablets p.o. three times a day for 4 days PRN OR
- Ibuprofen 200 mg – 2 tablets p.o. three times a day for 4 days PRN
- Analgesic Balm to affected area QID for 7 days PRN for muscle strain/sprain.
- Polysporin’ ointment to wound twice a day for 10 days PRN
- Consider immobilization of injury with splint or ace wrap until seen by health care provider
- Place soft pad on the jaw and allow inmate to support jaw with their hands
- Place pulse oximeter and administer Oxygen at 2L minute via nasal cannula (requires provider order)
- Immobilize jaw to minimize discomfort and prevent further damage; wrap with bandage over top of head and under the jaw.
- Apply ice to the affected area
- Flush affected areas with copious amounts of cool water. Irrigate eyes with sterile normal saline. Skin should be washed with oil- based or cold cream based soap
- Remove contaminated clothing and contact lenses (rigid contacts)
- Monitor inmate. Significant improvement should be noted within 15-30 minutes after exposure

**Education/Intervention:**

**Inmate Name**

**Date:**

**Time:**

**Inmate Signature/Credentials:**

**RN/LPN Signature/Credentials:**

**DOC #**