

# RECOGNISING THE SICK CHILD

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SICK OR WELL ?

Obviously very well !



SICK OR WELL ?

Obviously very sick !

Meningococcal  
septicaemia



SICK OR WELL ?

Not very well.....  
but not very sick !

Home or Hospital ?



# Spotting the Sick Child

Helping health care professionals spot children with serious illness

This is a new interactive tool commissioned by the Department of Health to support health professionals in the assessment of the seriously sick child.

Children need a different approach from adults and many health professionals are nervous about assessing children.

- My Learning
- BASIC CHILD ASSESSMENT
- SYMPTOMS
- MY WAITING ROOM
- RESOURCES

## Home

### Welcome to Spotting the Sick Child

Welcome to the 2nd edition of Spotting the Sick Child

This interactive website is designed for health care professionals to improve their skills at assessing the top 7 commonest acute problems for which children see their family doctor, or go to an urgent care clinic, or emergency department.

The website is split into 7 main areas. We suggest that you start with 'Basic Child Assessment' followed by 'Symptoms' if you are a first time user.

#### Basic Child Assessment

There is a section with advice on communicating with children. The '3 minute tool kit' gives you a framework for a quick but thorough 'top to tail' examination of a child. The 'How To' section shows how to actually do these checks.

#### Symptoms

The area has 7 sections: Difficulty in Breathing, Fever, Rash, Fits, Dehydration, Abdominal Pain and Head Injury. Each section gives you key background information, key points in the history, key points in the examination and 'red flag' conditions to look out for.

#### My Waiting Room

'Patient Stories' is a section where you can follow patients through an interactive journey from arrival to finishing your assessment. You get to see the care and decisions on patient assessment and management are yours! 'Short Cases' are similar but shorter. 'Test and My Certificate' is a formal test where you can get a certificate to show off your sick child spotting skills.

#### Resources

In this area are links to various educational resources and guidelines.

#### My Learning

In this area you can personalise the website on your own page. You can select sections relevant to your practice and have them readily available in your main playlist. You can also see how much of the website you have completed at any given time.

#### My Learning

My Progress: 30%

Last Viewed: Basic Child Assessment (New To + 10/10/2010)

< View All My Learning section

# SPOTTING THE SICK CHILD WEBSITE

[www.spottingthesickchild.com](http://www.spottingthesickchild.com)

A collaboration between the Dept of Health and RCPCH to help health care professionals spot children with serious illness

**TABLE 1. RED FLAGS: THE 'REACH'/TRAFFIC LIGHT APPROACH TO STRATIFICATION**

**RESPIRATORY**

Red	Amber	Green (Normal)
■ Grunting, tachypnea: >60 breaths/minute, Moderate or severe chest indrawing	■ Nasal flaring, tachypnea: >50 age 6-12 months; >40 over 12 months	■ None of the either Red or Amber signs

**EVERYTHING ELSE**

■ 0-3 months temperature 38°C or above; 3-6 months 39 or above. Bulging fontanelle, neck stiffness, fitting/focal neurology, billous vomiting	■ Fever 5 or more days, not weight bearing/not using limb, history of rigors, non-blanching rash (in the absence of any other Red REACH features)	
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**ACTIVITY**

■ unable to rouse, or not staying awake when roused, appears ill to health professional, weak, high-pitched, or continuous cry	■ No smile, wakes only with prolonged stimulation, decreased activity	■ Normal response, smiles, stays awake/wakens quickly, strong/normal cry/ not crying
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**COLOUR**

■ Pale/mottled/ ashen/ blue	■ History of pallor	■ Normal
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**HYDRATION**

■ dry mucous membranes, poor feeding, reduced urine output		■ Normal
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**Responses.** Red: 999 ambulance; Amber: refer acutely; Green: watch / safety net.

# TRAFFIC LIGHT SYSTEM

Green – Low Risk (watch)

Amber – Intermediate (refer)

Red – High Risk (999)



## BEFORE REACHING FOR THE STETHOSCOPE -

What Can You See ?

