



**10 Minutes
Prior to Arrival**

**ALS / BLS and Agency
ETA
Reason for Notify
Age
Male or Female**

M

**Mechanism or
Medical Complaint**

I

**Injuries or
Illness Identified
STEMI – 12 Lead
Stroke – Cincinnati Scale**

S

**Signs
Symptoms
HR – BP – SpO2 – RR – EtCO2 – BG
Lowest confirmed BP
GCS Score: E (4) – V (5) – M (6)**

T

Treatments

ASK IF THERE ARE ANY QUESTIONS?