OKLAHOMA DEPARTMENT OF CORRECTIONS
NURSING PRACTICE PROTOCOL
Altercation/Physical Assault

MSRM 140117.01.9.1
(R- 2/20)
(page 1 of 2)

Chief Complaint: ____________________________

Time of Injury: ____________________________

Mechanism of Injury: ____________________________

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

Allergies: __________________________________________________________________________

Current Medications: __________________________________________________________________________

Vital Signs: __________________________________________________________________________

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

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

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

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

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

Apparance:  
- Mild distress
- Moderate distress
- Severe distress

Site-Type of Injury
R = Right
Lt = Left
A = Anterior
P = Posterior
U = Upper
L = Lower

- Arm (R/L) (U/L) (A/P)  
- Hand (R/L) (A/P)
- Leg (R/L) (U/L) (A/P)
- Foot (R/L) (A/P)
- Back (R/L) (U/L)
- Head (R/L) (A/P)
- Jaw (R/L)
- Neck (R/L) (A/P)
- Shoulder (R/L) (A/P)
- Buttock (R/L)
- Face (R/L)
- Nose
- Abdomen (R/L) (U/L)
- Chest (R/L) (U/L)

Severity of Injuries:  
- Minor
- Moderate
- Severe
- Undetermined

CONTACT HEALTH CARE PROVIDER/RN IMMEDIATELY IF: Health care provider must be called if not on site or if after clinic hours.

CALL 911 FOR ALTERED STATE OF CONSCIOUSNESS, ABNORMAL VITAL SIGNS OR BLEEDING

Contact OU College of Dentistry regarding fractured jaw (405-271-4441) (if dentist or health care provider not available, facility nurse may contact the OU College of Dentistry).

If Wound(s) is severe /deep / requires
- Wound that edges do not approximate easily with Steri – Strips
- Deformity is present
- Impaired neurological/vascular status
- Bleeding is uncontrolled
- Signs of infection present
- Mechanism of injury suggesting hidden trauma
- Wound has imbedded debris not easily irritated out
- Laceration to the abdomen or chest
- Marked swelling is present
- Laceration to the face, ear, nose or eyelid
- that may penetrate underlying organ
- Takes anticoagulants, over age 50
- Laceration not responding to intervention
- Condition not responding to intervention
- Health Care Provider:

Emergency department notification time: ________________ Time Notified: ________________ Orders Received for Treatment:  
- Yes
- No

Transported to: __________________________________________________________________________

Transported by:  
- Ambulance
- Facility Vehicle
- Med Flight
- Other: “State”

Plan: Interventions: (Check all interventions provided)

- Check in assessment only for health care provider’s visits.
- Stop bleeding with pressure
- Apply telfa pad, clean dry dressing or butterfly dressing
- Wash well with antiseptic soap, sterile water or sterile normal saline, remove all ingained dirt/debris/bacteria
- 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
- Administer O2 (this will require an order from the 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 10 days PRN
- Silvadene or Medihoneyto affected area (this will require an order from the health care provider)
- Immobilize 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
- Immobilize jaw to minimize discomfort and prevent further damage; wrap with bandage over top of head and under the jaw. Bandage should be easily removable in case of need to vomit.
- Apply ice to the affected area to reduce swelling
- Consider crutches if lower extremity
- Medical Lay-in
- Tetanus diphtheria injection (Last tetanus diphtheria injection more than 5 years - requires a health care providers order)

Education/Intervention: Instructed to keep wound clean and dry, signs and symptoms of infection, signs and symptoms to warrant further treatment, medication use, follow-up sick call if no improvement. Inmate verbalizes understanding of instructions.

Progress Note: __________________________________________________________________________

Health Care Provider Signature/Credentials: __________________________________________________________________________

RN/LPN Signature/Credentials: __________________________________________________________________________

Inmate Name: ____________________________

(Last, First)
Facility: __________________  Date/Time of Altercation/Physical Assault: ________________

Additional Information: ______________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Medical Provider Signature/Credentials: ________________________________ Date: _______ Time: ______

RN/LPN Signature/Credentials: ________________________________ Date: _______ Time: ______

Inmate Name
(First, Last) DOC #