Disclosures

- I have no actual or potential conflict of interest in relation to this program/presentation
Objectives

• Describe the most common emergencies that occur in the general pediatric office

• Learn how to prepare your office for these emergencies

• Learn interventions to treat the most common pediatric office emergencies
What is an emergency?
Pediatrics, August 2018

Frequency of Pediatric Emergencies in Ambulatory Practices

Matthew L. Fakhoury, MD; Elizabeth Moniz leads, MD; Hareth Mousa, PhD, MPH; R.H.K. Levi Price, MD; L.R. Sierra X. Vaugn, MPH; Tom Orav, BS; E.M. D.; Brian D. Bennyworth, MD, MD

- 42 per 100,000 visits/year
- Not super common but you need to be prepared!
What one tool do you need most in an office emergency?
WHAT COULD POSSIBLY GO WRONG?
Respiratory Emergencies

- Asthma exacerbation
- Anaphylaxis
- Infections
  - pneumonia
  - bronchiolitis
Albuterol: MDI = or > Nebs

- Equally efficacious
- Cheaper
- Teaches them how to use home meds
- ? Albuterol/ipratropium combo may prevent admissions

Steroids: PO= IM= IV

- PO Dexamethasone
  - 0.3-0.6 mg/kg
  - Max 16 mg
  - Long duration
  - Better tolerated than prednisone
Infections: providing O’s

- Nasal cannula
- Face mask
- Non-rebreather
- High flow nasal cannula

Suction

- Trach plugging
- Bronchiolitis
Anaphylaxis!

30kg

EpiPen® Jr

EpiPen®

1. Form fist around EpiPen® and pull off blue safety release.
2. Place orange end hard into outer thigh so it ‘clicks’ and hold for 10 seconds.
Adjuvant therapies

- No evidence they help
- Focus on the epinephrine
- IV Fluids if you can do that

Seizures

- Febrile
- Breakthrough
Checklist

- Oxygen
- BVM
- Anti-seizure meds

Anti-seizure meds

- Routes matter:
  - PR
    - Diazepam 0.3-0.5 mg/kg
  - IM
  - (IV)
  - IN
    - Midazolam 0.2 mg/kg
Rectal diazepam
Intranasal midazolam!
If you use this...

You gotta know how to use this...
Psych/behavioral

- New psychosis is different from established psych abnormality
- Toxidromic?
- Safety first!

When things are heating up...

- De-escalate
  - Remove sources of stress (mom/dad?)
  - Remove potential “weapons”
  - Calm the room (lights, lower voices)
Chemical warfare

• Still reasonable?
  • ODT olanzapine (Zidus)
  • PO Benzos

Chemical warfare

• Not so much?
  • Call for help
  • Safety first- yours and your staff
  • IM olanzapine (Zyprexa)
  • IM lorazepam
Mock codes
Emergency Care Cart

Airway Supplies: Oral airway/BVM
Airway Supplies: Nasal Trumpet

Practice simple things

(6) Quick Disconnect Port for Cannula or Mask
Available with 2-port or 4-port receptors

(5) Regulator Gauge

(4) Flow Adjustment Control
For setting altitude or flow setting
Do Not use as a shut off valve.

(3) On/Off Valve

(2) Cylinder Content Gauge

(1) Pressurized Cylinder or Tank
Practice simple things
Things that seem like emergencies…

(But you can handle it!)
When to send to ED?
Can I take care of it in my office?

- Not on face/GU/hand/feet or needing cosmetic repair?
- Superficial bite?
- Domestic animal?
Animal bites: infection risk

- Cats > dogs
- Amox/clav ppx
- PCN allergic: 3rd gen ceph or bactrim + clinda

Animal bite considerations

- Rabies risk
Guidelines for Prophylaxis against Rabies

Animal bite: tetanus risk

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<thead>
<tr>
<th>DIRTY WOUND</th>
<th>CLEAN WOUND</th>
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<tr>
<td>&lt; 3 TETANUS</td>
<td>(+)TIG</td>
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<td>&gt; Or = 5 TETANUS</td>
<td>BOOST if &gt;5 years</td>
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<td>BOOST if &gt;10 years</td>
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Take Home Points

• Prepare your office for the common emergencies
• Practice using the emergency equipment
• Maintain PALS
• Keep your phone charged and use 9-1-1
• Remember limitations of the office

Thank You!