



Project Number: 2016-1-RO01-KA203-024630

Practical Application 2.5.a Case study: "Treatment area" in Emergency for the child with "Red Code"

CASE STUDY

"Triage in Paediatric Emergency"

Case description: Problems in understand each other between paediatrician and nurse of Triage, about the attribution of the "Treatment area" in Emergency for the child with "Red Code".

Case:

An eight-month-old baby is brought to Emergency because from the day before he had repeated vomiting and frequent diarrheal discharges. During the last hours the mother saw him very apathetic and not very reactive.

Upon arrival in triage, the triage nurse evaluated the baby, who appeared in slight respiratory distress, pale skin, cold at the extremities and marbled; the sensory appeared not very vigilant, alternating moments of drowsiness with moments of irritability.

A red priority code was assigned, and, the baby was assigned as a "treatment area" to the Paediatrics.

In our hospital, the allocation of the treatment area also involves the choice of the specialist who will immediately take charge of the child, in this case he was the paediatrician.

In the described scenario, it happened that the paediatrician was called and informed that in Emergency there was a baby with Red Code. The paediatrician is normally located in the fifth floor ward; in this case the paediatrician had to delay taking charge of the baby, as he was involved in another emergency on the fifth floor in Paediatrics, this produced with a certain amount of slowing of the first treatment in a rather critical patient.

The most correct procedure would have required the assignment of the "Reanimation" treatment area, with immediate management of the anaesthetist (normally present on the same level as the Emergency Unit), and then a subsequent take-over of the paediatrician.



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Questions:

- What/which communication and organizational tools could have facilitated a quick and correct decision making between triage nurse and specialist doctor?

- What emotional factors and what professional prejudices impede effective rapid decision-making?

- In this specific case did the urgency of the red code correspond to a quick and correct decision-making process?



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