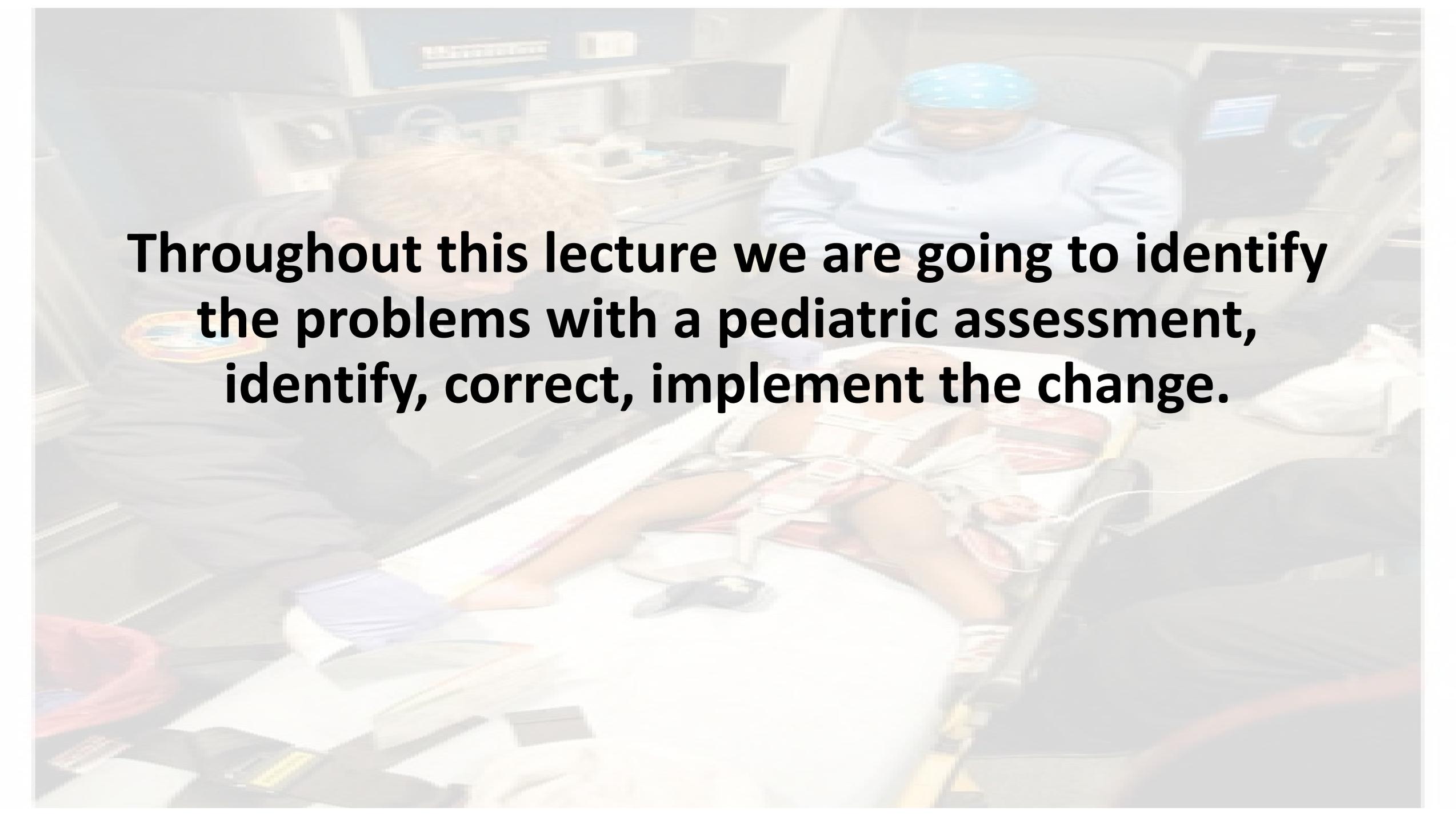
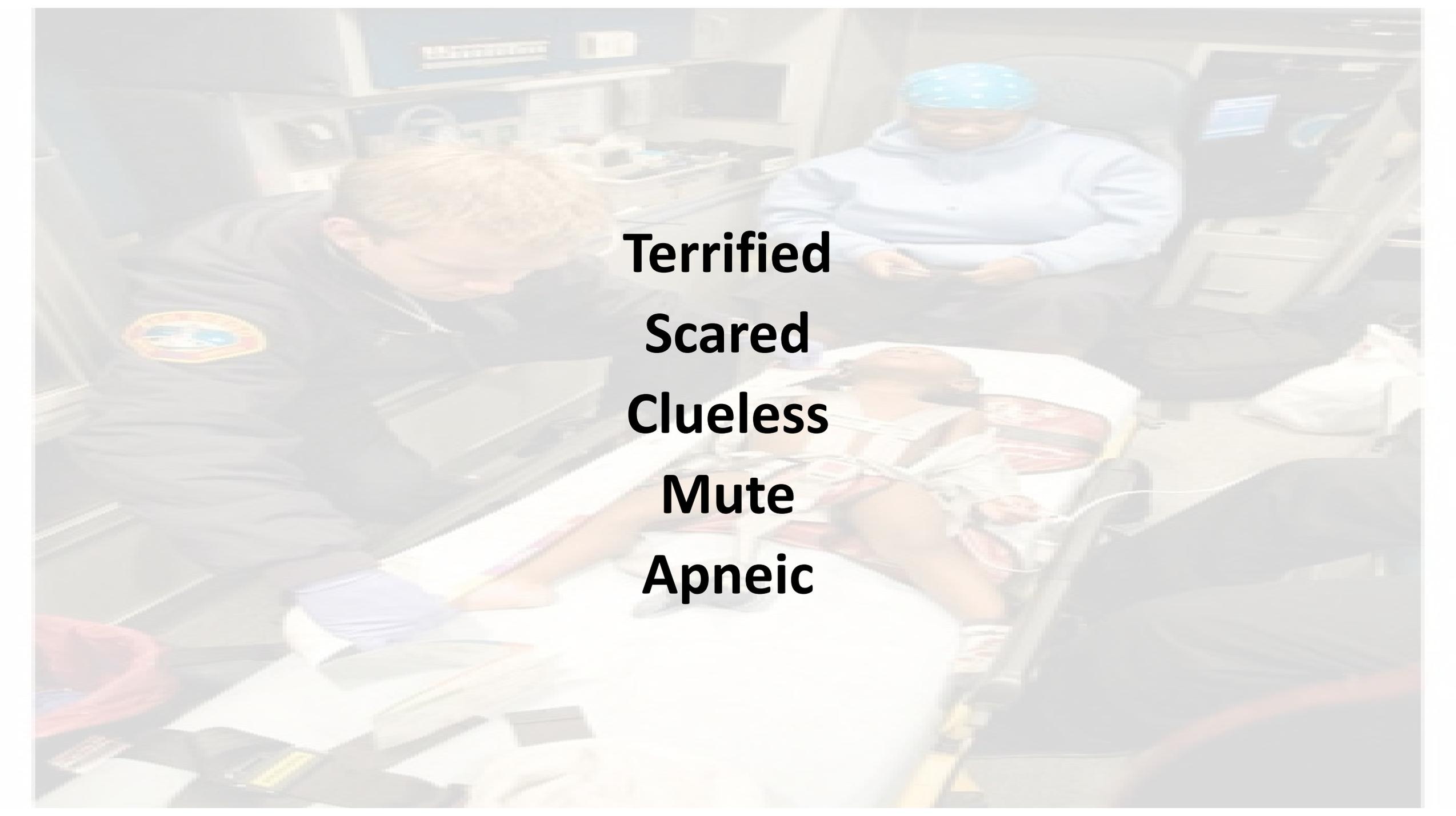


The Wittle Bittle Assessment (pediatrics)

VAOEMS Symposium 2015

A blurred photograph of a pediatric patient lying in a hospital bed. The patient is wearing a blue cap and a white gown. Medical staff in white scrubs are visible around the bed, attending to the patient. The background shows a clinical setting with various medical equipment and monitors.

