

SAQ 2

A 2 week-old term baby weighing 4kg is brought to the ED with difficulty breathing and floppiness.

Her vital signs are as follows

HR 160

BP 65/35

Sat 83% on air

T 37.6

CRT 4 seconds

She is lethargic, will respond to voice

1. List 4 differentials for her presentation

Must include – sepsis, congenital heart disease

T trauma/NAI
H heart (CHD), hypovolaemia
E electrolyte imbalance
M metabolic disease – CAH
I IEOM (inborn errors of metabolism)
S Sepsis/infection
F formula related
I intestinal (volvulus/NEC)
T thyroid
S seizures

2. List your treatment priorities in sequential order (4 marks)

Airway/breathing – airway manoeuvres and oxygen – improve saturations, if persistent hypoxia will likely require RSI

Treat shock - IV access, IO if unable and IV fluid – 10-20ml/kg bolus (smaller bolus in case of CHD), reassess and repeat

Seek/treat hypoglycaemia 2ml/kg 10% dextrose

Source control – Assume sepsis and empirically treatment with antibiotics – cefotaxime 100mg/kg and amoxicillin 50mg/kg

If CHD strongly suspected – prostaglandin