

WFR Part 1—SOAP Note Practice

## The SOAP Note: How To Document The Patient’s Medical Condition

Learning how to write SOAP Notes is a very important part of the Wilderness First Responder certification.

The SOAP note serves as your documentation for the patient’s medical condition, as well as any treatment or evacuation you plan to go forward with.

It’s very important to document what the patient is experiencing, so you can give an accurate report to EMS or to anyone who assumes care of the patient after you. It’s also important to document clearly to protect yourself against legal claims if the patient has a negative outcome.

No SOAP note is perfect, but you’ll become better with practice throughout the course.

## What Goes In A SOAP Note?

A SOAP note contains four categories of information:

### S—Subjective

This component of your SOAP note includes information about the event/injury provided by the patient or bystanders, what you see that gives you a sense of the situation, and the summary/story of what happened.

Key points to communicate include:

* Patient’s age and gender
* Chief complaint—when calling emergency services, the first thing to communicate is what the patient identifies as their chief complaint (what bothers them the most). For example, “throbbing pain in the left wrist.”
* Describe the mechanism of injury (“MOI”) or history of present illness (“HPI”) so that they can understand how the event happened.

“MOI” explains what led to the injury, like a patient falling from a 15-foot tree or ladder.

“HPI” explains how the illness came on, like the patient developed a headache while climbing a trail.

**Example**

“This is a 31-year-old female patient whose chief complaint is a throbbing pain in her left wrist. She states her MOI was falling down a flight of stairs, about 15 feet.”

### O—Objective

The second component of your SOAP Note includes **objective, quantifiable and measurable** data: your findings and observations of the patient’s current state.

A thorough patient assessment is essential to ensure you give the healthcare provider an accurate sense of the patient’s condition.

Note the position you found your patient in following the MOI.

Provide details about pertinent findings, or pertinent negatives, found during your patient exam.

Examples of relevant findings to convey to a healthcare provider include:

* Bruises/bleeding
* Unusual hardness/softness
* Unusual breathing sounds (wheezing, rapid)
* Grunts from pain, spine tenderness, and unusual smells
* Changes to circulation (pulses), sensation (tingling/numbness), and motion, also called “CSMs”
* Pertinent patient history and findings from your head to toe assessment.
* Vital signs

Vital Signs

Note the time when you take the patient's vital signs and any notable changes to these over time. Relay these vital signs for your patient:

* Level of Responsiveness (LOR). Check to see if the patient is awake and oriented to who they are, where they are, what date/time it is, and recent events. If they can answer all of these questions, you note “Alert and Oriented x 4” or “AAO x 4”.
* If a patient appears unresponsive, check whether they are responsive to verbal stimuli, responsive to pain, or totally unresponsive.
* Respiratory rate (breaths per minute), rhythm, and quality
* Heart rate (pulse), rhythm, and quality
* Temperature, if you have a thermometer
* Skin color, temperature, and moisture (called “SCTM”): Normal skin tends to have pink mucous membranes (ex: a patient’s inner lip) and is warm and moist. Normal pupils tend to be equal, round, and reactive to light (“PERRL”).

**Example**

“The patient was found lying on her left side, clutching her left wrist. The left wrist has bruising but no bleeding. She did not lose consciousness at any point. She complains of pain in her left wrist and it hurts to move. No point tenderness on her spine. CSM in all four limbs is normal.”

### A—Assessment

The third component of your SOAP report is the assessment, which is where you convey the problem.

Use your wilderness medicine education to assess the patient’s signs/symptoms and make a decision about what the diagnosis might be. If you’re not sure, it’s fine to list more than one thing as a possibility. Briefly explain your reasoning.

**Example**

“After testing the strength and flexibility of her wrist, it’s not usable, and any movement is very painful. She may have a sprain or break. She has no tenderness of the spine, but may still have a spinal injury because of the height of the fall.”

### P—Planning or Plans for Patient

This is where you outline your beginning treatment plan. If you are presenting this to EMS or another rescue or healthcare worker, you should convey what treatment you’ve begun taking, as well as possible steps you plan to take.

**Example**

“I will maintain spine protection by stabilizing the head and neck. I will create an improvised splint for the wrist with a magazine and athletic tape. Because of a possible spine injury, we will wait for the ambulance to arrive before taking any other action or moving the patient.”

