



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

Practical Application 2.5.b Case study: Communication between paediatric nurses about decision making

CASE STUDY

“Triage in Paediatric Emergency

At the Pinerolo hospital (Italy) it is used the PEWS (Paediatric Advanced Warning System) as mainly nursing tool, to early detect the deterioration of a hospitalized child, in order to optimize the management of a patient who may need a transfer and a start at a more intensive level of care.

The PEWS consists of an attribution of a score deriving from the sum of various parameters (both clinical and instrumental) detected by the nurse. Each score match to a decision choice, in terms of both reevaluation times, and possible notification to the on call anaesthetist.

The present case refers to a two year old child admitted for severe bronchospasm. The assessment of the nurse with the PEWS shows a score of 4. The therapy is changed by the paediatrician on call.

A later reassessment shows a score of 5 (ie a deterioration), which provides for the "notification" that is the "preallerta" of the anaesthesiologist. In this case the on call paediatrician prefers not to inform the anaesthetist yet.

In this way a dissonance was created between the interpretation of the PEWS by the doctor and by the nurse, with a consequent misunderstanding regarding the uniformity of use of the instrument.

Questions:

- What reasons may have conducted the paediatrician to minimize the notice about the aggravation of the case with the nurse?

- What could have facilitated a clear and open communication between paediatrician, nurse



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and anaesthesiologist about the evaluation variation to the PEWS?

- What could make the PEWS assessment tool an instrument that uniformly used and interpreted by all the paediatric staff responsible for clinical evaluation?



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