What Can You Hear ?

What Can you Feel?



## WHAT CAN YOU SEE ?

Tachypnoea

Cyanosis

Chest retractions

Decreased consciousness

Rashes

Level of Hydration





## WHAT CAN YOU HEAR?

Abnormal cry

Cough

Stridor

Wheeze

Nothing (not always good!)



## WHAT CAN YOU FEEL ?

Temperature of Skin

Check the Pulse

Check Capillary Refill



## ABC APPROACH

A = Airway

B = Breathing

C = Circulation

(D = Disability)



## RASHES

Most Rashes are benign but  
CHECK FOR BLANCHING

Toxic v Non-toxic rashes

Check for oral lesions

Check the palms and soles

Check the genital area



## RASHES

Keep at home or  
acute referral ?

Chickenpox



## RASHES

Keep at home or  
acute referral ?

Henoch-Schonlein  
Purpura



## RASHES

Keep at home or  
acute referral ?

Staphylococcal  
Scalded Skin  
Syndrome



## RASHES

Keep at home or  
acute referral ?

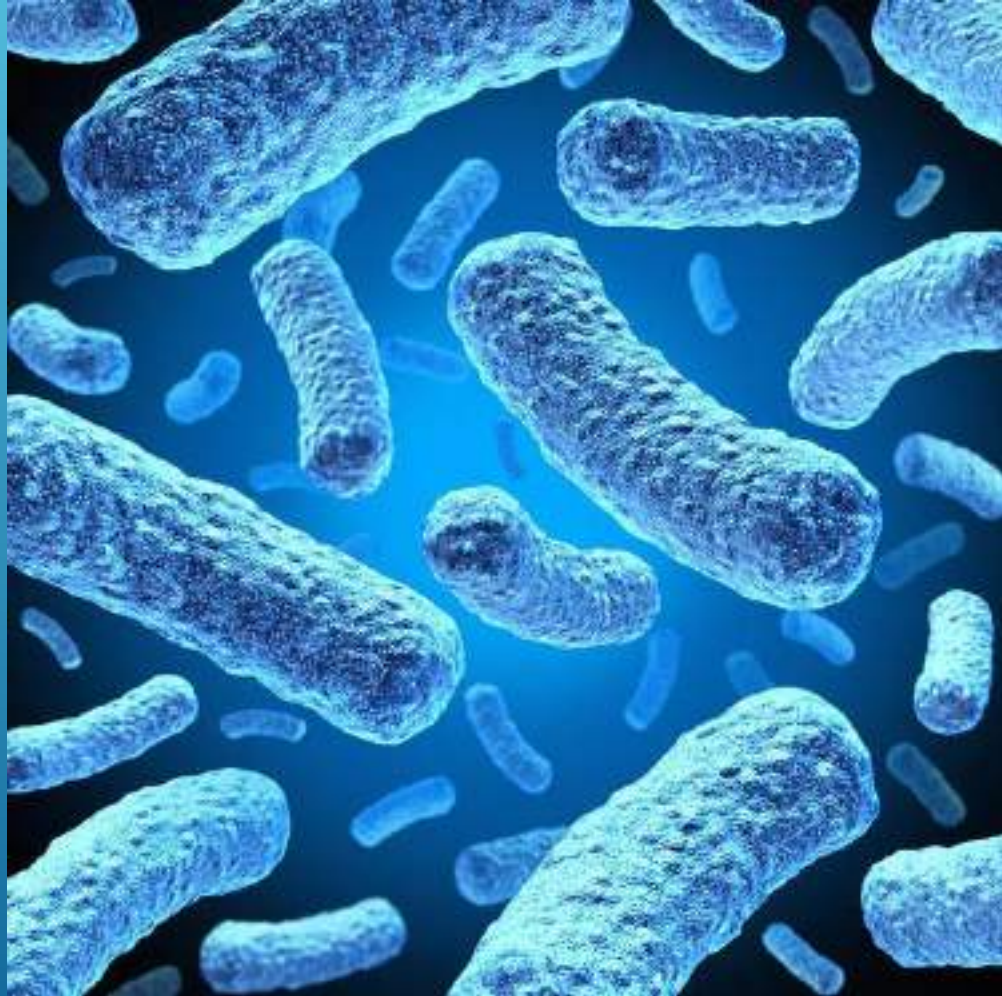
Erythema  
Multiforme





## RED FLAGS

Diagnostic symptoms or signs that should heighten your concern and lower your threshold for referral



