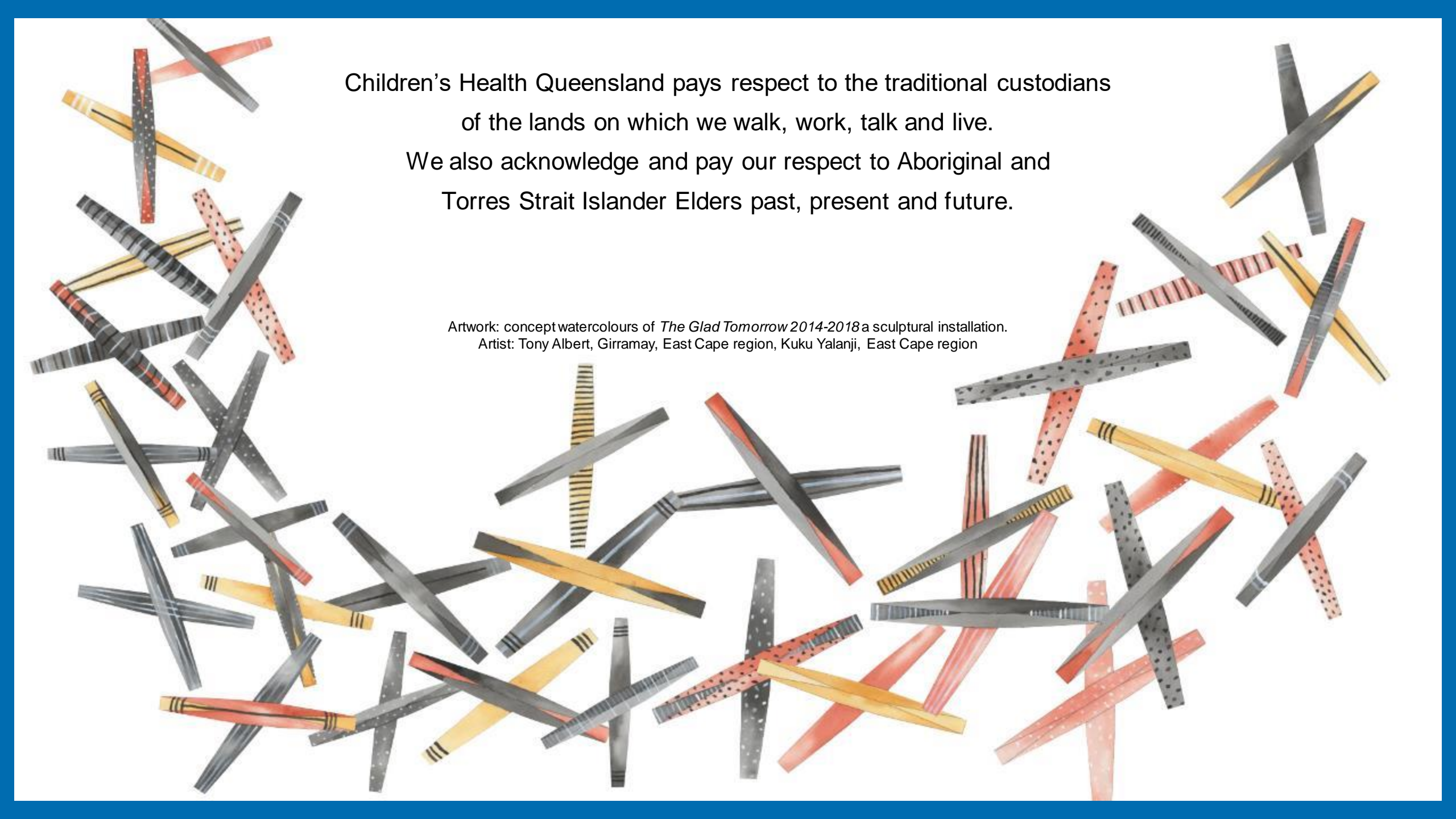


Optimus

CORE

Recognise deterioration
Deliver life saving care





Children's Health Queensland pays respect to the traditional custodians
of the lands on which we walk, work, talk and live.
We also acknowledge and pay our respect to Aboriginal and
Torres Strait Islander Elders past, present and future.

Artwork: concept watercolours of *The Glad Tomorrow 2014-2018* a sculptural installation.
Artist: Tony Albert, Girramay, East Cape region, Kuku Yalanji, East Cape region



Housekeeping

Our Motivations



Coroners find we are late to recognise deterioration

Early Recognition & Escalation saves lives

Course Overview

Recognition



Case Study

BASIC LIFE SUPPORT



Airway & Breathing
Station



Circulation Skills Station



CPR & Defib Station

Clinical Context

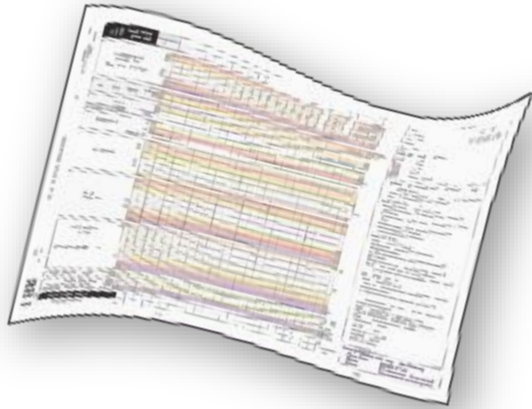


Simulation



Why is it hard to detect sick children early?

