



Activity Report



Week commencing: 12th October 2020

Team Shift Activity:

number of shifts:	1
number of taskings:	3
number of patient involvements:	2
number of governance procedures:	0

Team Shift:			
Date:	16/10/2020	Duration:	13:03
		Personnel:	CW, TA
No. of taskings			
<i>trauma</i>	2	<i>adult</i>	3
<i>medical</i>	1	<i>paediatric</i>	0
<i>cardiac arrest</i>	0		
Pre-shift issues	nil	Post-shift issues	T1 battery needs replacing (battery 1) Tempus is 3lead absent
Pre-comments	nil	Post-comments	nil

Case	Age	gender	type	Job description	S/D	Scene time	Total time	General interventions	Governance interventions	Adverse events
1	29	female	trauma	Fall from wall	no	-	-	yes	no	nil
				<i>Additional comments:</i> Fall from wall, pelvic and leg injury. Pcr no.12304866 Pain relief, pelvic binder, immobilised, p2, escorted to ED. ["IV access"], ["Immobilisation", "Assisted Transfer"], ["Drugs outside JRCALC guidelines (non-governance)"] Fentanyl – 350 mcg total Trauma call passed via desk.						
2	-	-	trauma	stood down	yes	-	-	no	no	nil
				<i>Additional comments:</i>						
3	32	male	medical	Agonal breathing	no	-	-	no	no	nil

	<i>Additional comments:</i>	not as given, abdo pain recent procedure ?sepsis Handed over to crew agreed plan
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key – Res = responder, S/D = stood down?, time = hour:mins

Solo Activity:	active responders:	SB 5846, SB 5854, CB 664, SO 007, SB 5857
	number of taskings:	10
	number of patient involvements:	8
	number of governance procedures:	2 (x1 EMRTS governance)
	Tasking Types:	
	<i>trauma</i>	8
	<i>medical</i>	1
	<i>cardiac arrest</i>	1
	<i>adult</i>	8
	<i>paediatric</i>	2

Case	Res	Date	Age	gender	type	Job description	S/D	Scene time	Total time	General interventions	Governance interventions	Adverse events
1	SB5854	12/10	32	female	trauma	RTC	no	-	-	yes	no	nil
	<i>Additional comments:</i> Rollover RTC - clinical suspicion of spinal cord transection at T8-T10 level. Patient lying on grass embankment. clinical findings suggested cord injury. Careful log rolling, pelvic splint, scoop, Headblocks, immobilisation. CT showed burst fracture of body of T8, with cord compression and bone fragments within the canal ["IV access"], ["Immobilisation"], ["Assisted Transfer"]											
2	SB5854	12/10	-	-	trauma	Head Injury	yes	-	-	no	no	nil
	<i>Additional comments:</i> - male with head injury: Stood down on arrival . Patient had left scene											
3	SB5846	16/10	20	male	trauma	Stabbing – case report	no	00:49	01:01	yes	yes (EMRTS)	nil
	<i>Additional comments:</i>											
4	CB664	17/10	50	male	trauma	Stabbing	no	-	-	no	no	nil