## RED FLAGS SEPSIS

Temp 38 or above at 0-3 months

Temp 39 or above at 6-12 months

Grunting or tachypnoea > 60 bpm

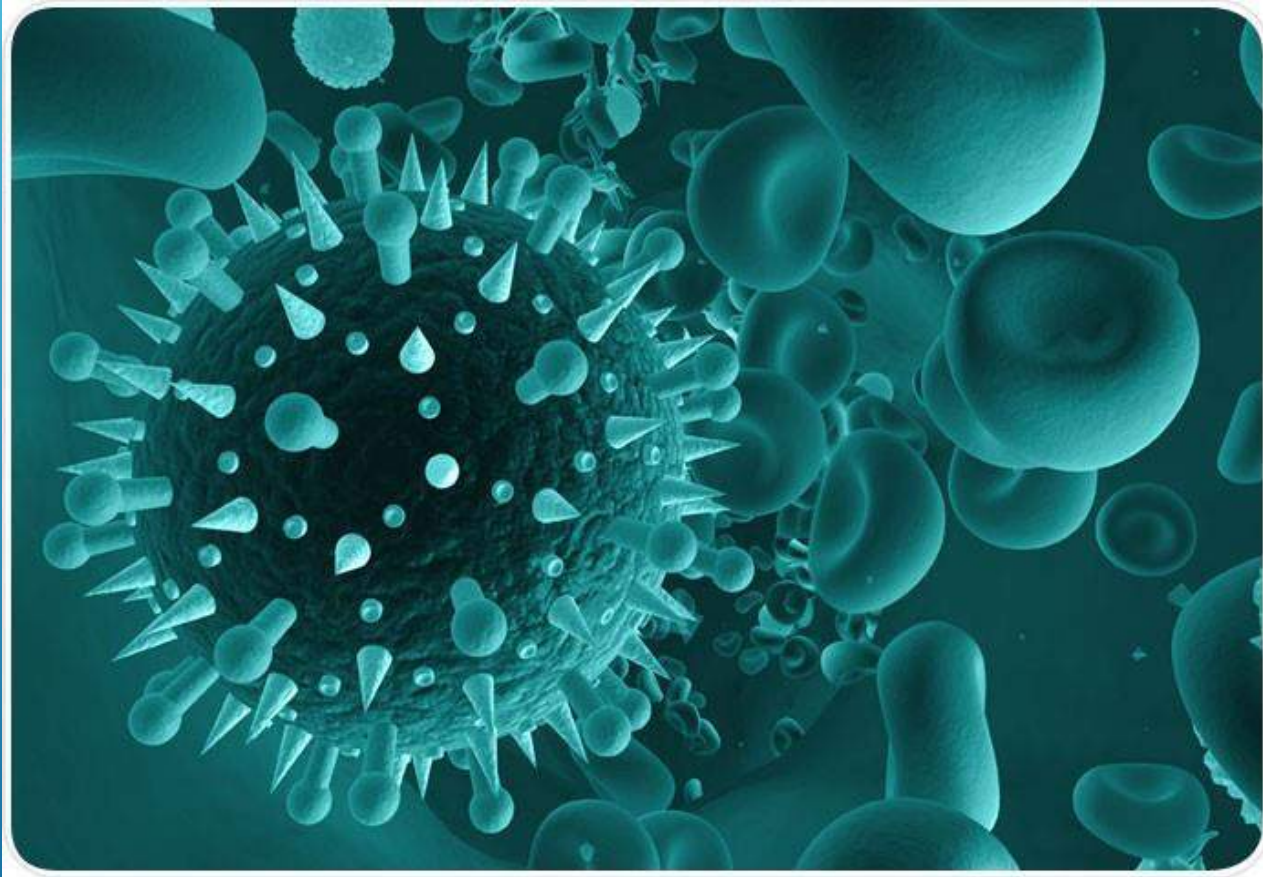
Pale / mottled / blue / ashen skin

Dry mucous membranes and poor  
urine output

Bulging fontanelle or neck stiffness

