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Care Pathway for children with reduced level of consciousness

Name Address

Time / Date Signature Printed name

(Use this care pathway as the formal documentation of the child's admission in conjunction with the national guideline for the management of children with a reduced conscious level)

Date of Birth Hospital number

	Hospital number
Initial ASSESSMENT: Tim	ne arrived Time assessed
Any Airway problems? Yes / No	
Briefly document findings below.	Anaesthetist / Senior help called? Yes / No
Any Breathing problems? Yes / No	Resp rate = Resp rate low / normal / high for age
Briefly document findings below.	Anaesthetist / Senior help called? Yes / No
Any Circulation problems? Yes / No	BP measurement = BP low / normal / high for age
Briefly document findings below.	Senior help called? Yes / No
Initial RESUSCITATION of A B C	
Airway:	
Breathing:	
Circulation:	

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Initial ASSESSMENT:

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Initial ASS	ESSMENT:	Neu	ırology				_
			Triage	1 st asses		2 nd assessment	
000 5	(4.4)	Tim	e =	. Time =		Time =	4
_	es = (1-4)						_
	$\frac{\text{rbal} = (1-5)}{(1-6)^2}$						4
	tor = (1-6)	.\					4
IC	otal = (3-15)					_
(<2.		hypoglycae	emia –	ensure all investion	gations tal		
Pupils:	Equal	Yes	/ No				
•	Reactive	e Yes	/ No				
Posture:	Normal	/ Decortic	ate / De	cerebrate (ext	ensor) /	Completely flaccid	
_	response (i		·	: Normal (eye Abnormal (e Yes / No	yes mov	point on ceiling) / re with head) s Senior helped called Anaesthetist called PICU called	
CORE IN	/ESTIGATI	ONS: Ti	ck box if p	performed R	esult	Action requi	ired
Ca	pillary gluco				=	Yes / I	No
	dside urinaly			Ketones	=	Yes / I	No
	•			Glucose	=		
				Leucocytes	=		
				Others	=		
Blo	od gas (a	art./ cap./	venous) pH	=	Yes / I	No
	5 (•		PCO ₂	=		
				PO ₂	=		
				BE / HCO ₃	=		
				Others (eg lactat	e)=		
Ful	l blood cour	nt		Hb	=	Yes / I	No
			_	Pits	=		
			W	CC / Neutrophils	=		
U+	Fs			Na	=	Yes / I	Nο
			_	K	=	10071	••
				Cr	=		
				Urea	=		
LF	Γο			Albumin / Protein	=	Yes / I	No
Li	13			AST / ALT	=	10371	10
				ASI / ALI	=		
l ah	oratory Glu	COSA		ALF	=	Yes / I	No
	sma ammoi				=	Yes / I	
_	od culture	па			=	Yes / I	
		cample	_	hium hanarin hatt		168/1	NU
	ved plasma	•	•	hium heparin bott	(C)		
	ved serum s	•	•	ain bottle)			
Sav	ved urine sa	iiipie	山 (Pla	ain sample bottle)			

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HISTORY

Any history / risk of drug ingestion? Any previous infant deaths in the family? Any exposure to herpes / cold sores? Any recent foreign travel?

Yes / No Yes / No Yes / No Yes / No

Care Pathway for children with reduced level of consciousness Name Address Time / Date Date of Birth Signature Hospital number Printed name **EXAMINATION** (use continuation sheet if more space required)

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Vame		
Address		

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				1105pitai iii	umoci		
PROBLEMS / DIFFERENTIAL DI	AGNO	SIS					
Check for all of the following: (Tic	k if pos	sible, n	.b. <i>mor</i>	re than o	<i>ne</i> catego	ry can be t	icked)
Shock Sepsis Evidence of trauma Hyperglycaemic (>11mmol/l) Hypoglycaemic (<2.6mmol/l) Raised plasma ammonia (>200mic Ketoacidosis without hyperglycae Bacterial meningitis Herpes simplex encephalitis Intracranial abscess Tuberculous meningitis Clinically raised intracranial press Ongoing convulsion Recovering from previous convuls Hypertension Cause unknown after test results	mia		I.V. De	xametha	isone give	en Yes / No	
Other suspected diagnoses							
Further Investigations:							
All core investigations sent Other investigations required: Infection screen *Lumbar puncture Cranial imaging Coagulation studies Plasma Ca / Mg EEG *Further metabolic tests		(if seps (if seps (if raise (if seps (if prolo (if HSE	sis) sis / me ed ICP sis / rais onged o	tra eningitis / / intracra sed plasi convulsio se unkno	auma / po / HSE/ cau anial abso ma ammo on and ag wn)	ed <1 year)	ve state) vn) iknown)
Other tests requests						naemia / out hypergly	rcaemia /

^{*}See practice guidelines for contraindications to performing a lumbar puncture in the acute situation

^{*}See practice guidelines for exact tests to request to diagnose metabolic illnesses

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TREATMENT PLAN

Senior help called	Contact details
PICU called	Contact details
Paediatric neurologist called	Contact details
Paediatric neurosurgeon called	Contact details
	Contact details