



Quick Reference Guide

# PAEDIATRIC ACUTE RECEIVING UNIT (PARU) RHCYP

Last updated November 2023



# Welcome to PARU

We hope you enjoy your time here



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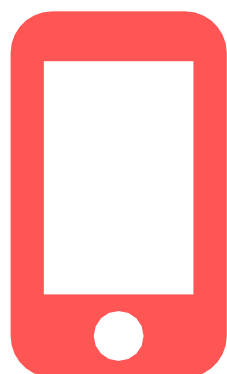
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# Useful numbers and roles

| <b>Role</b>                   | <b>Bleep</b> | <b>OOH Activity</b>     |
|-------------------------------|--------------|-------------------------|
| Consultant of the Week        | 9018         | Variable                |
| 2nd on Consultant             | 9250         | No                      |
| Tier 2 Registrar (1)          | 9424         | Evenings, WE and Nights |
| Tier 2 Registrar (2)          | 9426         | Evenings and WE         |
| Tier 1 Admissions             | 9102         | Evenings, WE and Nights |
| FY/GPST Ward Cover General    | 9109         | Evenings, WE and Nights |
| Castle Mey Ward Cover         | 9136         | Evenings and WE         |
| Dalhousie Ward Cover          | 9138         | No                      |
| Tier 1 PIU                    | 9147         | No                      |
| Tier 1 Admissions Back-Up     | 9226         | Evenings Mon-Thurs      |
| Medical NP                    | 9245         | Variable                |
| Advanced Paediatric NP        | 9292         | Variable                |
| Clinical Coordinator ( phone) | 50086        | Evenings, WE and Nights |
| Medical Coordinator           | 9181         | Evenings, WE and Nights |
| Surgical Coordinator          | 9186         | Evenings, WE and Nights |



**Please download the 'Induction' App and select your hospital preference as 'Royal Hospital for Children and Young People (RHCYP)' for access to other useful bleep and phone numbers**

# Shift Patterns for Tier 1 Trainees

## EARLY SHIFT

0800-1600

Discharge scripts and acute jobs  
prior to WR

## DAY SHIFT

0830-1700 T/W/T

0900-1700 M/F

WR and ward jobs

## NIGHT SHIFT

2100-0930

H@N

Clerks admissions from  
ED, support with ward  
cover

*Carpe  
diem!*

## LONG DAY WARD

0900-2130

WR and ward jobs

H@N evening ward cover

## LONG DAY ADMISSIONS

0900-2130

Clerks admissions from ED

Workbench tasks

## LATE SHIFT

1400-2200

Supports admissions from ED

# The H@N Team

Weekday Evenings 16:30-21:30



Consultant



Clinical Coordinator



Tier 2 Registrar x2



Tier 1 Admissions



Tier 1 Late



Tier 1 Ward FY/GPST Ward

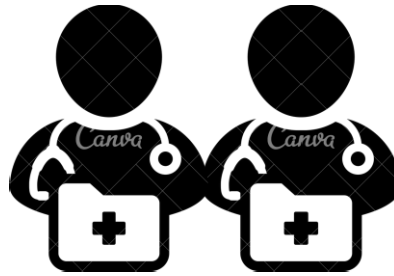


The evening team consists of a minimum of the Clinical coordinator (senior nursing staff), Tier 2 registrar x2, Tier 1 admissions, Tier 1 ward cover and FY/GPST ward cover.

There may also be a consultant, Tier 1 late, Medical nurse practitioner, Advanced paediatric nurse practitioner and medical students working as part of the H@N evening team.

