

# pediatric emergency management

guidelines for rapid diagnosis and therapy

stanley a. cohen

# **PEDIATRIC EMERGENCY MANAGEMENT**

## **Guidelines for Rapid Diagnosis and Therapy**

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# **pediatric emergency management**

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*To the best of our knowledge, recommended measures and dosages herein are accurate and conform to prevalent standards at time of publication. Please check the manufacturer's product information sheet for any changes in the dosage schedule or contraindications.*

# PREFACE

PEDIATRIC EMERGENCY MANAGEMENT is intended to help relieve the plight of medical personnel faced with a true pediatric emergency. Knowledge and judgment are required instantaneously in any emergency, with little opportunity to consult more experienced physicians, standard textbooks or current journals. The problem becomes compounded when the patient is a child—with illnesses, therapy and drug doses unfamiliar to most non-pediatricians.

This book was developed to be used in an actual emergency situation. The concise practical formats were devised to be read in advance or used at the bedside. Pertinent facts, procedures, and dosages that must be considered in the initial evaluation and management of pediatric emergencies are emphasized.

Those experienced with the emergency care of children will find the information in this manual a review and reminder of essential points. Those less familiar with these difficult situations should benefit from the guidelines provided.

The contributors have done much to insure an optimal and concise approach to each of the emergencies. This was often difficult because of the breadth of the subject, superimposed upon the constraints and brevity of the format. Several contributors, Drs. Clark, Flax, Link, Todres, and Wason are to be especially thanked, not only for their own informative sections, but also for their stimulation and constant counsel.

In addition, numerous others at several institutions have reviewed portions of this manual and have provided sagacious advice to benefit this book, keeping the emergency room and ambulance personnel in mind. I am grateful for the efforts of Drs. Anne Baker, Carla Cohen, Pat Donahoe, Marty Fosburg, Steve Gellis, Ed Keenan, Dan Keim, Krishnamoorthy, Allen Lapey and Allan Walker at the Massachusetts General Hospital; J. Martin Kaplan at Hahnemann Hospital; Jerry Haber, Judson Hawk, Steve Levine, Wood Lovell and Don Coleman, RPh, at Scottish Rite Hospital; and Dianne Kempe at Yale, in this regard. I also thank Dr. David Irons for his efforts in creating the index.

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I am particularly grateful to my wife, Judy, our children, David, Adam and Lauren, and my parents for their support, confidence and love. This volume is dedicated to them.

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# USE OF THE PEDIATRIC EMERGENCY MANUAL

This manual was developed to emphasize information and guidelines necessary for pediatric emergency care. Many modifications have been incorporated to simplify and speed its use in an actual emergency.

- 1) Each topic is treated separately, but similar formats are used throughout.
- 2) Statements are concise in outline form.
- 3) Pages are cross-referenced so there is no need to refer to the index for further directions.
- 4) The type, page size, and artwork were all adapted to improve visualization at the bedside.
- 5) Emergency drug doses, fluid requirements, procedures, and appropriate age-related tables are provided for your reference.

One can use the manual best by flipping to the appropriate section and finding the topic desired. If the topic is not listed, consult the index. Should further procedures or drugs be necessary, they are referenced in the text. The contributors have carefully established guidelines to aid the physician involved in an emergency. But they are only guidelines and not dogma. Your own judgment and knowledge will help you to modify these protocols for individual patients. Other procedures, drugs, or doses may be preferred. Alternative protocols may be appropriate or more desirable at different institutions.

The contributors have listed accepted modalities and drugs; however, dosage preference may vary from hospital to hospital. Refer to the manufacturer's package insert for further drug information. When time permits, refer to standard texts for a more complete understanding.

All of these issues are best reviewed in advance, with areas of responsibility determined and recommendations revised for each institution or office.

We hope that you will find this manual useful and that the knowledge it imparts will be matched by your judgment and confident approach to children and their emergencies.

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