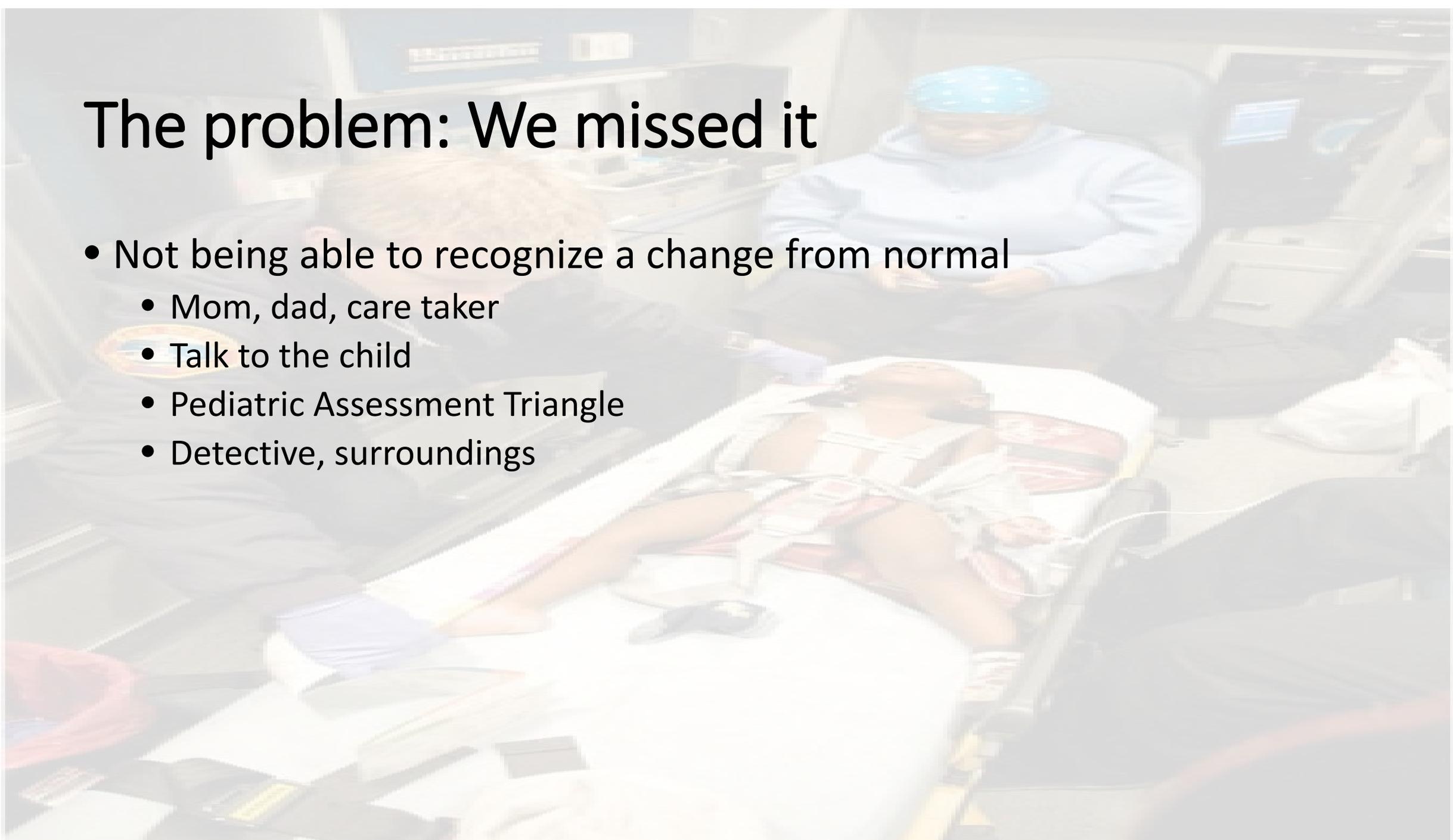
Throughout this lecture we are going to identify the problems with a pediatric assessment, identify, correct, implement the change.



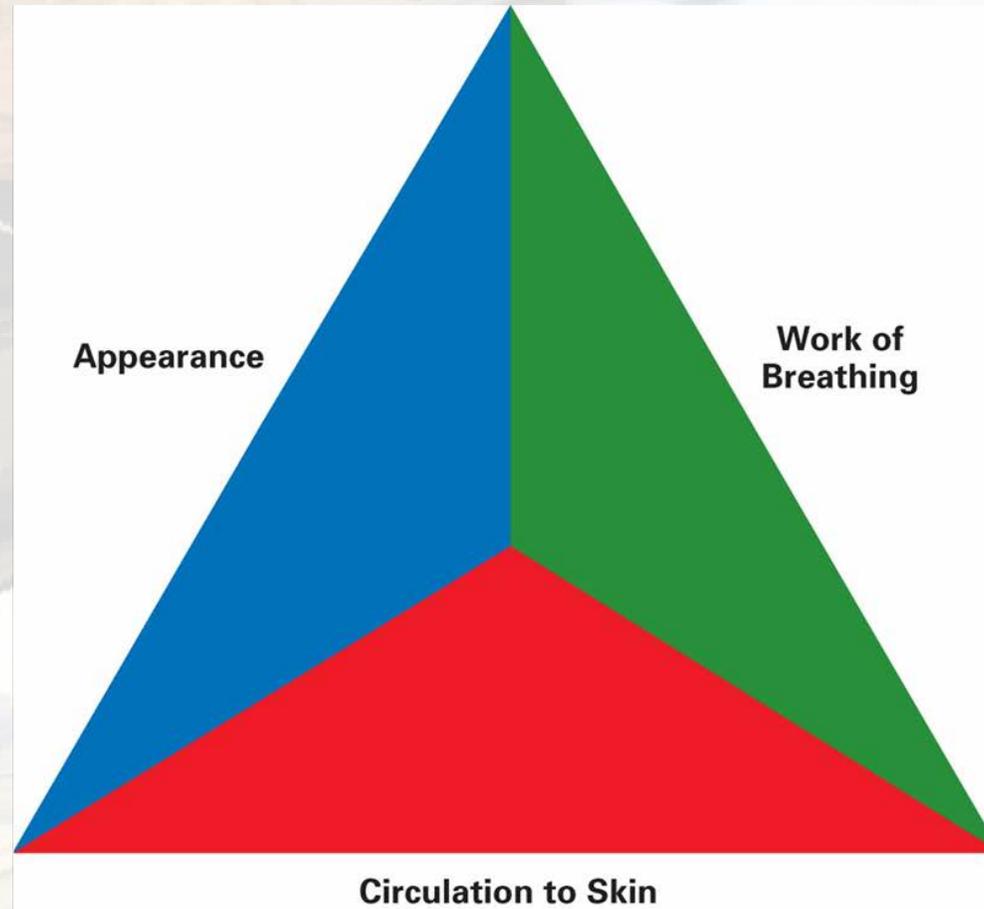
Terrified
Scared
Clueless
Mute
Apneic

The problem: We missed it

- Not being able to recognize a change from normal
 - Mom, dad, care taker
 - Talk to the child
 - Pediatric Assessment Triangle
 - Detective, surroundings



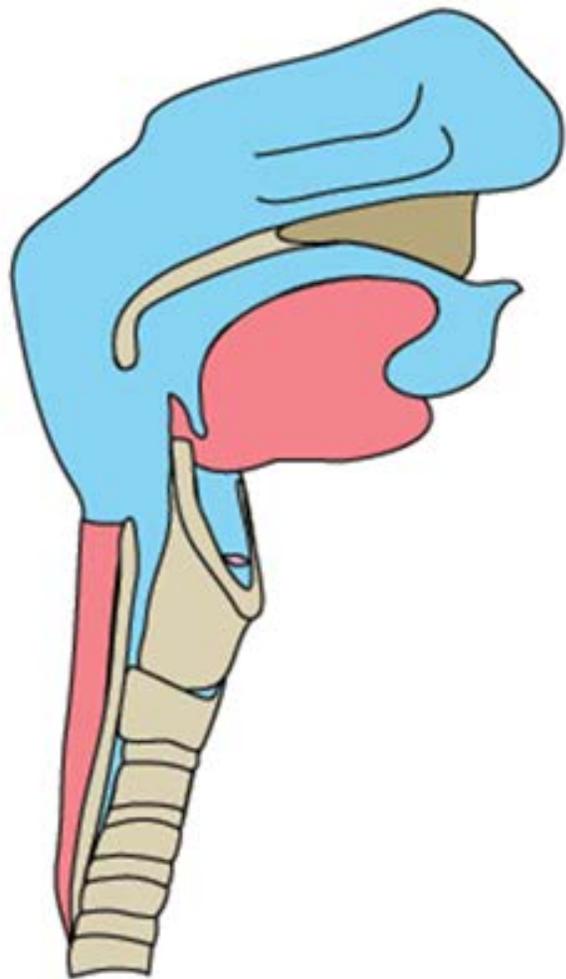
Pediatric Assessment Triangle



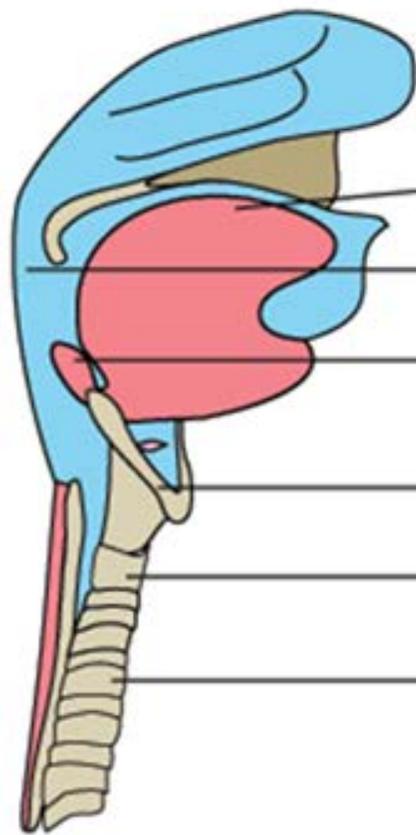
The problem: Different from the “norm”