# The H@N Team

Weekends 09:00-21:30



Consultant x2



Clinical Coordinator



Tier 2 Registrar x2



Tier 1 Admissions FY/GPST ED



Tier 1 Ward FY/GPST Ward

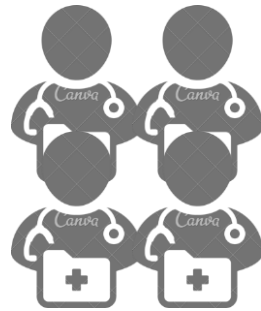


The weekend team consists of a minimum of the Clinical coordinator (senior nursing staff), Consultant x2, Tier 2 registrar x2, Tier 1 admissions, Tier 1 ward cover, FY/GPST ward cover and FY/GPST ED.

There may also be a Medical nurse practitioner, Advanced paediatric nurse practitioner and medical students working as part of the H@N weekend team.

# The H@N Team

Nights 21:00-09:30



Consultants



Clinical Coordinator



Tier 2 Registrar



Tier 1 Admissions



FY/GPST Ward

The night team consists of a minimum of the Clinical coordinator (senior nursing staff), Tier 2 registrar, Tier 1 admissions and FY/GPST ward cover.

There may also be an Advanced paediatric nurse practitioner working as part of the H@N night team. There will be a consultant on call from home for each of General Paediatrics, HaemOnc, Neurology and GI.

# A typical PARU day



## Morning Handover

- chaired by Tier 1 Nightshift
- safety brief from clinical coordinator
- discuss new and old patients by ward
- concludes with PARU safety checklist

## Ward Round

- split into teams of seniors/juniors to cover Castle Mey, Dalhousie and medical outliers under PARU
- 9102 blepholder reviews workbench



## Post Ward Round Huddle Team Lunch

## Afternoon

- jobs from ward round, IDLs
- ensure any H@N jobs are on workbench
- ensure all trak SBARS are up to date



## Evening Handover 16:30

- specialties followed by PARU
- keep it brief - focus on outstanding jobs and patients to be aware of

# Tier 1 Admissions Shift

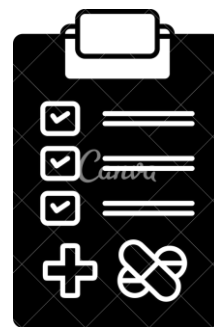


Please ensure the following is completed as appropriate for each child admitted:

- clerking documentation on TRAK
- medicines reconciliation form (shortcode \paedsmedrec on TRAK as part of clerking documentation)
- growth chart (plot weight and OFC)
- PVC bundle
- drug monitoring form e.g. gentamicin
- Kardex (following golden rules of prescribing)
  - regular medications
  - paracetamol and ibuprofen PRN
  - oxygen
  - ensure if on MDIs the next review time is highlighted and handed over

# Dirleton (PIU)

## Organisation is key



The planned investigation is staffed by a Tier 1 Paediatric trainee for 1 week at a time. It facilitates infusions for specialty patients (mainly GI/rheumatology), reviews for recently discharged patients and those on pathways for HSP and ITP, alongside other ad-hoc tasks such as food challenges and assisting the endocrine nurses with testing.

Each attending patient should have a referral form completed at the time of booking which is available to view on TRAK. Any bloods to be done should be requested on TRAK in advance by the booking clinician.



08:00 Plan your day. Pre-empt any difficulties. Print labels for patients attending for bloods.

09:00 Patients attend throughout the morning for bloods and cannulas.

11:00 MRI list on Crichton. You should complete the blue clerking proforma and consent form. It is your responsibility to discuss the risk of a reaction to an anaesthetic (1:100,000 and reduced if there is no personal or family history of previous reactions). Occasionally, you will be asked to label bottles for bloods to be taken under GA by the attending anaesthetist.

13:00 Patients attend throughout the afternoon for review. Specialty patients should be seen by their parent team, but you will be expected to see PARU patients independently with advice from senior colleagues. The first port of contact for any queries about a patient in PIU should be the referring team.

At 14:00 on a Thursday the PIU doctor attends PET training.

