

PEARLS of Urgent Care

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Disclaimer

- I am not representing any company or receive any funding for this presentation.
- It will not include any areas of unapproved or investigational procedures or medications.

OBJECTIVES

- The Learner will be able to verbalize urgent care treatment modalities
- Health care providers will be able to identify appropriate urgent care and ER emergencies.

Just a Little Picture



Hey there! My kid fell off the bed and hit their head!

- Head injury?Trauma algorithm
- Children younger than 2 years – assess mental status, no scalp hematoma except frontal
- No Loss of consciousness
- Non- severe injury mechanism
- No palpable skull fracture
- According to parents, child is acting normal

Head injury (cont)

- Children ages 2 years and older
- Normal mental status
- No LOC
- No vomiting
- Non severe injury mechanism
- No signs of basilar skull fracture
- No severe headache

Assessment Pearls

- Glasgow coma scale
- Pupil response
- Altered mental function
- Age of patient
- Decision rules attempt to limit unnecessary exposure to CT scans

A view of Pompeii



Hey! My BP is 205/115

- First thing- recheck
- HTN- new guidelines- BP early hypertension 130/88
- Primary versus secondary
- Classification
- Asymptomatic elevated BP without symptoms

Hypertension (cont)

- Uncontrolled BP
- Hypertensive emergency
- If uncontrolled and chronic- patient just does not comply with treatment regimen- Evaluate- recheck BP. May need to restart their meds and send to PCP.
- If chest pain, SOB, dizziness- needs a trip to the ER!

New Hypertension Guidelines

- BP- <120-80- evaluate yearly
- BP stage one- 130/80-89 Lifestyle changes
- BP stage two >140-90- 10 year risk for cardiac disease lifestyle changes
- BP- urgent- >180 or >90
- BP emergency->180 ->120

Hypertension

- Reminder- this patient should go to his or her PCP
- Review of meds
- HCTZ
- ACE inhibitors
- ARBS

Hypertension Conclusion

- No evidence that asymptomatic patients should be treated acutely
- ED or urgent care visit may be their only contact with a health care professional
- Counsel
- Follow up is important!

Oh my gosh, I broke a bone

- Mechanism of injury
- Xrays
- Splint
- Ibuprofen
- Send to ortho

Bacterial pharyngitis Vs Viral pharyngitis

- Incubation period- 2-5 days
- Rapid antigen testing
- Tonsillar exudate
- Amoxil, PCN for treatment
- PCN allergy- kelflex
- Severe PCN- Clindamycin , azithromycin

Symptoms of Strep

- Fever
- Tonsillar exudate
- Enlarged tender cervical lymph nodes
- If viral- salt water rinses and tylenol or ibuprofen for pain
- Also think about mono- do not give amoxicil causes a rash.

Pharyngitis cont.

- May want to give steroids, although recent studies are discussing the use of steroids for this
- Dose – decadron 4- 8 mg IM
- Children- 0.6 mg per kg.
- Oral dose for adults- 60 mg po for 1-2 days.

I have a headache!

- Typical of previous headaches
- Worst headache?
- Fever or chills?
- Associated symptoms?
- Age?

Differential Diagnosis

- Migraine
- Cluster headache
- Sinusitis
- Caffeine or alcohol withdrawal
- Dental abcess
- TMJ

Differential DX

- Trigeminal Neuralgia
- Post LP headache

Treatment

- Ibuprofen
- Sinus infection if greater than 10 days- amoxil, Antihistamines, nasal saline augmentin, allergic to PCN- doxycycline
- Migraine- Toradol and zofran
- Refer to PCP for ongoing headaches

Bee stings

- If allergic- give EPI 0.3 1:1000 Sub q every 5- 10 minutes if necessary
- Benedryl 25- 50 mg IM
- Corticosteroids- Prednisone 1 mg per kg or solumedrol 125 mg IM
- Oxygen if necessary
- Call 911

Dog Bite

- Thoroughly cleanse wound with soap and water.
- Do not sew up small puncture wounds, if bite is larger and wide open , dress with guaze and send to ER
- May give Augmentin for dog bite- M catarralis on dogs teeth. If PCN allergic- clindamycin

I am itchy and I dont know why

- Rashes
- Assess- color, shape, how long and what exposure
- Most common urgent care rash is Poison IVY
- Treatment- Steroids and steroid cream

STDs

- South Carolina is third in STDS
- GC/Chlamydia
- Trichomonas
- Syphilis
- Treatment-Rocephin, cipro, azithromycin
- BIG TIME LECTURE :)

The Urgent care extras!

- Fever
- FLU
- Pneumonia
- Rashes
- Constipation

If in doubt

- Chest pain with hypertension- go to ER
- Severe abdominal Pain
- High fevers
- Fractures that are beyond urgent care service
- ER!

A few others

- Urinary tract infections
- Sprains, Strains
- MVCs

In summary

- A quick review of Urgent care and ER treatments
- Most common Urgent care evaluations
- Questions??

Thank YOU!!



References

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