**NOTE**: Your wilderness medicine training gives you the tools to create an educated treatment plan, and to identify possible diagnoses for various medical conditions. However, if you have called for the assistance of EMS, you should always defer to their recommendations. They will recommend if and/or when the patient needs to be evacuated and seek definitive care.

## Practice SOAP Note Activity Instructions

Use this activity to practice a SOAP Note. **You will not submit this activity.** It’s just a practice for your benefit. You’ll complete and submit many other SOAP note assignments as part of other lessons in this course.

* Read the scenario.
* Then fill out the S-O-A-P parts at the end of the scenario to the best of your ability.
* Check your answers on the last page.

## Known Facts

You and your cousin are hunting in the Ozarks over Memorial Day weekend. The nearest highway is 45 minutes away via dirt road, and the nearest town 30 minutes further away. You’ve been hiking for several hours away from where you parked the car on the dirt road.

Late in the afternoon, the two of you are standing on a rock ledge overlooking part of the forest. You decide to set up a spotting scope. Your cousin sees a ledge with what he thinks may be a slightly better vantage point. He quickly scrambles up the slope. Suddenly, one of the small bushes he was using as a handhold pulls out of the ground, and he slides down the rocky hillside. He slides for about twenty feet, then hits a large boulder and comes to a stop. He cries out in pain and grabs his right ankle.

When you reach him, you examine his legs. Luckily, he managed to escape with only a few minor cuts on his thighs. However, his right ankle is in a lot of pain. It only takes a few minutes for it to start to swell.

Prepare your practice SOAP Note, then check your answers.

**Primary Assessment:** Patient is alert and oriented x 4. He complains of a lot of pain in his right ankle, but he does not have any apparent bleeding or severe injuries. He did not lose consciousness. His breathing and circulation are good.

**Secondary Assessment:** Patient says the pain in his right ankle is about “7/10.” After a few minutes, it begins to swell. However, he has normal circulation, sensation, and movement (CSM) of the ankle. The CSM of the toes is normal as well. He is able to stand and walk on it with a slight limp. He does not have any other apparent injuries- except for a few minor scrapes on his hands. He has no pain in his head, neck, or back, and insists that his ankle took the most force from the fall

|  |  |
| --- | --- |
| Time | 16:00 |
| Level of Responsiveness (LOR) | A+O x4 |
| Heart Rate (HR) | 65, strong, regular |
| Respiratory Rate (RR) | 20, regular, no wheezing |
| Skin Color | Pink, flushed, warm, no rashes |
| Blood Pressure (BP) | Radial pulses present |
| Pupils | PERRL |
| Temperature | Not taken |

|  |  |
| --- | --- |
| **S**ymptoms | Pain in right ankle |
| **A**llergies | None |
| **M**edications | None. Takes occasional heartburn medication. |
| **P**ertinent History | 28 years old. None. |
| **L**ast In/Out | Patient ate full lunch 5 hours ago & has drunk about 2 liters of water this afternoon. Outputs are unremarkable. |
| **E**vents | Patient slid about 20 feet down a hillside and absorbed the force of the fall with his feet against a rock. |

## SOAP Note

Do your best to complete the S-O-A-P components, then check your answers on the following page. Potential SOAP scenario answers may vary, and sometimes there are several correct answers. Use the details provided to the best of your ability. As long as you back up your answers with sound reasoning, you’ll do well.

# S—Subjective:

# O—Objective:

# A—Assessment:

# P—Plan:

## Check Your Answers

### Subjective

### The patient is a 28-year-old male whose chief complaint is pain in the right ankle. The patient slid about 20 feet while scrambling up a hillside. He absorbed the force of the fall with his feet against a boulder. He did not hit his head or lose consciousness. Patient is currently alert and oriented (A&O x 4).

### Objective

### The patient was found on the ground, clutching his right ankle. He did not lose consciousness at any point. He complains of pain in his right ankle and it hurts to move, but has good CSM. He is able to walk on it with a slight limp. No tenderness on his spine or pain elsewhere in the body.

### Assessment

### The patient has an injury to his right ankle. He is able to walk on it.

### Plan

### We will hike back to the car and periodically monitor the circulation, sensation, and motion (CSM) of the ankle and foot. The patient will apply ice and compression to the ankle as soon as it is available.