



**Prehospital Emergency Services
Current Awareness Update
Issue 103-104, Sep/Oct + Nov/Dec 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 103/4, Sep-Oct +Nov-Dec 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](#)

[Helicopter Emergency Medical Services](#)

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Sep/Oct

*** SWASFT author *** Henderson, T., Endacott, R., Marsden, J., & Black, S. (2023). Competence of UK paramedics in performing standard paramedic skills [research-article]. *Journal of Paramedic Practice*, 15(10).

Click [here](#) to access fulltext- SWASFT Athens required (register [here](#)). Click [here](#) to access free abstract

Abbott, I., & Whitley, GA., (2023). What are ambulance personnel experiences of sexual harassment and sexual assault in the workplace? A rapid evidence review. *International emergency nursing*, 71.

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Patient Profile

Sep/Oct

Children and Young People

Ciarletta, J., et al., (2023). Safe Ground Transport of Pediatric Patients: A Qualitative Assessment of Best Practice Guidelines Implementation [research-article]. *Prehospital Emergency Care, Online First*.

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Further Research Needed

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Fehlmann, CA., et al. (2023). Assessment of frailty by paramedics using the clinical frailty scale - an inter-rater reliability and accuracy study. *BMC emergency medicine*, 23(1).

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CONCLUSION: The assessment of frailty by paramedics was reliable in this vignette-based study. However, the accuracy deserved to be improved. **Future research should focus on the clinical impact of these results and on the association of prehospital frailty assessment with patient outcomes.**

Finney, O., et al. (2023). Comparison of prehospital stroke care at private homes and residential care settings [research-article]. *Journal of Paramedic Practice*.

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CONCLUSION: Clinician awareness of characteristics associated with residential settings may be important for delivering emergency stroke care. **Research is needed to optimise ambulance assessment for care home patients.**

Fishe, J. N., et al., (2023). Early Administration of Steroids in the Ambulance Setting: An Observational Design Trial (EASI-AS-ODT). *Academic Emergency Medicine*.

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CONCLUSIONS: In this multicenter study, the addition of an oral systemic corticosteroid (OCS) into EMS agency protocols for pediatric asthma exacerbations significantly increased systemic corticosteroid administration but did not significantly decrease hospital admission rates. As overall EMS systemic corticosteroid administration rates were low, **further work is required to understand optimal implementation of EMS protocol changes to better assess potential benefits to patients.**

Hunt, B., et al. (2023). Diagnostic Accuracy of Posterior Circulation Stroke by Paramedics: A Systematic Review [research-article]. *Prehospital Emergency Care*.

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CONCLUSION: There is a substantial lack of evidence regarding the diagnosis of PCS [Posterior Circulation Stroke] by paramedics. Despite the low quality of evidence available, overall, the

sensitivity for paramedic PCS diagnosis appears to be poor. **Further investigation is required into paramedics' diagnosis of PCS and the use of educational interventions.**

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Nov/Dec

Ablard, S., et al. (2023). **Delivery of public health interventions by the ambulance sector: a scoping review.** *BMC public health*, 23(1).

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Conclusion: This scoping review has demonstrated the breadth of public health related activities in which the ambulance sector is involved. However, an overemphasis on demand management outcomes precludes definitive conclusions on the impact of ambulance sector-led public health initiatives on public health outcomes. **Future evaluations of public health initiatives should incorporate wider health system perspectives to assess what happens to patients in health sectors beyond the immediately apparent remit of the ambulance sector.**

Kirk, B., McClelland, G., & Hepburn, S. (2023). Hyperventilation in cardiac arrest—a systematic review and narrative synthesis [research-article]. *Journal of Paramedic Practice*, 15(11).

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Conclusion: Hyperventilation is common during cardiac arrest management. Currently available human data do not produce sufficient evidence to favour any ventilation strategy; however, a harmful upper limit will exist. **This review found no human randomised control studies examining how ventilation rate, tidal volume or pressure affect patient outcomes and this warrants further research.**

Owen, F., & Stagg, H., (2023). Rural versus urban out-of-hospital cardiac arrest response, treatment and outcomes in the North East of England from 2018 to 2019. *British paramedic journal*, 8(2).

Available [here](#) to College of Paramedics members. Click [here](#) to access abstract. Click [here](#) to request fulltext- SWASFT Athens required (register [here](#)).

This report showed differences in OHCA response and outcomes between rural and urban settings. In the shockable OHCA sub-group analysis, rural areas had slower ambulance response times and lower ROSC rates. The longer ambulance response times in the rural shockable OHCA group could be a factor in the reduced ROSC rates. **Linking hospital survival data should be used in future research to explore this area further.**

Sweet, S., & P, Withers, P., (2023). A quantitative study of confidence among paramedics in assessment of the cardiovascular system. *British paramedic journal*, 8(2).

Available [here](#) to College of Paramedics members. Click [here](#) to access abstract. Click [here](#) to request fulltext- SWASFT Athens required (register [here](#)).

Conclusions: High confidence levels for a cardiovascular examination were reported among the respondents of this survey. Paramedics have shown good confidence among all areas of a cardiovascular assessment, except with palpating the chest for heaves and thrills. **There is an**

evident link between reported confidence levels and how often these assessments are completed, however there is still room for additional training and research within this area.

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