

Proposal for insertion of nurses in the **EMERGENCY** REGULATION PROCESS



SISTEMA DE CLASSIFICAÇÃO ONLINE **SISCON**

PRODUCT OF THE PROFESSIONAL MASTER'S DEGREE IN HEALTH AND ENVIRONMENTAL SCIENCE EDUCATION

JOSE LUIZ DA SILVA
ILDA CECÍLIA MOREIRA DA SILVA
LUCRÉCIA HELENA LOUREIRO

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PROPOSAL FOR INSERTION OF NURSES IN THE EMERGENCY REGULATION PROCESS



Authors:

José Luiz da Silva

Lucrecia Helena Loureiro

Ilda Cecília Moreira da Silva



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1 INTRODUCTION

The product proposal is based on the researcher's perception of the demands of Prehospital Care (PHC) services, to optimize resources and provide comprehensive assistance to health system users regarding urgent mobile care, in addition to present a new strategy for emergency regulation at Médio's Paraíba region - RJ where nurses would actively act in the process of elaboration, updating and management of the emergency network reference grid providing technical support for the regulator, besides maintaining permanent contact with the decentralized teams acting as a facilitator in order to guide the nursing staff in the intervention procedures, clarify doubts and guide the protocol procedures in emergency care.

1.1 Instrument Development

After compiling the theoretical framework, the information was arranged in the Web system in a didactic, illustrated and accessible comprehension form, with the aid of a schematic structure and a simple language text.

1.2 Web System Functional Specification

After the basic research and requirements gathering, the web system modulation was started and was developed using techniques responsive to its layout thus allowing usability in any device that needs to access its functions, using the HTML programming languages (HyperText). Markup Language), CSS (Cascading Style Sheets), and JavaScript.

We chose not to use heavy frameworks, 3D rendering and high resolution images in order to include the largest number of devices thus speeding the loading and making their use more intuitive. After building and debugging internal tests, different screen resolutions and browsers were used on computers and tablets. In analyzes performed by the author, the site was compatible with all tests proposed on computers, phones / smartphones and tablets tested.

Initial production was evaluated and tested fortnightly by the system analyst in conjunction with the researcher. The definitions, adjustments and changes were discussed at technical team meetings held at the end of each step and the necessary adjustments being applied to improve and eliminate possible failures.

The web system is presented in its first version (1.0), with new versions, adaptations and changes for other realities or other spaces that may be applied.

1.3 Architectural design

The project began through discussion with the advisor to seek technical support defining the feasibility of creating the system in view of the possibility of its use in professional qualification in order to justify its construction.

We then made contact with another researcher who was developing a similar project in order to obtain information about the work developed by the Computer Technician. With a favorable evaluation, we chose to hire the service of the referred professional.

1.4 System development and testing

Telephone contact was made with the professional and a visit was scheduled to clarify and detail the product to be developed. After a brief description of the study proposal, the professional responsible for developing the system, requested a deadline for consolidation of ideas and initial design of the application. After this step, the technician sent a link to the researcher's first review of the product. It was approved and hired the IT professional.

The web system was presented by the developer to the researcher through a link and an initial evaluation was performed by the researcher who then asked other professionals working in PHC and regulation of urgency to advise on the functionality of the web system and its practical application.

1.5 Development of the guiding questions of the web system

The questions were developed through existing risk classification protocols, however these protocols were changed to meet the local reality and internal need of the service. The Manchester protocol was the basis for the elaboration of the product and the color system used was similar to that practiced in the protocol, the orange color existing in the Manchester protocol was suppressed and the blue color used only for illustrative purposes before the definition of sending support units.

In this way we chose to exclude the blue color which in the Manchester protocol is indicated for non-urgent cases and the orange color which is used for “very urgent” cases since for non-urgent cases the immediate sending of a support unit and urgency and “very urgent” levels have been unified and classified in yellow to suppress the ambivalence that urgency levels could cause to the system user.

Patient classified as red (emergency): Needs immediate care and there is a risk of death (immediate dispatch of a USA support unit preferably), there is a need to continue to provide guidance to the care taker in order to provide basic life support. until the arrival of

Patient classified as yellow (urgency): Needs service or evaluation by healthcare professional (shipping from a USA or USB support unit as soon as available).

