

Paediatric Transfer Traffic Light

RISK ASSESSMENT

SCOTSTAR

0333 399 0222

Inform RHC Emergency nurse coordinator of transfer 0141 452 4585

DOCUMENT DECISION ON TRANSFER DOCUMENT AND IN CLINICAL NOTES

TRANSPORT

SCOTSTAR RETRIEVAL
Referring Clinician
**MUST MAKE OWN
ED CONSULTANT
AWARE**

A | Airway issue/ Intubated
B | Compromised breathing with potential for deterioration (low sats, difficulty talking, concerns re WOB)
C | Shock (e.g. remains tachycardic despite fluid bolus)
D | P or U on AVPU
Trauma: Patients requiring secondary transfer to MTC should be d/w ScotSTAR

REMEMBER

D/W Scotstar **All cases which may potentially require PICU or organ support**

Sick patients causing clinical concern but not meeting above criteria:
Phone ScotSTAR for advice

TRANSPORT

PARAMEDIC CREW
AMBULANCE
with urgency of ambulance based on clinical judgment

All patients requiring admission for medical or surgical review, that do not fall under Red or Green pathway, or any Green patient with Safeguarding concerns

REMEMBER

MUST D/W ED Senior if PEWS 5 or above
Document discussion in notes

TRANSPORT

SELF-TRANSPORT
OR TAXI

Head Injuries not requiring immediate CT and GCS 15
Any child requiring specialty review with PEWS of 0
Limb injuries (excluding femoral fractures) who are adequately analgesed (must be >2hrs post sedation or IN Diamorphine) and immobilise limb if appropriate
IV cannula does not prevent car transfer but must be secured and checked prior to departure

REMEMBER

Provide 'Travelling to RHC' leaflet

Any deviation from the above guidance must be discussed with the ED senior in charge