World Health Organization

Medical Emergency Checklist

Version Feb 2019

Immediately after primary & secondary surveys:

IS FURTHER AIRWAY INTERVENTION NEEDED? May be needed if: • Abnormal level of consciousness (AVPU scale) • Stridor • Respiratory Distress • Hypoxaemia or hypercarbia	☐ YES, DONE ☐ NO
IS THERE A SEVERE ALLERGIC REACTION? (ADRENALINE NEEDED)	☐ YES ☐ NO
IS THERE A *TENSION* PNEUMOTHORAX? (NEEDLE/DRAIN NEEDED)	☐ YES ☐ NO
DOES THE PATIENT NEED OXYGEN?	☐ YES ☐ NO
IS THE PULSE OXIMETER PLACED AND FUNCTIONING?	☐ YES ☐ NO
DOES THE PATIENT NEED BRONCHODILATORS? (e.g. salbutamol)	☐ YES ☐ NO
DOES THE PATIENT NEED IV FLUIDS?	☐ YES ☐ NO
ASSESSED FOR ONGOING BLEEDING (including gastrointestinal, vaginal, and other internal):	☐ BY EXAM ☐ NGT ☐ ULTRASOUND ☐ CT ☐ DIAGNOSTIC PERITONEAL LAVAGE
IS TREATMENT FOR HYPOGLYCAEMIA NEEDED?	☐ YES ☐ NO
IS TREATMENT FOR OPIOID OVERDOSE NEEDED?	☐ YES ☐ NO
IS THE PATIENT HYPOTHERMIC/HYPERTHERMIC?	☐ YES ☐ NO

When initial resuscitation is complete:

HAVE VITAL SIGNS BEEN RECHECKED?	☐ YES
HAS THE PATIENT BEEN GIVEN:	☐ ASPIRIN ☐ ANALGESIC ☐ TRANSFUSION ☐ ANTIBIOTICS ☐ NONE INDICATED
DOES THE PATIENT NEED AN ECG?	☐ YES ☐ NO
PREGNANCY TEST DONE?	☐ YES ☐ NOT INDICATED
HAVE ALL TESTS AND IMAGING BEEN REVIEWED?	☐ YES ☐ NO, PLAN IN PLACE
WHICH SERIAL EXAMS ARE NEEDED?	☐ NEUROLOGICAL ☐ ABDOMINAL ☐ VASCULAR ☐ RESPIRATORY ☐ NONE
PLAN OF CARE DISCUSSED WITH:	☐ PATIENT/FAMILY ☐ RECEIVING UNIT ☐ PRIMARY TEAM ☐ OTHER SPECIALISTS
RELEVANT EMERGENCY UNIT CHART COMPLETED?	☐ YES

*if intervention is needed but unavailable, respond YES and note missing item, date & time on stockout log sheet.