Patient classified as green (less severe cases): Provides guidance-only care (immediate dispatch of a USA or USB support unit as soon as available).

2 RESULTS

2.1 Classification System Development: SISCON in operation

The screens that make up the SISCON Classification System are referenced by colors where the system classifies each module according to complexity, being red for higher complexity, yellow for moderate complexity and green for low complexity. Thus,

the input methods direct the user to the desired routing. The operation occurs by typing the access link to the platform <http://boring-ritchie-4f14d9.bitballoon.com/> after typing opens a login screen where the user previously registered by the web system manager that gives ownership of login and password allowing access to the system.

Figure 1: Login Screen



After logging in the system opens a home screen where the user opens the call after the request via telephone through his contact with the emergency control center, in the home screen the professional is able to register the name and address of the as well as identify the location of the ticket on the map. The system also makes it possible to record the beginning and end of care and the proposal to store such information in a specific database for future consultations generating quality indicators and other information.

Figure 2: SISCON System Home Screen

Sistema de Classificação Online | SISCON X

Abertura do Chamado 11:1:47 Fechamento do Chamado 11:07:31

Nome _____ Sobrenome _____

Localização da ocorrência _____

Localização no mapa

Login

Sobre

Figure 3: Data Populated with Location

João Carlos Silva

Rua 338 - Monte Castelo, Volta Redonda - RJ, Brasil

Localização no mapa

Classificação de risco

Envio imediato da ambulancia

ENVIAR AMBULÂNCIA!

About:

The “About” tab on the home screen describes information about the authors of the project.

Figure 4: Online Classification System

Sistema de Classificação Online | SISCON ×

Informações do Projeto

Dissertação apresentada ao Programa de Mestrado Profissional em Ensino em Ciências da Saúde e do Meio Ambiente, como parte dos requisitos para obtenção do título de Mestre em Ensino em Ciências da Saúde e do Meio Ambiente. Desenvolvimento de software para classificação de risco on-line.

Mestrando

José Luiz da Silva

Orientadores

Orientador: Profª Drª Ilda Cecília Moreira da Silva
Co-orientador: Profª Dra. Lucrécia Helena Loureiro

2.2 Initial Screening

After performing the prior registration of the user requesting care, the professional is directed to the initial screening screen where through questions to be asked to the applicant will determine whether or not the support units (ambulances) are sent immediately.

Figure 5: Initial Screening

Triagem Inicial

A pessoa consegue te ouvir?

Sim Não

A pessoa consegue falar?

Sim Não

A pessoa realiza ordens simples?

Sim Não

A pessoa está respirando?

Sim Não

A pele da pessoa esta na cor normal?

Sim Não

A pessoa está sangrando?

Muito Médio Não

PROSSEGUIR PARA AVALIAÇÃO

In cases where the answers are “YES” the rating remains blue and there is no initial indication by the immediate support unit shipping system.

Figure 6: Risk Rating

The screenshot displays a triage interface with a dark header containing a map icon and the text "Localização no mapa". Below the header, the main area is titled "Triagem Inicial" and contains six assessment questions, each with radio button options:

- A pessoa consegue te ouvir? (Sim, Não) - "Sim" is selected.
- A pessoa consegue falar? (Sim, Não)
- A pessoa realiza ordens simples? (Sim, Não)
- A pessoa está respirando? (Sim, Não)
- A pele da pessoa esta na cor normal? (Sim, Não)
- A pessoa está sangrando? (Muito, Médio, Não)

At the bottom of the assessment section is a green button labeled "PROSSEGUIR PARA AVALIAÇÃO". To the right, a red vertical panel titled "Classificação de risco" features a large blue circle and a button with a truck icon and the text "ENVIAR AMBULÂNCIA!".

If the professional accidentally triggers the immediate sending of a support unit in cases where the user answers “YES” the system informs of the need for immediate sending.

Figure 7: Answers

This screenshot shows the same triage interface as Figure 7, but with a white dialog box overlaid in the center. The dialog box contains the following text:

boring-ritchie-4f14d9.bitballoon.com diz
 Não existe necessidade de envio para a ambulância
 OK

The background interface remains the same, showing the "Triagem Inicial" questions and the "Classificação de risco" panel.

