



Indiana Emergency Medical Services for

Children Newsletter

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Pediatric Trauma Continuing Education Credits

Targeted Issue Grantee Jane Brice, MD, MPH along with her medical team of the University of North Carolina, Chapel Hill has developed pediatric trauma courses designed to offer emergency medical services (EMS) providers an overview of pediatric trauma. Pediatric trauma is the leading cause of injury and death in American children. Courses are additionally available for 911 telecommunicators to learn about the scope of pediatric trauma, how to quickly deploy EMS resources, ways in which to assist EMS response by collecting valuable information, and ways in which to work with dispatched services to minimize response and scene times en route to definitive care. Courses are available for out of state EMS providers at: <http://www.aheconnect.com>. These continuing education courses are available for \$5.00.

NASN Develops Video Education Series on Anaphylaxis

The National Association of School Nurses (NASN) developed video education regarding school nurses playing a vital role in helping to avoid and manage an anaphylactic reaction in school children. This video series is available at: <http://www.nasn.org/ToolsResources>. Additional material is available regarding examples of successful partnership between school nurses and parents helping to create a safer learning environment for students with severe allergies. This video education is available at: <http://www.nasn.org/ToolsResources>.

Developing Measures of Quality for the ED Management of Pediatric Suicide-Related Behaviors

A recent article, published in Pediatric Emergency Care, sought to identify quality performance measures for the pediatric emergency department (ED), in treating pediatric suicide-related behavior. ED physicians determined the following quality of care factors: time until medical assessment; direct or post-assessment referral to a crisis intervention professional; type of mental health, psychosocial, or risk assessment requested; psychiatric or any other inpatient admission; treatment plan post-discharge; time until first follow-up appointment; follow-up obtained; and follow-up type to have the most relevance to patient care. Further research is needed to link performance measures to patient outcomes.

Available at: <http://www.ncbi.nlm.nih.gov>

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