Recognising Deterioration



Warning Tools &
Pathways



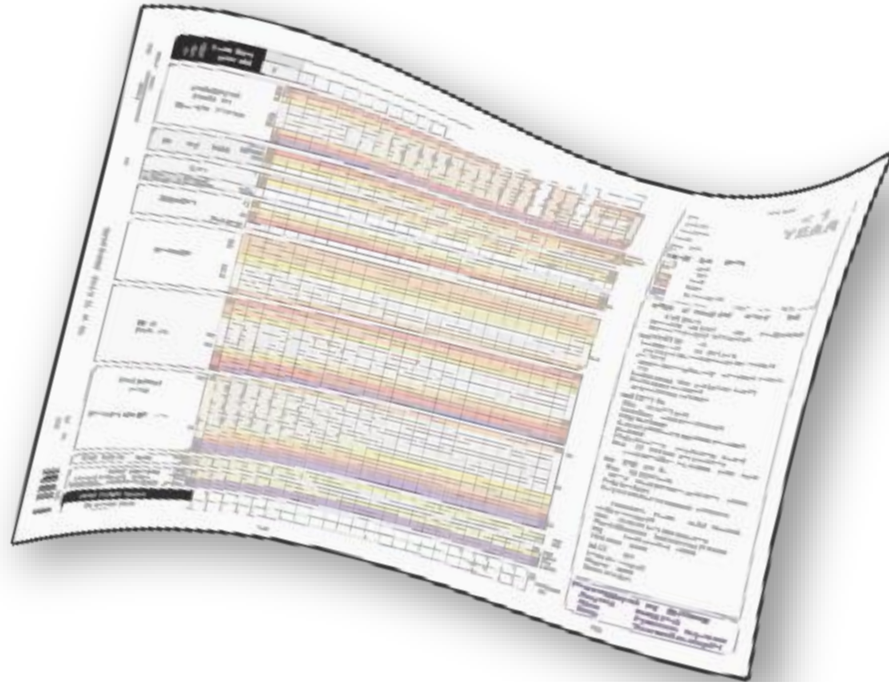
Clinical Judgement



Parent concerns

Recognising Earlier

Recognising Deterioration



Early Warning Tools & Pathways

Recognising Deterioration



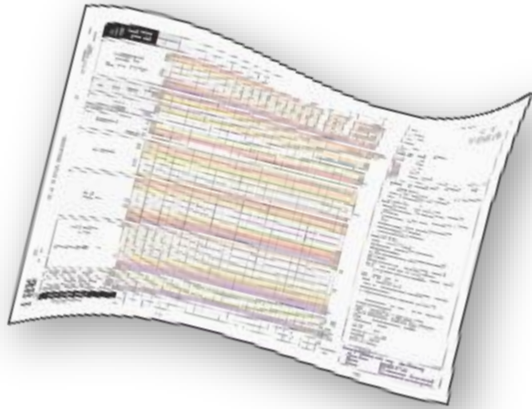
Clinical Judgement

Recognising Deterioration



Parent concerns

Recognising Deterioration



Warning Tools &
Pathways



Clinical Judgement



Parent concerns

As you move through the case study...

53

99%
On Room Air

38.9

160

101
64
awake



Emily is a 14 month old girl who presents with fever and vomiting for 12 hours. Unwell for 1 week with URTI symptoms but more lethargic today. Parents are concerned she is not herself. Admitted for trial of oral intake.