Immediately send a support unit, as an extreme severity event is assumed and the option to choose to direct a advanced life support, however the system makes it possible to continue the assessment more accurately and may choose another type of resource based on the syndromic assessment process where the professional can better assess the situation, noting that the immediate activation of teams reduces response time.

Figure 8: If No

Classificação de risco

Envio imediato da ambulância

ENVIAR AMBULÂNCIA!

Triagem Inicial

A pessoa consegue te ouvir?

Sim Não

A pessoa consegue falar?

Sim Não

A pessoa realiza ordens simples?

Sim Não

A pessoa está respirando?

Sim Não

A pele da pessoa esta na cor normal?

Sim Não

A pessoa está sangrando?

Muito Médio Não

PROSSEGUIR PARA AVALIAÇÃO

In the initial screening screen there is a field for the assessment of bleeding where there is an exception, in this case the answer “NO” by the user and that does not require the sending of a support unit.

Figure 9: Bleeding Assessment

Classificação de risco

ENVIAR AMBULÂNCIA!

Triagem Inicial

A pessoa consegue te ouvir?

Sim Não

A pessoa consegue falar?

Sim Não

A pessoa realiza ordens simples?

Sim Não

A pessoa está respirando?

Sim Não

A pele da pessoa esta na cor normal?

Sim Não

A pessoa está sangrando?

Muito Médio Não

PROSSEGUIR PARA AVALIAÇÃO

If the answer is “YES” the system opens a new field where the professional can determine the location of the bleeding.

Figure 10: Bleeding Assessment, Positive Response Case

The screenshot shows the 'Triagem Inicial' (Initial Triage) screen. It consists of two columns of questions with radio button options. The right column has a 'Local do sangramento' (Bleeding location) field with 'Braço' (Arm) entered. Below the questions is a green button labeled 'PROSSEGUIR PARA AVALIAÇÃO'. On the right side, there is a red panel titled 'Classificação de risco' (Risk Classification) featuring a large blue circle and a button that says 'ENVIAR AMBULÂNCIA!' (SEND AMBULANCE!).

If the answer is “VERY” it will be advised to immediately send a support unit.

Figure 11: Bleeding Assessment

This screenshot shows the 'Triagem Inicial' (Initial Triage) screen with a different set of answers. The 'Local do sangramento' field is empty. The 'Classificação de risco' (Risk Classification) panel on the right now shows a large red circle and the text 'Envio imediato da ambulancia' (Immediate ambulance dispatch), with the 'ENVIAR AMBULÂNCIA!' button highlighted in red.

2.3 Syndromic Evaluation

After the initial screening, the professional should trigger the "proceed evaluation" tab in order to open the syndromic evaluation screen, the first tab being the chest pain where through the user's argument the professional can determine the urgency level of care based in color classification.

2.4 Chest pain


In addition to presenting the commonly used questions and color grading as described above, this screen keeps an alert to forward a support unit proceeding to the

removal of victims with thoracic complaints to the emergency room (UPA), as pain protocol instituted by the Ministry of Health.

Figure 12: Chest pain

Avaliação Sindrômica

Remover para UPA independente da Classificação

DOR TORÁCICA	PASSANDO MAL	QUEIXAS RESPIRATÓRIAS	SINAIS E SINTOMAS GERAIS	ALTERAÇÃO DE ESTADO NEUROLÓGICO
<input type="radio"/> Alteração respiratória <input type="radio"/> Pulso anormal <input type="radio"/> Sinais de choque <input type="radio"/> Dor severa <input type="radio"/> Dor precordial <input type="radio"/> Hemoptise	<input type="radio"/> Falta de ar com estado mental e SV normais <input type="radio"/> Dificuldade de deglutir <input type="radio"/> Dor moderada <input type="radio"/> Dor plurítica <input type="radio"/> Epistaxe <input type="radio"/> Vômito persistente <input type="radio"/> Histórico de HIV+	<input type="radio"/> Sinais vitais normais <input type="radio"/> Dor leve <input type="radio"/> Dor muscular <input type="radio"/> Suspeita de infecção respiratória superior <input type="radio"/> Tosse produtiva	Classificação de risco  <input type="button" value="ENVIAR AMBULÂNCIA!"/> <input type="button" value="← VOLTAR"/>	