Seizures or any focal neurology

Decreased conscious level



## AMBER FLAGS SEPSIS

Fever for 5 or more days

History of pallor

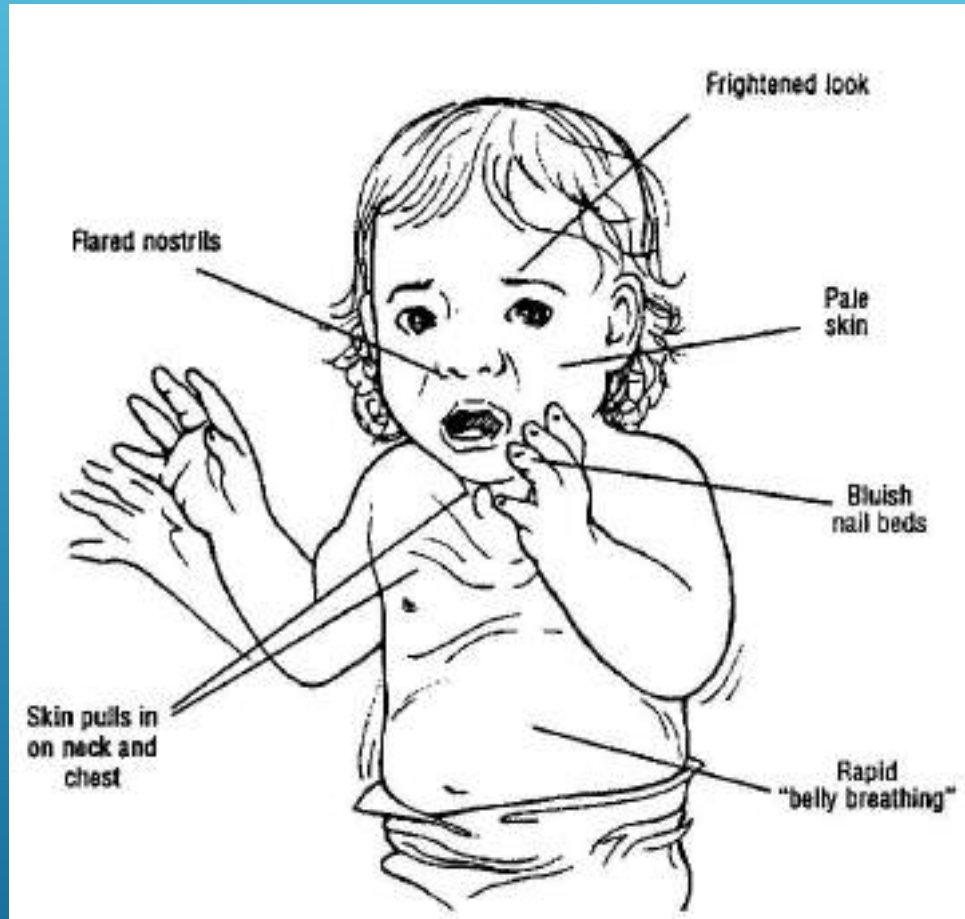
Tachypnoea > 50 at 6-12 months

Tachypnoea > 40 at > 12 months

Reduced feeding

