

General instructions for tasks

All teams execute tasks in compliance with rule:

"Rallye Rejviz is training and game - do all you can for patients benefit"

- a) The time reserved for the accomplishment of each task is the maximum time. It begins by the first member of the team getting off the vehicle. The task judge will warn you 2 minutes before the end of time limit. When your time is up, you must stop, get into your vehicle and leave the scene.
- b) During the task listen to and follow instructions of judges and organizers.
- c) The evaluation of task is done by positive points, i. e. the more points, the better result. The number of acquired points is not announced by judges in task area.
- d) We accept imitations of ambulance equipment, which are visibly marked, i. e. shoebox with a cord (tube) and visible title „suction unit“. We won't accept the same box with titles suction unit, ventilator, ECG only on different sides!
- e) If there are other people (photographers, etc.) then competing crew in the Ambulance, crew will announce this to an organizer at start of task and before arrival on the task site these persons will leave the Ambulance and move according to instructions of organizers.
- f) If the crew will be „miraculously“ informed about the task judges will use more strict score awarding criteria. Beware, players and their injuries are not unchangeable.
- g) If the patient's vital functions parameters (heart rate, blood pressure, ... etc.) are not a part of task explanatory note, you will get them from the judge after examination of the patient. Vital signs should be consciously obtained by measurement on the patient.
- the value of heart rate is necessary to be measured at least 10 seconds by holding the finger at a. radialis or a. carotis externa, it is also possible to read the value from monitor
 - blood pressure – it is not necessary to perform measurement of real BP, but you have to set the tonometer cuff on the arm and to have stethoscope prepared
 - pulse oxymetry – it is allowed to use your own pulse oxymeter, the simulated value will be announced by judge.
- It is prohibited to ask about vital functions of the patient without examining him first! If the crew has pre-prepared material (i. e. I. V. set) and in a range of 10 seconds wants to know all attributes of vital functions, judge will provide them in a real time range, according to practical experience.
- h) Treat the scenario patient as a real case.
- i) Oxygen – the pressure bottle with equipment must be at the patient, the face mask or tracheal cannula must be near the head of patient (if you are not reported by the judge in another way)
- j) Monitor (oxymeter) must be switched on besides the patient with cables at least embedded on patient.
- k) When administering medication, you must physically put the box (ampule) with the drug near the place of applying and report to the judge the name of the drug, dose and the way of application for instance Valium, 10 milligrams, intravenous administration). You must really show the appropriate drug to the judge, with only exception of narcotics – in this case you can show another ampule and declare it by the right name). It is not possible to report drugs administration only by words, when you have a bag with them far from the patient.

l) You will simulate intravenous administration by fixing the hose of infusion set (without the needle) to the corresponding part of patient's body and putting the infusion bottle (infusion bag) beside the patient. Then report to the judge "intravenous line ready".

m) Neck immobilization – you are supposed to use the neck collar as in the real situation or immobilise the neck by a member of your crew for the whole of task. It is not possible to put just the collar beside the patient's neck.

n) In the case of „patient transportation“ demand it is the right way to load the patient to the vehicle, whole crew step into the vehicle and closing all doors.

o) In the case of „patient's preparedness for transportation“ demand in the task explanatory note put the patient in the right position on the stretcher (transport chair, another appropriate device) and report „ready for transport“ to judge.

p) In the case of demand on correct routing in the task explanatory note announce your decision to the judge choosing from the options in task legend.

q) Intubation and establishing intravenous line of mannequins should proceed realistically. For insertion of intravenous cannula you have to use the mannequin's pre-built intravenous access place at the arm.

r) Using of splints requires complete application with exception of different demands of judge.

Player's evaluation

Player usually has a total of 100 points, if there are two, each has a half. If there are more players, every player rate proportionally to amount of allocated points.

Each part of score awarding has 4 levels:

perfect	25 points
not absolutely perfect (only small mistakes)	20 points
imperfect (essential part missing)	10 points
whole part missing (approach, communication, kindness, empathy)	0 points

TOTAL SCORE **100 points**

Single parts of score:

1. approach: introducing, calm and self-conscious approach, one member of crew talking to the patient, understandable explanation (non - Latin expressions, for example. fracture, commotio)

2. communication: explaining the progress of primary and secondary examination, explain diagnosis to the patient, explanation of treatment, routing, informing the patient before sudden changes of positioning, explanation to relatives,

3. kind manipulation: gentle positioning, careful manipulation during immobilisation, gentle undressing,

4. empathy: protection from weather (rain, wind, coldness, sun), no patient over-stepping, no undressing in front of public,