

PEDIATRIC EMERGENCY CARE FACILITY RECOGNITION

Emergency Department with Level IV Capabilities

Application Instructions

Before you begin the application, please take a moment to carefully review the Pediatric Emergency Care Facility Standards document and all of the requirements listed within this document and application form. Please note that the term "pediatric" throughout this document refers to all children age 14 and younger.

1. Please complete the attached application form
 - a. Section I - Signature page
 - i. Please obtain original ink signatures as detailed within this page
 - b. Section II - Checklist section
 - i. This section lists required equipment, supplies, personnel and policies needed to be recognized as a Level IV Pediatric Emergency Care Facility
 1. Please use the tables to indicate if these are present within your facility
 - ii. Supporting documentation is required when there is a checkmark in the column labeled "DOC"
 1. This supporting documentation should be submitted as detailed below.
2. Place the completed application form and all supporting documentation into a bookmarked pdf for submission. The bookmarks within the pdf should follow this order:
 - a. Completed application form
 - i. Original ink-signed signature page
 - ii. Checklist section with Y/N column filled out indicating presence/absence of equipment, supplies, personnel, policies
 - b. Supporting documentation
 - i. Requested documents as indicated by the checkmark in the "DOC" column of the application form
 1. These should be submitted in the same order as listed in the application form and should be clearly labeled using the same terminology as listed in the application form
 - ii. Any other supporting documentation that the facility would like to submit for review. For example:
 1. Highlights since last application (if applicable)
 2. Elements not included within the application that the facility would like to showcase
3. Submit the completed application form and all supporting documentation as one pdf file to:
 - a. Crystal Mallory, EMSC Coordinator – Crystal.Mallory@delaware.gov

For questions regarding the application process, specific criteria items, and/or supporting documentation, please contact the Delaware Emergency Medical Services for Children (EMSC) Program in the Office of EMS at 302-223-1353.

Review of Applications

1. Applications will be reviewed by the Office of EMS to assure all required documents are included.
2. Feedback on the application will be provided in writing prior to scheduling a site visit.
3. The facility's recognition status will be determined after review of the submitted application form/supporting documents and completion of the site visit.

Recognition as a Pediatric Emergency Care Facility

1. Upon achieving recognition as a Level IV Pediatric Emergency Care Facility in the State of Delaware, an official letter from the Director of the Division of Public Health and a Certificate of Recognition will be issued to the facility.
2. If the application is incomplete, or if pediatric emergency care standards are not met to the level required for recognition, a letter will be sent to the facility with deficiencies identified.
3. Facilities may appeal the denial of recognition by submitting a written request to the Director of EMS in the Office of EMS.
 - a. A facility may appeal the denial of recognition within 90 days of receiving the denial letter
 - b. After the 90-day time frame, a new application is required to apply for Recognition
4. A facility may continue to submit applications multiple times until a Certificate of Recognition is issued by the Division of Public Health.
5. Recognition may be renewed by submitting a new application every three years.
6. Facilities may not be able to meet a Pediatric Emergency Care Facility requirement due to extenuating circumstances. As a result, Withdrawal of Recognition status may occur. In this situation, the hospital will notify the Delaware Division of Public Health's Director of EMS by phone (302-223-1350) and through written notice to the attention of State EMS Director, Pediatric Emergency Care Facility Recognition Program at least 60 days prior to withdrawal, if possible. In the notification please include information on the rationale for the decision.

**PEDIATRIC EMERGENCY CARE FACILITY - LEVEL IV
SECTION I - APPLICATION FORM – Signature Page**

Facility Name		
Facility Address		
<p align="center">The above-named facility certifies that each requirement in this Level IV Pediatric Emergency Care Facility request for Recognition is met and will be operational during the three-year Pediatric Emergency Care Facility Recognition period to the best of the facility's ability.</p>		
Chief Executive Officer	Typed Name:	
	Signature:	Date:
Medical Director of Emergency Services	Typed Name:	
	Signature:	Date:
Nurse Manager or Director of Emergency Services	Typed Name:	
	Signature:	Date:
Pediatric Nurse Coordinator	Name:	
	Phone Number:	
	E-mail:	
	Signature:	Date:
Pediatric Physician Coordinator	Name:	
	Phone Number:	
	E-mail:	
	Signature:	Date:

PEDIATRIC EMERGENCY CARE FACILITY - LEVEL IV
SECTION II - APPLICATION FORM – Checklist

E = Essential D = Desired NR = Not Required ✓ = Documentation Required

* = available in <1 hour

PEDIATRIC EMERGENCY CARE FACILITY – LEVEL IV				
1. PERSONNEL	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Physician with pediatric emergency care experience on duty 24/7	E	✓		
RN with pediatric training	E	✓		
Respiratory Therapist	NR			
Trauma Coordinator	NR			
Nurse Educator	NR			
Trauma team* (Available in less than 1 hour)	NR			
Pediatric Physician Coordinator	E	✓		
Pediatric Nurse Coordinator	E	✓		
Social Services	NR			
Child Abuse support services	D			
Child life services	NR			
On-line medical control for pre-hospital	E			
Respiratory care	D			
Pediatric Critical Care Committee	NR			
Pediatric Trauma Committee	NR			

Special Consultants (*Available in less than 1 hour)¹	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Pediatrician* available in < 1 hour	D			
Radiologist	D			
Anesthesiologist* available in < 1 hour	D			
Cardiologist	NR			
Critical Care Physician (on site)	NR			
Nephrologist	NR			
Hematologist/oncologist	NR			
Endocrinologist	NR			
Gastroenterologist	NR			
Neurologist	NR			
Pulmonologist	NR			
Psychiatrist/Psychologist	NR			
Infectious Disease Physician	NR			

Surgical Specialists (*Available in less than 1 hour)	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Anesthesia and surgical suite promptly available	NR			
Secondary surgeon	D			
Pediatric surgeon*	NR			
Neurosurgeon	NR			
Orthopedic surgeon	NR			
Otolaryngologist	NR			
Urologist	NR			
Plastic surgeon	NR			
Oral/maxillofacial surgeon	NR			
Gynecologist	NR			
Microvascular surgeon (transfer agreement if not available)	NR			
Hand surgeon (transfer agreement if not available)	NR			
Ophthalmologist	NR			
Cardiac surgeon ²	NR			
Pathologist	NR			
Pediatric Dentist	NR			
Intensivist onsite	NR			

Rehabilitation Program	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Physical Therapy	NR			
Physical Medicine/Rehabilitation Physician	NR			
Occupational Therapy	NR			
Speech Therapy	NR			
Special Education	NR			

2. POLICIES, PROCEDURES, AND PROTOCOLS	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Illness and injury triage	E	✓		
Pediatric patient assessment and reassessment	E	✓		
Documentation of pediatric vital signs	E	✓		
Immunization Assessment	E	✓		
Pediatric Pain Assessment and Management	E	✓		
Sedation and Analgesia for Procedures, including medical imaging	E	✓		
Informed consent for procedures, treatments (when parent/guardian is not present)	E	✓		
Social and mental health evaluations	D	✓		
Physical and/or chemical restraint of patients	E	✓		
Child maltreatment and sexual assault	E	✓		
Death of the Child in the ED policy	E	✓		
Do-not-resuscitate orders	E	✓		
Family centered care policies, including but not limited to:		✓		
▪ Involving families in patient care decision making and in medication safety processes	E	✓		
▪ Consideration of family presence during all aspects of emergency care, including resuscitation	E	✓		
▪ Education of the patient, family, and regular caregivers	E	✓		
▪ Discharge planning and instruction	E	✓		
▪ Identifying bereavement counseling resources	E	✓		
Communication system with the patient's medical home or primary health care provider	E	✓		
Medical imaging policies that address appropriate dosing for studies consistent with as low as reasonably achievable (ALARA) principles	E	✓		
All-hazard disaster preparedness plan that includes pediatric specific components	E	✓		

3. EQUIPMENT	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
EMS communication equipment	E			
Organized emergency cart/bag	E			
Printed or electronically available drug doses/length-based resuscitation tape	E			
Scale (with weight in kilograms)	E			
Resuscitation board	E			
Warming device for infants	E			
Warming device for children	E			
Portable radiography	E			
Slit lamp	E			
Neonatal/infant radiant warmer	NR			
Phototherapy equipment	NR			
Pacemaker capability internal	NR			
Pacemaker capability external	E			
Thermal control for patient and/or resuscitation room	E			
Age appropriate pain scale assessment tools	E			
Monitoring Equipment	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Electrocardiography monitor/defibrillator with pediatric paddles or pads and hard copy capabilities	E			
Cardiopulmonary monitor with pediatric and hard copy capability, visible/audible alarms, routine testing and maintenance	E			
Pulse oximeter (neonatal, adult, and pediatric probes)	E			
Blood pressure cuffs (neonate, infant, child, adult, and thigh)	E			
Rectal thermometer probe (28 degrees – 42 degrees, Celsius)	E			
Otoscope, ophthalmoscope, stethoscope	E			
Doppler ultrasound device	E			
Non-invasive blood pressure monitoring (infant, child, and adult)	E			
Continuous end-tidal CO ₂ monitor	D			
End-tidal CO ₂ detector	E			
Monitor for central venous pressure, arterial lines, temperature	NR			
Monitor for pulmonary arterial pressure and intracranial pressure	NR			
Transportable monitor	E			

