

PHYSICIAN CHART					
Triage Level					
Date	Time				
Presenting Problem: FEVER / UNWELL Age 0-3 months					
Estimated Age:	Yrs Mths Days				
Triage					
Allergies:					
T	P	RR	BP	SpO2	WT
Medications:					
CC / HPI circle positives, backlash (!) negatives			OTHER HX NO CHRONIC DISEASES		
TRIAGE NOTE: Reviewed / Agree with nursing HX BY: Family / Paramedics CARE PLAN: NONE - Antipyretics - Antibiotics COMPLAINT: Crying / Irritable / Fever / Feeding poorly			IMMUNIZATIONS - UTD / 2 mth Hib/Pneumo / 4 mth Hib/Pneumo MATERNAL HX - NML / DM / HTN / HSV / Alcohol / drug use DELIVERY - NML / vaginal / C-section CV / RESP - Congenital heart dz SURGERY - NONE MEDS - NONE ALLERGIES - NKDA - See nursing note		
ONSET: ... hrs / days / wks ago / Awake with / UNW PATTERN - Intermittent / constant / Better / worse / same CONTEXT - Recent travel / Unwell contacts			FAMILY / SOCIAL HX ADLSE POSSIBLE - NO / YES 2nd HAND SMOKE EXPOSURE - NO / YES LIVES WITH - Family / Mother / Father FAMILY HX - Asthma - Bleeding dz / DM		
SYMPTOMS / SIGNS / ROS NONE CONST - Abn cry / Weight loss / Abn behaviour / Rigors EYES - Discharge / Pain / Rubbing eyes / Redness ENT - Earache / Ear discharge (nasal discharge / congestion / Voice change) CV - Cyanosis RESP - Cough / Trouble breathing / Wheeze / Apneic spells GI - Abdominal pain / Constipation / Bloody / mucous stool (vomiting onset # times past 24 hrs) (Diarrhea onset # times past 24 hrs) GU - Foul-smelling urine / Reduced urine output (Dry diaper x hrs) SKIN - Rash			SERIOUS INFECTION POSSIBLE NO YES URINARY TRACT INFECTION - NO / POSSIBLE - Leukemia (Urinary frequency / dysuria / Rx consider admit if > 2 mths, otherwise PO OR) PNEUMONIA - NO / POSSIBLE - O2sat = % on RA (RR = 50/min - Cyanosis - Cough - Grunting - Nasal flaring) (Chest crackles - Chest indrawing) MENINGOCOCCAL DZ - NO / POSSIBLE - Ill-looking / Purpura (Cap refill > 3 sec - Neck stiffness) BACTERIAL MENINGITIS - NO / POSSIBLE - Irritable/inconsolable (Neck tenderness/rigidity/torticollis / Anorexia / Cervical stiffness) HERPES SIMPLEX ENCEPHALITIS - NO / POSSIBLE - Rash (Anorexia / focal seizure / hyper / leukopenia / leukocytosis / Hepatitis) KAWASAKI UNSURE - NO / POSSIBLE (Fever longer than 5 days plus 4 of five of bilateral conjunctiva injection / Erythema (facial) Erythema (extremities) / mucositis) DENTAL abscess / Polymorphous rash SEPTIC ARTHRITIS / OSTEOMYELITIS - NO / POSSIBLE (Limp / joint swelling / non-weight bearing) (Not using an extremity)		
RELEVANT HX NEG FEEDING - Breast / bottle / NML / decreased / not feeding LAST: - Age - Drink - BM PERINATAL HX - Full term - Premature - wks gest (Birth wt - kg / NICU - wks) GBS STATUS - NEG - prolonged ROM - Intrapartum fever / ABX RECENT CARE / Rx - NO - YES					
MD Assessment: MD Discharge: Signature			© 1999-2016 BEC Emergency		

CONSTITUTIONAL T = tender; S = swelling; D = deformity		Patient	