Miserable and sleepy

Not weight-bearing / using limb



## RED FLAGS BRONCHIOLITIS (N.I.C.E)

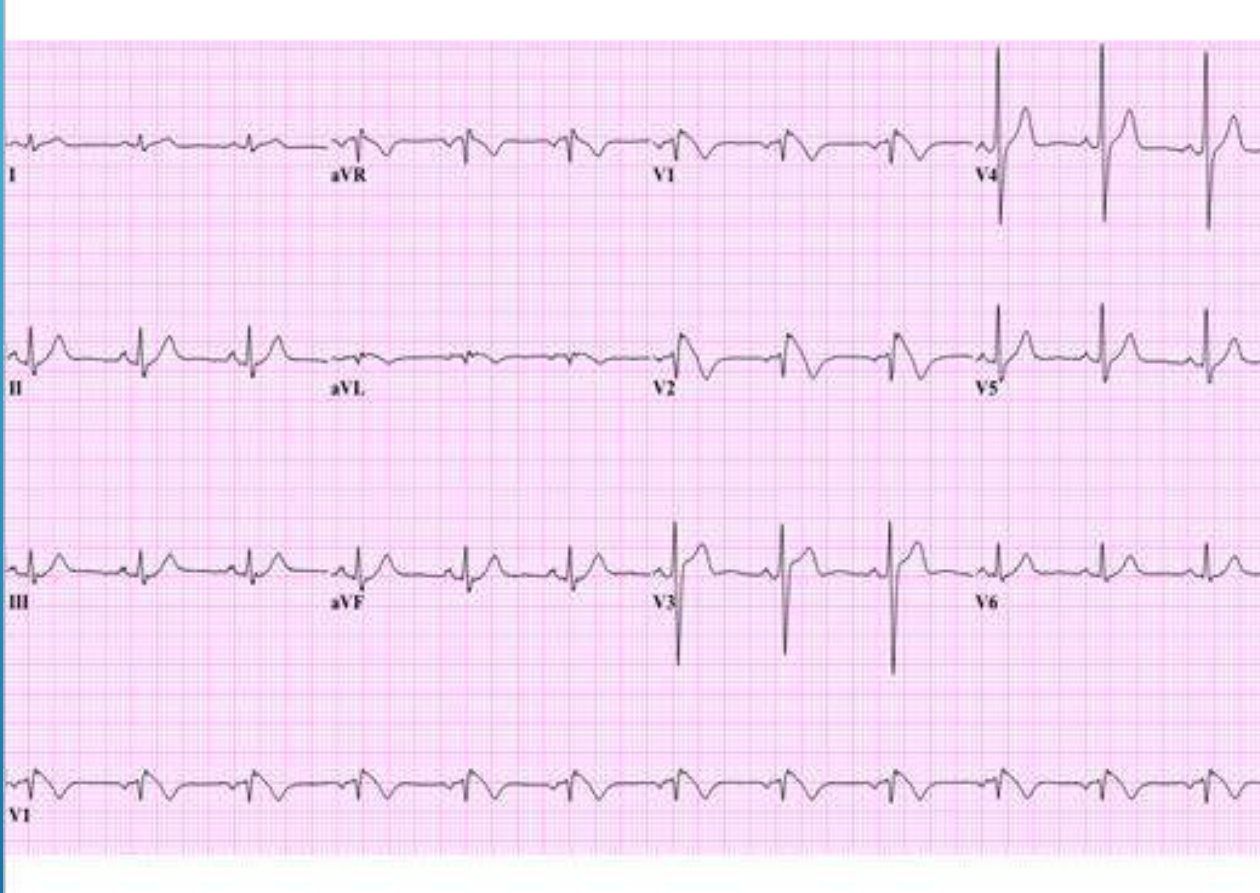
Apnoea or cyanosis (dial 999)  
Worsening work of breathing  
Fluid intake < 50% of normal  
Exhaustion (less interactive)

