

<b>Title</b>	<b>Gather and record information to support patient assessment</b>		
<b>Level</b>	<b>3</b>	<b>Credits</b>	<b>3</b>

<b>Purpose</b>	<p>This unit standard is for emergency care first responders and builds depth in gathering and recording information to support patient assessment.</p> <p>People credited with this unit standard are able to:</p> <ul style="list-style-type: none"> <li>– assess and record patient vital signs and explain perfusion status in the emergency care first response context; and</li> <li>– gather current and relevant patient medical history in the emergency care first response context.</li> </ul>
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<b>Classification</b>	Emergency Services > Emergency Care - First Response
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<b>Available grade</b>	Achieved
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<b>Prerequisites</b>	Unit 29321, <i>Provide basic emergency care</i> , or demonstrate equivalent knowledge and skills.
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### Guidance Information

- 1 Practical competence must be demonstrated with a minimum of two patients in one or more emergency situations, which may be real or simulated.
- 2 Any assessments requiring application of organisational requirements may be performed using workplace organisational requirements, or simulation/scenario-based activities utilising sector good practice guidelines and/or current New Zealand Resuscitation Council Guidelines and Publications.
- 3 Definitions
 

*Current emergency care practices* – for the purposes of this standard, these refer to clinical techniques or methodologies that have proven to be most effective at delivering a desired outcome and are actively promoted across the emergency care sector, particularly in out-of-hospital contexts such as emergency care first response.

*Emergency care first response context* – for the purposes of this unit standard, this refers to situations where emergency care is delivered in a variety of out-of-hospital environments, largely by non-health professionals, prior to transfer of care to ambulance crew or other health care professional. Emergency care in this context recognises and responds to respiratory and circulatory insufficiency, changes in levels of consciousness, and responds to other conditions using devices and/or techniques readily available to non-health professionals.

#### 4 References

References include New Zealand Resuscitation Council (NZRC) guidelines and publications; and/or the protocols of the organisation employing the candidate; and/or equipment manufacturer's documentation; and/or current texts relating to out-of-hospital emergency care practices. Guidelines relating to all aspects of adult, child, and infant basic life support are available at <http://www.resus.org.nz>.

#### 5 Range

All procedures in this unit standard should be carried out:

- a according to current emergency care practices;
- b in a manner that will not exacerbate the patient's condition; and
- c in compliance with the Health and Safety at Work Act 2015, and subsequent amendments.

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### Outcomes and performance criteria

#### Outcome 1

Assess and record patient vital signs and explain perfusion status in the emergency care first response context.

Range inclusion or exclusion of range items must be justified in relation to the patient condition.

#### Performance criteria

1.1 Vital signs are assessed and recorded to ascertain if they are within normal parameters.

Range includes but is not limited to – level of consciousness, pulse, respirations, blood pressure, skin, pupils.

1.2 Explain perfusion status.

Range includes but is not limited to – presence of carotid; femoral and radial pulses; skin colour, temperature and dryness; level of consciousness as a measure of brain perfusion.

#### Outcome 2

Gather current and relevant patient medical history in the emergency care first response context.

#### Performance criteria

2.1 Identify the relevant components of a patient's medical history.

2.2 Gather information from a patient and other parties to establish current and relevant medical history.

- 2.3 Information communicated by others is checked for comprehension, interpretation, and clarity of intent.
- 2.4 Record the history, examination, and treatment in a concise and logical manner consistent organisational privacy requirements.

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<b>Planned review date</b>	31 December 2025
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**Status information and last date for assessment for superseded versions**

Process	Version	Date	Last Date for Assessment
Registration	1	10 December 2015	N/A
Revision	2	25 July 2019	N/A
Rollover	3	24 June 2021	N/A
Rollover and Revision	4	28 September 2023	N/A

<b>Consent and Moderation Requirements (CMR) reference</b>	0121
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This CMR can be accessed at <http://www.nzqa.govt.nz/framework/search/index.do>.

**Comments on this unit standard**

Please contact Toitū te Waiora Community, Health, Education and Social Services Workforce Development Council [info@toitutewaiora.nz](mailto:info@toitutewaiora.nz) if you wish to suggest changes to the content of this unit standard.