# Admin hints and tips

## WARD ROUND NOTES

`\mpwrd`

shortcode for WR note

`\mpwrf`

shortcode for Friday  
WR note (includes WE  
plan)

## WORKBENCH

The Tier 1 on for admissions is responsible for ensuring both the TRAK (set up your preferences) and excel workbench is kept up to date

## REFERRAL PATHWAYS

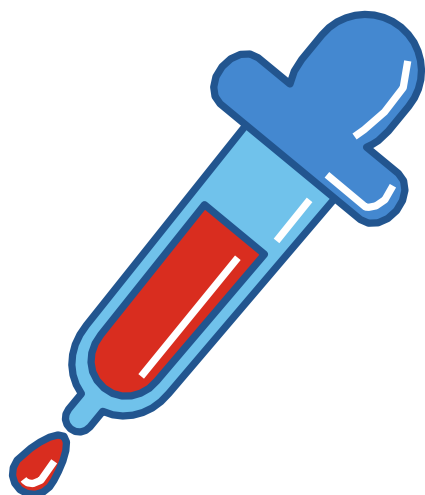
Please see the PARU website on the intranet then scroll to referrals/arranging tests

## IDLs

There are a number of shortcodes for common paediatric presentations

# Top Tips for Paediatrics

## Venepuncture



- Take a friend! Play specialists, nursing staff and medical staff are a great source of support for both patients and junior doctors!
- Make use of ametop (>6m, 30-45min)/EMLA (>1y, 40-60min) and cold spray
- Some bloods can be taken via capillary sampling e.g. CRP, assays
- BTS tubes come in 2 sizes - small for <10kg and large size for >10kg
- Aim for 1-4ml for a blood culture
- CBG analysers can be found in the laboratory in ED or PICU
- Avoid using the ACF and long saphenous (long line sites)



## Urine sampling

- Part of full septic screen in febrile/unwell babies <3m or as indicated in older children
- Gold standard is supra-pubic aspirate in children <6m
- In-out urinary catheters are first line in older children or when SPA is contraindicated/unsuccessful
- Avoid clean catch urines where possible (high risk of contamination)

# Top Tips for Paediatrics

## Multi-Dose Inhaler (MDI) Reviews

- Record current MDI frequency, observations, work of breathing and examination findings
- Aim to stretch to 4 hourly in 1 hourly increments



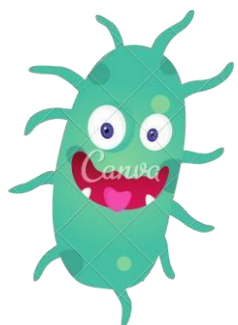
## Fluid reviews

- Assess input, output (including urine output as ml/kg/h) and overall balance
- Assess clinical fluid status
- If the child needs fluids, consider the best route - NG or IV
- If on IV fluids, should have daily U&Es



## Microbiology samples

- Urgent microscopy should be requested on urine and CSF samples
- Call 26021 or OOH bleep 2900 (via 110 bleep system as the laboratories are based at RIE)



## Radiology

- Non-urgent radiology requests do not require discussion
- For urgent or portable radiology requests, discuss with the radiographers or duty radiologist as indicated



# Teaching and Learning Opportunities



## PARU Morning Teaching 08:30

- Tuesday - Consultant Teaching by 2nd on Consultant
- Wednesday - Endocrine Teaching
- Thursday - Peer Teaching (allocated by teaching rota team)

All teaching takes place on teams and attendance is recorded

## RHCYP Teaching

All teaching takes place on teams.

- Tuesday - RHCYP Grand Round 13:00 in CLaH
- Thursday - Respiratory/PARU Radiology Meeting 12:30
- ST Teaching - ST1-4 Wed / ST5-8 Friday both in SPHERE at 1-3pm or via Teams

## Learning Points

The weekly learning points email is collated by Tier 1 trainees

## QuAC Days

Allocated a month in advance by the rota reps. Trainees are encouraged to undertake quality improvement projects and attend clinics.