						<i>Additional comments:</i>	27D04S "POLICE MALE STABBED IN CHEST BY PARTNER LOTS OF BLOOD" Nil from me - dealt with by crew first on scene the casualty had a stab wound in the rlq of abdomen with no active bleeding or signs of injury to deep structures. He was haemodynamically stable and was conveyed to morriston without my needing to accompany him.					
5	CB664	17/10	27	male	medical	Unconscious	no	-	-	no	no	nil
						<i>Additional comments:</i>	31D03 – the casualty had been found unconscious and unrousable in the street SJA crew first on scene had roused the casualty who was judged likely intoxicated as a result of alcohol and other substance(s). The casualty was taken to the Help Point for further evaluation and monitoring.					
6	SB5846	14/10	14	male	trauma	Hanging Paeds	yes	-	-	no	no	nil
						<i>Additional comments:</i>	Not as given, Stood down en route.					
7	multiple	18/10	-	-	trauma	Male hit by train	no	-	-	no	no	nil
						<i>Additional comments:</i>	- multiple responders – SO 007, SB 5857, SB 5854 - no patient found. believed false alarm (driver saw pedestrian on track and thought he had hit them, as they appeared to jump out of the way but he felt a bump). hart searched area with police. no patient found. police helicopter searched, no heat sources detected.					
8	multiple	18/10	73	male	arrest	Cardiac arrest	no	00:34	01:55	yes	no	nil
						<i>Additional comments:</i>	multiple responders – SB 5846, SB 5854 - GR and RM co-respond as witnessed local arrest. - Witnessed cardiac arrest. wife making a brew, heard him collapse in bedroom snoring. unclear if car given - PEA - LUCAS and adrenaline – ROSC – 08:43- Portly Diabetic chap. ?POST MI on 12L ECG. - advanced airway - iGel to ETT - Intubated whilst flat with VL and stylet first pass COETT 8.0 - ["Oxygen applied/confirmed"] ["IV access", "crystalloid given", "LUCAS"] - ["Thrombus"] - ["Neuroprotective measures"], ["Midazolam", "Rocuronium", "Adrenaline"] - ["Full monitoring", "Unstable during transfer"], Adren infusion - Tricky extrication on scoop out of house - Transport to UHW ED with GR. Adrenaline infusion and bolus needed - CT - massive SAH					
9	SB5854	16/10	52	female	trauma	Stabbing	no	01:20	01:40	yes	no	nil

						<i>Additional comments:</i>	<ul style="list-style-type: none"> - stab wound posterior left chest - patient stable, so immediate transfer to UHW - sats dropped en route, to 90% with increased respiratory rate and anxiety ++ auscultation showed diminished air entry on the left - decompressed in MCL 2 ICS with 14g venflon. good result - resps decreased, sats improved. ct scan showed left sided haemopneumothorax - decompression of a tension pneumothorax 					
10	SBS5854	16/10	16	male	trauma	RTC	no	00:20	00:37	yes	yes	nil
						<i>Additional comments:</i>	<p>RTC : Cyclist v car. High speed, no cycle helmet.</p> <ul style="list-style-type: none"> - asystolic arrest - clinically base of skull fracture with occipital crepitus, heavy bleeding from both ears - HOTT - ["IV access", "Advanced life support"] - ["Simple Thoracostomy"] - EMRTS attended - Blood products withheld - ROLE'd - Catastrophic unsurvivable head injury 					

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



Governance: Solo case 3 (case review)
Solo case 10

Case Reviews

Case: solo 3	Date: 16/10	Responders: SB5846	Age: 20	Gender: male
	Time: 20:06	Scene Time: 00:49	Total Time: 01:01	1st on Scene YES/NO
	Tasking Description		Stabbing	

Mechanism/History:	Stab chest and abdo
Injuries:	

Clinical	Assessment					Interventions	Comments
	C	A		B			
	yes	patent	no	haemorrhage		haemostatics used	Sutures, clamps, staples
				compromised - low GCS		["Oxygen applied"], advanced airway	
	<i>c-spine</i>	cleared					unable to clear
	<i>B</i>	RR	0	Sats	0	penetrating injury, bilateral	["thoracotomy"]
	<i>C</i>	HR	0	BP	0	catastrophic haemorrhage	["Tension pneumothorax", "Open pneumothorax", "Massive Haemothorax", "Cardiac tamponade"]
	<i>D</i>	GCS		3		pupils equal/unreactive	
	<i>E</i>	T		BM			
	<i>Other</i>						

Post-Intervention Observations	Ventilated	yes	RR	0	Sats	0	HR	0	BP	0	GCS	3	T	0	BM	
Transport details																
Stable:	NO	ROLE														
Governance Interventions	YES	YES – governance procedure performed by EMRTS														
Comments:	Thoracotomy by EMRTS Assisted in central access and haemorrhage control Stapled aorta. Clamped pulmonary vessels. Internal Cardiac massage Trauma line into svc Heart filled but no cardiac activity despite 4+4 blood products ROLE															



