



**Prehospital Emergency Services  
Current Awareness Update  
Issue 102, July/Aug 2023**

The aim of this Current Awareness Update is to provide a digest of information supporting evidence based practice in prehospital emergency services.

The issue name relates to when the contained articles were published- the bulletin is published the following month once the national bulletin has been issued.

This is an edited version of  
the update for SWASFT staff

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*Prehospital Emergency Services Current Awareness Update – Issue 102, July-Aug 2023*

**With thanks to Matt Holland, LKS ASE Librarian** (on behalf of the National Ambulance Research Steering Group).

*This Current Awareness Update was commissioned by the National Ambulance Research Steering Group comprising of research leads from ambulance trusts in England, Scotland and Wales and other experts and groups supporting prehospital research. The aim of the group is to support the strategic development of ambulance and prehospital research whether leading, collaborating in or using research.*

The research papers have been arranged by the topic headings below:

[Prehospital Practitioners – Professional Development](#)

[Prehospital Research – Methods and Discussion](#)

[Diagnosis & Triage](#)

[Patient Profile](#)

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## Prehospital Research – Methods and Discussion

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## Diagnosis and Triage

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## Patient Profile

### Children and Young People

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## Further Research Needed

Carne, B., et al. (2023). Factors contributing to death of major trauma victims with haemorrhage: A retrospective case-control study. *Emergency medicine Australasia : EMA, Online First*.

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**CONCLUSIONS:** The present study reaffirms previous literature that lower body temperature on presentation to hospital is a significant potentially modifiable variable in predicting death following major trauma. **Further studies should investigate whether all pre-hospital services**

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**have key performance indicators (KPIs) for temperature management and causes for failure to reach these.** Our findings should promote development and tracking of such KPIs where they do not already exist.

Hill, M. A., et al. (2023). Secondary traumatic stress in partners of paramedics: A scoping review. *Australasian Emergency Care, 0(0)*.

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**CONCLUSION:** Further research is required to quantify secondary traumatic stress severity in paramedic partners and explore relationships between post-traumatic stress, secondary traumatic stress, and couple functioning. Further, evaluation of partner support needs and barriers to accessing support is warranted.

Maguire, B. J., Al Amiry, A., & O'Neill, B. J. (2023). Occupational Injuries and Illnesses among Paramedicine Clinicians: Analyses of US Department of Labor Data (2010 - 2020). *Prehospital and disaster medicine*.

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**CONCLUSIONS:** Paramedicine clinicians are a critical component of the health, disaster, emergency services, and public health infrastructures, but they have risks that are different than other professionals. This analysis provides greater insight into the injuries and risks for these clinicians. **The findings reveal the critical need for support for Emergency Medical Services (EMS)-specific research to develop evidence-based risk-reduction interventions.** These risk-reduction efforts will require an enhanced data system that accurately and reliably tracks and identifies injuries and illnesses among PCs.

Mausz J., e. a. (2023). Women's Participation in Leadership Roles in a Single Canadian Paramedic Service. *Prehospital emergency care*.

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**CONCLUSION:** Although paramedicine is witnessing an encouraging shift in the demography of its workforce, our results point to a potential under-representation of women in leadership roles. **Future research should focus on identifying and ameliorating barriers to career advancement among women and other historically underrepresented people.**

Wilson, C., et al. (2023). Feedback for Emergency Ambulance Staff: A National Review of Current Practice Informed by Realist Evaluation Methodology. *Healthcare (Basel, Switzerland), 11(16)*.

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**CONCLUSIONS:** This study suggests that initiatives providing feedback for EMS staff are common in practice, with most UK ambulance trusts currently having examples of feedback initiatives within their footprint. EMS feedback initiatives are motivated by various factors but are challenging to implement and sustain effectively. The published literature differs from current practice in the focus and scope of EMS feedback initiatives. **There is considerable opportunity to strengthen the methodological and theoretical basis for innovations in practice in this area.** This includes providing guidance on the design of interventions and robust evaluation of different feedback approaches, especially those which might be unique in meeting the challenges of the EMS setting.

- [Advanced paediatric life support : a practical approach to emergencies](#)
- [History Taking in Clinical Practice](#)
- [Manual of Splinting and Casting](#)
- [Rang and Dale's pharmacology](#)
- [Primary Care for Paramedics](#)

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