- Head
 - Larger
 - Soft spots, fontanelles
- Airway
 - Tongue
 - Trachea
- Chest
 - Rubber
- Abdomen
 - Belly breathers
 - Organs





Adult's Upper Airway



Child's Upper Airway

Tongue is larger in proportion to mouth

Pharynx is smaller

Epiglottis is larger and floppier

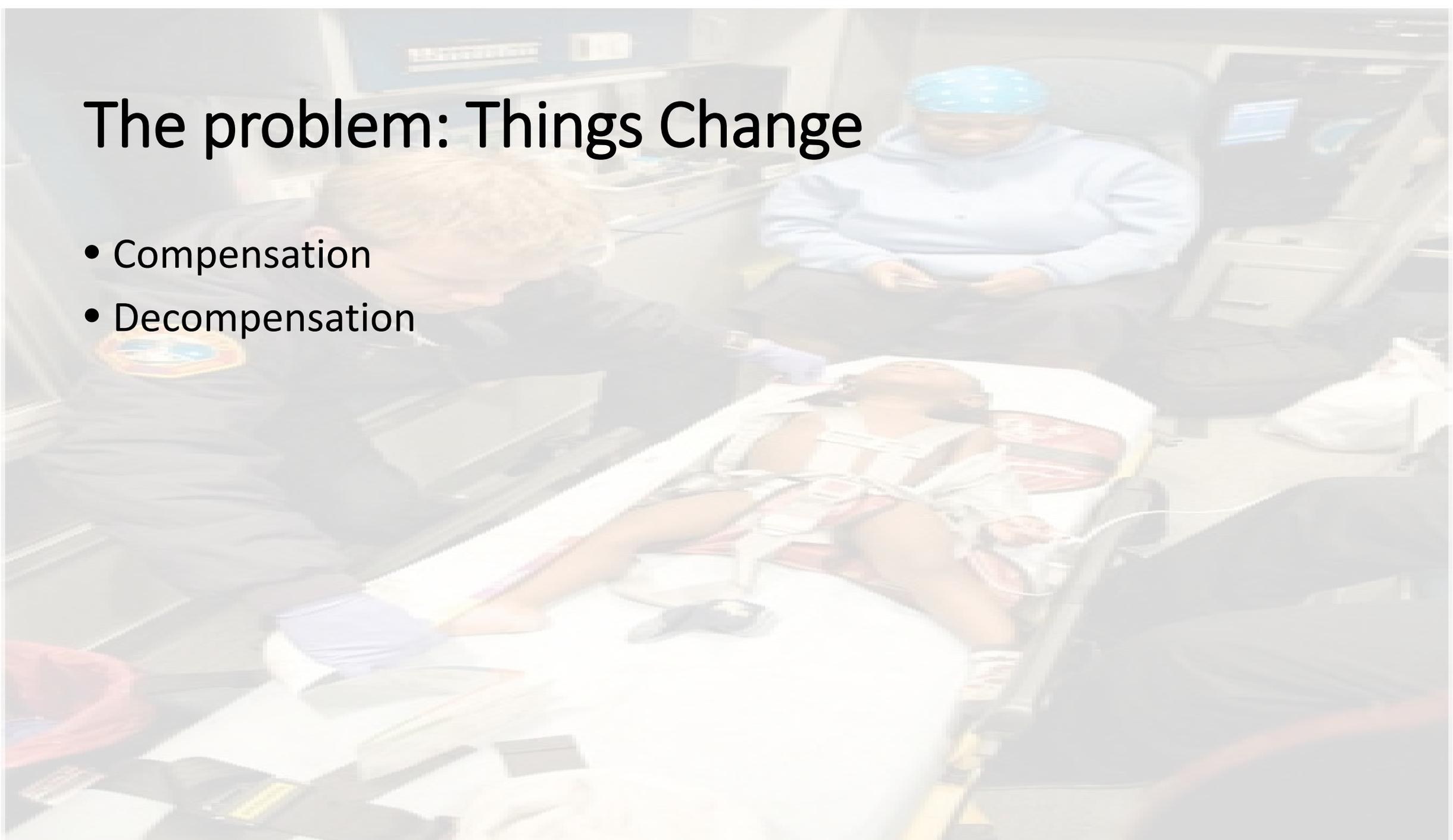
Larynx is more anterior and superior

Narrowest at cricoid

Trachea narrow and less rigid

The problem: Things Change

- Compensation
- Decompensation



Pause, understand this concept CARDIAC

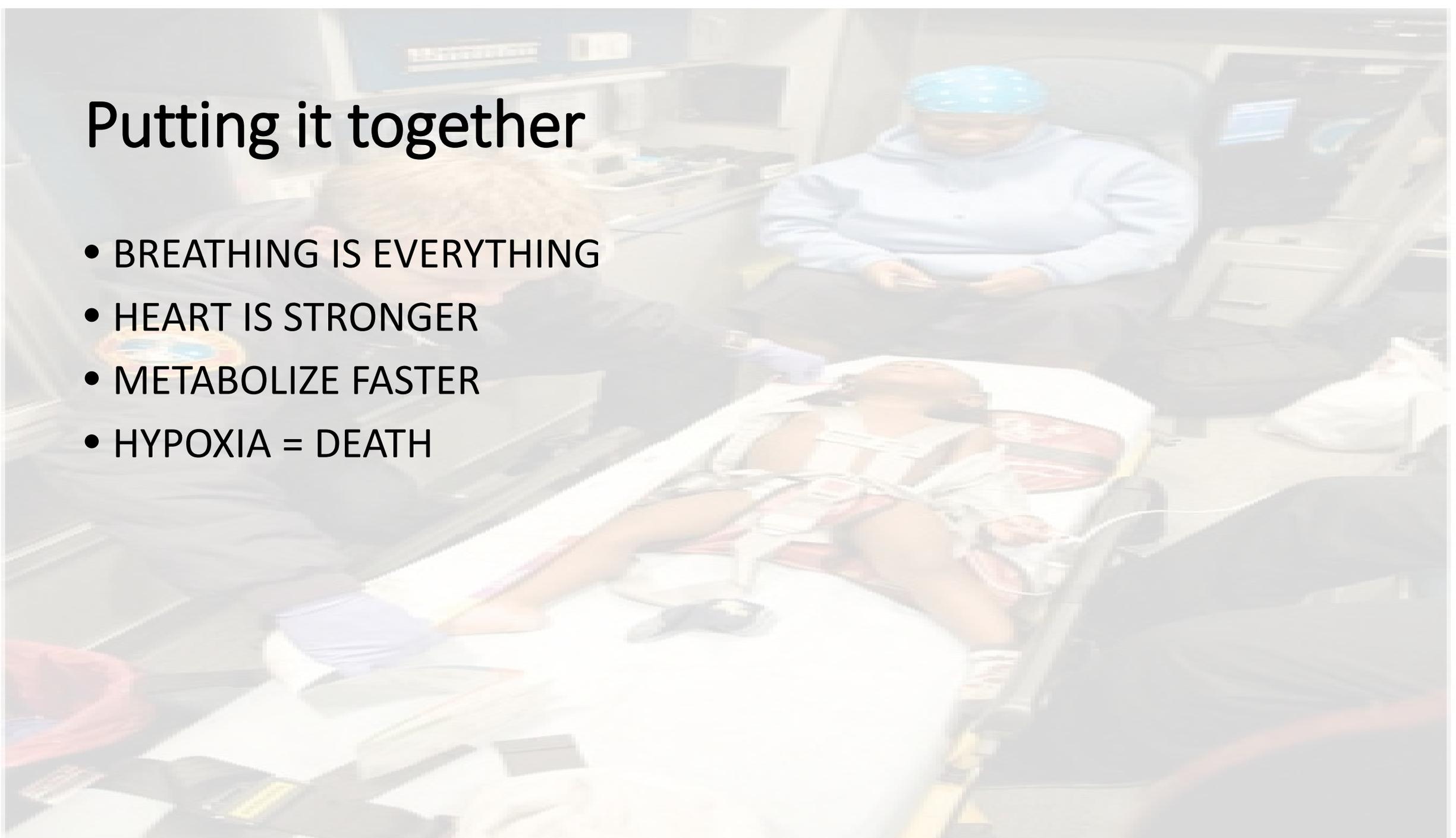
- Adults compensate
 - Heart increases stroke volume, by increasing the strength of the contraction, rate of contraction
 - Blood pressure goes up, heart rate increases = more blood
- Pediatrics compensate
 - Heart increases the rate of contraction
 - Heart rate increases

