

# New study finds low transfer rates of pediatric burn patients in the US

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According to a new study from researchers in the Center for Pediatric Trauma Research and the Center for Injury Research and Policy at Nationwide Children's Hospital, nearly 127,000 kids in the U.S had burn injuries in 2012. Over half or 69,000 of these children had burns that are considered significant injuries by the American Burn Association (ABA). That's about 1 kid every 8 minutes with a significant burn, or 189 kids per day.

The ABA recommends that a child with a significant burn be referred to a burn center for evaluation and care. Burn centers must meet rigorous standards in terms of personnel expertise, facility resources, and [medical services](#). Also, they must treat sufficient numbers of patients to demonstrate that expertise. Using data from hospitals across the country, the research team looked at hospitals with low volumes of burn patients, hospitals who should refer their burn patients to a burn center.

The study, available today online and in the September issue of *Burns*, found that among children with significant burns in low volume hospitals, 90.3% of patients were treated and released from the ED, 4% were admitted to that same hospital without transfer, and 5.6% were transferred to another [hospital](#).

"While the majority of children treated without being transferred are likely receiving adequate burn care in the [emergency department](#) or possibly with outpatient follow-up care, ABA guidelines do not specify when outpatient follow-up is appropriate," said Krista Wheeler, the

study's senior author. "The ABA could lessen this room for error by clarifying their guidance."

Jonathan Groner, MD, co-author, pediatric burn surgeon, and medical director of the Center for Pediatric Trauma Research, explained that the ABA referral criteria for pediatric burn patients may be too broad and would possibly benefit from urgency specifications regarding care. While some of the pediatric burn patients receiving care in low volume hospitals would have improved clinical outcomes if they were transferred upon presentation to the emergency department, other patients may need only outpatient follow-up at a [burn](#) center.

Data for this study came from the 2012 Nationwide Emergency Department Sample (NEDS), the largest all-payer emergency department database in the United States.

Provided by Nationwide Children's Hospital

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