



# Freedom of Information Request

**31 January 2023**

## Question

I would like to know:

I wish to know what awareness and training is regularly given to staff in the front-line emergency departments or mobile staff ie at road side/incident locations:

1. On the recognition of the signs of Malignant Hyperthermia (MH).
2. The causes of it (ie patient response to certain anaesthetics, such as halothane, sevoflurane, desflurane).
3. If patients allergy information is shared between Health Boards across Scotland and if mobile staff have access to that to alert them, ie to not administer certain anaesthetics to a patient etc.
4. If staff are trained are to look for 'medical alert' bracelets or necklaces before any interventions.
5. If sufficient stocks of dantrolene vials are kept by the authority at hand to deal with any complications from a patient having a severe reaction, requiring it.

## Answer

**1,2.**

For questions 1 and 2 asked, “what awareness and training is regularly given to staff in the front-line emergency departments or mobile staff ie at road side/incident locations: On the recognition of the signs of Malignant Hyperthermia (MH). The causes of it (ie patient response to certain anaesthetics, such as halothane, sevoflurane, desflurane).”

We do not hold a record specific to the training as asked, on the recognition of the signs of Malignant Hyperthermia (MH).

However,

The Scottish Ambulance Service follows the Joint Royal College Ambulance Liaison Committee (JRCALC) Clinical Practice Guidelines as its core source of clinical guidance. For further information on JRCALC please see their public facing website which can be found at the website address below:

<https://www.jrcalc.org.uk/guidelines/>

<https://aace.org.uk/clinical-practice-guidelines/>

Scottish Ambulance Service Clinicians will follow the widely used ABCDE Management approach (2) (Airway, Breathing, Circulation, Disability, Expose and Examine), while considering the most appropriate time to initiate treatment and transport.

Specific to our Specialist Teams such as the Emergency Medical Retrieval Service (EMRS).

EMRS is a consultant service staffed by consultants experienced in critical care who work in emergency medicine, intensive care, or anaesthesia along with their SAS commitments. They respond with senior doctors in training from the same specialties or advanced retrieval practitioners who have backgrounds in nursing or paramedicine plus further experience and training in critical care. All our staff will have some awareness of MH but those with anaesthetic experience will have more knowledge.

We do not use volatile anaesthetics in our service, nor carry dantrolene.

In theory we could be called to assist in a theatre environment from a rural general hospital in which case we (EMRS) would rely on local arrangements for the supply of dantrolene.

3. This information would only be accessible by authorised Health Care Professionals if a patients Key Information Summary has been updated by their GP and shared.
4. Yes, staff are trained to look for a medical alert on the patient during their assessment and within the immediate surroundings (such as a house), if presenting symptoms allow.
5. We do not hold this information.