NREMT Medical Assessment Skill: Step by Step

The EMT medical assessment in order: scene, primary survey, OPQRST and SAMPLE, focused exam, vitals, treatment and handoff

Medic Basics
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NREMT MEDICAL ASSESSMENT: THE ORDER

The NREMT medical assessment station tests whether you can take a good history from an ill patient, examine the body system that matches the complaint and start the right treatment. Most of the score is in the questions you ask, so practice them until they come out in order.

1. Protective equipment, scene safety, number of patients, nature of illness, more help if needed.
2. General impression and primary survey: mental status, airway, breathing, circulation.
3. Transport decision: critical or not?
4. History of the present illness: OPQRST.
5. Past history: SAMPLE.
6. Focused secondary exam of the affected system.
7. Vital signs, treatment, reassessment and a short report.

PRIMARY SURVEY FOR AN ILL PATIENT

- Mental status: AVPU. Altered? Check a blood glucose; under 60 mg/dL is hypoglycemia.
- Airway: open and clear? Position, suction, adjunct as needed.
- Breathing: rate, effort, accessory muscles, how many words per breath. Oxygen to an SpO2 of 94 to 98%.
- Circulation: pulse rate and quality, skin color, temperature and moisture.
- Say the priority: unstable patients get treated and moved; the rest of the history happens en route.

HISTORY: OPQRST AND SAMPLE

LETTER	ASK
Onset	What were you doing when it started? Sudden or gradual?
Provocation	What makes it better or worse?
Quality	Describe it: pressure, sharp, burning, tearing?
Radiation	Does it move or spread anywhere?
Severity	Zero to 10, how bad is it now?
Time	When did it start? Has it changed?
Signs and symptoms	What else are you feeling?
Allergies	Medicines, foods, latex?
Medications	Prescription, over the counter, recent changes; bring the bottles
Past history	Heart, lung, diabetes, seizures, surgeries; pregnancy if possible
Last oral intake	When did you last eat or drink?
Events	What led up to calling 911?

FOCUSED EXAM BY COMPLAINT

COMPLAINT	LOOK AT	EMT TREATMENT TO CONSIDER
Chest pain	Skin, breath sounds, pulses, 12-lead if available	Aspirin, help with own nitro, oxygen if SpO2 under 94%
Shortness of breath	Work of breathing, breath sounds, edema	Oxygen, help with own inhaler, CPAP if allowed
Altered mental status	Glucose, pupils, breath odor, medical tags	Oral glucose if awake and can swallow
Stroke signs	Face, arm drift, speech, last known well time	Glucose check, rapid transport, notify
Abdominal pain	Tenderness, distension, guarding	Position of comfort, nothing by mouth
Allergic reaction	Airway swelling, wheeze, hives, low BP	Epinephrine auto-injector per protocol

VITALS, TREATMENT AND HANDOFF

- Full set of vitals: pulse, BP, respirations, SpO2, mental status; glucose when indicated.
- Give treatment within EMT scope and say why you are giving it.
- Reassess after every treatment; stable patients get at least two sets of vitals.
- Report: age, complaint, OPQRST highlights, pertinent SAMPLE, vitals, treatment and response.

SAFETY Critical-fail themes: skipping scene safety or protective equipment, never asking about the chief complaint, missing a primary-survey problem, giving a harmful or out-of-scope treatment, or delaying transport of an unstable patient for history.

Sources (2) are listed with links at medicbasics.com/sheets/nremt-skill-medical-assessment.html. For education and exam preparation only. Not medical advice; follow current guidelines and your institution's protocols. Medic Basics is an independent study aid not affiliated with any certifying body.