"INTERMEDIATE" ** HIGH RISK SERIOUS ILLNESS APPEARANCE - Alert / Looks well / Looks sick** CRY - Not crying - NML cry - W/whimpering / sobbing (Weak / inconsolable -> hyperactive -> inconsolable cry) BEHAVIOUR - Content/soothing (Irritable-consolable/irritable/consolable) INTERACTION - NML - ABN response to social cues (No response to social cues) ACTIVITY - NML/playing - Wakes only to prolonged stimuli (Does not wake or stay aroused) VITAL SIGNS - NML / Febrile - T = 38C** - HR = 100* RR over 1 min -> 60/min** DISTRESS - NONE / MG / Mod / Severe AIRWAY PROBLEM - NONE - Stridor - Drooping (Lethargic voice - Lethargic grimacing - Tremor) RESP - NML - Nasal flaring** - Grunting** (Incoarse/irregular) COLOUR - NML - Pale* - Flushed* - Jaundiced* - Cyanotic** (Tachymia** - tachy -> tachycardia) SIGNS DEHYDRATION - NONE - weak outlets (Cap refill > 3 sec - NO tears - Lily mucous membranes) (reduced skin turgor -> abd resp pattern -> cool extremities)		Estimated Age: Yrs Mths Days CBC CHFM CHFM CHFM U/RINP WBC Na NML or NML or NML or NML or HGB Cl UA PLAT Glc WBC HCO3 RBC Urea Bact Creat	
HEAD / NECK WNL HEAD - NML exam - T - S ANT. FONT - NML - Sunken / Bulging** - Closed EYES - NML - PERL - Red/injected / Rt - Lt TMS - NML - Red / Bulging - Rt - Lt NASAL DISCHARGE - NO - Clear - Coloured THROAT - NML - Erythema - Exudate - Throat - Vesicles MENINGEAL SIGNS - NONE ADENOPATHY - NO - YES		SKIN / MSK WNL SKIN - NML - Rash - Petechiae** SPINE / VERTEBRAL TENDERNESS - NO - YES MEDICAL DECISION MAKING / COURSE CONSULTS / CALLS INVESTIGATIONS (1-30 days) rectal T >= 38.0C (Lab: culture blood/urine (qam) # < 2 mths stool if diarrhea) (stool PCR if resp symptoms) (LP < 1 month, < 3 months if looks unwell or WBC < 5 on-15) (Antibiotics same criteria as LP) <small>*See next reviewer notes (P) for no signs of S. pneumoniae (P) (see 90% hospital to die between 0-1 in infants < 3 months old Pediatrics 2015 Jan;135(1):95-7)</small> <small>Diagnose occurrence of the outbreak for primary tract infection in infants < 3 months of age.</small> <small>Septic Rx: 20 mg/kg IV bolus (if on O2) > 1 hour End hour (20 mg/kg)</small> <small>(No improvement start 1st dose: 30 mg/kg IV bolus, 1 mg/kg/min, 10 mg/kg/min, 10 mg/kg/min)</small> <small>(When shock: 10mg/kg bolus, 10mg/kg/min, 10mg/kg/min, 10mg/kg/min)</small> <small>100 mg/kg push & ampul # < 2 months old & severe dz plus apnoea < 14 days old</small> <small>If glucose < 2.6 mmol, start D10W 50mg/kg. Consider hydrocortisone 2mg/kg in any child that has fluid and norepinephrine resistant septic shock</small>	
CHEST / CVS WNL BREATH SOUNDS - NML - Rales - Wheezes-exp/inspir (Rt / Lt) HEART SOUNDS - NML - Murmur - systolic / diastolic - Rub CHEST WALL - NML Inspection - T - S - D PERIPHERAL PULSES - NML - Rt = Lt - Decreased / Absent CAPILLARY REFILL - NML - Delayed -> > 3 sec		DISCHARGE DISCHARGE - Instructions - Rx DISPOSITION / DIAGNOSIS Note: Dictated / attached F/U - Own MD - As necessary - Clinic-Peds - ER CONDITION - Improved / Worse / No change - Stable / Unstable IMPRESSION / DIAGNOSIS Note: Dictated / attached (Fever - no source - URTI - Otitis media - Pneumonia - UTI) (Viral exanthem)	
ABDOMEN / GENITALIA WNL PALPATION - NML, non-tender - Tender ORGANOMEGALY - NONE - Liver - Spleen MASS - NONE BOWEL SOUNDS - NML - Increased - Decreased - Absent RECTAL EXAM - NML - T - Mass - Hem - Hem + Melen EXTERNAL GENITALIA - NML - T - S - Rash - Circumcised			
POWS / TONE WNL REFLEXES - NML			
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