Make sure parents know the red flag symptoms and signs



## RED FLAGS CARDIOVASCULAR

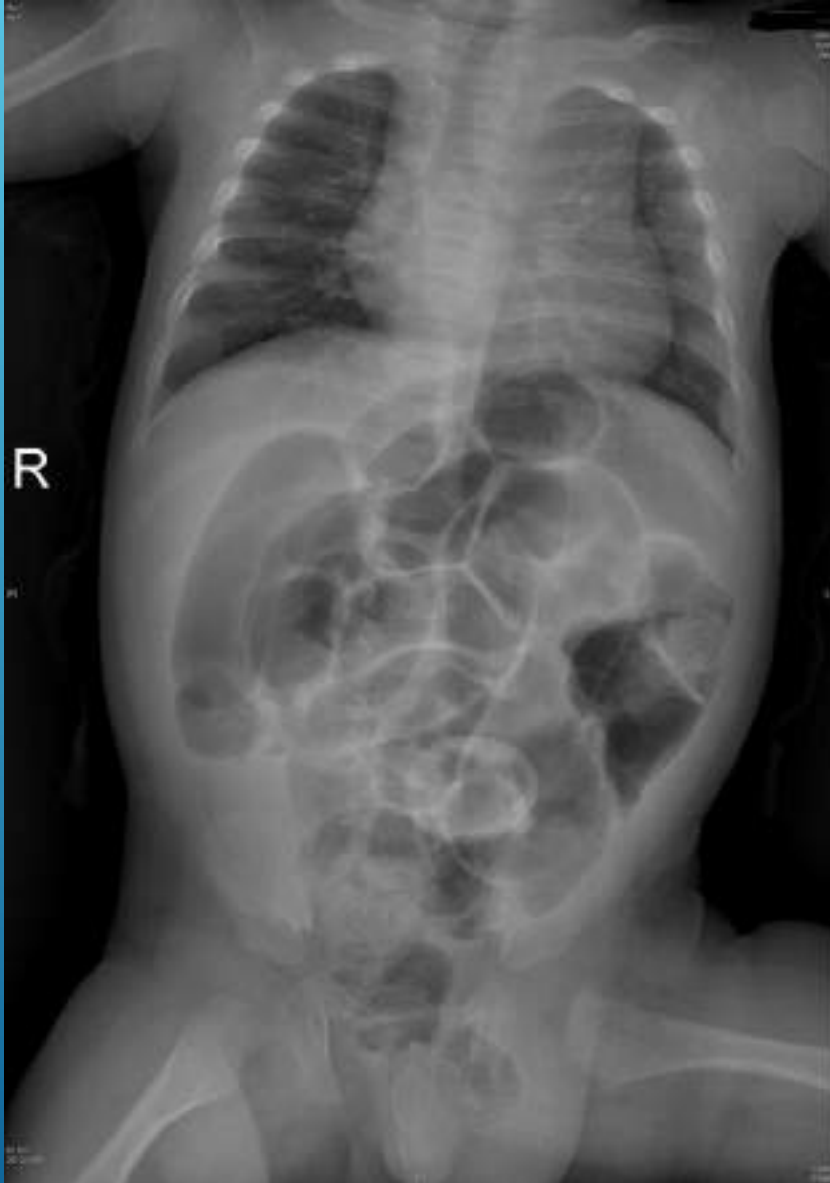
Cyanosis (measure the O<sub>2</sub> sats)  
Poor feeding and slow weight gain  
Persistent tachypnoea & recession  
Pallor, sweating, hepatomegaly  
Loud murmur with symptoms  
Exertional chest pain in older child  
Synocopal episodes on exertion



## RED FLAGS PAEDIATRIC ECG

What condition does  
this ECG show ?