POR 20:31
PTB2 09/05/2018

Figure 13: Red syndromic assessment

Avaliação Sindrômica

Remover para UPA independente da Classificação


DOR TORÁCICA	PASSANDO MAL	QUEIXAS RESPIRATÓRIAS	SINAIS E SINTOMAS GERAIS	ALTERAÇÃO DE ESTADO NEUROLÓGICO
<input checked="" type="radio"/> Alteração respiratória <input type="radio"/> Pulso anormal <input type="radio"/> Sinais de choque <input type="radio"/> Dor severa <input type="radio"/> Dor precordial <input type="radio"/> Hemoptise	<input type="radio"/> Falta de ar com estado mental e SV normais <input type="radio"/> Dificuldade de deglutir <input type="radio"/> Dor moderada <input type="radio"/> Dor plurítica <input type="radio"/> Epistaxe <input type="radio"/> Vômito persistente <input type="radio"/> Histórico de HIV+	<input type="radio"/> Sinais vitais normais <input type="radio"/> Dor leve <input type="radio"/> Dor muscular <input type="radio"/> Suspeita de infecção respiratória superior <input type="radio"/> Tosse produtiva	Classificação de risco  Envio imediato da ambulância <input type="button" value="ENVIAR AMBULÂNCIA!"/> <input type="button" value="← VOLTAR"/>	

Figure 14: Yellow syndromic assessment

Avaliação Sindrômica

Remover para UPA independente da Classificação

DOR TORÁCICA	PASSANDO MAL	QUEIXAS RESPIRATÓRIAS	SINAIS E SINTOMAS GERAIS	ALTERAÇÃO DE ESTADO NEUROLÓGICO
<input type="radio"/> Alteração respiratória <input type="radio"/> Pulso anormal <input type="radio"/> Sinais de choque <input type="radio"/> Dor severa <input type="radio"/> Dor precordial <input type="radio"/> Hemoptise	<input checked="" type="radio"/> Falta de ar com estado mental e SV normais <input type="radio"/> Dificuldade de deglutir <input type="radio"/> Dor moderada <input type="radio"/> Dor plurítica <input type="radio"/> Epistaxe <input type="radio"/> Vômito persistente <input type="radio"/> Histórico de HIV+	<input type="radio"/> Sinais vitais normais <input type="radio"/> Dor leve <input type="radio"/> Dor muscular <input type="radio"/> Suspeita de infecção respiratória superior <input type="radio"/> Tosse produtiva	Classificação de risco  Envio imediato da ambulância <input type="button" value="ENVIAR AMBULÂNCIA!"/> <input type="button" value="← VOLTAR"/>	

Figure 15: Green syndromic assessment

Avaliação Sindrômica

Remover para UPA independente da Classificação

DOR TORÁCICA	PASSANDO MAL	QUEIXAS RESPIRATÓRIAS	SINAIS E SINTOMAS GERAIS	ALTERAÇÃO DE ESTADO NEUROLÓGICO	Classificação de risco
<ul style="list-style-type: none"> <input type="radio"/> Alteração respiratória <input type="radio"/> Pulso anormal <input type="radio"/> Sinais de choque <input type="radio"/> Dor severa <input type="radio"/> Dor precordial <input type="radio"/> Hemoptise 	<ul style="list-style-type: none"> <input type="radio"/> Falta de ar com estado mental e SV normais <input type="radio"/> Dificuldade de deglutir <input type="radio"/> Dor moderada <input type="radio"/> Dor plurítica <input type="radio"/> Epistaxe <input type="radio"/> Vômito persistente <input type="radio"/> Histórico de HIV+ 	<ul style="list-style-type: none"> <input checked="" type="radio"/> Sinais vitais normais <input type="radio"/> Dor leve <input type="radio"/> Dor muscular <input type="radio"/> Suspeita de infecção respiratória superior <input type="radio"/> Tosse produtiva 	<p>Classificação de risco</p> <div style="border: 2px solid green; border-radius: 50%; width: 60px; height: 60px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> ● </div> <p>Envio imediato da ambulância</p> <p><input type="button" value="ENVIAR AMBULÂNCIA!"/></p> <p><input type="button" value="← VOLTAR"/></p>		

The following tabs follow the same line and can be added to the system, by establishing internal protocols, the ones we presented was a demonstration of the use of the system.

