



## Activity Report



Week commencing: 24<sup>th</sup> May 2021

|                             |                                  |   |
|-----------------------------|----------------------------------|---|
| <b>Team Shift Activity:</b> | number of shifts:                | 0 |
|                             | number of taskings:              | 0 |
|                             | number of patient involvements:  | 0 |
|                             | number of governance procedures: | 0 |



|                       |                                  |                          |                     |
|-----------------------|----------------------------------|--------------------------|---------------------|
| <b>Solo Activity:</b> | active responders:               | CB 664, SB 5857, SB 5854 |                     |
|                       | number of taskings:              | 14                       |                     |
|                       | number of patient involvements:  | 9                        |                     |
|                       | number of governance procedures: | 3 x 1 by EMRTS           |                     |
| Tasking Types:        |                                  |                          |                     |
|                       | <i>trauma</i>                    | 11                       | <i>adult</i> 14     |
|                       | <i>medical</i>                   | 1                        | <i>paediatric</i> 0 |
|                       | <i>cardiac arrest</i>            | 2                        |                     |
|                       | <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                           | CB664 | 24/05 | 19  | male   | trauma  | Fall from fence   | no  | -          | -          | yes                   | no                       | nil            |
| <i>Additional comments:</i> |       |       |     |        |         | <p>The casualty had climbed over a 3m high fence and had injured his ankle after dropping to the ground.</p> <p>Incident upgraded to AMBER1 because he had an obvious open fracture of L ankle and was stuck on the ground in the open.</p> <p>["IV access"] ["Limb splinting"]</p> <p>Examination and observations.</p> <p>Analgesia.</p> <p>Dressing to wound.</p> <p>Handover to crew for transfer to Morriston.</p> <p>Noted that WAST paramedics now carrying and able to give co-amoxiclav.</p>   |     |            |            |                       |                          |                |
| 2                           | CB664 | 25/05 | 62  | male   | med/tra | RTC   | no  | -          | -          | no                    | no                       | nil            |
| <i>Additional comments:</i> |       |       |     |        |         | <p>RTC - the casualty was the driver of a vehicle which had left the carriageway onto soft verge/shallow ditch.</p> <p>Minor injury to scalp and R elbow.</p> <p>Main concern was his symptoms of heart failure and COPD - very wheezy and SpO2 87% at best.</p> <p>He declined transfer to hospital for review.</p> <p>Discharged into care of Police after roadside breath test.</p> <p>The casualty and his partner both given advice that he should seek medical help if worsening breathlessness later or any other symptoms of concern.</p> |     |            |            |                       |                          |                |

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|   |                             |       |    |        |         | Letter done to GP.   |     |   |       |     |     |     |
| 3 | multiple                    | 26/05 |    | female | medical | Seizure  | yes | - | -     | no  | no  | nil |
|   | <i>Additional comments:</i> |       |    |        |         | <p>multiple responders: SB 5857, SB5854</p> <p>Seizure in known epileptic. Banged head, now recurrent seizures with no improvement in GCS post seizure ? traumatic ? status.</p> <p>Request for BASICS assistance as EMRTS committed in Swansea.</p> <p>Discussed with Steff on ASD/Trauma desk update from crew in scene - unresponsive &gt;30 minutes post seizure, concern re head injury, ?PHEA</p> <p>-&gt; joint response SB5857 AND SB5854</p> <p>Stood down on route - second crew on scene and have successfully extricated patient to EA who has recovered slightly in GCS (3--&gt;5--&gt;6), going to transfer directly to UHW</p> <p>Allocated 0051, mobile 0052, Stood down approx 0104</p> <p>Manual text not received by BB (seen on WhatsApp only)</p> |     |   |       |     |     |     |
| 4 | CB664                       | 26/05 | 26 | male   | trauma  | Fall from mountain bike  | no  | ? | 03:14 | yes | yes | nil |
|   | <i>Additional comments:</i> |       |    |        |         | <p>Fall from mountain bike on unofficial dirt track.</p> <p>Found by friends on ground in pain and unable to move legs.</p> <p>["IV access"]</p> <p>["Immobilisation", "Assisted Transfer"]</p> <p>Examination and observations.</p> <p>Sedation to allow packaging and transfer via Coastguard helicopter to UHW.</p> <p>["Pre-hospital Sedation"]</p> <p>Presumed weight = 80Kg</p> <p>decision: 17:30, start: 17:43, complete: 18:20</p> <p>indication: extrication</p> <p>location: on ground at scene</p> <p>oxygen, CO2 monitoring</p> <p>Ketamine: 40mg initial dose, 100mg total dose</p> <p>midazolam: 1 mg</p> <p>stable observations</p> <p>no complications</p>  |     |   |       |     |     |     |