Pause, understand this concept RESPIRATORY

- Adults compensate
 - Increase respiratory rate
 - Increase depth of respirations
- Pediatrics compensate
 - Increased respiratory rate
 - Depth of respirations will not change due to diaphragm

Putting it together

- BREATHING IS EVERYTHING
- HEART IS STRONGER
- METABOLIZE FASTER
- HYPOXIA = DEATH



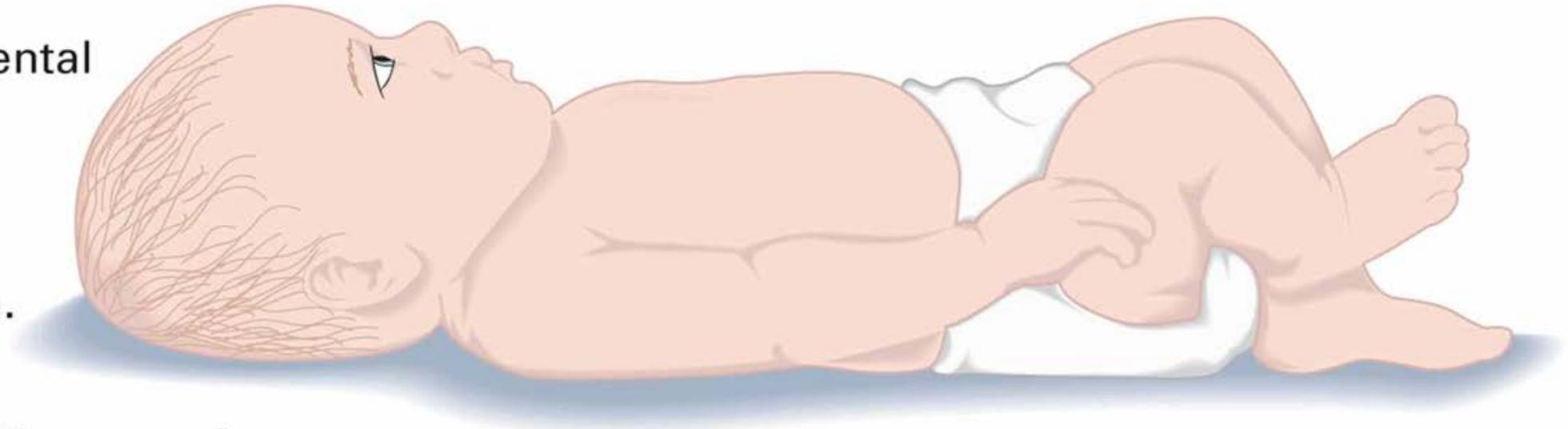
Apathy or lack of vitality.

Rapid respiratory rate.

Rapid or weak and thready pulse.

Altered mental status.

Pale, cool, clammy skin.



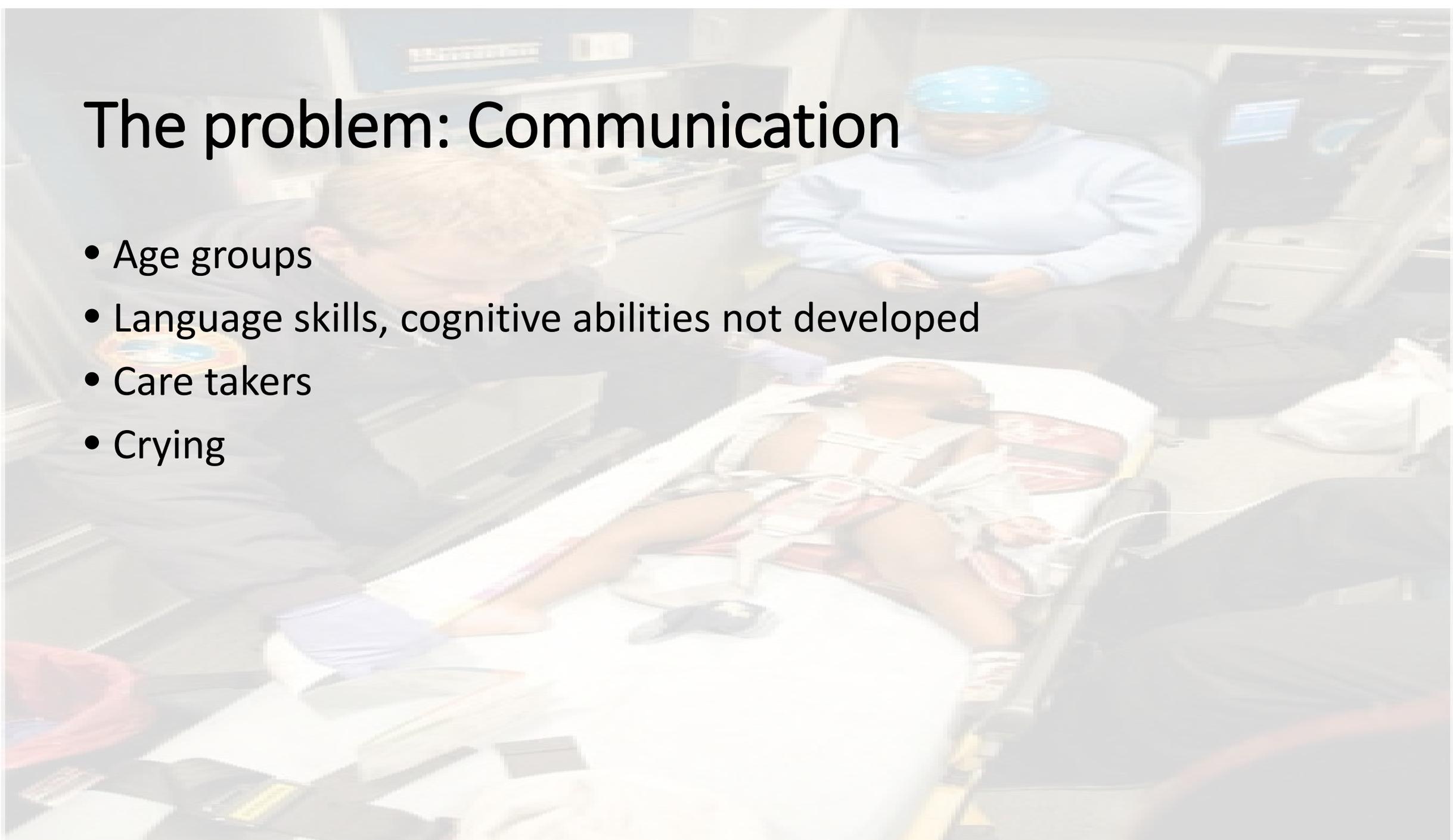
Absence of tears when crying.

Falling blood pressure.

