

Pediatric training essential to improving outof-hospital emergency care for children

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A national survey of more than 750 emergency medical services providers conducted by researchers at Oregon Health & Science University identified airway management skills, personal anxiety and limited pediatric care proficiency among key factors that may contribute to pediatric safety events for children in out-of-hospital emergent care situations. The study, published online today in *The Journal of Pediatrics*, supports the American Academy of Pediatrics' recommendation for pediatric physician involvement in EMS training, medical oversight and policy development.

"Pediatric care merits specialized attention because of its unique challenges, including age-dependent anatomic differences, varied medication dosing and size-based equipment needs," said the study's lead researcher Jeanne-Marie Guise, M.D., M.P.H., professor of obstetrics and gynecology, and emergency medicine, in the OHSU School of Medicine. "Understanding and properly reacting to these factors, as well as providing training for all health care providers, is pivotal not only to preventing medical errors in pediatric cases, but also in strengthening health care delivery across the United States."

To conduct the research, Guise and colleagues used a structured group interaction process known as the Delphi method, to achieve unbiased consensus from participants representing 44 states, making it one of the largest nationwide surveys of its kind. Qualitative and quantitative analyses of responses were conducted to identify the factors perceived as most and least likely to lead to pediatric safety events.



From an initial set of 150 potential contributing factors, survey respondents also perceived lack of experience with pediatric equipment, as well as the interference of patient family members as potential causes of pediatric safety events. In addition, while surveyed EMS <u>providers</u> identified medication errors and team member communication among patient safety causes, these factors ranked much lower than what was seen in in-hospital settings, illustrating a viable difference between inhospital and out-of-hospital care scenarios.

"EMS is an essential contributor to health and health care delivery," said Beech Stephen Burns, M.D., head of pediatric <u>emergency medicine</u> at OHSU Doernbecher Children's Hospital, OHSU School of Medicine. "When considering that there are an estimated 800,000 to 1.6 million EMS transports of children each year in the U.S., the value of enhancing pediatric training becomes even more apparent to ensure the best outcome for our patients and their families."

Provided by Oregon Health & Science University

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