Criterion	Exception	Definition of terms
Percentage of children with a reduced conscious level having a plasma ammonia sent	Children within one hour post convulsion. Children with trauma not related to a medical collapse.	Plasma ammonia result should be available in the notes or on the hospital results system
Percentage of children with a reduced conscious level having a sample of urine sent to clinical pathology to be saved for later use	Children within one hour post convulsion. Children with trauma not related to a medical collapse	Saved urine sample sent should be documented in the notes or on the hospital results system
Percentage of children with a reduced conscious level who have their respiratory rate from admission documented in the notes		
Percentage of children with a reduced conscious level who have their blood pressure from admission documented in the notes		
Percentage of children with a reduced conscious level who have their GCS from admission documented in the notes		
Percentage of children with suspected bacterial meningitis who were treated with intravenous dexamethasone before or with the first dose of antibiotics.		Suspected bacterial meningitis is defined by a score of 8.5 or more using the clinical diagnostic decision rule below if the child has neck stiffness: Symptom/sign Score If GCS < 9 = 8 Neck stiffness present = 7.5 Duration of symptoms = 1 /each 24 hrs Vomiting = 2 Cyanosis = 6.5 Petechiae = 4 Serum CRP = CRP value (g/dl) divided by 100 or if the child does not have neck stiffness but has fever and two or more of the following: rash irritability bulging fontanelle

These audit criteria were selected as they were readily measurable and important markers of good practice. The criterion for dexamethasone given in suspected bacterial meningitis is based on level 1a evidence. These audit criteria were also selected as the GDG felt performance could be improved in these areas (personal experience).