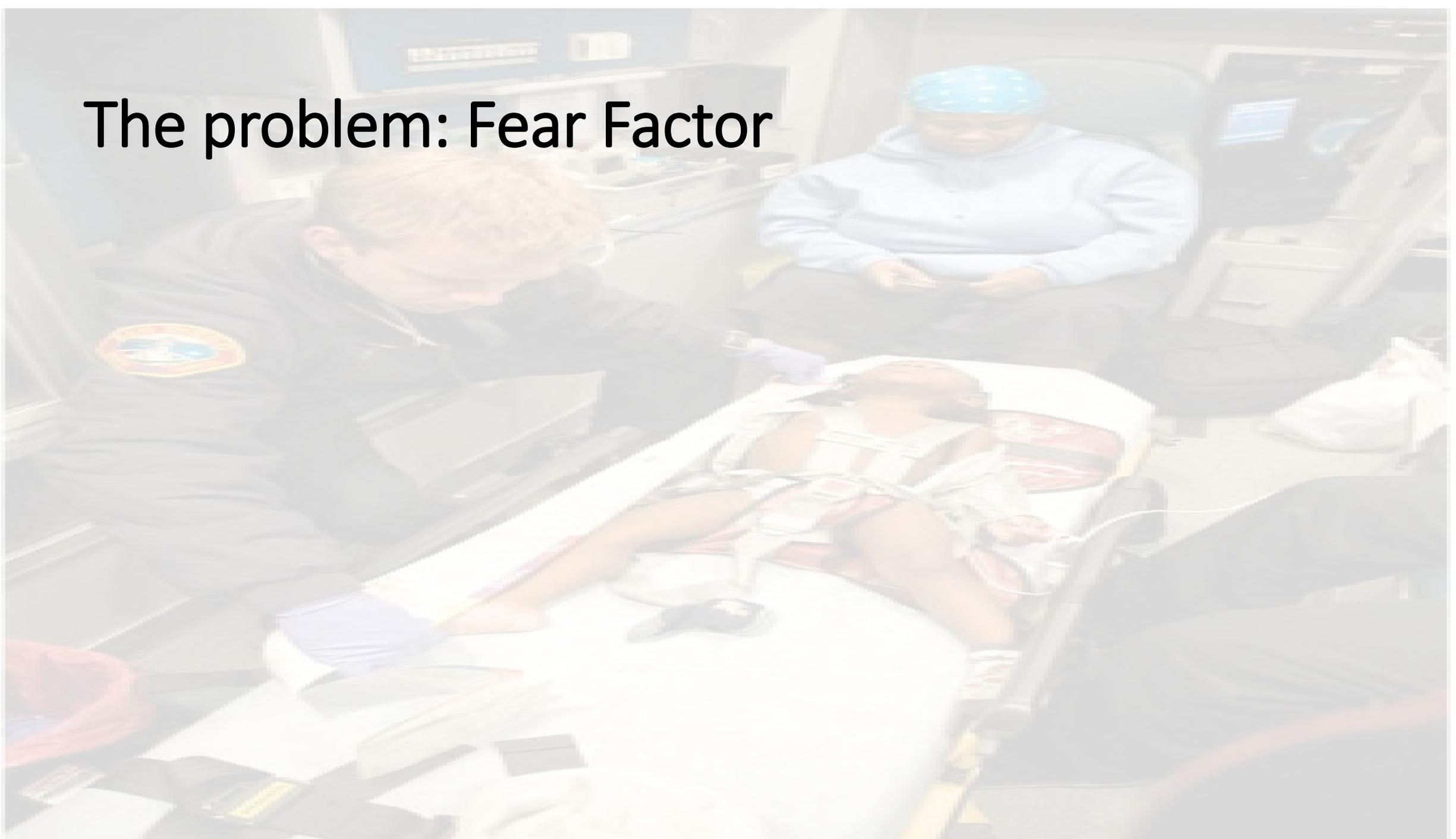
Delayed capillary refill.

The problem: Communication

- Age groups
- Language skills, cognitive abilities not developed
- Care takers
- Crying

