

EMERGENCY MANAGAMENT: INTRODUCTION

Vol.1 Núm. 2 2019

ISSN-L: 2695-2785

DOI: -

EMERGENCY MANAGAMENT: INTRODUCTION

Luis Francisco Torres Pérez, Doctor en Ciencias de la Salud por la Universidad de Málaga. Presidente de la SAECC-ASADENCA. Enfermero Bloque de Calidad en Cuidados del Hospital Regional Universitario de Málaga. Miembro del grupo de investigación en Cuidados de Málaga IBIMA AE-20 INVESCUIDA

Mónica Rodríguez Bouza, Enfermera Servicio Provincial EPES Cádiz. Profesora Facultad de Enfermería UCA. Referente de Investigación de la SAECC-ASADENCA

Ana M^a Leal Valle, Enfermera Unidad de Medicina Interna Hospital Virgen de la Victoria de Málaga. Experta en lectura crítica.

Jesús Bujalance Hoyos, Enfermero Bloque de Calidad en Cuidados del Hospital Regional Universitario de Málaga. Responsable andaluz de la estrategia de Centros Comprometidos con la Excelencia en Cuidados (BPSO). Miembro del grupo de investigación en Cuidados de Málaga IBIMA AE-20 INVESCUIDA

Cipriano Viñas Vera, Doctor en Enfermería por la Universidad de Málaga jefe del Bloque de Calidad en Cuidados del Hospital Regional Universitario de Málaga. IP del grupo de investigación en Cuidados de Málaga IBIMA AE-20 INVESCUIDA

M^a Ángeles García Ortega, Coordinadora Docente de la Formación de enfermeros internos residentes en Pediatría. Enfermera especialista en Cuidados Pediátricos. Jefa de Bloque de Pediatría del Hospital Materno Infantil de Málaga (Hospital Regional de Málaga)

Abstract: The present article summarises the immediate management of vomiting in paediatric patients from the Paediatric Assessment Triangle approach, including the primary and secondary assessments of signs and symptoms for handling the situation properly. The relevant articles on the subject have also been updated.

Keywords: Uncertainty, Patient Prioritization, Paediatric nursing.

EMERGENCY MANAGMENT: INTRODUCTION

MANEJO EN URGENCIAS: INTRODUCCIÓN

Resumen: En este artículo se realiza una síntesis del abordaje inmediato del paciente pediátrico ante una situación de vómitos desde el enfoque del triángulo de evaluación pediátrica, incluyendo la valoración primaria y secundaria de los signos y síntomas para un adecuado manejo de la situación. Se ha realizado una actualización de artículos referentes en la temática.

Palabras clave: Incertidumbre, Prioridad del Paciente, Enfermería Pediátrica.

GESTÃO NAS URGÊNCIAS: INTRODUÇÃO

Resumo: Neste artigo é apresentada uma síntese da abordagem imediata do doente pediátrico numa situação de vómitos a partir da abordagem do triângulo de avaliação pediátrica, incluindo a avaliação primária e secundária dos sinais e sintomas para uma adequada gestão da situação. Foi feita uma atualização de artigos de referência relacionados com o tema abordado.

Palavras-chave: Incerteza, prioridade do doente, enfermagem pediátrica.

EMERGENCY MANAGAMENT: INTRODUCTION

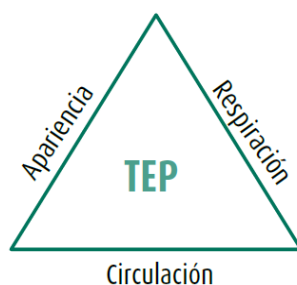
IMMEDIATE MANAGEMENT

Managing uncertainty in paediatrics is a challenge for any clinician. Being able to discern between low complexity cases, with more or less complex features, and the cases that require supervision by a specialist (or which represent a threat) is a very frequent problem in primary care.

The Paediatric Assessment Triangle (PAT) attempts to systematise the concept of “great diagnostician” attributed to the clinical expert. This is a useful, quick, and simple assessment method that identifies the type and severity of the problem and prioritises the initial treatment (Figure 1. The Paediatric Assessment Triangle (PAT)).

The PAT formally categorises the general impression of the patient’s condition in line with the fact that emergency management requires a shift in approach in order to focus on what the patient needs rather than on what the patient has.

Figure 1. The Paediatric Assessment Triangle (PAT)



Spanish	English
TEP	PAT
Apariencia	Appearance
Respiración	Breathing
Circulación	Circulation

The TAP is based on audio-visual examination, without using hands or any other element. The assessment of the appearance, the analysis of the work of breathing, and the appearance of the skin as indicators of circulatory status make up the three sides of the triangle.

The approach of these bulletins is focused on patients with a stable clinical situation in which primary and secondary assessments will allow us to follow an effective and purpose-oriented therapeutic approach in the majority of cases (Horeczko, Enriquez, McGrath, Gausche-Hill, & Lewis, 2013).

EMERGENCY MANAGEMENT: INTRODUCTION

DEVELOPMENT

Appearance assesses tone (if the child moves spontaneously, resists examination, is seated or standing, etc.), interactiveness (if the child is alert and connects), consolability, look/gaze (if the child makes contact, if there is visual tracking), and speech/crying (loud crying, inappropriate words, etc.).

The analysis of the work of breathing consists of observing the position adopted by the child (on a tripod, not tolerating decubitus, etc.), any pulling, nasal flaring, or head nodding, as well as any abnormal respiratory noises (whimpering, hissing, nasal voice) that can be heard without the need for auscultation with a stethoscope.

