



# Paediatric End of Life managed Care Network (PELiCaN)

## Request for a NEW Police Marker/Ambulance Alert

**This is a request for a new occurrence marker/ambulance alert for the following patient:**

<b>Patient Name:</b>	
<b>DoB/CHI:</b>	
<b>Address</b> <i>(must include postcode):</i>	
<b>Is there a second address?</b> <i>E.g. Parents at different addresses</i>	

<b>1)</b>	<b>Diagnosis</b>	
<b>2)</b>	<b>Please select as appropriate:</b>	
	Palliative patient considered to be <b>unstable or deteriorating</b> and although they are not receiving end of life care at this stage, sudden deteriorating resulting in death would NOT be unexpected	
	Palliative patient who is actively <b>dying</b> (last days/weeks of life) and receiving end of life care at home	
<b>3)</b>	<b>Is there a CYPADM or DNACPR in place?</b>	
	If YES, State resuscitation as written on the CYPADM/DNACPR:	
<b>4)</b>	<b>Is there an Anticipatory Care Plan in Place?</b>	
<b>5)</b>	<b>Are there cultural or spiritual wishes to be aware of?</b> <a href="#">(See NES Spiritual Care Guidance)</a>	
	If Yes please provide details:	
<b>6)</b>	<b>Does the patient have a 'Just in Case' Box of medications for symptom management?</b>	

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7)	<b>Any other information that Police Officers/Ambulance Crew should be made aware of?</b> <i>E.g. is patient likely to have a major bleed?</i>	
8)	<b>Please provide all the following details (name and contact) of professionals who can provide further information /advice if needed.</b>	
	Lead Consultant:	
	GP:	
	Other:	
	<b>GOOD PRACTICE POINT:</b> where the patient is unstable/deteriorating it may be difficult to predict whether lead consultant will be available at time of death. Please provide as details of the Speciality Teams and GP who may be able to advise Police Scotland if required	
9)	<b>Death Certification: <u>where patient is receiving end of life care at home</u>, plans for death certification will have been made. Please provide details of agreed plan and contact details or state if not applicable.</b>	

**Once completed this form should be sent to both the following email addresses:**

Police Scotland: [childdeathgovernance@scotland.pnn.police.uk](mailto:childdeathgovernance@scotland.pnn.police.uk)

Scottish Ambulance Service: [sas.endoflifecare@nhs.scot](mailto:sas.endoflifecare@nhs.scot)