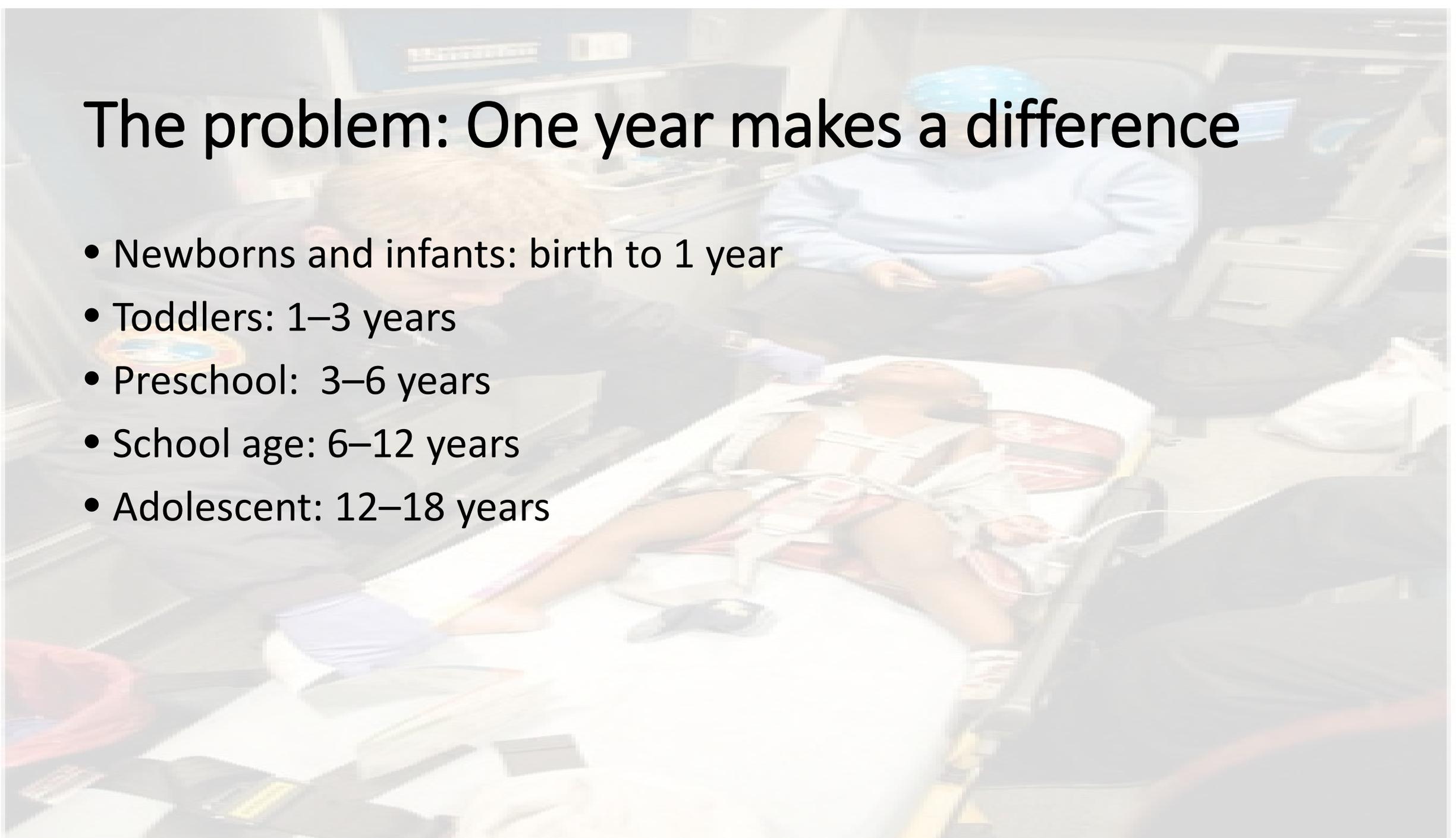


The problem: Fear Factor

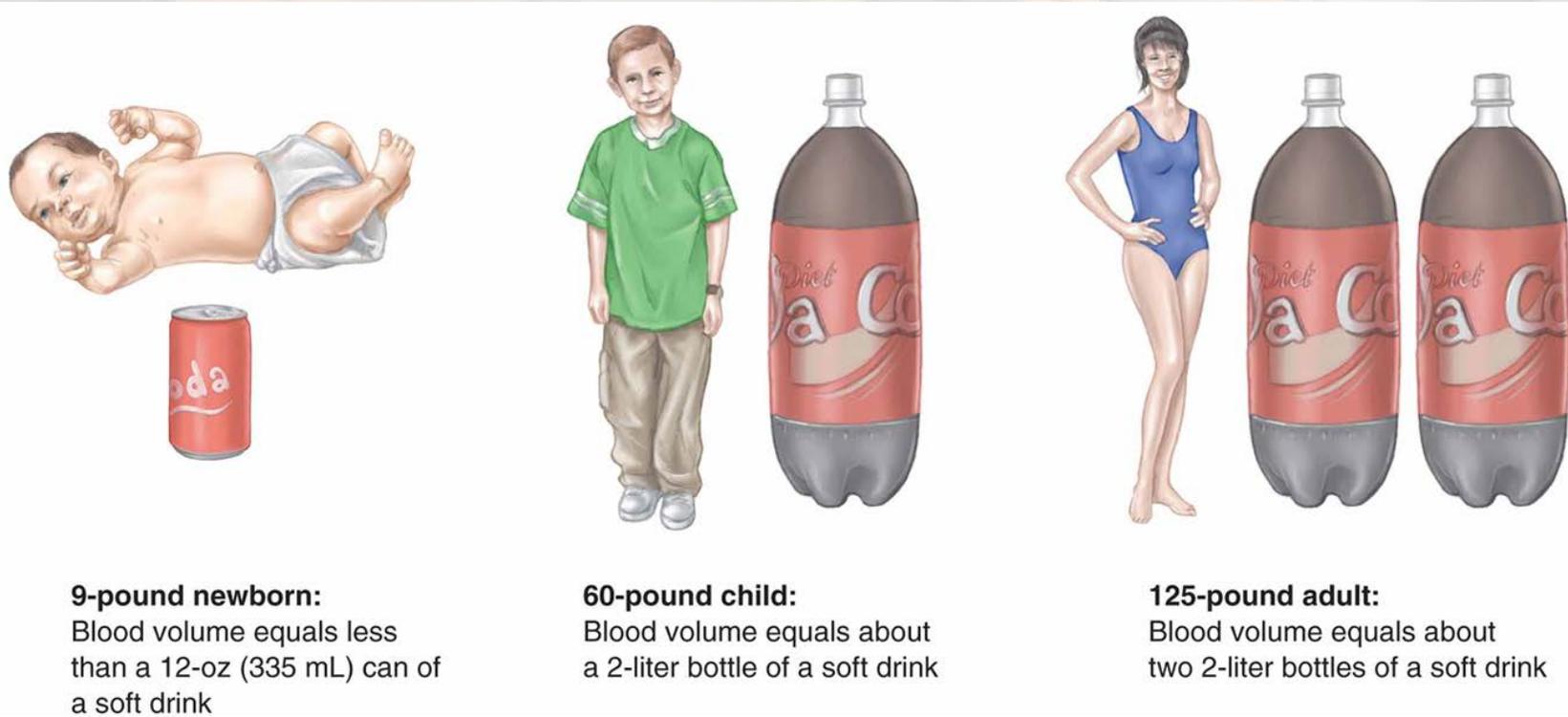


The problem: One year makes a difference

- Newborns and infants: birth to 1 year
- Toddlers: 1–3 years
- Preschool: 3–6 years
- School age: 6–12 years
- Adolescent: 12–18 years



The problem: Blood Volume

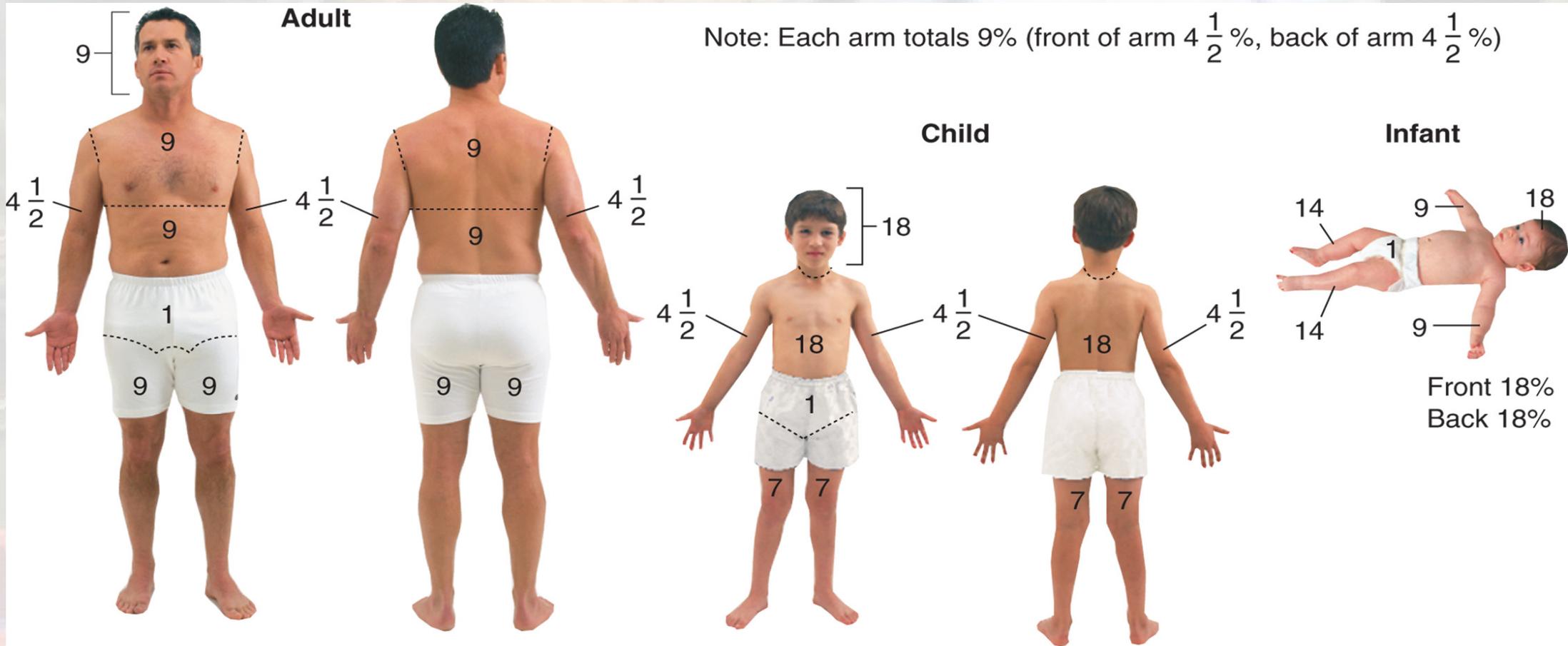


9-pound newborn:
Blood volume equals less than a 12-oz (335 mL) can of a soft drink

60-pound child:
Blood volume equals about a 2-liter bottle of a soft drink

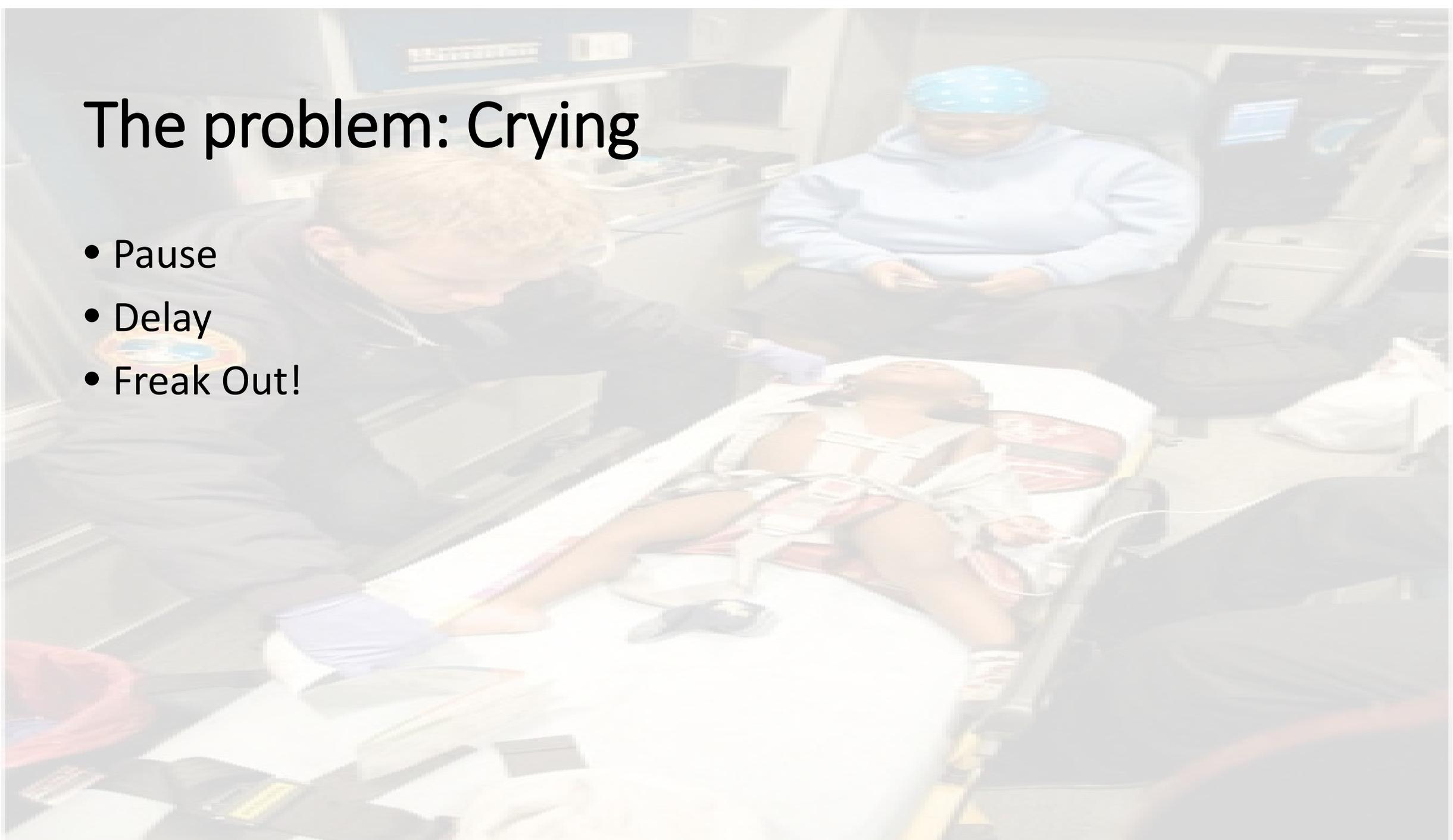
125-pound adult:
Blood volume equals about two 2-liter bottles of a soft drink