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| 5 | SB5854                      | 26/05 |    |      | trauma | RTC  | yes | - | - | no  | no | nil |
|   | <i>Additional comments:</i> |       |    |      |        | Car had driven into the back of a Highways Agency lorry that had been laying out cones in lane 3 of M4.<br>High speed collision, all unknown<br>Stood down en route, minor injuries  |     |   |   |     |    |     |
| 6 | SB5854                      | 26/05 |    |      | trauma | Stabbing   | yes | - | - | no  | no | nil |
|   | <i>Additional comments:</i> |       |    |      |        | Report of stabbing, stood down as minor injury   |     |   |   |     |    |     |
| 7 | SB5854                      | 27/05 |    |      | trauma | Stabbing   | yes | - | - | no  | no | nil |
|   | <i>Additional comments:</i> |       |    |      |        | initial report was "stabbing in chest, gasping for air", updated to "Hit in chest by a ball, has stabbing pains and is gasping for air"<br>stood down as not required  |     |   |   |     |    |     |
| 8 | CB664                       | 28/05 | 50 | male | trauma | 29D03 - RTC  | no  | - | - | no  | no | nil |
|   | <i>Additional comments:</i> |       |    |      |        | vehicle vs low front wall of property at side of residential street.<br>The driver was the sole occupant, had self-extricated and been able to mobilise first to Police vehicle and then to EA<br>Examination and observations.<br>No significant injuries found but noted history of cerebral aneurysm.<br>Conveyed to Morriston as precaution  |     |   |   |     |    |     |
| 9 | SB5857                      | 29/05 |    |      | trauma | RTC - Rollover   | no  | - | - | yes | no | nil |
|   | <i>Additional comments:</i> |       |    |      |        | Dacia Duster - 3 occupants. Flipped & ended against crash barrier in central reservation.<br>Airbags not deployed, passenger compartment appears intact.<br>Arrived on scene simultaneously with first FRS vehicle. 1x EA & police on scene.<br>Patients all out of vehicle - self extrication with bystander assistance, all full recollection of events, no reported LoC.<br><br>Patient 1 - 36F - Driver (restrained)<br>No injuries reported. C-spine cleared (NEXUS). Normal observations. Discharged with SOS advice<br>Patient 2 - 38M - Front passenger (restrained)<br>Recovering from previous accident with metalwork in leg, limited WB, and existing shoulder injury / ?stable back injury.<br>Self extricated and mobilising around scene. No C-spine tenderness, full ROM, no neurology.<br>C/O pain to L arm - tender over mid humerus and distal radius with reduced movement. Sensation / circulation intact. Abrasion to elbow.<br>Discharged to EA crew for observations and transfer to Morriston for assessment. |     |   |   |     |    |     |

