

Case Management: Series 1

For on site tutorials as part of the remote simulation program

Paediatrics: 6

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Introductions



General Aims

- Learn in a team setting
- Blend clinical skills with team skills
- Reflect critically on practice

Ground Rules

- Participation
- Privacy
- Confidentiality
- Disclaimer
- Debriefing
- Mobile phones

Session Objectives

- Describe the structured approach to a paediatric respiratory emergency
- Provide clinical management for the paediatric patient
- Identify key components for effective team work



Structured Approach

Airway

Breathing

Circulation

Disability

Exposure

Fluids

Glucose

- Primary assessment
- Resuscitation
- Secondary assessment – identification of key issues
- Emergency treatment
- Stabilisation, transfer to definitive care

Crisis Resource Management

- Know your environment
- Prepare and plan
- Call for help
- Take a leadership role
- Allocate attention
- Distribute the workload and use resources
- Communicate effectively

Scenario

- 6 month old girl ex prem, unwell 3/7 w URTI, cough/SOB 2/7, difficulty feeding this morning, marked increased work of breathing & lethargy



Scenario

- BAT CALL

6yo known asthmatic

RR 38, HR 170, Very wheezy

Three lots of ventolin via spacer

ETA 2 minutes

Summary

- Call for assistance in anticipation of clinical and logistical need.
- Planning & preparation are both long and short term factors.
- Clear, concise communication is the responsibility of all members of the team.

References

- Advanced Paediatric Life Support Manual (5th Edition), 2011.
- NSW Health Policy “Infants & Children – Recognition of a sick baby or child in the emergency department”, 2011.
- NSW Health Policy “Infants & Children – Acute management of Asthma”, 2012
- NSW Health Policy “ Infants & Children – Acute management of Bronchiolitis”, 2012

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