Patient Details (PAS): Hospital Number:	
DOB:	
NHS Number:	2004
NHS Number Status:	
Patient Name:	<u>VERIFIED - NP</u>
Patient Name:	X
Patient Address:	xxxxxx
Tatelle Additions.	III
	111
Gender:	М
Ethnicity:	BRITISH - WHITE - (AA)
Patient Tel Number:	0787xxxxx
GP Name:	DR
GP Address:	DK
	XXXXXXX
GP Tel Number:	Xxxxxxx
Referrer Name:	XXXXXXX
Referrer Job Title:	Sister
Referrer Tel Number:	
Hospital Site:	North Manchester
Hospital Address:	Pennine Acute Hospitals NHS Trust
	North Manchester General Hospital, Delaunays Road,
	Crumpsall,
	Manchester,
Clinical Area:	M8 5RB
paediatric emergency department	
Interpreter:	No
Referral Type:	Information Sharing - School Nurse
Name of Child's Primary Carer(s)	
Carer Number 1:	Helen
Carer Number 1 Relationship:	Mother
Carer Number 2:	
Carer Number 2 Relationship:	
School:	xxxxxxx Primary School
Parental Responsibility:	Yes
Family Comments of the 100	
Family Composition/Significant Others Name 1:	Helen
DOB 1:	neien
·	

mother

Relationship 1:

~	-	
School	1	
SCHOOL		٠

Parental Responsibility 1: Yes

Name 2:

DOB 2: 2004

Relationship 2: patient
School 2: xxxxxxx

Parental Responsibility 2: No

Name 3:

Date Of Presentation: 02/12/2013

SBAR

Situation:

Child was brought by ambulance accompanied by mother with wounds to both sides of neck and chest, appear to be stab wounds, stated initially that he had been assaulted by unknown person with unknown weapon whilst playing out with older siblings. Later changed his history x 2 eventually stating that he was playing and got his head caught in a fence and then fell onto glass, unsure of full history as has been inconsistent throughout. Step father had initially advised ambulance crew that the initial story had been incorrect.

Background:

Presented with wounds to neck and chest inconsistent history and had initially advised that he had been the victim of an assault. Mother was present, stating that it had happened whilst he was playing out so she did not know what had happened, but a man had brought him home upset. Police had been contacted, and duty social worker for contacted, advised family were known to them in 2010, due to reports of violence towards X and his sister by mum's partner at the time.

Assessment:

Child seen by ED SHO, reg and consultant discussed with surgeons at central City children's hospital, advised to arrange CT thorax and neck, unable to carry out as initially unable to gain access on child as required for IV contrast. Inconsistent history throughout, not necessarily consistent with injuries, police involved and spoken to several people involved and are happy with final story about him getting trapped between fence and falling. Child now referred to central City surgeons and for transfer to ED. Concern about a lack of consistency in history.

Recommendation:

Information sharing. Child being transferred to central City children's hospital.

Is The Child Aware of the Referral: Yes

Are Parents or Carers Aware of the

Referral: Yes

Have They Given Permission for the

Referral: Yes

View of the Referral:

nil voiced

CAF Completed: Not Known

Other Agencies/Provision Involved

- None Entered

Any Other Relevant Information:

Spoken to the duty social worker at X contact centre during night who gave some history of previous involvement with family.