The problem: Body Surface Area



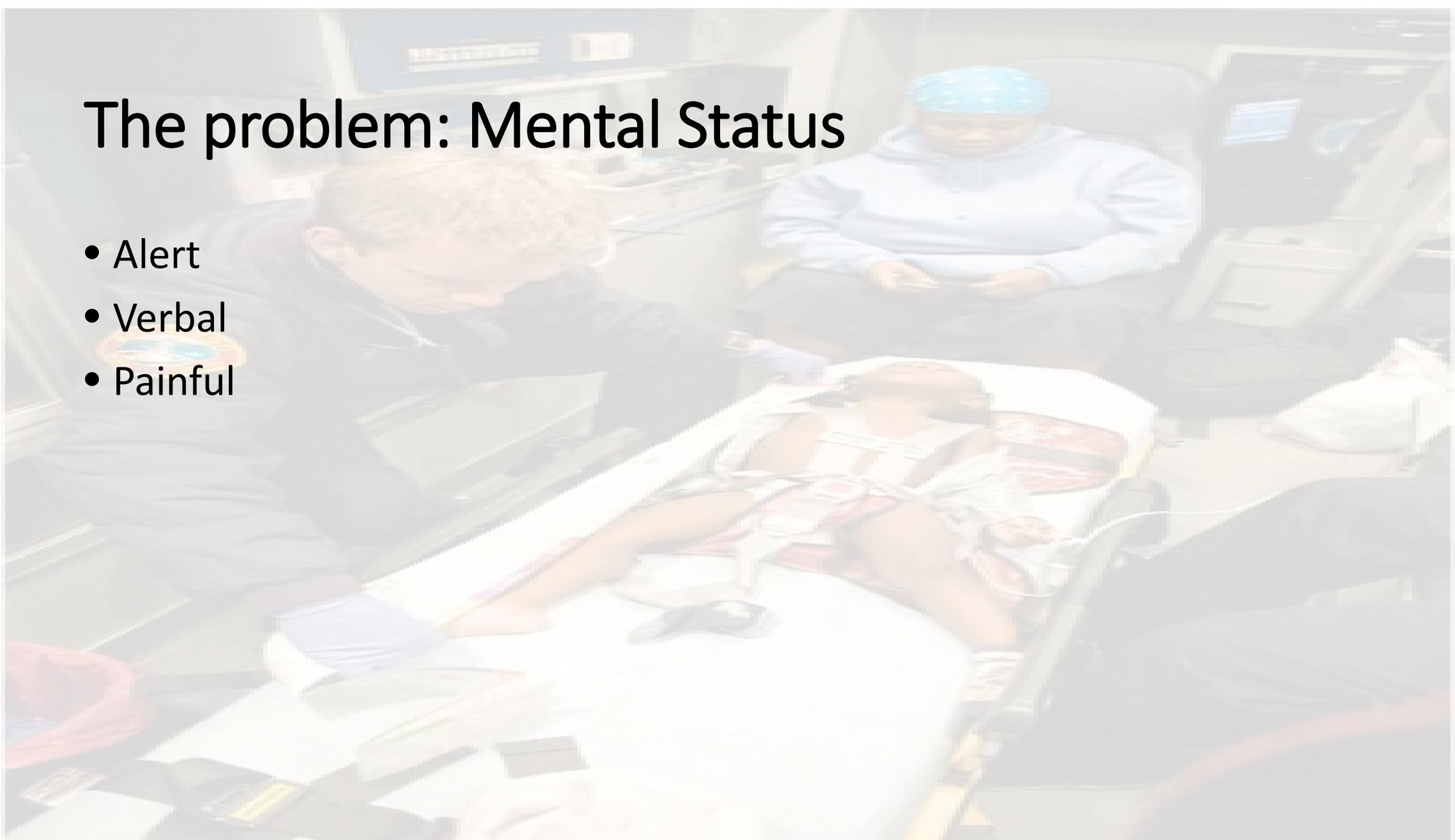
The problem: Crying

- Pause
- Delay
- Freak Out!



