

NSW HEALTH

SCHOOL-BASED VACCINATION PROGRAM AEFI CLINICAL SEQUENCE OF EVENTS FORM

INSTRUCTIONS

- This form must be completed for all students who have been transferred to hospital.
- All sections of this form must be completed.
- The top copy (white) must accompany the student to the hospital.
- The carbon copy (yellow) must be faxed to the PHU as soon as possible.

NSW HEALTH

SCHOOL-BASED VACCINATION PROGRAM AEFI CLINICAL SEQUENCE OF EVENTS FORM

Date: _____ School: _____ AHS _____

Student Name: _____ DOB: _____ Year: _____

Attending RNs names: _____

Vaccines administered

Vaccine:Time given:Batch: Site: Vaccine:Time given: Batch:Site:

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Time first symptom developed: _____ Description of event: _____

INITIAL ASSESSMENT (TIME:)

NB: A 2nd RN can complete this while 1st RN providing treatment

AIRWAY: Swelling of lips/tongue/throat/neck? Y/N Wheeze? Y/N Stridor? Y/N Cyanosis? Y/N

BREATHING: Spontaneous? Y/N Resp rate: 0 <10 10-24 25-35 >35 Increased resp effort * ? Y/N

CIRCULATION: Pulse (central): <60 60-79 80-99 100-120 >120 Character: Strong/Weak Pallor: Y/N

Capillary refill** : <2 sec >2 secs Systolic BP (if available): >90 70-90 <70 0 NA

Any Rash? Y/N Urticaria? Y/N Flushing/erythema? Y/N Site/extent

Level Of Consciousness***: A V P U

* As indicated by one or more of grunting, accessory muscle use (sternocleidomastoid, intercostal), intercostal recession or tracheal tug

** Test at chest

*** A=Alert V=responds to Verbal stimuli P=responds to Pain U=Unresponsive

ACTION TAKEN

Positioning: supine/recovery/other Adrenaline? Y/N Other treatment/clinical notes: _____

Response/review at 5 mins (time) Pulse: <60 60-79 80-99 100-120 >120 Resp rate: 0 <10 10-24 25-35 >35

Assessment: Improved/unchanged/worsening Specify changes: _____

Clinical progress (clinical treatment and response): _____

Time help was summoned: _____ Type of help (ambulance/GP): _____

Time help arrived: _____ Transferred to (hospital): _____ Transfer time: _____

ADRENALINE CHART NB: Rotate site for multiple doses

Time	Dose	Batch	Site	RN signature