

# Guide to Emergencies

## How To Access Emergency Help

Fortunately, true pediatric emergencies are uncommon. When faced with non-urgent questions or issues, please call during regular office hours (9-5, M-F, 9-12 Sat). If there is an urgent situation during those hours, we should be able to get you right in. After hours, please feel free to call the doctor on call for our practice. In a serious emergency, you do not need a referral to go to one of the two pediatric emergency rooms (Strong or RGH) or to call 911. When in doubt, we are always available to help direct you. Most of the time, particularly with minor injuries, mild fractures or sprains, ear aches, fever and sore throats, we can tell you what to do until we can see you in the office.

We discourage you from using commercial after hours services for three reasons. Firstly, they often do not have experienced pediatricians present, secondly, it is important to maintain continuity of care with your personal physician, and, thirdly, most problems can be taken care of during office hours. Please check with us first.

### Common Pediatric Emergencies

### Phone Numbers

- |   |                                      |
|---|--------------------------------------|
| 1) Fever (greater than 101 F in infants less than 2 months or over 104 F in all children) | 1) Our Office: 342-5665              |
| 2) Wheezing   | 2) After Hours:<br>258-3381          |
| 3) Trauma (mostly sprains, mild fractures, lacerations)                                   | 3) Poison Control:<br>1-800-222-1222 |
| 4) Burns (1st and 2nd degree)   | 4) Lifeline:<br>275-5151             |
| 5) Vomiting with dehydration  |                                      |
| 6) Seizures   |                                      |
| 7) Airway obstruction (choking, croup)  |                                      |
| 8) Poisoning (medicines, household products)  |                                      |
|   | 5) 911                               |

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## FIRST AID HINTS

- 1) Scrapes, cuts and scratches require cleansing with soap and water to remove dirt. Initially apply hydrogen peroxide. Apply antibiotic ointment to reduce bacteria and prevent drying. Swelling or redness may mean a serious infection.
- 2) For deeper cuts that are bleeding, stop the bleeding by applying pressure with a clean dressing. If the edges of the wound separate or the laceration is longer than 1/2 inch, it may need suturing.
- 3) Head Injuries require rest and often cold compresses to reduce pain and swelling. Call us if there is loss of consciousness, excessive sleepiness, vomiting, blood or fluid from the ears, persistent headache, persistent dizziness, unequal pupils, weakness or pallor.
- 4) Choking accompanied by inability to breathe and change in color is an emergency. The child should be placed face down over the rescuers arm or legs with the head lower than the trunk. The rescuer rests his or her arm on the thigh and delivers four blows to the back with the heel of the hand between the child's shoulder blades. The child is then turned over, the mouth cleared and the breathing re-assessed. If this attempt was unsuccessful, call for help and keep repeating. CPR should be administered by trained individuals.
- 5) Burns and scalds require immediate flushing with cold water. Immediately remove all affected clothing and flush the skin with cold water for 5-10 minutes to stop the burning. Do not apply ice. Ice could potentially do further damage by freezing the already compromised tissues. If the burn is 1st or 2nd degree, apply the sap from an aloe plant then dress with Noxema. However, if the burns are 2nd degree or worse and on the face, hands, feet or groin, call immediately.
- 6) Nosebleeds require pressure on both nostrils with the patient in a sitting position for at least ten minutes without peaking! If the bleeding lasts longer than 45 minutes, call.

(585) 342-5665

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