



Activity Report



Week commencing: 19th April 2021

Team Shift Activity:

number of shifts:	2
number of taskings:	8
number of patient involvements:	6
number of governance procedures:	2

Team Shift:			
Date:	20/04	Duration:	09:57
Personnel:	BB, WH, TA		
No. of taskings			
<i>trauma</i>	5	<i>adult</i>	5
<i>medical</i>	0	<i>paediatric</i>	0
<i>cardiac arrest</i>	0		
Pre-shift issues	nil	Post-shift issues	nil
Pre-comments	Using BB CDs initially	Post-comments	Used BB CDs. IPad flat in car

Case	Age	gender	type	Job description	S/D	Scene time	Total time	General interventions	Governance interventions	Adverse events
1	40	male	trauma	Unclear history	no	02:26	02:39	yes	yes	nil
				<i>Additional comments:</i> Reportedly found standing in hall of multiple occupancy residence, with blood to face, staring and unresponsive then fell to floor. On arrival of RRV patient prone, at foot of stairs, bloody face and hands with swelling to occipital region, unresponsive Suction, O2 and MILS by RRV paramedic. Clothes removed, binder (unclear mechanism), scoop. Difficulties with access. Extricated down stairs out from building. IV access outside. Fluctuating GCs 4-14, with episodes of complete unresponsiveness in between agitated with intermittent full body shaking with eye rolling ?seizures and snoring with blood in airway - decision to PHEA						

				["PHEA"] decision – 22:35, start - 22:44, complete – 22:47 indication - Airway compromise – multifactorial, location - Road outside property, checklist – yes Pre-02 – facemask Drugs – fentanyl 100mcg, Ketamine 150mg, rocuronium 100mg intubation – , MILS, WH operator, VL-4, grade 1, 1 st attempt, ["misting", "chest movement", "auscultation", "etCO2"] vent within 2 mins, no complications propofol maintenance titrations 18-20ml/hr, further dose rocuronium 50mg and fentanyl 50mcg en route Mobile with patient to EA 2305 ["Assisted Transfer"]						
2	82	male	trauma	Car into rear of HGV	no	-	-	yes	no	nil
	<i>Additional comments:</i>			Restrained driver - ?Medical collapse. Airbags deployed. LTOT, cardiac history, AF, warfarin. Fentanyl 50mcg Assisted to self extrication to EA trolley. Variable HR 35-90, ECG multifocal PVCs. Pain to sternum ?from motability steering wheel knob. Analgesia, ashice UHW ["IV access"] ["Assisted Transfer"]						
3	82	female	trauma	Fall, deformed ankle	no	-	-	yes	no	nil
	<i>Additional comments:</i>			On floor several hours prior to our arrival. Deformity but no critical skin, good pulse, normal sensation. ["IV access"] ["Limb splinting", "Assisted Transfer"] ["Drugs outside JRCALC guidelines (non-governance)"] - Fentanyl 100mcg, Ondansetron 4mg After > 1 hour new vehicle and on discussion with desk minimum wait until 8pm for 7pm start to be allocated at 7.30 (ie further 2 hour wait). Patient cold and distressed. Options considered including moving patient inside, PTS/single man vehicle, borrowing equipment etc. Family willing to use vehicle to transport, so splinted with SAM splint, assisted to a borrowed wheelchair and into car, transported with escort to POWH.						
4		female	trauma		yes	-	-	no	no	nil
	<i>Additional comments:</i>			Stood down as arriving on scene - not as given. Discussed with paramedic on EA - panic attack and happy to deal						

5	29	male	trauma	Stabbing to chest	no	00:35	01:24	yes	yes	nil
<i>Additional comments:</i>				<p>Alleged stabbed ?screwdriver, 2 wounds to left side of chest</p> <p>Agitated +++++, fighting, kicking, screaming. Police present and restraining patient. Chest seal x2 (Police/WAST)</p> <p>IV access (challenging - several lines lost) and IV ketamine for analgesia / sedation to facilitate observation and for patient and crew safety.</p> <p>EMRTs arrived. Extricate in carry chair. Transferred joint Medserve and EMRTS. Boluses of ketamine to allow safe transfer without excessive sedation.</p> <p>["IV access"]</p> <p>["Assisted Transfer"]</p> <p>["Pre-hospital Sedation"]</p> <p>decision – 01:17, start – 01:21, complete - ?</p> <p>operators – BB, WH</p> <p>location – upstairs, in bedroom</p> <p>ketamine 20mg increments, 120mg total dose</p> <p>O2,</p> <p>observations stable</p>						
<i>Additional comments:</i>										

