



REFERRING CENTRE DOCUMENTATION	KIDS Number		

RELEVANT HISTORY			
ALLERGIES, MEDICATIONS, IMMUNISATIONS (INCL. TETANUS)			

STATUS AT REFERRAL							
AIRWAY & C-SPINE				BREATHING			
CLEAR	DETAILS SIZE, ROUTE, LENGTH, CUFFED			VENTILATED	PIP/ΔP		SPO2
COMPROMISED				SV (AIR/O2 .....	PEEP		INSP TIME
INTUBATED				CPAP	FiO2		EXP TIME
BEING INTUBATED				BIPAP	MAP		NITRIC ppm
TRACHEOSTOMY				HFOV	RR/HZ		OXY INDEX
COLLAR	BLOCKS & TAPE			COMMENTS			

CIRCULATION			
OBSERVATIONS		FLUIDBOLUSES (ML/KG)	
HR		COLLOID	
BP	/	CRYSTALLOID	
MEANBP		BLOOD	
CAP REFILL		FFP /CRYO	
U/OUTPUT		MAINTENANCE	
INOTROPES		ACCESS	
		PERIPHERAL	
		IO	
		CENTRAL	
		ARTERIAL	

BLOOD GASES				
TIME				
SAMPLE	ART VEN/CAP	ART/VEN/CAP	ART/VEN/CAP	ART/VEN/CAP
pH				
pCO2				
pO2				
HCO3				
BE				
LACTATE				
GLUCOSE				
NA				
K				

NEUROLOGY						
GCS	E	M	V	PUPILS	R	L
A	V	P	U	REACTION	R	L
SEDATED		3% SALINE		MANNITOL		
PARALYSED		NG TUBE		OG TUBE		

INFECTION				
TEMP °C	CORE		PERIPHERAL	
ANTIBIOTICS				
CULTURE RESULTS				

REFERRING CENTRE DOCUMENTATION				KIDS NUMBER		
BLOOD RESULTS				IMAGING	PLAINX-RAYS	CT/US/MRI
DATE & TIME				DATE & TIME		
HB				HEAD		
WCC (NEUT)						
PLATELETS				CHEST		
NA						
K						
UREA						
CREATININE				SPINE		
INR/PT						
APTT				ABDOMEN		
FIBRINOGEN						
AST						
BILIRUBIN				PELVIS		
ALP						
CRP				LIMBS		
BLOOD GRP						
CROSS MATCH						
OTHER				DOES RADIOLOGY NEED TO BE TRANSMITTED TO WMPRS?		
				YES	YES	

ADVICE PROVIDED (SUMMARY OF DISCUSSION)