

PRACTISS Pediatric Asthma Exacerbation Scenario Supporting Roles

Role	Description (Role, Behaviour, Key Moments, Script)
Parent	<p>Parent will come in shortly after the patient arrives. You will help answer any further history questions. You will generally be very concerned for your child and remain at the bedside throughout the scenario.</p> <p>History He has known asthma and has been using his puffer more over the past 3 days Past Medical History: Asthma - last steroids was last winter, eczema, hospitalized for a week @ 10 months with bronchiolitis Current Meds.: Ventolin, Flovent Allergies: None Social History: Lives with parents Family History: Mom and dad both have asthma and eczema</p> <p>Review of Systems Head, eyes, ears, nose, throat: Rhinorrhea, other normal Respiratory: Today coughing, audible wheezing, difficulty breathing</p> <p>Stage 2+ - As you notice Charlie getting more sick, you will remain at the bedside and become more and more agitated unless you're consoled.</p> <p>Stage 3 - You will notice Charlie getting sleeper and ask "Why does he look so tired?"</p> <p>Post-Intubation - After intubation/ROSC, you should be updated by a team member. If not, you will become upset.</p>