Figure 16: Getting sick

Avaliação Sindrômica

Remover para UPA independente da Classificação

DOR TORÁCICA	PASSANDO MAL	QUEIXAS RESPIRATÓRIAS	SINAIS E SINTOMAS GERAIS	ALTERAÇÃO DE ESTADO NEUROLÓGICO	Classificação de risco
<ul style="list-style-type: none"> <input type="radio"/> Respiração inadequada <input type="radio"/> Sinais de sangramento cutâneo <input type="radio"/> Sinais neurológicos graves <input type="radio"/> Sinais de meningismo <input type="radio"/> Dor severa <input type="radio"/> Febre alta (superior 39,5°C) <input type="radio"/> Febre em imunocomprometidos <input type="radio"/> Sudorese fria <input type="radio"/> Hipoglicemia <input type="radio"/> Risco específico de infecção 	<ul style="list-style-type: none"> <input type="radio"/> Dor moderada <input type="radio"/> Bolhas ou manchas disseminadas <input type="radio"/> Imunossupressão conhecida <input type="radio"/> Início súbito <input type="radio"/> Febre moderada (38,5°C - 39,5°C) <input type="radio"/> Sinais neurológicos focais <input type="radio"/> História hematológica importante 	<ul style="list-style-type: none"> <input type="radio"/> Sinais Vitais Normais <input type="radio"/> História recente de viagem <input type="radio"/> Dor aguda leve (1-3/10) <input type="radio"/> Evento recente <input type="radio"/> Febre baixa (inferior 38,5 °C) 	<p>Classificação de risco</p> <div style="border: 2px solid blue; border-radius: 50%; width: 60px; height: 60px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> ● </div> <p>Envio imediato da ambulância</p> <p><input type="button" value="ENVIAR AMBULÂNCIA!"/></p> <p><input type="button" value="← VOLTAR"/></p>		

Figure 17: Respiratory Complaints

Avaliação Sindrômica

DOR TORÁCICA PASSANDO MAL QUEIXAS RESPIRATÓRIAS SINAIS E SINTOMAS GERAIS ALTERAÇÃO DE ESTADO NEUROLÓGICO


Cuidado com uso crônico de corticóides, idosos, história de internações frequentes ou internação em UTI.

<input type="radio"/> Dor precordial <input type="radio"/> Estridor <input type="radio"/> Exaustão <input type="radio"/> Insuficiência Respiratória <input type="radio"/> Sinais de choque <input type="radio"/> Incapacidade falar em sentenças <input type="radio"/> Início agudo após trauma	<input type="radio"/> Dispnéia ao esforço <input type="radio"/> Dor pleurítica <input type="radio"/> Dor torácica ao tossir <input type="radio"/> Esforço respiratório leve <input type="radio"/> Sibilos respiratórios	<input type="radio"/> Sinais Vitais Normais <input type="radio"/> Dor de garganta <input type="radio"/> Dor de ouvido com febre <input type="radio"/> Evento recente <input type="radio"/> História de cheira noturna <input type="radio"/> Secreção nasal amarelada	<p style="text-align: center;">Classificação de risco</p> <div style="text-align: center;">  </div> <div style="text-align: center;"> <input type="button" value="ENVIAR AMBULÂNCIA"/> <input type="button" value="← VOLTAR"/> </div>
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Figure 18: General signs and symptoms

Avaliação Sindrômica

DOR TORÁCICA PASSANDO MAL QUEIXAS RESPIRATÓRIAS SINAIS E SINTOMAS GERAIS ALTERAÇÃO DE ESTADO NEUROLÓGICO

<input type="radio"/> Sinais vitais com alterações importantes	<input type="radio"/> Edema generalizado (anasarca) <input type="radio"/> Sinais sistêmicos e flogísticos <input type="radio"/> Ictericia aguda <input checked="" type="radio"/> Toxemiado, prostrado, febril ou desidratado	<input type="radio"/> Sinais Vitais Normais <input type="radio"/> Fraqueza ou câimbras <input type="radio"/> Edema localizado crônico <input type="radio"/> Alteração menstrual	<p style="text-align: center;">Classificação de risco</p> <div style="text-align: center;">  </div> <p style="text-align: center;">Envio imediato da ambulância</p> <div style="text-align: center;"> <input type="button" value="ENVIAR AMBULÂNCIA"/> <input type="button" value="← VOLTAR"/> </div>
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2.5 Alteration of the neurological state

In addition to presenting the usual questions, this screen alerts you to specific situations such as the use of alcohol or illicit drugs, and these "tips" may be useful when classifying and sending support units.

