



CODE

*Red*

VI SWANADITHAN ♀  
 1103479 KANGGAIMA

**Urgence / Emergency Department**  
**Feuille de triage**  
**Triage Assessment Sheet**

Date: 06/01/18 Hrs/Time: 2255 Age: 47

Mode d'arrivée/Method of Transport:  Ambulance  Ambulant/Ambulatory  Police

Référence/Referral:  Étab/Center  Clin/CLSC  Docteur/Doctor

Accompagné/Accompanied: Oui/Yes  FRIEND (WITNESS) Non/No

**Évaluation subjective/Subjective Assessment**

Raison de la visite/Reason for visit: HT & RIN  
PEDESTRIAN STRUCK BY  
 Histoire actuelle/Presenting History: CAR  
AT A 60KMPH ON  
JARVIS & ST. LAURENT  
& FLEW OVER CAR  
→ LOC FOR MINUTES  
& CONFUSION AFTERWARDS  
PTX ON

**Antécédents médicaux en relation avec les systèmes suivants**  
**Past Medical History according to the following systems**

Neurologie/Neurology: \_\_\_\_\_  
 Respiratoire/Respiratory: \_\_\_\_\_  
 Cardiovasculaire/Cardiovascular: \_\_\_\_\_  
 Gastro-intestinal/Gastrointestinal: \_\_\_\_\_  
 Renal: \_\_\_\_\_  
 Endocrinologie/Endocrinology: \_\_\_\_\_  
 Autre/Other: \_\_\_\_\_

**Médicaments/Present Medications**

D.

Allergies: D.

Dernière infection anti-tétanique  
 Last tetanus toxoid

**Évaluation objective/Objective Assessment**

Observations:  
A&Ox4  
9/10 PAIN AT OCCIPUT  
& NECK PAIN  
PHYSICAL OF ACCIDENT

Signes vitaux/Vital Signs  N/A  
 TA/BP 117/74 TA/BP \_\_\_\_\_  
 Pouls/Pulse 72 Pouls/Pulse \_\_\_\_\_  
 Respiration 12 Température 37.5

**Évaluation: Assessment**

Class	Primary	Secondary	Hrs/Time	Initial
I Stat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
II Urgent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
III Semi-Urgent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV Non-Urgent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Intervention/Plan**

Endroit/Place: AR

Heure de réévaluation/  
 Time to be Reassessed: \_\_\_\_\_

Référé à/Referred to: \_\_\_\_\_

D. Abeniggo-CAR  
 Signature de l'infirmière de triage  
 Triage Nurse Signature

X