Rolled Ankle Review GREEN



Reviewed Staff: Reviewers:

Situation: A student has hurt his/her ankle before and thinks he/she may have rolled it. The victim does not want University Police or EMS called and feels he/she will just to the doctor to get it checked out.

Victim: Lie on the ground gripping your ankle in pain, telling the responder you do not want the police and you know what's wrong.

Witness: Run to the office/intramural supervisor and explain your friend hurt their ankle badly.

Checklist - (Facilitator/victim will verbalize bold words in parenthesis

If 3 (*) missed, staff automatically does not meet requirements

- ____ Grab the AED, first aid kit, radio and cellphone*
- ____ Check the scene (Facilitator: scene is safe)
- ____ Check the victim and ask "are you okay?" (Victim: "My ankle hurts a lot")
- _____ Ask the victim what happened? Where does it hurt? Do you hurt anywhere else? Has this ever happened before? Did you hear or feel anything?*
- _____ Tell victim you are first aid certified and want to help; obtain consent
- Move victim to a comfortable position (sitting/lying down) while stabilizing injury
- ____ Radio other staff for bag of ice
- ____ Radio other staff and offer assistance of the transportation chair

(If the ice and transportation chair are not prompted, facilitator will instruct them to do so)

____ Apply ice to the injury

Date: _____

____ Stay with victim and try to keep calm until he/she feels like he/she is ready to leave. (Facilitator: What would you do while monitoring the student?)

Watch for signs of shock (See symptoms listed below: must verbalize at least 3)

Fill out an accident report* (Facilitator: What information should be included on the report?) Explain what SAMPLE stands for

Explain transportation options and give pink transportation slip to victim^{*}

____Make sure he/she leaves with University Police or a friend

(Victim: "I am fine and I would like to leave")

After victim departs:

Inform Pro Staff about the emergency, call Mo if after hours

Other

- Check for knowledge of building address and appropriate phone number
- Does staff member have CPR pocket mask clipped on?
- Keep in mind "RICE": Rest Immobilize Cold Elevate

Symptoms of sho	ock: confusion,	altered level of	consciousness,	pale/ashen	appearance,
cool/moist skin, i	rapid breathing	excessive thirs	t, nausea, and v	omiting	

Please write comments on back of sheet \rightarrow

Address

1601 Badger St

1820 Pine St

Phone Number

608-785-5225

608-785-8696

Rec info: all staff members

MH info: only if staff member works there

☐ Met Requirements ☐ Did not meet requirements ____ (Facilitator: **Paige will contact you**)

Signature of Facilitator: ______ Signature of Reviewee: ______

Location

Mitchell Hall

REC