

DEPARTMENT: Poudre Valley Hospital Emergency Medical Services	POLICY DESCRIPTION: Pediatric Patient Assessment
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APPROVED: 5/7/2015	RETIRED:
EFFECTIVE DATE: 5/7/2015	REFERENCE NUMBER: 3160

Pediatric Patient Assessment
SCOPE: Poudre Valley Hospital EMS and represented Northern Colorado services [See page 1]
PURPOSE: To define pediatric assessment
PROCEDURES AND GUIDELINES:
<p>A. Definition</p> <ol style="list-style-type: none"> 1. Pediatric patients are defined as age < 14 years. 2. Neonate: birth to 1 month 3. Infant: 1 month to 1 year 4. Toddlers: 1-5 years 5. School age: 6-14 years <p>B. Primary assessment</p> <ol style="list-style-type: none"> 1. Scene size-up, mechanism of injury/illness 2. Spine precautions if indicated. 3. Responsiveness: AVPU, interaction of patient with guardian and rescuer. 4. Airway: Patency, obstruction, foreign body 5. Breathing: rate, depth, chest rise, lung sounds, equality, work of breathing (retractions, nasal flaring, grunting, tripodding and head bobbing). 6. Circulation: heart rate, regularity, quality, capillary refill, blood pressure, skin color and temperature. 7. Disability: GCS; Pupil size and reactivity; eye movements; Motor (posturing, seizures, paralysis, strength), Sensory (numbness, tingling, sensory level), fontanels (flat, depressed, or bulging). 8. Expose patient completely as needed to facilitate exam but try to prevent hypothermia 9. Adjuncts: Pulse oximetry, capnography, blood glucose, temperature monitor as indicated. <p>C. Expanded Exam as Indicated</p> <ol style="list-style-type: none"> 1. When appropriate utilize parent/guardian to assist. 2. HEENT: Blood/fluid from ears, nose, mouth or eyes, pupils, lacerations, eye movements, conjunctiva, swelling, tenderness, bruising, rashes, deformity, wounds, mucous membranes, presence of tears, drooling, fontanel and trauma. 3. Neck: swelling/mass, JVD, crepitus, tracheal position, subcutaneous air, retractions, bleeding, wounds, tenderness, bruising, deformity, hoarseness and trauma. 4. Chest: Crepitus, lung sounds, subcutaneous air, paradoxical movement, instability, bleeding, heart sounds, wounds, tenderness, swelling, bruising, retractions, diaphragmatic breathing, surgical scars and trauma. 5. Abdomen: Rigidity, guarding, distention, bleeding, wounds, tenderness, bruising, rebound, surgical scars and trauma.

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6. Pelvis/GU: Stability, crepitus, priapism, bleeding, wounds, rashes.
7. Extremities: CMS, range of motion, pulse equality, edema, bleeding, wounds, deformity, crepitation, strength, sensory level.
8. Back: edema, bruising, bleeding, wounds.
9. Neurological: GCS, cranial nerves, sensory level, reflexes, motor strength, pupils, eye movements. Interacting appropriately
10. Skin: rashes, color, temperature, skin turgor, capillary refill.

D. History

1. Onset, progression, does anything make the symptoms better or worse, previous episodes, loss of consciousness, quality, radiation, severity, toxic exposure, sexual activity, pregnancy, drug and alcohol use.
2. Is history consistent with exam, consider non-accidental trauma
3. Surgeries, medications, dosages, allergies, last oral intake, last bowel movement, urine output, immunizations

E. Reassessment

1. Reassess after interventions and more frequently with unstable patients

Age	Weight	HR range	HR ave./min.	Resp. rate range breaths/min.	BP (sys) range (mmHg)
Premie or <3 kg	<3kg	120-160	140	40-60	40-60
Term newborn 1-7 days	3 kg	90-165	125	40-60	60-80
1 wk - 3 wks	3 kg	105-180	150	40-60	60-80
1 month	4 kg	120-180	150	40-60	65-95
6 mos.	8 kg	110-185	140	25-40	65-105
12 mos.	10 kg	110-170	135	20-30	70-110
2 yrs.	12 kg	90-150	120	20-30	70-110
3 yrs.	14 kg	75-135	110	20-30	80-110
4 yrs.	16 kg	75-135	110	20-30	80-110
5 yrs.	18 kg	65-135	100	20-30	80-110
6 yrs.	20 kg	60-130	90	12-25	90-115
8 yrs.	26 kg	60-120	90	12-25	90-115
10 yrs.	32 kg	60-120	90	12-25	95-120
12 yrs.	42 kg	60-120	85	12-25	95-120
14 yrs.	50 kg	60-120	85	12-18	100-130

ADDITIONAL CONSIDERATIONS:

- A. Patient should remain NPO
- B. Use Broselow Tape if available

REFERENCES: