



FR / EMR Scope of Practice Update Scenario: Diabetic

Scene Survey	
Hazards	None
Environment	Guest room at a local downtown hotel
Mechanism of Injury	Staff at the hotel looked in on the patient when they missed checkout, and found them lying unresponsive on the bed.
Patients (#)	One
Additional Resources	Fire department first responders have arrived on scene with you.
PPE / General Impression	The patient is lying supine on a bed. The eyes are closed and the patient is not moving.
Primary Survey	
LOC (AVPU)	The patient's eyes are closed, and they do not respond to voice or to pain.
Delicate Spine / SMR	Rule out with questioning / no evidence of trauma / patient lying on a bed.
ABCs: <ul style="list-style-type: none"> Airway Breathing Circulation 	Airway is clear with a head-tilt/chin-lift. Breathing is quiet and regular. Carotid pulse is present. Insert an OPA.
RBS	The patient has a "Diabetes" medical alert bracelet on their right wrist.
Skin	Cold, pale, clammy skin
O ₂	Apply the SpO₂ monitor and oxygen – 15lpm via NRFM.
Airway	Maintained
Position	Position patient 3/4 prone by the end of the primary survey at the latest.
Bandage & Blanket	Not needed
Transport Decision	
Stable or Unstable?	Unstable. If EMR: Direct a partner to prep egress/transport while you continue with your assessment.
Secondary Survey	
History/Interview: <ul style="list-style-type: none"> Onset – The patient is unresponsive. Provoke – Quality – Region/Radiation – Severity – Time – 	<ul style="list-style-type: none"> Signs and Symptoms – Unresponsive Allergies – Unknown Medications – Unknown Past Medical History – Diabetic as per bracelet Last Oral Intake – Unknown Events – Found unresponsive by hotel staff

Baseline Vital Signs: <ul style="list-style-type: none"> • LOC (GCS) • Blood Pressure • Respirations • SPO2 • Pulse • Skin • Pupils • Blood Glucose • Temperature 	<ul style="list-style-type: none"> • U on AVPU (FR). GCS 111 = 3/15 (EMR) • 134/86 • 20. Regular and effective • 99% on 15lpm O₂ • 88, regular • Cool, pale, clammy • 4 x 4, equal and reactive • 1.3 mmol/L. PATIENT IS HYPOGLYCEMIC. • Not applicable
Administer Glucagon FOR FR: FOR EMR:	Administer 1mg of glucagon IM (following the steps listed on the Administer Glucagon via IM Injection Checklist). Continue with assessment and treatment on scene while waiting for transportation. Complete transport after glucagon administration, and then continue with assessment and treatment while en route to the hospital. Notify hospital.
Head to Toe: <ul style="list-style-type: none"> • Head • Neck • Chest • Lung Sounds(EMR) • Abdomen • Back • Pelvis • Lower Extremities • Upper Extremities 	<ul style="list-style-type: none"> • No abnormalities detected. • Trachea is midline. No JVD is noted. • No abnormalities detected. • Clear, equal air entry bilaterally from apex to bases. • Soft x 4. No rigidity or guarding noted. • No abnormalities detected. • Stable. • No abnormalities detected. Peripheral pulses are present. • No abnormalities detected. Peripheral pulses are present.
Ongoing Exam and Treatments	
Vitals Signs	Re-assess vital signs every 5 minutes (unstable patient).
Treatments	None
Hospital Report	Name, Age, Gender, C/C, HxC/C, PmHx, Rx, Allergies, Vital Signs, Physical Findings, Protocols / Treatments and Results.