

# Distracting Shoulder

## Scenario Overview:

This one is about a child who has tripped and fallen down some stairs and landed on their head and shoulder. The child's head and neck was bent back in the collision with the ground but the child only complains of pain in their shoulder because it seems much worse than the smaller pain in their neck. This scenario is designed to test the first aiders with a distracting injury from a potentially more serious one on a child (a patient group that tests different communication skills for example). The child's parent can be with them to help explain the mechanism.

## Difficulty:

First Aider Moderate

## How the scenario should progress:

The child isn't going to get any worse during the scenario. This one is probably best where, if the first aiders do not consider the potential for neck or head injury, this could be discussed at the end rather than necessarily giving them any additional symptoms within it.

## Actor Tips:

Needs to be quite upset and adamant that their shoulder is the bit that hurts the worst.

## Patient 1:

**Name:** Sam Brown **Age:** 8 **Sex:** Male

## Medication:

Blue reliever inhaler

## Allergies:

None Known

## Past medical/family/social history:

Asthma

## Findings on examination:

Child is initially telling you about the pain in their shoulder and is quite upset. They also have a bit of neck pain which can be found out if the first aiders specifically ask. The patient does not have a significant head injury but just a small graze on their forehead. The pain in their shoulder is rated 8/10 (or the equivalent on the Wong-Baker smiley faces scale) and stays just in their shoulder. It is painful to move their arm. No deformities. Some swelling present. The child will have difficulty explaining exactly where the pain in their neck is as they are much more worried about their shoulder. The child will be very scared. They have sensation and movement in all limbs. No visual impairment. Skin colour normal.

## Possible treatment from first aiders:

Good history take and a thorough understanding of the mechanism from the parent. Attempt to calm the child (perhaps use the parent to help). Good communication, keeping things simple.

|                          |        |                      |
|--------------------------|--------|----------------------|
| <b>Time after start:</b> | 0 mins | Stays about the same |
| <b>Response:</b>         | Alert  |                      |
| <b>Airway:</b>           | Yes    |                      |
| <b>Breathing?</b>        | Yes    |                      |

|                      |               |  |
|----------------------|---------------|--|
| <b>Respirations:</b> | 18 but crying |  |
| <b>Pulse:</b>        | 105           |  |