Figure 19: General signs and symptoms

Avaliação Sindrômica

Avaliar uso / interrupção de anticonvulsivante e neurolépticos e abstinência de álcool e drogas ilícitas.

DOR TORÁCICA	PASSANDO MAL	QUEIXAS RESPIRATÓRIAS	SINAIS E SINTOMAS GERAIS	ALTERAÇÃO DE ESTADO NEUROLÓGICO
<ul style="list-style-type: none"> <input type="radio"/> Comprometimento/obstrução de vias aéreas <input type="radio"/> Respiração inadequada <input type="radio"/> Sinais de choque <input type="radio"/> Pulso anormal <input type="radio"/> Dor precordial <input type="radio"/> Distúrbio súbito do equilíbrio <input type="radio"/> Dor intensa (8-10/10) <input type="radio"/> Em pós-comicial e torporoso/comatoso <input type="radio"/> Febre alta > 39,5°C 	<ul style="list-style-type: none"> <input type="radio"/> História de inconsciência <input type="radio"/> História duvidosa <input type="radio"/> Febre moderada < 39,5 > 38,5°C <input type="radio"/> Dor moderada (4-7/10) <input type="radio"/> Em pós-comicial e alerta <input type="radio"/> Relato de primeira crise convulsiva <input type="radio"/> Crise convulsiva há menos de 12h <input type="radio"/> Relato de desmaio ou síncope <input type="radio"/> Ritmo cardíaco irregular <input type="radio"/> Hemiparestesia (formigamento, dormência) 	<ul style="list-style-type: none"> <input type="radio"/> Sinais Vitais Normais <input type="radio"/> Febre baixa <input type="radio"/> Dor aguda leve (1-3/10) <input type="radio"/> Crise convulsiva há mais de 12h <input type="radio"/> Tonteira não rotatória <input type="radio"/> Parestesia bilateral ou migratória <input type="radio"/> Febre baixa < 38,5 °C <input type="radio"/> Dor aguda leve (1-3/10) 	<p style="text-align: center;">Classificação de risco</p> <div style="text-align: center;">  <p style="margin: 5px 0;">ENVIAR AMBULÂNCIA!</p> <p style="margin: 5px 0;">← VOLTAR</p> </div>	

3 FINAL CONSIDERATIONS

This product aims to offer software for nurses working in emergency mobile units at Médio Paraíba's region with the possibility of future use by other professionals working in PHC and / or SAMU 192 services, mainly as support in CRMUs.

The Software is not intended to be a change in the management of mobile care units, but a facilitating tool for decision making regarding the sending or not of a support unit as well as its type and crew, thus enabling nurses to be included in the process. CRMU's workplace.

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Sistema de Classificação Online | SISCOON

Abertura do Chamado: 23:07:50 | Fechamento do Chamado: 23:08:33

Nome: _____

Endereço: _____

Telefone: _____

Classificação de risco: **9** (ENVIAR AMBUULÂNCIA)

Triagem Inicial

A pessoa consegue falar? Sim Não

A pessoa está respirando? Sim Não

A pessoa está sangrando? Muito Médio Não

A pessoa consegue se mover? Sim Não

A pessoa avalia o próprio estado? Sim Não

A idade da pessoa está fora do normal? Sim Não

SISTEMA DE CLASSIFICAÇÃO ONLINE

SISCOON

PRODUCT OF THE PROFESSIONAL MASTER'S DEGREE IN HEALTH AND ENVIRONMENTAL SCIENCE EDUCATION

JOSE LUIZ DA SILVA
ILDA CECÍLIA MOREIRA DA SILVA
LUCRÉCIA HELENA LOUREIRO