Circulatory status is assessed based on the appearance of the skin: Is there pallor? Is it cyanotic? Does it present with cutis marmorata (a marble-like complexion)?

These factors provide a benchmark for cardiac output and organ perfusion (Carles Luaces Cubells, Montse Delgado Maireles, Yolanda Fernández Santervás, 2015)(Cázares-Ramírez & Acosta-Bastidas, 2014).

CLINICAL ORIENTATION: SUMMARY

Table 1. Orientation according to the PAT

Appearance	Work of breathing	Circulation	Clinical orientation
N	N	N	Stable
A	N	N	CNS dysfunction
N	A	N	Shortness of breath
A	A	N	Respiratory failure
N	N	A	Compensated shock
A	N	A	Decompensated shock
A	A	A	Cardiopulmonary failure

* (N: Normal; A: Altered)

Source: Carles Luaces Cubells, Montse Delgado Maireles, Yolanda Fernández Santervás, 2015

PRIMARY AND SECONDARY ASSESSMENTS

Primary paediatric assessment uses the Airway, Breathing, Circulation, Disability, Exposure (**ABCDE**) approach for assessment and management.

Primary paediatric assessment is a practical assessment of respiratory, cardiac, and neurological function, including assessment of vital signs and determination of oxygen saturation (Cázares-Ramírez & Acosta-Bastidas, 2014).

This part of the primary evaluation includes the following (Table 2. Management summary):

EMERGENCY MANAGAMENT: INTRODUCTION

- ABCDE assessment:
 - Intervention/action: initiation of treatments
 - First letter in each of the sections.
 - Identification of threatening problems: categorisation

In this method, thorough examination (use of hands) is added to observation.

- Secondary evaluation focuses on a slower management where information is collected from secondary sources and a recapitulation is made. An acronym allows us to do it in an orderly way: the **SAMPLE** history) (Storch de Gracia Calvo P, 2015):

S: signs and symptoms.

A: allergies.

M: medications.

P: pertinent past medical history.

L: last oral intake.

E: events leading to present illness/injury. This must include the mechanism of the injury, the time it occurred, and what happened until the child became cared for.

This gives way to a complete examination and assessment of the patient's situation and whether there is a need for transfer to or management at another level of care.

Table 2. Management summary

The Paediatric Assessment Triangle (PAT)
<ul style="list-style-type: none"> ▪ Shortness of breath ▪ Circulation: skin colour ▪ Neurological status: appearance/behaviour
Primary assessment: ABCDE
<ul style="list-style-type: none"> ▪ A: patent airway and cervical stabilisation ▪ B: ventilation and oxygenation ▪ C: circulation and haemorrhage control ▪ D: neurological dysfunction ▪ E: exposure
Secondary assessment
<ul style="list-style-type: none"> ▪ SAMPLE history ▪ Complete physical examination ▪ Complementary tests
Categorisation and transport
<ul style="list-style-type: none"> ▪ Paediatric Trauma Index (PTI) ▪ Transfer

Source: Storch de Gracia Calvo P, 2015

EMERGENCY MANAGMENT: INTRODUCTION

REFERENCES

- Carles Luaces Cubells, Montse Delgado Maireles, Yolanda Fernández Santervás, J. B. i H. (2015). *Urgencias pediátricas de atención primaria en coordinación con el Hospital Sant Joan de Déu*. Retrieved from https://www.sjdhospitalbarcelona.org/sites/default/files/u1/Para_profesionales/Programas_otros_centros/01_2015_06_09_urgencias_pediaticas_ap_hsjd_cast.pdf
- Cázares-Ramírez, E., & Acosta-Bastidas, M. A. (2014). Valoración pediátrica inicial en Urgencias. *Acta Pediátrica Mexicana*, 35(1), 82–87. Retrieved from http://www.scielo.org.mx/scielo.php?script=sci_arttext&pid=S0186-23912014000100013
- Horeczko, T., Enriquez, B., McGrath, N. E., Gausche-Hill, M., & Lewis, R. J. (2013). The Pediatric Assessment Triangle: Accuracy of Its Application by Nurses in the Triage of Children. *Journal of Emergency Nursing*, 39(2), 182–189. <https://doi.org/10.1016/j.jen.2011.12.020>
- Storch de Gracia Calvo P, P. M. M. A. (2015). *FAPap - Formación Activa en Pediatría de Atención Primaria - Atención inicial al paciente traumatizado grave*. Retrieved from http://archivos.fapap.es/DetalleArticulo/_l1urTLmMtVrea6WrA0sG3cX-hZhTWRLXpF5stlpNG2cbLDR_aJ7eQ3hZAY7lbgr9QR89WkmOeQIKuGpWIKew

EMERGENCY MANAGMENT: INTRODUCTION

RINSAD

The Journal of Childhood and Health (Revista Infancia y Salud - RINSAD), ISSN: 2695-2785, arises from the collaboration between the administrations of Portugal, Galicia, Castilla y León, Extremadura, and Andalusia, within the [Interreg Spain-Portugal RISCAR](#) project, and aims to disseminate scientific articles on children's health, providing researchers and professionals with a scientific base from which to learn about the latest advances in their respective fields.

The two main target audiences of RINSAD are:

- a) Researchers in the field of childhood and health.
- b) Professionals in the sector.

Total cost of the project (indicative): 2,418,345.92 €

Total ERDF approved: 1,813,759.48 €

RINSAD is the result of the [Interreg Spain - Portugal RISCAR](#) project in collaboration with the [University of Cádiz](#) and the [Nursing and Physiotherapy Department of the University of Cádiz](#), Cádiz, Spain.

The works published in this journal are licensed under a [Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International](#) license.