

Signs of Asthma

- Nasal flaring
- Pursed lips
- Broken speech
- Retractions
- Cough
- Abnormal lungs
- Tachycardia
- Tachypnea
- Tripod position

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Treatment

Case One

Any other considerations?

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Evaluation

Case One

Summary

- A case of respiratory distress
- Lower airway disease
- Asthma more prevalent
- Prompt treatment is essential
- Continuous reassessment
- Use of capnography

A B C

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2 All choked up!

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Dispatch

Case Two

Medic 3, respond to 12 Appnyke Lane for a 10-month old with trouble breathing.

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General Impression

Case Two

Physiological condition?

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Initial Assessment

Case Two

What is going on with this kid?

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Rapid History

Case Two

- Onset
- Recent illness
- Activity

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Assessment

UPPER AIRWAY OBSTRUCTION

Pathological

- Croup
- Epiglottitis
- Tracheitis
- Anaphylaxis



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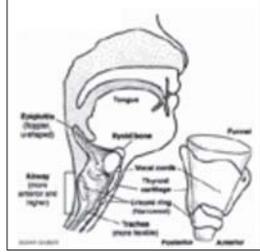
Foreign-Body Obstruction

Case Two



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Upper Airway Anatomy



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Treatment

Case Two



Incomplete airway obstruction

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Evaluation

Case Two



Physiological condition?

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Treatment

Case Two



You're unable to grasp the FOB

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Evaluation

Summary

- Respiratory distress was sudden
- Do not jump to conclusions
- Stay out of the mouth, if possible
- Leave it be if a cough, gag, or cry
- Assess for respiratory failure
- Prompt action with bradycardia

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3 Not so sweet!

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Dispatch

Case Three

Ambulance 315, respond to 14 Sweet Tee Lane for an unconscious child



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Arrive on Scene Case Three



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General Impression Case Three



Physiological condition?

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Initial Assessment Case Three



What is going on with this kid?

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Gather History

C hief complaint	P ast medical history
I mmunizations	P arent's impression
A llergies	E vents surrounding
M edications	D iet / diapers
	S ymptoms

C-I-AM-P²EDS

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Assessment Case Three



What is causing the AMS?

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Potential Sources of AMS

ALTERED MENTAL STATE

Intracranial	Extracranial
<ul style="list-style-type: none"> • Lesion • Tumor • Abscess • Fluid • Blood 	<ul style="list-style-type: none"> • Metabolic • Toxicological

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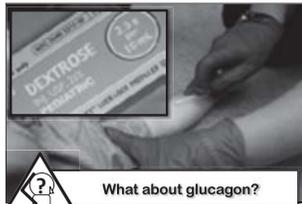
Potential Causes of AMS

AEIOU - TIPS

<ul style="list-style-type: none"> Alcohol Epilepsy Insulin Overdose Uremia 	<ul style="list-style-type: none"> Trauma Infection Poisoning Stroke
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Treatment Case Three



What about glucagon?

Hypoglycemia

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Evaluation Case Three



What caused the drop?

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Disposition

Case Three



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Accidental Poisonings

Summary

- A case of an altered mentation
- Scene assessment fundamental
- PAT extremely useful
- Pediatric-specific references
- Differential diagnoses focus Rx

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4 All warmed up to me
EMT **Case**

Dispatch

Case Four

Ambulance 4, respond to 395 New Run Fires Circle for a child in a seizure.



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Types of Seizures

Generalized	Partial	Neonatal
Tonic-clonic	Simple	Subtle
Absence	Complex	Tonic
		Focal-clonic
		Multifocal
		Myoclonic

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Arrive on Scene

Case Four



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General Impression

Case Four



Physiological condition?

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Initial Assessment

Case Four



What is going on with this kid?

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Gather History

C hief complaint	P ast medical history
I mmunizations	P arent's impression
A llergies	E vents surrounding
M edications	D iet / diapers
	S ymptoms

C-I-AM-P²EDS

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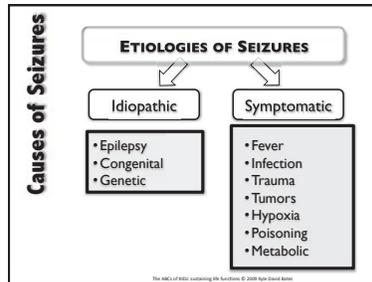
Assessment

Case Four



Cause of the seizure?

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Treatment

Case Four



What about cooling?

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Evaluation

Case Four

Summary

- Respiratory failure d/t seizure
- Problem of ventilation
- Seizing on arrival needs treatment
- Hypoventilation may be common
- Seizures & fevers are signs

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5 **Let's be blunt!**

EMT

Injury Patterns

Case Five



A brisk fall day

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Dispatch

Case Five

Ambulance 6 & Medic 47 respond to Walk and Don't Walk for a child struck by a car.

