

NLS WATERPARK MAJOR PROCEDURE EVALUATION

DATE:

FACILITY:

SLIDE FLUME C-SPINE:	BREATHING	NON-BREATHING	NO PULSE
Guard 1: Guard 2: Victim:			<input type="checkbox"/> Proper Signalling <input type="checkbox"/> Entry into Flume <input type="checkbox"/> Rollover <input type="checkbox"/> Assessment <input type="checkbox"/> Critical Intervention <input type="checkbox"/> Transport out of moving water <input type="checkbox"/> Board placed effectively <input type="checkbox"/> Straps done correctly <input type="checkbox"/> Safe Removal (victim & rescuers) <input type="checkbox"/> Immobilization throughout <input type="checkbox"/> Re-Assessment <input type="checkbox"/> RBS <input type="checkbox"/> Information relayed to Pivot <input type="checkbox"/> EMS & Pool Clear <input type="checkbox"/> Blanket <input type="checkbox"/> Oxygen & OPA <input type="checkbox"/> History <input type="checkbox"/> Vitals <input type="checkbox"/> Head to Toe <input type="checkbox"/> Overall Victim Care <input type="checkbox"/> Personal Protection
Guard 1: P W F			<input type="checkbox"/> Communication throughout <input type="checkbox"/> Teamwork <input type="checkbox"/> Confidence
Guard 2: P W F			<input type="checkbox"/> Communication throughout <input type="checkbox"/> Teamwork <input type="checkbox"/> Confidence

DEEP C-SPINE:	BREATHING	NON-BREATHING	NO PULSE
Guard 1: Guard 2: <i>Guard 2 ("stabilizer") must also do another rescue evaluation</i> Guard 3: Victim:			<input type="checkbox"/> Proper Signalling <input type="checkbox"/> Entry <input type="checkbox"/> Rollover <input type="checkbox"/> Transport of victim <input type="checkbox"/> Stabilization of victim at wall <input type="checkbox"/> Board inserted effectively <input type="checkbox"/> Smooth transition of clamps <input type="checkbox"/> Straps done correctly <input type="checkbox"/> Safe Removal (victim & rescuers) <input type="checkbox"/> Immobilization throughout <input type="checkbox"/> Assessment <input type="checkbox"/> RBS <input type="checkbox"/> Information relayed to Pivot <input type="checkbox"/> EMS & Pool Clear <input type="checkbox"/> Blanket <input type="checkbox"/> Oxygen & OPA <input type="checkbox"/> History <input type="checkbox"/> Vitals <input type="checkbox"/> Head to Toe <input type="checkbox"/> Overall Victim Care <input type="checkbox"/> Personal Protection
Guard 1: P W F			<input type="checkbox"/> Communication throughout <input type="checkbox"/> Teamwork <input type="checkbox"/> Confidence
Guard 2: P W F			<input type="checkbox"/> Communication throughout <input type="checkbox"/> Teamwork <input type="checkbox"/> Confidence

