EMERGENCY

First assess

AIRWAY and BREATHING

Check for signs of serious head and spine trauma

Assess pregnancy status and amount of

Insert IV; give fluids rapidly. Then...

If large haemoptysis.

See Section 3.8.

Respiratory distress

Do ECG. Call district clinician for help.

IV fluids.

Manage airway.

See Section 10.10b.

Give IV antibiotics (call clinician to do LP first if can do within 15 minutes).

Associated traumatic injuries (spine, chest, pelvis) (see Section 4).

Decreased breath sounds

IF NO EMERGENCY SIGNS AND NO PRIORITY SIGNS:

If inadequate breathing, assist ventilation with bag valve mask

IF VAGINAL BLEEDING, SEE CHART ON MANAGEMENT OF VAGINAL BLEEDING.

ALTERED LEVEL

Conscious / Convulsing

Check for signs of serious head and spine trauma

First assess

IF EMERGENCY SIGNS

Assess pregnancy status and amount of

Insert IV; give fluids rapidly. Then...

If large haemoptysis.

See Section 3.8.

Respiratory distress

Do ECG. Call district clinician for help.

IV fluids.

Manage airway.

See Section 10.10b.

Give IV antibiotics (call clinician to do LP first if can do within 15 minutes).

Associated traumatic injuries (spine, chest, pelvis) (see Section 4).

Decreased breath sounds

IF NO EMERGENCY SIGNS AND NO PRIORITY SIGNS:

If inadequate breathing, assist ventilation with bag valve mask

IF VAGINAL BLEEDING, SEE CHART ON MANAGEMENT OF VAGINAL BLEEDING.

PRIORITY SIGNS AND SYMPTOMS

IF NO EMERGENCY SIGNS AND NON-PRIORITY SIGNS: NON URGENT

Patient can wait in queue.

Provide routine care and use the appropriate sections.

Repeat Quick Check if condition changes.

IF VAGINAL BLEEDING, SEE CHART ON MANAGEMENT OF VAGINAL BLEEDING.