Brugada Syndrome



## RED FLAGS GASTROINTESTINAL

Projectile vomiting in infancy

Bilious vomiting at any age

Suspected intussusception

Chronic diarrhoea with FTT

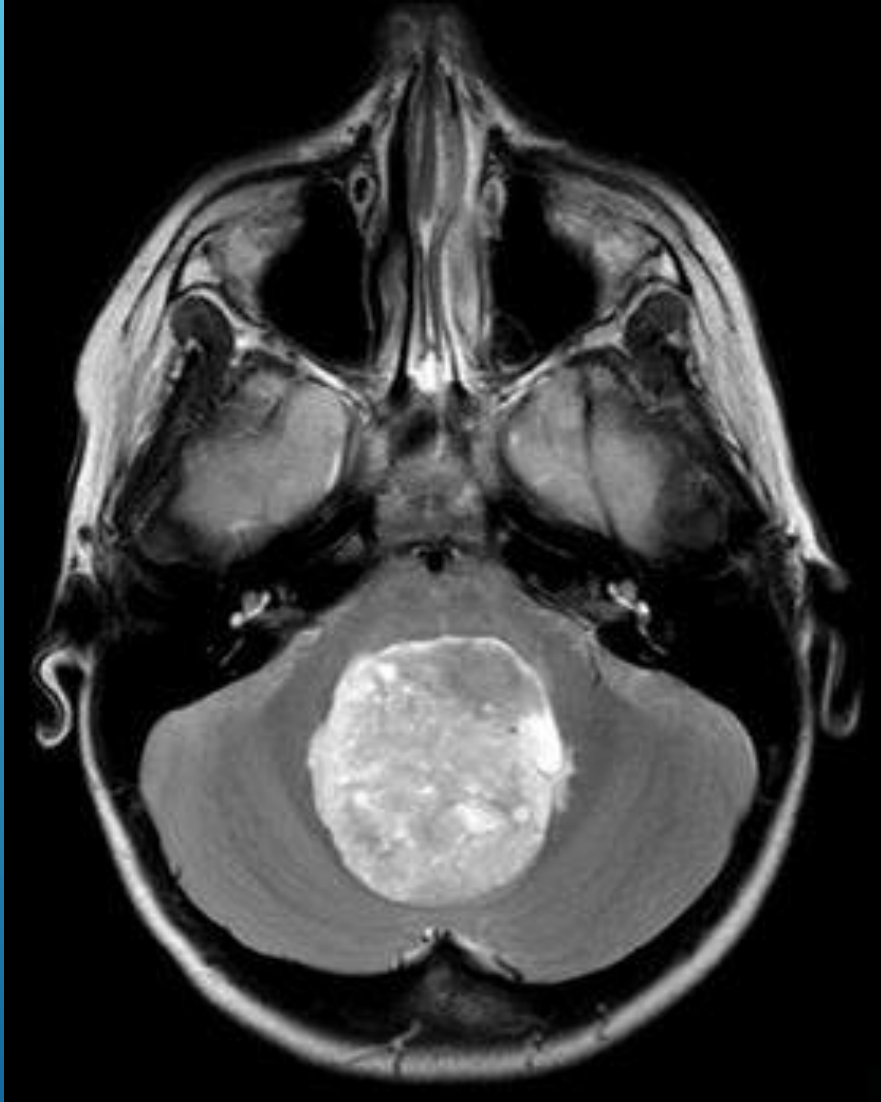
Pain and tenderness in the RIF

Rectal bleeding (not constipated)

Bloody diarrhoea (stool c/s neg)

GI symptoms with weight loss

Inguinal hernia (always refer)



