

EMERGENCY PRIMARY CARE

CENTRAL AUSTRALIAN ABORIGINAL CONGRESS

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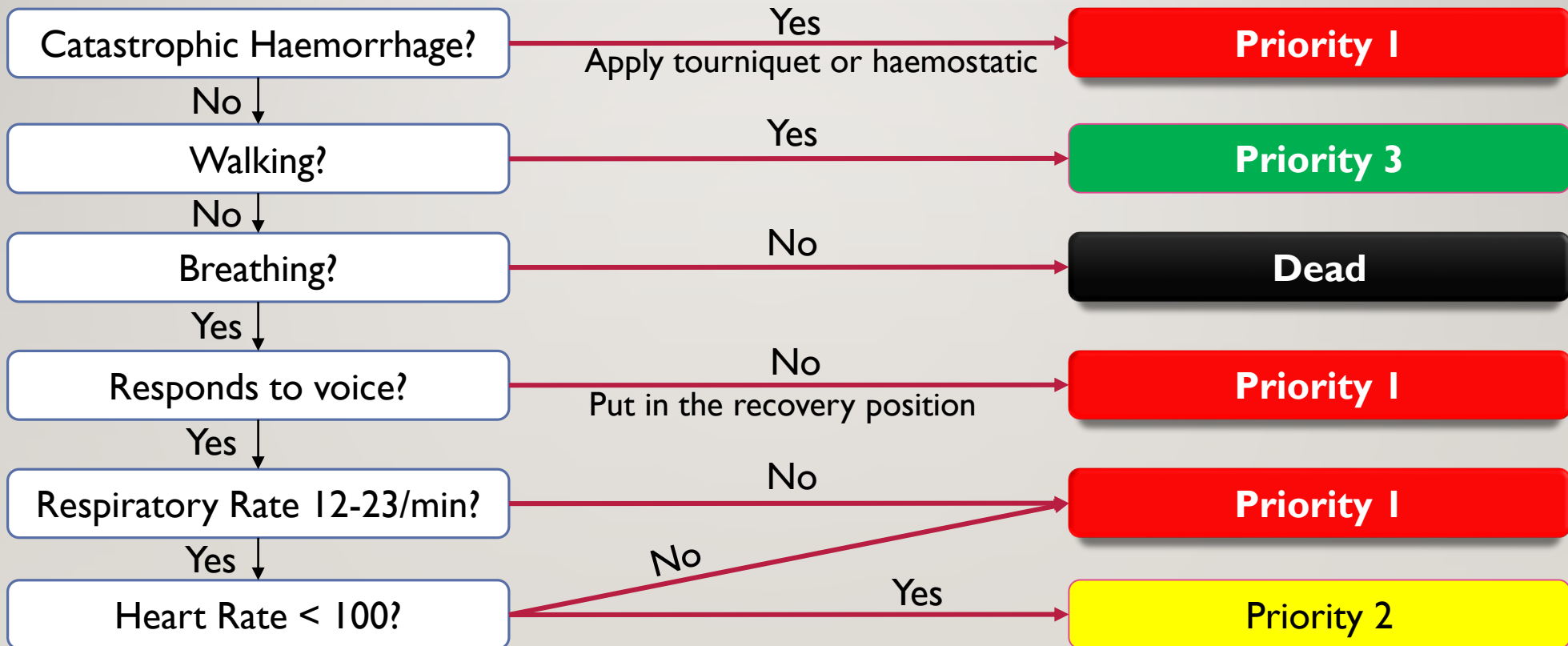
THE PROBLEM

- Emergencies are relatively rare in primary care
- Huge variety of clinical situations that lead to emergency presentations
- Staff have varied experiences of dealing with emergencies
- The staff member with the shortest experience in primary health care may have the most recent emergency experience
- Courses teach the theory and some practical skills but not how to do it together in your own clinic

WHAT MAKES A DIFFERENCE IN AN EMERGENCY?

- Triage

TRIAGE



WHAT MAKES A DIFFERENCE IN AN EMERGENCY?

- Triage
- Protecting airways (spine)
- Stopping bleeding

STOPPING BLEEDING

- Tourniquet
- Point pressure
- Tying off a vessel
- Pelvic splint



WHAT MAKES A DIFFERENCE IN AN EMERGENCY?

