

Ambulance Hand Over

M – Alf Stewart a 75-year-old gentleman woke at about 0430 with difficulty breathing. He felt light headed and anxious and his wife phoned for an ambulance.

I – He sounds wheezy and has a strong history of ischaemic heart disease. He has had a previous CABG, smokes and has diabetes and high blood pressure.

S – At the scene Alf's observations were: RR – 40/min, Sats – 93% on air, HR – 110 irregular and NIBP was 110/75. Just before arrival at the ED his observations were: RR – 35/min, Sats 95% on a Hudson mask, HR – 110 irregular and NIBP – 100/60.

T – Alf has been cannulated with an 18G cannula. Oxygen started and 5mg of nebulised salbutamol given en route. He has also received 300mg of aspirin.

A – No Known Allergies

M – Aspirin-75mg, Ramipril-5mg, Atenolol-50mg, Simvastatin-20mg, Omeprazole-20mg, Diet control for his diabetes

B – CABG 8 years ago, Hx of diabetes, hypertension, smoking and GORD

O – Wife followed in her car. She was told to check-in at reception and someone would be out to talk her when they could.

ABG @ 5 Min

pH		7.31	(7.35-7.45)
paCO₂	53		(35-45 mmHg)
paO₂		72	(80-100 mmHg)
HCO₃		18	(22-26 mEq/L)
BE		- 4.3	(-2 to +2)
Lac		3.3	(0-2)
Glu		8.6	
Hb		126	

VBG @ 5 Min

pH		7.28	(7.35-7.45)
paCO₂	57		(35-45 mmHg)
paO₂		33	(80-100 mmHg)
HCO₃		17	(2-26 mEq/L)
BE		- 4.8	(-2 to +2)
Lac		3.5	(0-2)
Glu		8.6	
Hb		127	

ABG @ 10 Min

pH	7.23	(7.35-7.45)
pCO ₂	61	(35-45 mmHg)
pO ₂	68	(80-100 mmHg)
HCO ₃	14	(22-26 mEq/L)
BE	-6.3	(-2 to +2)
Lac	4.7	(0-2)
Glu	7.3	
Hb	119	

VBG @ 10Min

pH	7.20	(7.35-7.45)
pCO ₂	63	(35-45 mmHg)
pO ₂	29	(80-100 mmHg)
HCO ₃	15	(22-26 mEq/L)
BE	- 6.7	(-2 to +2)
Lac	4.8	(0-2)
Glu	7.1	
Hb	130	

ABG @ 15 Min

pH	7.13	(7.35-7.45)
pCO ₂	58	(35-45 mmHg)
pO ₂	64	(80-100 mmHg)
HCO ₃	12	(22-26 mEq/L)
BE	- 8.8	(-2 to +2)
Lac	6.1	(0-2)
Glu	6.6	
Hb	122	

VBG @ 15 Min

pH	7.11	(7.35-7.45)
pCO ₂	61	(35-45 mmHg)
pO ₂	31	(80-100 mmHg)
HCO ₃	10	(22-26mEq/L)
BE	-9.1	(-2 to +2)
Lac	6.3	(0-2)
Glu	6.6	
Hb	122	