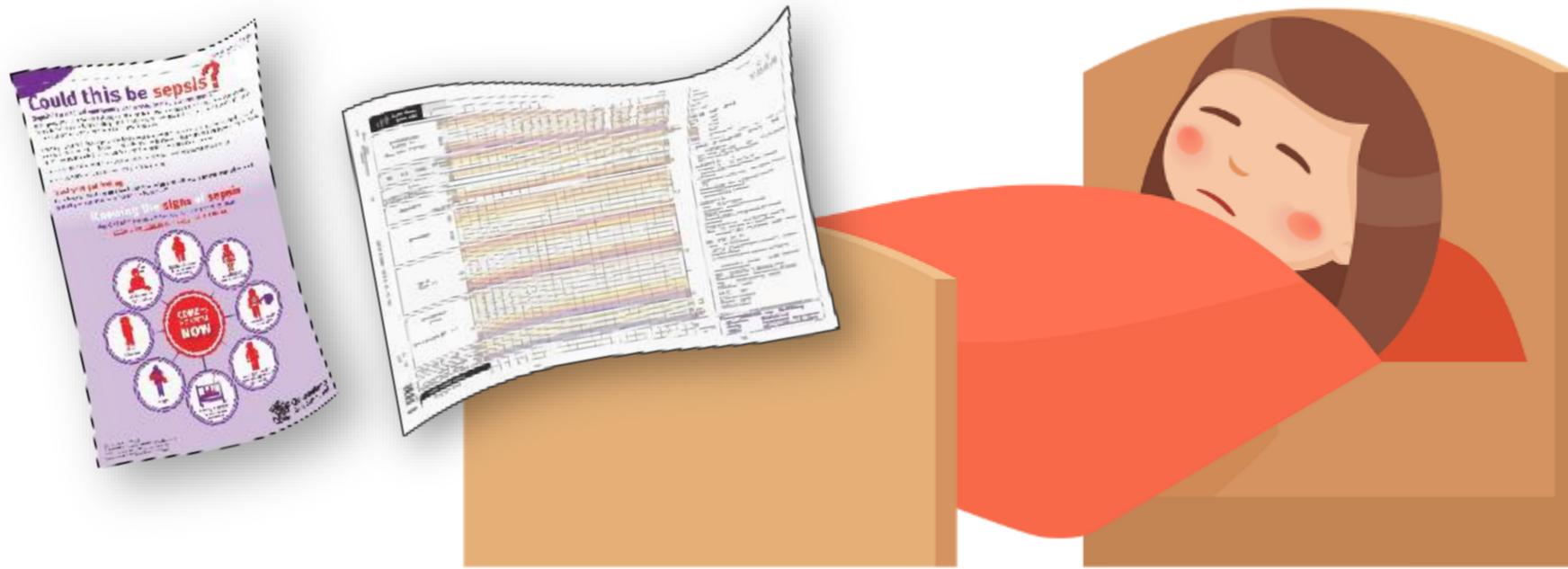
51

99%
On Room Air

38.8

160

101
64
Wakes to voice



What actions do you take based on the CEWT?

Parent interview:

"What were you concerned about overnight?"

53

99%

On Room Air

38.9

160

101

64

asleep



Handover

Progress

Time	Resp Rate	Resp distress	O2	O2 Sats	T °C	HR	BP	CRT	LoC	CEWT
0300	43	Nil	99%	RA	39.4	145		< 2		5
<i>Comments : Febrile and miserable, paracetamol + ibuprofen given. Parents concerned not her normal self. Nasogastric fluid continues.</i>										
0500	33	Nil	100%	RA	36.7	110		-	Asleep	0
<i>Comments : Asleep at time of review, less miserable. Very sweaty +++</i>										

What do you
think?



35

99%
On Room Air

36.0°

110

122
96
unresponsive



The parents call for review of their child, concerned she is moving abnormally in her sleep. They state this is completely abnormal.



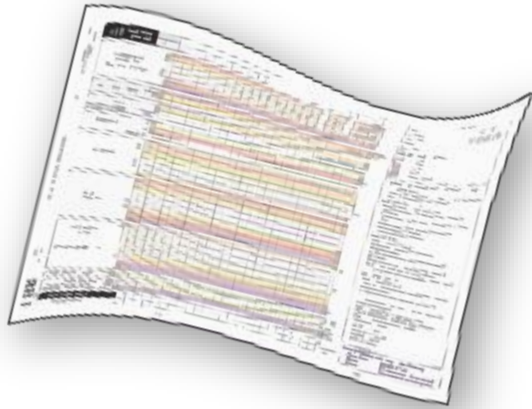
What now?

Emily developed status epilepticus secondary to unrecognised bacterial meningitis and sepsis.

After resuscitation and an admission to ICU and Rehab, she is now back at home with her parents.

Her parents have shared their story to help us learn from their experience.

Recognising Deterioration



Warning Tools &
Pathways



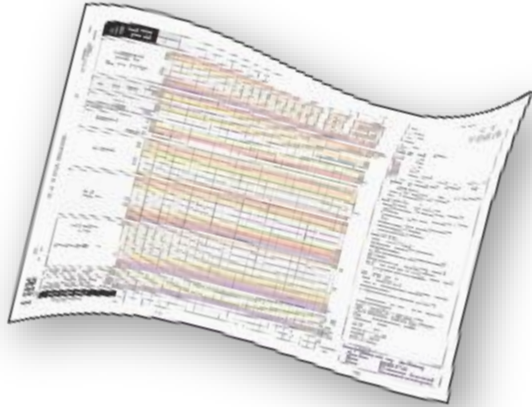
Clinical Judgement



Parent concerns

Summary

Recognising Deterioration



Early Warning Tools



Clinical Judgement



Parent concerns

Summary

BASIC LIFE SUPPORT



Airway & Breathing
Station



Circulation Skills Station



CPR & Defib Station

Coming Up Next