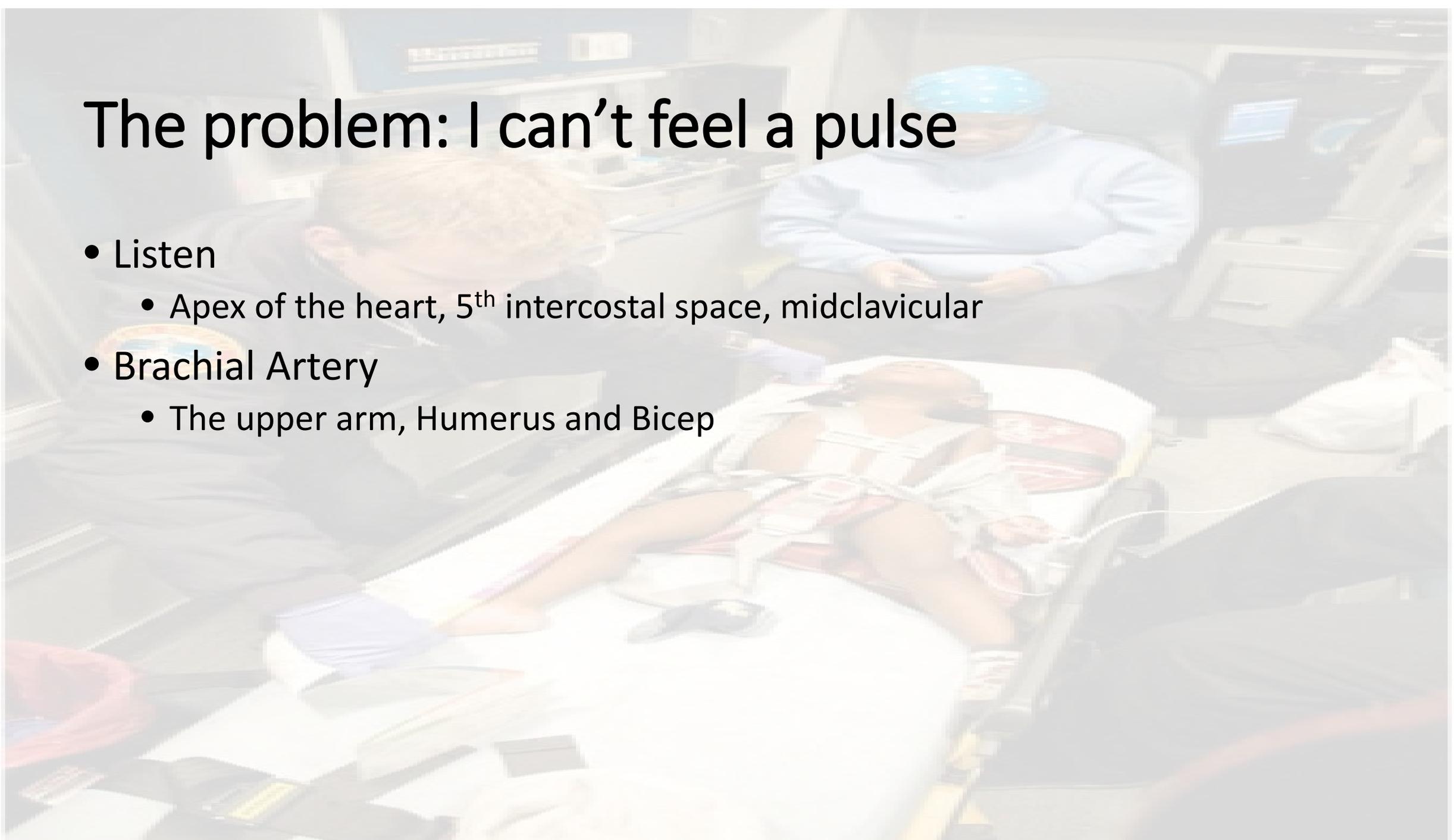
The problem: Mental Status

- Alert
- Verbal
- Painful

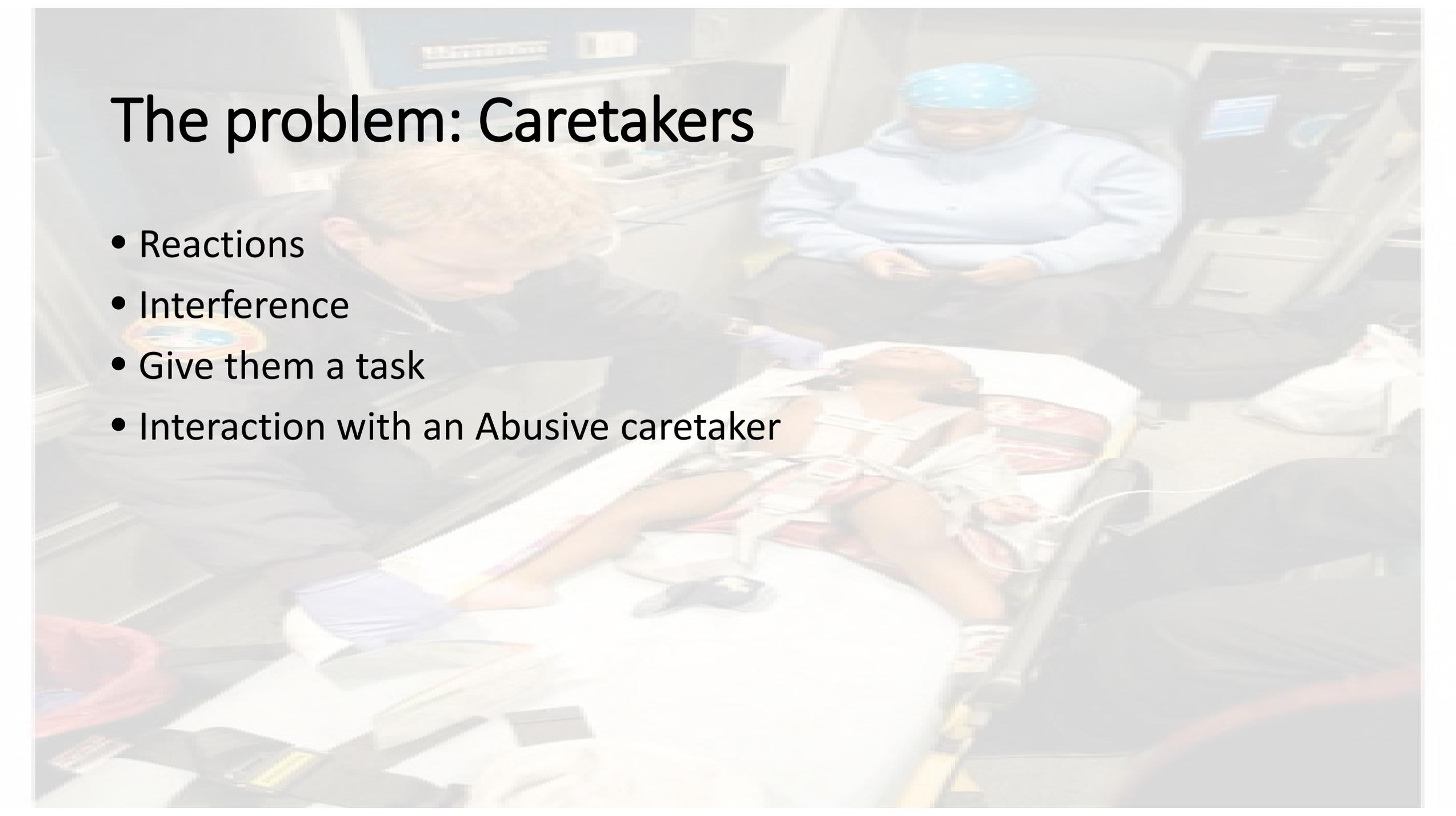


The problem: I can't feel a pulse

- Listen
 - Apex of the heart, 5th intercostal space, midclavicular
- Brachial Artery
 - The upper arm, Humerus and Bicep



The problem: Caretakers



- Reactions
- Interference
- Give them a task
- Interaction with an Abusive caretaker

The problem: Equipment just doesn't work

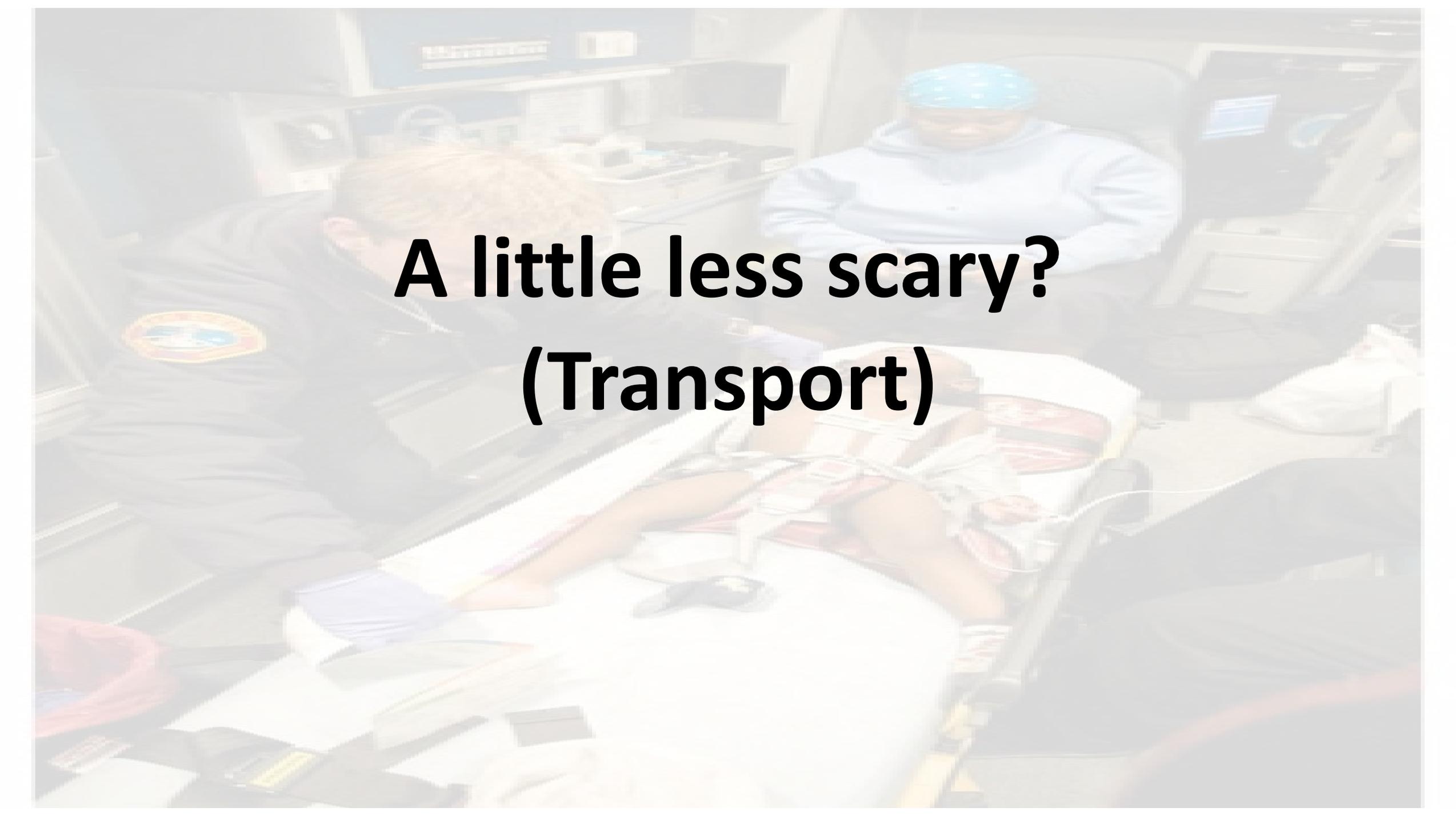
- Pulse Oximetry
- Capillary refill
- Blood pressure
- Oxygen
- Stretcher



The problem: High Tech

- Use your Resources
- Support ABCs
- DOPE
- Transport





**A little less scary?
(Transport)**

THANK YOU!

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