



<b>Assessment Name</b>	<b>Scenario 3– Paediatric Haemorrhage</b>
<b>Level / Section:</b>	<b>Advanced Paramedic</b>
<b>Version:</b>	<b>Version 1 (May 2010)</b>

### **Candidate Information**

You are called to a farmhouse where a 12 year old boy was involved in a farm machine accident. His arm is caught around the drive shaft of the tractor's power take off (PTO). Firefighters are in the process of freeing his arm. There are obvious compound fractures present to forearm. He is pale, screaming with pain and his sleeve is soaked with blood.

### **Instructor information**

This scenario covers 3 major topics; paediatric analgesia, management of external haemorrhage and haemorrhagic shock. The instructor states that there is a delay in IV access so that the candidate considers PO morphine, access is then obtained and the candidate can choose to continue PO or to give IV. The release of the boy's arm is associated with major haemorrhage and the candidate must exhaust all other methods of haemorrhage control before applying the tourniquet. The candidate must inform hospital staff of the tourniquet. The candidate must control the haemorrhage and recognise signs of poor perfusion before administering IV fluids.

The incident happened about twenty minutes ago. There is no significant compression force

Past medical history: None

Medications: None.

No Allergies.

### **Equipment**

Paediatric manakin. Defibrillator monitor, Oxygen cylinder, Non rebreather mask, Morphine, Nitrous Oxide, Tourniquet, Hartmann's Solution 500mL, tourniquet, dressings. Paediatric cannulation arm.

### **Key assessment points**

Administration of Oral Morphine (Medication Change)

Application of a tourniquet (Skill)

New doses for paediatric morphine (Knowledge change)

Management of external haemorrhage in children (New knowledge)





Candidate Name \_\_\_\_\_

Date \_\_\_\_\_

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Instructor information	Candidate key tasks	Score 0/1
Initial Assessment & Management		
<p><i>When asked there are no contra-indications to any medications. Vital signs are: P 110, resps 26, BP 110/60, capillary refill &lt;2 secs</i></p> <p><i>Pain is 10 on the Wong Baker or linear scale.</i></p> <p><i>Instructor to state that it will take time to access his uninjured arm so there will be a delay in IV access.</i></p> <p><i>Pain score reduces to 8</i></p> <p><i>AP colleague now obtains IV access.</i></p>	Provides oxygen therapy	
	Applies ECG, SpO2 monitor	
	Gathers a SAMPLE history	
	Assesses vital signs	
	Assesses the pain	
	Considers Nitrous Oxide	
	Checks 7 rights of medication administration	
	Administers Morphine 0.1 mg/Kg PO <b>Critical Point – NEW MEDICATION</b>	
	Re-assesses pain	
	Repeats Morphine 0.05 mg/Kg IV or 0.1 mg/Kg PO prn q 2 mins to Max (0.15mg/Kg IV/IO or 0.3mg/Kg PO) <b>Critical Point – KNOWLEDGE CHANGE I</b>	
Considers Cyclizine 0.7mg/Kg or Ondansetron 0.1 mg/Kg mg IV slowly		
Firefighters are almost ready to release the boy's arm and on release blood spurts from fracture site		
<p><i>If asked - the vital signs are:</i></p> <p><i>Absent radial but palpable carotid pulse – rate 140, resps 32, BP 80/40, capillary refill 5 sec</i></p> <p><i>He is cool peripherally.</i></p>	Candidate must control haemorrhage before fluid therapy	
	Provides PEEP as appropriate	
	Applies dressing	
	Applies additional dressing(s)	
	Depresses proximal pressure point	
	Recognises that tourniquet may be applied having exhausted other haemorrhage control measures <b>Critical Point – NEW KNOWLEDGE</b>	
	Correctly applies tourniquet <b>Critical Point - SKILL</b>	
Re assesses pulse, vital signs		





<i>There is no aLOC or mottling.</i>  Instructor asks candidate to give ED handover	Recognises signs of inadequate perfusion	
	Administers Hartmann's solution 20 mL/Kg	
	Reassesses	
	Considers additional fluid boluses en route to hospital if ongoing signs of poor perfusion	
	Recognises need for urgent transport	
	Gives handover in ED and includes information on tourniquet	

Score \_\_\_\_\_/25 = \_\_\_\_\_ %

<b>Successful or Remediation</b>	
A candidate must remediate if they did not complete a Critical Point or if they achieve a score < 70%	

Examiner 1: .....

Examiner 2: .....