- Triage
- Protecting airways (spine)
- Stopping bleeding
- Oxygen (+/- bagging) if breathing difficulties (watch COPD, tension pneumothorax)
- Sugar if hypoglycaemic (diabetes medication or alcoholics)
- Salbutamol (Adrenalin for anaphylaxis)
- Rehydration 20ml/kg

ACCREDITATION

ISO, RACGP/AGPAL, NT Pharmacy

PROBLEM

- 11 clinics (5 in town)
- Locally determined emergency procedures
- Only reviewed 3yrly with Agpal/RACGP
- ISO review annually reported poor maintenance of emergency equipment
- NT Pharmacy evaluation reported poor maintenance of emergency medications
- Different clinics had different emergency loads and equipment
- Staff had different experience and skills



STANDARDISATION

- Trolleys
 - Capacity, ability to seal, good design
- Draws
 - Same contents in same draws, assists users moving within organisation
- Airways
 - Utilise same airways as retrieval team
- Medication
 - NT Atlas



STORAGE/ACCESS

- Temperature control and stability
 - Medication
 - No issue
 - Adrenalin least stable but shelf life at 70C
 - Devices
 - Should be ok
 - ISOgel < 40 C
- No lock, child safe

MAINTENANCE

- Record check of equipment and seal
- Record next medication or device due to go out of date
- Checking trolley keeps staff up to date on contents and layout
- Need to keep documentation of maintenance
- Someone to check trolley seal each day and if seal has been broken



DOCUMENTATION

ESSENTIAL CHECKS FORM

Health Centre: Amoonguna Clinic

Month:

Year:

NB Initial and date each cell

Drawer contents

Weekly Checks				
	Week 1	Week 2	Week 3	Week 4
ECG				
Lifepac				
Oxygen bottle				
S8 / RS4 medicines count				
Glucometers (Refer to BGL checklist)				
Portable Suction Unit				
Emergency Drug Box				
Resus Trolley <small>Check expiry dates</small>				
AED				

Fortnightly Checks		
	Week 1	Week 3
Emergency Bag		
Doctors Box		

Monthly Checks					
Adult Scales (calibration)	Room 1	Room 2	Room 3	Room 4	Room 5
Baby Scales (calibration)	Room 1	Room 2	Room 3	Room 4	Room 5
Anaphylaxis Kits	Room 1	Room 2	Room 3	Room 4	Room 5
Obstetric Kit					
HemoCue	Refer to HemoCue Check List				
QA & QC Checks	Refer to QA & QC Check List				
Fit Kit	(x1 in Emergency Bag)				

TRAINING

- On site training
- Heart rhythm generators for your equipment (mimic tracing) = \$1350.00
- Drug substitution
- Range of scenarios
- Escalation of skill
- Choose an emergency APP

PEDI STAT

- Enter the age, weight, length or Broselow colour

The screenshot displays the PEDI STAT app interface on a mobile device. At the top, there is a blue header bar with a back arrow and the title "Seizure". Below this, the app shows a list of medications and their dosages. The first medication is "Diazepam Rectal" with a dosage of "1.3 - 2.6 mg". The second medication is "Diazepam Rectal" with a dosage of "0.5 mg/kg" and a total dosage of "6.5 mg". The third medication is "Midazolam IV/IO" with a dosage of "0.2 mg/kg" and a total dosage of "2.6 mg". The fourth medication is "Midazolam Intranasal" with a dosage of "0.2 mg/kg" and a total dosage of "2.6 mg". The fifth medication is "Phenobarbital Load IV" with a dosage of "0.2 mg/kg". At the bottom, there is a blue bar with the text "Estimated Patient Information:" followed by three columns of data: "1 Year", "11 Months", "13 kg (28.7lbs)", and "85-90 cm (33-35)".

← Seizure

1.3 - 2.6 mg

Diazepam Rectal
0.5 mg/kg
6.5 mg

Midazolam IV/IO
0.2 mg/kg
2.6 mg

Midazolam Intranasal
0.2 mg/kg
Use higher concentration midazolam, 5mg/1ml
2.6 mg

Phenobarbital Load IV
Estimated Patient Information:

1 Year	13 kg	85-90 cm
11 Months	(28.7lbs)	(33-35 ")