## RED FLAGS NEUROLOGICAL

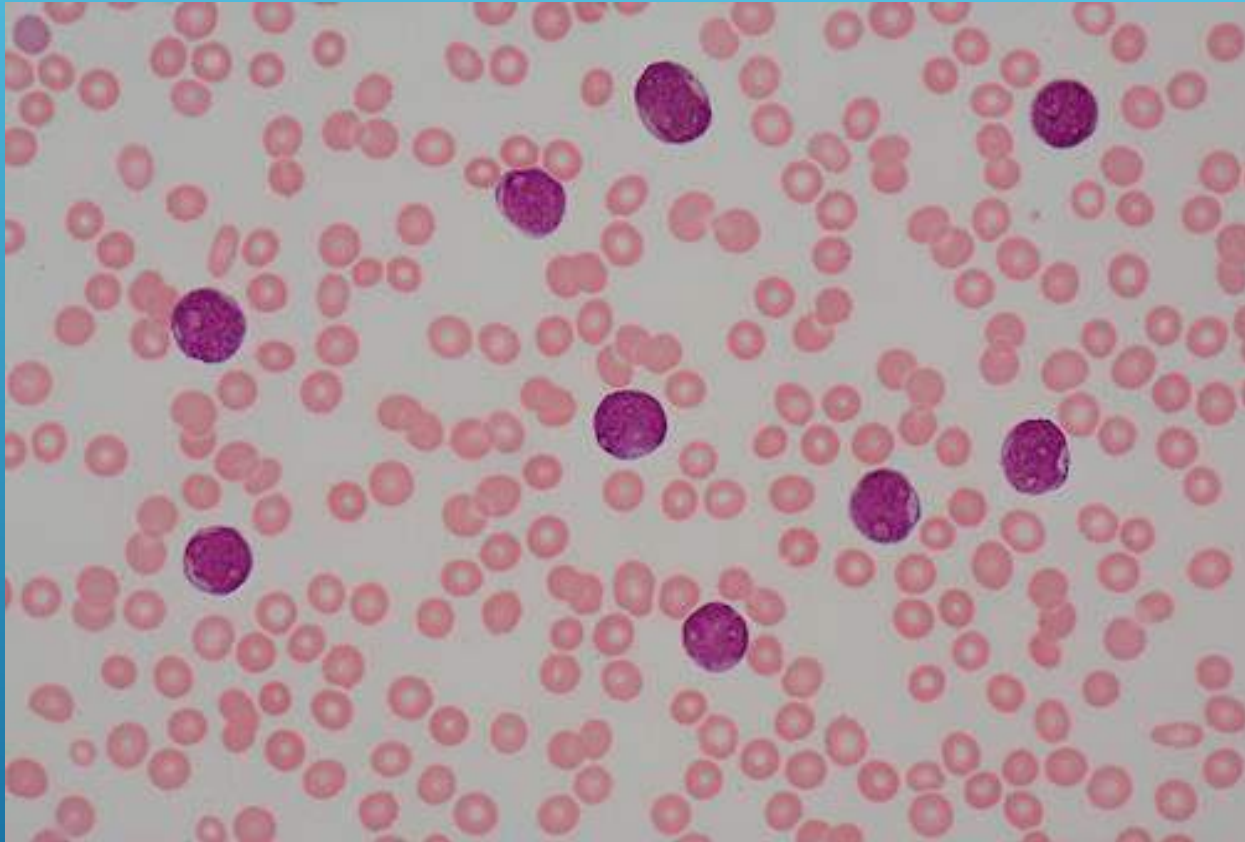
- Early morning headaches
- Daily headache with vomiting
- New strabismus in an older child
- Loss of balance or unsteady gait
- Cranial nerve palsies
- Papilloedema on fundoscopy
- Focal neurological signs
- Developmental delay
- Regression of motor milestones



## RED FLAGS - TRAUMA

LOC for more than 2 mins  
Altered conscious level now  
Bleeding not under control  
Limb-threatening injury  
Burns – area and depth





## RED FLAGS ONCOLOGICAL

Extreme Pallor

Petechiae or Purpuric Rash

Hepatosplenomegaly

Abdominal Mass

Fever following recent  
chemotherapy



## RED FLAGS PSYCHIATRIC

Deliberate Self-Harm  
(OD v cutting)

Eating Disorders  
(Junior MARSIPAN)

Acute Psychosis



## RED FLAGS CHILD ABUSE

Injury does not fit explanation

Changing explanation

Pattern of injuries suspicious

Injuries of different ages

Pathognomic presentation

Delayed presentation

Disclosure by the child

Known to Children's Services



## BE ON YOUR TOES FOR

Sepsis in babies < 3 months  
Possible Intussusception  
N.A.I. in a non-mobile child  
Children with a persistent limp  
D.K.A. presenting as S.O.B.  
Early signs of raised I.C.P.  
Syncope related to exercise  
Metabolic conditions

ANY QUESTIONS ?

