



Activity Report



Week commencing: 4th October 2021

Team Shift Activity:	number of shifts:	0
	number of taskings:	0
	number of patient involvements:	0
	number of governance procedures:	0



Solo Activity:	active responders:	SB 5866, CB 664, SB 5867, SB 5854	
	number of taskings:	6	
	number of patient involvements:	5	
	number of governance procedures:	0	
	Tasking Types:		
	<i>trauma</i>	5	<i>adult</i> 5
	<i>medical</i>	1	<i>paediatric</i> 1
	<i>cardiac arrest</i>	0	
	<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	SB5866	06/10	27	male	trauma	Fall from roof	no	-	-	yes	no	nil
						<i>Additional comments:</i> ?Bilateral closed UL # On arrival apparent that fall occurred at another address 45mins prior. ["IV access"] ["Immobilisation"] Bilateral triangular bandages. IV access. Morphine + OND from HART. Vac mat. Conveyed local TU (PCH) In XC2. Omission of not turning off collision avoidance lead to control override by computer during manouvering around traffic. Will need to enquire if we can have this permanently turned off along with default into dynamic driving mode.						
2	SB5866	06/10	70	male	medical	RTC	no	-	-	no	no	nil
						<i>Additional comments:</i> Running call, came across incident - provided support to RRV clinician. Rollover RTC with long stretch of prior erratic driving, vehicle was being followed by off duty officer due to manner of driving and concern.						

						<p>On my arrival pt sat at roadside in chair with no apparent injuries.</p> <p>BM (Normal)</p> <p>12 lead ECG (AF w RBBB pattern) ?on anticoagulants.</p> <p>FAST-ve</p> <p>Focused neurology no apparent CN deficits or PNS S/P deficits.</p> <p>Advised Vac Mat (age/rollover) and TU via Trauma Desk as Silver Trauma with ?anticoagulant ???prior medical episode should have head scan.</p> <p>In XC2, no blue light use.</p>						
3	CB664	06/10	47	female	trauma	29D02P - RTC	no	-	-	yes	no	nil
	<i>Additional comments:</i>					<p>single vehicle witnessed to rollover twice after hitting stone wall. Nominal speed limit on road 40mph.</p> <p>Driver - sole occupant, wearing seatbelt - found by police not responding.</p> <p>All airbags noted to have deployed.</p> <p>["IV access"]</p> <p>Fentanyl 100mcg</p> <p>Off-duty nurse and friend already on scene together with casualty's daughter.</p> <p>Casualty known to have type 1 IDDM. Initial CBG 1.6mmol/l. Glucose gel being given PO.</p> <p>Examination/obs/repeated estimation of CBG via "Freestyle Libre" device.</p> <p>IV 10% glucose x 250mls.</p> <p>GCS slowly improved to 15 once CBG into normal range but casualty then complaining of neck pain (new) and back pain (chronic) without neurological symptoms.</p> <p>Haemodynamically stable throughout with no obvious injuries.</p> <p>Once EA available casualty encouraged to self-extricate onto trolley with assistance.</p> <p>Conveyed to Morriston after approx. 100mins on scene.</p> <p>F&R did not attend.</p> <p>Casualty reported to DVLA give that this was the second profound hypoglycaemic episode in 4 months.</p>						
4	multiple	07/10			trauma	Reports of 2 Vehicle RTC	yes	-	-	no	no	nil
	<i>Additional comments:</i>					<p>multiple responders: SB 5867, SB 5854</p> <p>Police advice that there may be a possible fatality</p> <p>Coded 29D02R</p>						

						RM: I travelled westbound to Junction 36, passing 2 x Traffic cars in lane ONE . . . they were on blues, but travelling slower . . . driver waved and smiled as I passed. Only when I got to J 36 was I informed that the incident had been shut down/closed. Leaving us to run needlessly on Blues is dangerous. JD: Stood down en route. Very poor communication from Police who had actually cleared scene 5 minutes earlier
5	SB5866	09/10	11	male	trauma	11yr old fallen through roof no - - no no nil
	<i>Additional comments:</i>					reports state has broken both legs. Stood down on arrival, patient recovered by FRS no apparent injuries and taken home by police.
6	SB5854	09/10		male	trauma	Reports of stabbing. no - - no no nil
	<i>Additional comments:</i>					On arrival, the exact location of the patient was uncertain. Eventually tracked to a random neighbour, as he had knocked on her door asking for help. Deep laceration to the LEFT supraorbital Ridge Haematoma to LEFT occipitoparietal region. Haemodynamically stable. No enhanced care required.

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

No Governance