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|----|-----------------------------|-------|----|------|--------|--|----|---|-------|-----|-----|-----|
|    |                             |       |    |      |        | <p>Patient 3 - 10F - Rear passenger (passenger side) (restrained - standard belt only). No injuries reported (small superficial laceration &lt;0.5cm to left foot).<br/>C-spine cleared (NEXUS). Normal observations. Discharged to care of mum with SOS advice.<br/>2x discharged. 1x recommend to Morriston for assessment/ x-ray.<br/>Main intervention standing down EMRTS, HART, 2 additional DCA and preventing all 3 patients being boarded by FRS and WAST.</p>  |    |   |       |     |     |     |
| 10 | SB5854                      | 29/05 | 53 | male | arrest | cardiac arrest   | no | - | -     | yes | no  | nil |
|    | <i>Additional comments:</i> |       |    |      |        | <p>witnessed cardiac arrest with immediate bystander CPR.<br/>Initial rhythm = VF, shock x 1, converted to bradycardia broad complex ? Idioventricular rhythm.<br/>No palpable pulse, but good ETCO2 with Lucas<br/>Full ALS. in view of young age, no antecedent history and proximity to UHW (4.7 miles) decision to transfer to ED with ongoing compressions.<br/>Good ETCO2 throughout suggested some cardiac activity but no palpable pulse = Low output state (could also have been good placement of Lucas)<br/>In ED, Echo showed cardiac standstill after a few flickers of Ventricular activity.<br/>["IO access", "Advanced life support", "LUCAS"]<br/>["Assisted Transfer"]</p>   |    |   |       |     |     |     |
| 11 | SB5854                      | 29/05 | 86 | male | trauma | Fall – leg injury  | no | ? | 02:47 | yes | yes | nil |
|    | <i>Additional comments:</i> |       |    |      |        | <p>crew request for additional sedation.<br/>Patient had fallen and sustained a compound fracture of the mid shaft of RIGHT femur<br/>["IV access"]<br/>["Limb splinting", "Immobilisation", "Assisted Transfer"]<br/>Analgesia prior to arrival = IV Paracetamol 1000mg, IV Morphine 10 mg, Entonox,<br/>O/E mid shaft Femoral fracture, Skin broken lower down anteriorly ? comminuted compound fracture.<br/>Analgesia/Sedation = Ketamine IV , titrated to response( Sedation = Nystagmus) Full monitoring including ETCO2.<br/>Kendrick Splint applied, but despite significant effort, I was unable to fully reduce the mid shaft fracture.<br/>Distal pulses palpable before and after procedure.<br/>Monitored in full during Transfer<br/><br/>["Pre-hospital Sedation"]<br/>*no timings given*<br/>indication: facilitate procedure<br/>location: Home Address</p> |    |   |       |     |     |     |

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|----|-----------------------------|-------|----|--------|--------|---|-----|---|---|-----|-------------|-----|
|    |                             |       |    |        |        | oxygen, CO2 monitoring<br>Ketamine: 20mg initial dose, 40mg total dose<br>stable observations<br>no complications<br>Clinically stable throughout. I did not obtain a copy of the pre and post procedure blood pressure readings, all were however acceptable. (150/90 throughout )<br>Excellent level of sedation that allowed manipulation of fracture with significant force. No complaints from patient   |     |   |   |     |             |     |
| 12 | SB5854                      | 30/05 |    | male   | trauma | Ejection from Quad bike   | no  | - | - | yes | yes - EMRTS | nil |
|    | <i>Additional comments:</i> |       |    |        |        | Male ejected from quad bike, head injury<br>I arrived at the same times EMRTS.<br>GCS = E1V2M4 = 7<br>PHEA.<br>I assisted with Pelvic Binder and Immobilisation, packaging<br>Good team effort, Good CRM<br>["Immobilisation"]  |     |   |   |     |             |     |
| 13 | SB5854                      | 30/05 |    | male   | trauma | Motorcyclist v Car  | yes | - | - | no  | no          | nil |
|    | <i>Additional comments:</i> |       |    |        |        | Head injury. I mobilised from previous job, but was stood down when at J 35= crew running from scene to UHW   |     |   |   |     |             |     |
| 14 | CB664                       | 30/05 | 74 | female | arrest | Cardiac Arrest  | no  | - | - | yes | no          | nil |
|    | <i>Additional comments:</i> |       |    |        |        | The patient had cardiac history (no details) and had last been seen alive at 1615. Discovered unresponsive at 1630.<br>Family commenced CPR but they were clearly fatigued by the time I arrived.<br>["IV access", "Advanced life support", "LUCAS"]<br>["Assisted Transfer"]<br>Pads applied - asystole.<br>iGel size 4; O2 15l/min via BVM and took over chest compressions.<br>ALS once RRV and then EA arrived.<br>ROSC after 4mg adrenaline and ~30 minutes 12 lead - RBBB.<br>PEA - 2mg adr - ROSC ;<br>PEA again just before arrival at Morriston. ROSC post 1mg adrenaline..<br>Intubated at second attempt for transfer by road. |     |   |   |     |             |     |

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|  |  | iView V/L not helpful in bright sunlight.<br>Further attempts at resuscitation terminated in Resus. |
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*key – Res = responder, S/D = stood down?, time = hour:mins*



## Governance

Solo case 4

Solo case 11

Solo case 12 - EMRTS

