

# RECOGNITION OF THE SERIOUSLY ILL PEDIATRIC PATIENT

**S**SKIN

Mottled?  
Cyanotic?  
Petechiae?  
Pallor?

**A**CTIVITY

Needs Assistance?  
Not Amulating?  
Responsive?

**V**ENTILATION

Retractions?      Slow Rate?  
Head Bobbing?      Fast Rate?  
Drooling?      Stridor?  
Nasal Flaring?      Wheezing?

**E**YE CONTACT

Glassy Stare?  
Fails to Engage/Focus?

**A**BUSE

Unexplained Bruising/Injuries?  
Inappropriate Parent?

**C**RY

High Pitched Cephalic?  
Irritable?

**H**EAT

High Fever ( $>41^{\circ}$ )?  
Hypothermia ( $<36^{\circ}$ )?

**I**MMUNE SYSTEM

Sickle Cell?  
Aids?  
Cortisosteroids?

**L**LEVEL OF

CONSCIOUSNESS

Irritable?  
Lethargic?  
Pain Only?  
Convulsing?  
Unresponsive?

**D**EHYDRATION

Hollow Eyes?      Vomiting:  
Capillary Refill?      Projectile.  
Cold Hands, Feet?      Bilious Persistent?  
Voiding?      Dry Mucous  
Severe Diarrhea?      Membranes?

**SAVE:** Observations made prior to touching the child  
**CHILD:** History from caretaker and brief exam