

|                        |                           |                          |          |                            |
|------------------------|---------------------------|--------------------------|----------|----------------------------|
| <b>Standby Details</b> | <b>Date:</b><br>_ / _ / _ | <b>Age:</b> <b>M / F</b> |          | <b>Patient Label</b>       |
|                        | <b>Time:</b><br>_ : _     | <b>Condition:</b>        |          |                            |
|                        | <b>Crew ISSI:</b>         | <b>A</b>                 | <b>B</b> | <b>C</b>                   |
|                        | Intubated [ ]             | RR<br>SpO2               | HR<br>BP | GCS / AVPU<br>BM      Temp |

**ETA:** \_\_\_\_\_ **minutes**                      **DNACPR** \_\_\_\_\_ **Senior Doctor Aware?** [ ]

Unless CPR / Airway Loss:                      **Remain on Ambulance Trolley for 30 seconds**

|                         |  |   |
|-------------------------|--|---|
| <b>Handover Details</b> | <b>Name</b><br><b>Age</b>                          |   |
|                         | <b>Time (Onset / Incident)</b>                     |   |
|                         | <b>Mechanism / Medical Complaint</b>               |   |
|                         | <b>Injuries / Information on Medical Complaint</b> |   |
|                         | <b>Signs / Symptoms</b>                            | RR                      BP<br>SpO2                      GCS / AVPU<br>HR                      Sugar<br>Temp |
|                         | <b>Treatment / Trends</b>                          |   |

**Transfer and Clarify:**

**Allergies:**

**Background:**

**Medication:**

**Other:**