



## Activity Report



Week commencing: 8<sup>th</sup> February 2021

**Team Shift Activity:**

number of shifts:	2
number of taskings:	8
number of patient involvements:	4
number of governance procedures:	0

<b>Team Shift:</b>			
<b>Date:</b>	11/02/2021	<b>Duration:</b>	11:00
<b>No. of taskings</b>	4	<b>Attended:</b>	3
<i>trauma</i>	3	<i>adult</i>	4
<i>medical</i>	1	<i>paediatric</i>	0
<i>cardiac arrest</i>	0		
<b>Personnel:</b>	IB, TA, NA (Obs)		
<b>Pre-shift issues</b>	nil	<b>Post-shift issues</b>	nil
<b>Pre-comments</b>	nil	<b>Post-comments</b>	nil

Case	Age	gender	type	Job description	S/D	Scene time	Total time	General interventions	Governance interventions	Adverse events
1	18	female	trauma	Ankle injury	no	-	-	no	no	nil
				<i>Additional comments:</i> Fall off Segway. Right ankle trauma, obvious deformity. No significant pain. No indication for prehospital reduction. Safe for transfer with crew with IV paracetamol. Allocation 16:08. On scene 16:36.						
2	18	male	trauma	Knee Injury	no	-	-	yes	no	nil
				<i>Additional comments:</i> Dislocated patella, relocated with entonox To UGH with crew						

				["Limb splinting"] Alloc 18:15, Scene 18:52						
3			trauma	Entrapment RTC	yes	-	-	no	no	nil
	<i>Additional comments:</i>			Stood down on way Call - 15:20, Mob - 1524, S/d - 1534						
4	42	female	medical	Status epilepticus	no	-	-	no	no	nil
	<i>Additional comments:</i>			On arrival Pt awake and responding Crew happy to deal Alloc 23:49, Scene 00:08						

key – Res = responder, S/D = stood down?, time = hour:mins

<b>Team Shift:</b>					
<b>Date:</b>	12/02/2021	<b>Duration:</b>	05:27	<b>Personnel:</b>	IB, OL, CW
<b>No. of taskings:</b>	4	<b>Attended:</b>	1		
<i>trauma</i>	1	<i>adult</i>	3		
<i>medical</i>	1	<i>paediatric</i>	1		
<i>cardiac arrest</i>	2				
<b>Pre-shift issues</b>	nil	<b>Post-shift issues</b>	Storeroom door broken, but secure		
<b>Pre-comments</b>	nil	<b>Post-comments</b>	nil		

Case	Age	gender	type	Job description	S/D	Scene time	Total time	General interventions	Governance interventions	Adverse events
1			arrest	Respiratory arrest	yes	-	-	no	no	nil
	<i>Additional comments:</i>			stood down en route						
2	82	male	arrest	Cardiac arrest	yes	-	-	no	no	nil
	<i>Additional comments:</i>			stood down						
3	<1		medical	Difficulty breathing	yes	-	-	no	no	nil
	<i>Additional comments:</i>			? Croup ? Bronchiolitis						
4	35	male	trauma	Fell downstairs	no	-	-	yes	no	nil
	<i>Additional comments:</i>			Significant laceration to chin and forehead Dressing, Antibiotics, Analgesia ["IV access"] Coamoxiclav 1.2g Alloc 20:02, Scene 20:13						

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<b>Solo Activity:</b>	active responders:	SB 5866, SB 5854, CB 664, SB 5857, SB 5846	
	number of taskings:	8	
	number of patient involvements:	4	
	number of governance procedures:	1	
	Tasking Types:		
	<i>trauma</i>	6	<i>adult</i> 8
	<i>medical</i>	1	<i>paediatric</i> 0
	<i>cardiac arrest</i>	1	
	<i>other</i>	0	

Case	Res	Date	Age	gender	type	Job description	S/D	Scene time	Total time	General interventions	Governance interventions	Adverse events
1	multiple	09/02	20	male	trauma	Pedestrian vs Train	no	02:14	02:24	yes	yes	nil
						<i>Additional comments:</i> multiple responders: SB 5866, SB 5854 Pedestrian crossing tracks at station crossing. decelerating train - 5 mph or so according to driver, as was slowing down on approach to station Not a deliberate act, inattention, hoodie and earphones +Music Thrown between train and platform, stuck under train. RM 1st at pt, Police present, CTL (Chris) present - switched to op Cdr role on MC arrival Single track: all stop, Full PPE incl helmets.  on arrival, male was seated on the track under the train, bleeding from head and facial wounds, obvious fracture of mid shaft of RIGHT femur. Limited room, but patient accessed by crawling under train no catastrophic haemorrhage, Airway clear, palpable radial, GCS 15 ["IV access"], Analgesia = Fentanyl 150 mcg (titrated), TXA 1g Patient assisted to lay flat, slid onto FRS long board, slid out from under train. Clothing removed = showed this to be compound fracture, Augmentin given Repeat primary with hart/WAST arriving.						

