

Injured children may not be getting best possible care

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Most injured children are not being treated at pediatric trauma centers, arguably the most appropriate location of care for young patients, according to a study to be presented Monday, May 2, at the Pediatric Academic Societies (PAS) annual meeting in Denver.

Regional trauma centers, especially those with pediatric qualifications, have resources and expertise to provide <u>emergency medical services</u> to young patients with severe and life-threatening injuries. Trauma centers are designated as Levels I through IV, with Level I centers capable of providing the highest level of care.

A recent study has shown that about one-quarter of U.S. children do not live within 60 minutes of a pediatric trauma center. In addition, it is likely that some children who are injured within a reasonable distance to a trauma center may not make it there for treatment.

The study authors, led by Sage R. Myers, MD, analyzed information from several national databases to identify which types of hospitals are caring for children, especially the youngest and most severely injured.

Results showed that about 73 percent of injured children in the United States were treated outside pediatric trauma centers. Even among the most severely injured patients, about one-quarter were not admitted to a higher level trauma center of any type for treatment. Furthermore, about 48 percent were not treated at a Level I pediatric trauma center, which is capable of delivering the highest level of expertise and care in the



shortest possible time.

"Injury is the leading cause of death for children and, therefore, it is important for <u>health care providers</u> and researchers to focus on ways to optimize treatment of these injuries to ensure the best possible outcomes," said Dr. Myers, a <u>pediatrician</u> in the Division of <u>Emergency</u> <u>Medicine</u> at Children's Hospital of Philadelphia. "Statewide trauma systems have been created to deliver appropriate care to those patients who require specialized services for injuries.

"Our findings suggest that we have not yet perfected our system's ability to send our most injured children to our most-equipped trauma centers. We need to figure out why it is that not all children are making it to where they need to be when they are seriously injured."

Next, researchers plan to compare outcomes for children treated at trauma centers vs. non-trauma centers, Dr. Myers said.

More information: To view the abstract, go to <u>www.abstracts2view.com/pas/viephp?nu=PAS11L1_2906</u>

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