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Arrive on Scene

Case Five



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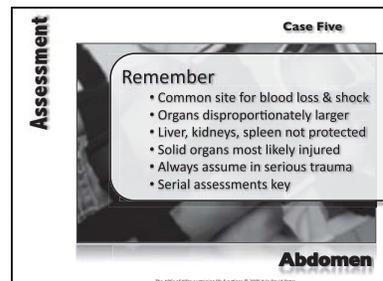
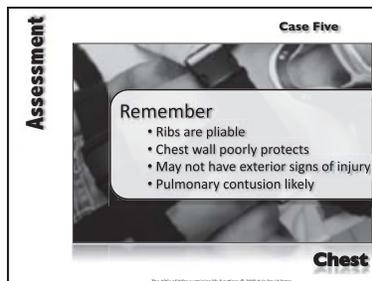
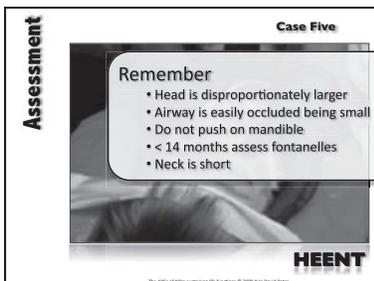
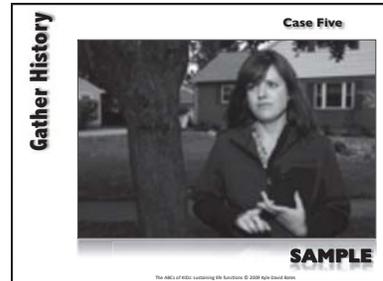
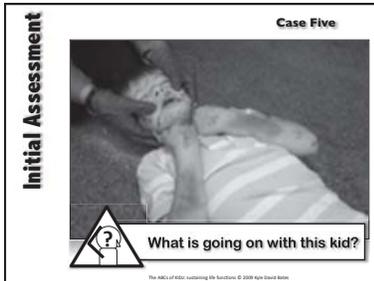
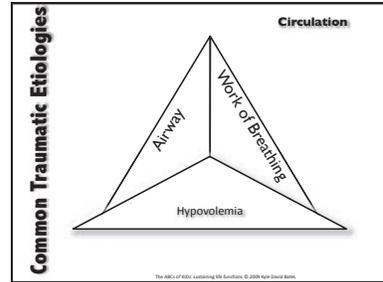
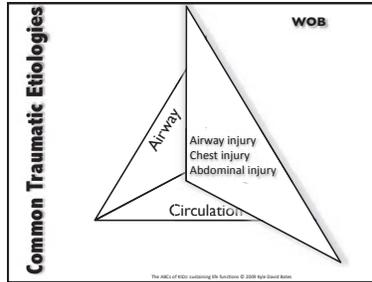
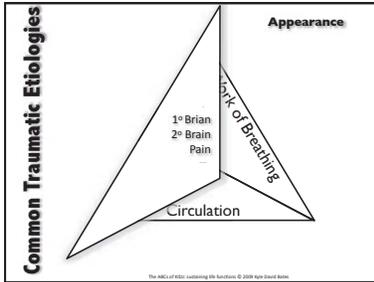
General Impression

Case Five



Physiological condition?

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Assessment Case Five



Remember

- Generally uncommon in young
- Assess the perineum for bleeding

Pelvis

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Assessment Case Five

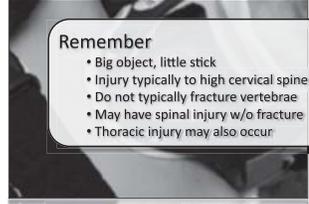
Remember

- Bones flexible, muscles underdeveloped
- May fracture despite outward signs
- 5 P's:
 - ✓ Pain
 - ✓ Pallor
 - ✓ Paresthesia
 - ✓ Paralysis
 - ✓ Pulselessness

Extremities

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Assessment Case Five



Remember

- Big object, little stick
- Injury typically to high cervical spine
- Do not typically fracture vertebrae
- May have spinal injury w/o fracture
- Thoracic injury may also occur

Neck & Back

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Assessment Case Five



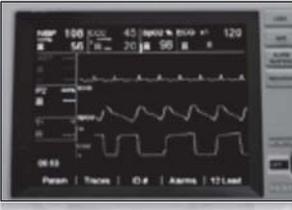
Remember

- Larger skin surface area
- Heat loss is rapid

Skin

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Advanced Treatment Case Five



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Disposition Case Five

Summary

- Problem of all areas
- Oxygenation/ventilation priority
- Anatomical differences
- Essential treatment on scene
- Rapid transport

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KIDz are...

- ...not little adults
- ...different anatomically & cognitively
- ...assessed with the PAT
- ...focus is upon the ABCs
- ...often respiratory in nature
- ...not scary!

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Thank You!

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