Documentation of the Paediatric Hydration Status on the MR1 at Triage Procedure

Effective: 9 July 2015

1. GUIDING PRINCIPLES

The WA Country Health Service - Kimberley (WACHS-K) aims to identify / improve the documentation of the hydration status on all paediatric presentations on the MR1 form.

The WACHS-K Assessment and Early Management of the Unwell Child Procedure prioritises and promotes the early identification of any unwell child who presents to any health site in the Kimberley and expedites the implementation of essential and appropriate treatment without delay.

At all WACHS-K hospitals:

- All Emergency Department nurses are to be triage competent and able to complete the MR 1 for paediatric presentations.
- At no time, should Triage be performed by first year registered nurses.
- Triage competent nurses:
  - are to have an understanding of the guidelines in the assessment and early management of the unwell child in relation to the paediatric hydration status
  - are to be able to assess/identify the hydration status of the paediatric presentation in the on presentation to the emergency department
  - are to ensure the hydration status is documented correctly on the MR 1 and progress notes using the Paediatric Hydration Status stickers.

2. PROCEDURE

2.1 Identification of the hydration status in the Emergency Department

Using the Unwell child procedure assess the hydration status according to the normal vital signs and hydration status and match the status with the colour code on the Traffic Light Tool in the Assessment and Early Management of the Unwell Child Procedure.

2.2 Documentation of the hydration status on the MR 1

- See Appendix 1 (Flow chart assessing and documenting the hydration status of the unwell child).
- Once the assessment is completed, indicate and sign on the hydration identification stickers (Appendix 2) the correct assessment level of hydration for the paediatric presentation.
- Place the sticker on the progress notes of the MR 1 for the primary assessment.
- Hydration assessment to be repeated if clinically required.

3. ROLES AND RESPONSIBILITIES

All Staff are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be.

4. COMPLIANCE

It is a requirement of the WA Health Code of Conduct that employees "comply with all state government policies, standards and Australian laws and understand and comply with all WA Health business, administration and operational directives and policies". Failure to comply may constitute suspected misconduct under the WA Health Misconduct and Discipline Policy.

5. EVALUATION

5.1 Monthly clinical audit of the appropriateness of triage (MR1) which includes the documentation of the of the paediatric hydration status.

5.2 All audit results at 100% of the documentation of the hydration status of the paediatric presentation to the emergency department.

6. APPENDICES

Appendix 1: Identification and Documentation of the Hydration Status of the Paediatric Presentation to the Emergency Department Flow Chart

Appendix 2: The Hydration Status Sticker

Appendix 3: Level of Hydration in Infants and Children in accordance with the Assessment and Early Management of the Unwell Child Procedure

7. REFERENCES

WACHS Kimberley Assessment and Early Management of the Unwell Child Procedure
Author(s): Fisher, Angela

WACHS Triage Primary Assessment and Management Guideline
Author(s): Miller, Mary

8. ACKNOWLEDGMENTS

Wyndham Hospital (WACHS-K)

Prototype sticker developed by Trish Birch (Administration Officer) on the recommendations from Monica Chappel (CN), Irene Pennell (RN), Victoria Sibanda (RN) Di Doran (ASEN) Jessica Priestly (RN), Jenny Connaughton (MO) and Allison McGregor (CNM).

This document can be made available in alternative formats on request for a person with a disability

Appendix 1: Identification and Documentation of the Hydration Status of the Paediatric Presentation to the Emergency Department Flow chart

Paediatric Presentation seen at triage- Assessment is conducted by the triage nurse and documented as per the Australian Triage Scale (ATS)

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Hydration status is assessed as per the normal vital signs and hydration status from the Unwell Child procedure.

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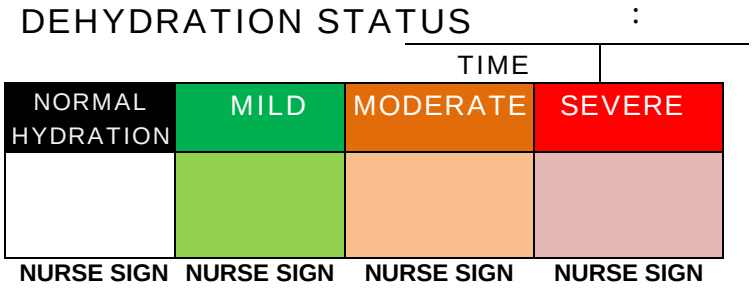
Hydration status sticker is completed with the correct status indicated Traffic Light Tool



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The Hydration sticker is put onto the Progress Notes of the MR 1 and the attending medical officer notified if out-of-normal range.

Hydration assessments are to be repeated if clinically required.

Appendix 2: Hydration Status Sticker

DEHYDRATION STATUS :

TIME

NORMAL HYDRATION	MILD	MODERATE	SEVERE
NURSE SIGN	NURSE SIGN	NURSE SIGN	NURSE SIGN

DEHYDRATION STATUS :

TIME

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NURSE SIGN	NURSE SIGN	NURSE SIGN	NURSE SIGN

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DEHYDRATION STATUS :

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NURSE SIGN	NURSE SIGN	NURSE SIGN	NURSE SIGN

APPENDIX 3: Assessment of (De)hydration Status in Infants and Children

Key determinants for mild, moderate and sever are highlighted in **red**.
Aligns with Traffic Light Tool in the Assessment and Early Management of the Unwell Child Procedure.

Clinical Signs	ASSESSMENT OF (DE)HYDRATION STATUS IN INFANTS AND CHILDREN			
	Normal	Mild (Low Risk)	Moderate (Intermediate Risk)	Severe (High Risk)
Weight Loss	None	<4%	4-6%	7% and over
Pulse	Normal	Normal	Slightly increased	**Tachycardia**
Respiratory Rate	Normal	Normal	**Slight tachypnoea**	**Hyperpnoea (deep, rapid & acidotic)**
Blood Pressure	Normal	Normal	Normal to orthostatic	**Orthostatic / shock**
Behaviour	Normal	Normal	Irritable	**Hyperirritable to lethargic**
Thirst	None	**Slight**	Thirsty	Intense
Mucous Membranes	Moist	Moist / Sticky	Dry	Parched
Tears	Present	Present	Decreased	Absent
Anterior Fontanelle	Normal	Normal	Normal to sunken	Sunken
Capillary Refill	<2 seconds	> 2 seconds	2-4 seconds	**>4 seconds with mottling, acrocyanosis**
Eyes	Normal	Normal	Sunken	Sunken, dark rings
Skin Turgor	Normal	Normal	**Tenting 1-3 seconds rebound**	**Tenting >3 seconds**
Urine SG	<1020	>1020	>1020 + oliguria	Oliguria or anuria

References: Kids Health (PMH Emergency Department) Paediatric Acute Care Guidelines -Gastroenteritis, The Royal Children's Hospital Melbourne – Clinical Practice Guidelines - Dehydration. Australian Government – Department of Health – Assessment of dehydration levels in infants guide.