						["Pre-hospital Sedation"] Indication: position pelvic binder and apply KTD to open femur # Decision: 10:00, start: 10:05, complete: 10:10 Oxygen, etCO2 Drugs: Ketamine 50mg, Fentanyl 150mcg observations stable  EMRTS arrived. hypothermia mitigation. ["Limb splinting", "Immobilisation", "Assisted Transfer"], ["Drugs outside JRCALC guidelines (non-governance)"] immobilised in full, packaged Blocks for immobilisation - low concern over neck, but MOI with distracting injury. EMRTS kindly conveyed to UHW, to permit us relocating vehicles to ED Vomited en route with EMRTS - mc should have given the requested Ondansetron						
2	CB664	09/02	35	female	med/tra	29D02 - RTC	no	-	-	no	no	nil
	<i>Additional comments:</i>					female driver reported to be fitting An SUV had collided with a wall on its offside and the rear of a parked vehicle on a road with a nominal speed limit of 30mph. Assessment of casualty in back of EA to which she had walked unaided She was upset and mildly confused but no injuries were apparent. No FH of seizures and no PMH of significant head injury She had previously been an inpatient under c/o neurologist for blackouts/seizures since October investigations NAD and on no treatment and she claimed she had been cleared to drive by GP						
3	SB5857	10/02	66	female	trauma	Given as pedestrian Vs truck	yes	-	-	no	no	nil
	<i>Additional comments:</i>					Turned out to be slip and fall, minor injuries						
4	SB5846	11/02	55	male	arrest	Cardiac Arrest		-	-	yes	no	nil
	<i>Additional comments:</i>					Witnessed cardiac arrest outside Post office Bystander CPR. WAST at scene. H57 en route by air from Dafen. Confirm arrest. 55 year old obese male with ALS ongoing						

						<p>good colour. coarse VF. good etcO2 trace</p> <p>breathing ontop on the CPR. Igel in situ. IO right tibia</p> <p>adrenaline, amiodarone, fluid. given by WAST</p> <p>MedServe interventions:</p> <p>["Advanced life support","LUCAS"] ["Assisted Transfer"]</p> <p>["Drugs outside JRCALC guidelines (non-governance)"]: sodium bicarbonate 8.4% 100mls, adrenaline 4mg</p> <p>Lucas-2 deployed.</p> <p>Igel converted to COETT 8.0 via VL4 plus stylet. first pass.</p> <p>rhythm change to PEA broad complex.</p> <p>sodium bicarbonate 8.4% 100ml IO.</p> <p>Continued ALS drugs and shocks as per ERC guidelines.</p> <p>VF/pea alternating. good colour and etcO2 (4kpa) throughout.</p> <p>reversible causes addressed.</p> <p>scoop. atmist UHW. EA transport with CPR ongoing.</p> <p>stand down H57.</p> <p>handover to ED team in majors isolation room.</p> <p>ROSC on arrival confirmed with USS.</p> <p>red PPE throughout.</p> <p>assisted with IV access and A-line.</p> <p>ph 6.9. lact 17. k+4.</p> <p>patient follow up:</p> <p>strong family history of sudden cardiac death. previous unstentable coronary heart disease. taken to Cath lab. nil for stenting. on ICU for TTM</p>						
5	SB5866	13/02			trauma	Fall from ladder: TCA	yes	-	-	no	no	nil
	<i>Additional comments:</i>											
6	CB664	14/02		male	trauma	29D03	yes	-	-	no	no	nil
	<i>Additional comments:</i>					a vehicle had aquaplaned on the eastbound M4 and had gone down an embankment						

						Nil - RRV first on scene reported that I was not required						
7	SB5855	14/02	27	male	trauma	Assault	no	-	-	no	no	nil
<i>Additional comments:</i>						Attacked by couple with potato peeler and roofing tile. Injuries to left eyebrow and bridge of nose, roof slate to back of head. Vomited x 3 ?ko'd GCS 15. No obvious inj to back of head. 4 cm lac to eyebrow and 3cm lac to nose. No obvious bony deformity. Dressed. Crew transported to POW. Alloc 1855, Scene 1930						
8	SB5854	14/02			trauma	Pedestrian vs train	yes	-	-	no	no	nil
<i>Additional comments:</i>						Reports of person hit by train. Stood down, no patients identified						

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## Governance

Solo case 1

