Characteristics of patients brought to the Paediatric Emergency Department (PED) by Ambulance at University Hospital Limerick (UHL)

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INTRODUCTION

UHL PED has noticed an increase in ambulance referrals some of whom required non-urgent attention (< 2 hours). We hoped to emulate a study by one of the tertiary level PEDs in Dublin, Ireland in order to review the characteristics of our own cohort of patients.

AIMS

To retrospectively review the characteristics of patients presenting to our PED in relation to their presenting complaint, urgency and outcome.

METHODS

Hospital Electronic databases were used to identify all patients who accessed our paediatric ED between 01.11.2017 and 31.01.2018. ED records were reviewed to ascertain patients brought in by ambulance (BIBA), their presenting complaint, urgency, and outcome.

RESULTS

From 01.11.17 to 31.01.18 4504 patients reviewed in UHL PED. 106 (2%) were BIBA. 32 (30%) with respiratory tract infections, 26 (25%) with seizure activity, 12 (11%) with head injuries, 7 (6%) with limb injuries, 6 (6%) with self harm/overdose, 4 (4%) with syncope, 3 (3%) with burns and 7 (6%) other.

The most common presentations were pyrexia (30%), seizures 77 (25%) and injuries (18%). Self harm/overdose comprised 6 (5%). Of significance non-urgent presentations at 33 (29%). 10 (9.4%) required ambulance intervention.

Triage Classification (Results)

OUTCOMES

- 44% admitted
 - 8 (7.5%) transferred to tertiary Paediatric ICU
 - Burn, Trauma, shunt review
 - 9 (8.5%) admitted to UHL Paediatric High Dependency unit
- 56% discharged home
 - 72% of these were discharged with GP follow up recommended
- No deaths during this study period

CONCLUSION

The most common presentations were pyrexia, injuries and seizures 77 (72%), self harm/overdose comprised 6 (6%).
Difficult to define inappropriate ambulance use
56% of our cohort were discharged home with GP follow up
29% required only non-urgent attention consistent with the previous study conducted by the Paediatric Emergency Department team in Temple Street Hospital (27%)(Caufield et. al 2016)

SOURCES

Lightfoot Solutions UK Ltd, (2016). National Ambulance Service of Ireland emergency service baseline and capacity review. [online]www.hse.ie/eng/services/publications/NAScapacityreview.pdf[Accessed 3rd March. 2018].

Morgans, A. Burgess S. Judging a patient's decision to seek emergency healthcare: clues for managing increasing patient demand. Aust Health Rev. 2012 Feb;36(1):110-4.

Presenting Complaints		
Pyrexia (30%)	Otitis Media	Asthma exacerbation
Burns	Drowning	Head injury (11%)
Limb injury (6%)	Seizure (25%)	RTA
Foreign body	DKA	Hypoglycaemia
Burns (3%)	Self-harm	Poisoning
Croup	Neck pain	Vomiting
Testicular Pain	Abdominal Pain	Wound
Rash	Collapse	DSP (6%)
Anaphylaxis	Cough	ENT