In addition to assessing pulse and breathing rate and quality, there are several key signs of shock that rescuers should assess, including skin color, skin temperature and condition, and capillary refill. These quick assessments will help the rescuer form a general impression of how adequately the victim is perfusing oxygenated blood throughout the body. Changes in normal skin complexion, such as pale, cyanotic, flushed, red, or jaundiced skin, may be an indication of shock. Skin temperature and moisture (eg, hot and dry or cool and clammy) may also be indicators of shock.

**Figure 3-4.** (A) Head-tilt chin-lift. (B) Modified jaw thrust.

**Spinal Injury**

A cursory assessment of motor and sensory function in the extremities should be performed next (a more detailed neurological examination will be discussed later). A brief assessment of sensory and motor function in the extremities, combined with the mechanism of injury and the victim’s chief complaint, will help determine whether spinal precautions will be necessary. A spinal injury should be suspected in all traumatic injuries until proven otherwise.

Assess for sensory nerve function by brushing or gently pinching the victim’s hands and feet. The athletic trainer should ask the victim to squeeze his or her fingers with his or her hands and plantar flex his or her ankle against resistance to assess motor function. The absence of sensory