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

Team Shift:					
Date:	21/04	Duration:	09:35	Personnel:	CW/TA
No. of taskings					
trauma	2	adult	2		
medical	1	paediatric	1		
cardiac arrest	0				
Pre-shift issues	nil		Post-shift issues	nil	
Pre-comments	No new issues		Post-comments	nil	

Case	Age	gender	type	Job description	S/D	Scene time	Total time	General interventions	Governance interventions	Adverse events
1	53	female	trauma	Self inflicted knife wound to neck	no	-	-	yes	no	nil
				<i>Additional comments:</i> Trachea clearly visible but didn't appear damaged . Other wound to wrist . ["IV access"] Clean dressing, analgesia, txa. Accompanied to hospital with pre alert via trauma desk 1430 mobile, 1453 at scene ,1555 clear						
2	25	male	trauma	Rollover RTC	no	-	-	no	no	nil
				<i>Additional comments:</i> Stood down but reallocated – x 2 taskings Pt absconded from scene before our arrival mobile 1853 and clear 1923						
3	<1	female	medical	11 month old seizure	no	-	-	no	no	nil
				<i>Additional comments:</i> Awake on arrival . Paramedic dealing Mob 1946 at scene 1954. Clear 2005						

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Solo Activity:	active responders:	SB 5854, CB 664	
	number of taskings:	7	
	number of patient involvements:	4	
	number of governance procedures:	2 x1 by EMRTS	
	Tasking Types:		
	<i>trauma</i>	7	<i>adult</i> 7
	<i>medical</i>	0	<i>paediatric</i> 0
	<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	SB5854	20/04	75	male	trauma	Patient had fallen under moving bus	no	01:05	01:20	yes	yes	nil
						<p><i>Additional comments:</i></p> <p>Major trauma. Crew on scene report GCS 3, weak central pulse, unsure if breathing</p> <p>On arrival injuries noted: Compound right frontal skull fracture flail segment left chest, pelvic fracture suspected , left leg partial amputation.</p> <p>I secured Pelvic Binder, 14G Venflon on RACF</p> <p>EMRTS arrived at this point. Intubation undertaken, followed by Bilateral Thoracostomy.</p> <p>I undertook the RIGHT thoracostomy, confirming RIGHT lung to be down. Blood and Lyoplas given.</p> <p>["IV access"]</p> <p>["Limb splinting","Immobilisation"]</p> <p>["Simple Thoracostomy"]</p> <p>location – road, beside bus</p> <p>indication – trauma, peri-arrest</p> <p>procedure – right side, Right lung not inflated, no blood, no rib fractures right side, but flail segment identified on the left</p> <p>Simple procedure as part of resuscitation, EMRTS had intubated and requested I perform Thoracostomy</p> <p>Patient arrested , decision not to proceed with further intervention agreed by all present on the basis of unsurvivable injury</p>						

						Good team work WAST/Medserve/EMRTS						
2	SB5854	20/04		male	trauma	Car into rear of HGV	no	-	-	yes	no	nil
	<i>Additional comments:</i>					Patient had driven into the back of a stationary lorry. Appears to have had a medical episode. ECG showing Multifocal Ventricular Ectopics ["IV access"] Dr Barton and Will Hedges also in attendance. No significant trauma, but due to medical instability, Dr Barton travelled to UHW with patient						
3	CB664	22/04	20	male	trauma	30D02 – Fall from height	no	-	-	yes	yes - EMRTS	nil
	<i>Additional comments:</i>					casualty had fallen off one of the boulders forming the sea wall behind Swansea University Bay Campus. Laceration to forehead. GCS 4/5 ["IV access"] Assisted WAST personnel first on scene and H67 PHEA and transfer to UHW by air						
4	SB5854	22/04			trauma	RTC	yes	-	-	no	no	nil
	<i>Additional comments:</i>					No persons injured. Stood down en route						
5	SB5854	23/04			trauma	Rollover RTC	no	-	-	no	no	nil
	<i>Additional comments:</i>					Builders van has shed load of wood onto carriageway. Van behind has swerved, lost control, rolled over Both drivers state they do not require any medical assistance or review. Worsening advice given Neither driver wished to be examined. Both accepted advice						
6	SB5854	24/04			trauma	Multi vehicle RTC	yes	-	-	no	no	nil
	<i>Additional comments:</i>					including Motorcycle Stood down en route						
7	SB5854	25/04	57	female	trauma	traumatic cardiac arrest	yes	-	-	no	no	nil
	<i>Additional comments:</i>					Stood down en route > Police confirm patient is dead						

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Governance

Team shift 20/04 – Case 1 and Case 5

Solo case 1

Solo case 3 – EMRTS governance