Airway and ventilation equipment and supplies	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Bag-valve-mask device (infant size: 450 mL; adult size 1000 mL) with oxygen reservoir. Self-inflating	E			
Neonatal, infant, child, and adult masks to fit bag mask device	E			
Oropharyngeal airways (sizes 0 – 5) 1 of each	E			
Oxygen delivery device with flow meter	E			
Clear oxygen masks (standard and non-rebreathing) for neonatal, infant, child, and adult	E			
Nasal cannula (infant, child, and adult)	E			
Suction devices – catheters (6 – 14 fr) and yankauer-tip/suction equipment	E			
Nasopharyngeal airways (infant, child, and adult)	E			
Nasogastric tubes (sizes 6 – 18 fr)	E			
Laryngoscope handles (pediatric and adult)	E			
Laryngoscope blades:				
▪ Curved 2, 3	E			
▪ Straight or Miller 0, 1, 2, and 3	E			
Endotracheal tubes:				
▪ Uncuffed (2.5 – 3.0)	E			
▪ Cuffed (3.5 – 8.0)	E			
Stylets for endotracheal tubes (infant, child, and adult)	E			
Feeding tubes (5fr and 8fr)	D			
Lubricant (water soluble)	E			
Magill forceps (pediatric and adult)	E			
Peak flow meters	E			
Inhalation therapy equipment - Nebulizer	E			
Tracheostomy tubes (2.5, 3.0, 3.5, 4.0, 4.5, 5.0, 5.5 mm)	E			
Chest tubes:				
▪ Infant (10fr – 12fr)	E			
▪ Child (16fr – 24fr)	E			
▪ Adult (28fr – 40fr)	E			
Oxygen blender	NR			
Pediatric endoscopes and bronchoscopes available	NR			
Respired gas humidifiers and bronchoscopes available	NR			
Pediatric ventilators	NR			
Difficult airway kit, alternate airway device	E			
Laryngeal Mask Airways (size 1, 1.5, 2, 2.5, 3, 4, 5)	E			

Vascular Access Equipment and Supplies	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Arm boards (infant, child, and adult sizes)	E			
Butterfly needles (19 – 25 gauge)	E			
Catheter for intravenous lines (14 -24 gauge)	E			
Needles (18 – 27 gauge)	E			
Intraosseous (IO) needles or device (pediatric and adult sizes)	E			
IV pressure bags for IO infusions	E			
Umbilical vessel catheters (3.5fr and 5.0fr) and cannulation tray	D			
IV administration sets with calibrated chambers and extension tubing	E			
Extension tubing, stopcocks, T-connectors	E			
Infusion device, able to regulate rate and volume of solution	E			
IV Solutions: Normal saline, dextrose 5%, and dextrose 10%	E			
Central venous access kit, (4.0 – 7.0fr)	D			
IV fluid/blood warmer	D			
Blood gas kits	E			
Rapid infuser	D			

Specialized Pediatric Trays	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Lumbar puncture kit including:				
▪ Neonatal (22 gauge 1 ½ inch)	E			
▪ Pediatric (22 gauge 2 ½ inch)	E			
▪ Adult (18 – 22 gauge 3 ½ inch)	E			
Urinary catheterization kits	E			
Foley catheters (sizes 6 – 22 fr)	D			
Resuscitative thoracotomy tray	NR			
Tracheostomy tray	D			
Needle cricothyrotomy set	D			
Intracranial pressure monitor tray	NR			
Newborn delivery kit (including umbilical clamps, scissors, bulb syringe, towel, and blanket)	E			
Shunt tap kit	NR			
Compartment pressure testing equipment	NR			
Incision and Drainage (I & D) tray	E			
Epistaxis tray or supplies and equipment	E			
Dental tray or supplies and equipment	D			
Plastics tray or supplies and equipment	D			
Thoracostomy tray	D			

Fracture Management Devices	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Spinal stabilization equipment for pediatric and adult patients	E			
Spine board (child and adult)	E			
Extremity splints	E			
Femur splints (child and adult)	E			

Medication Classes	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Analgesics	E			
Antibiotics/antimicrobial agents	E			
Anticonvulsants	E			
Antidotes and activated charcoal	D			
Antiemetic agents	E			
Antihypertensive agents	E			
Antipyretics	E			
Bronchodilators	E			
Corticosteroids	E			
All current PALS medications	E			
Rapid sequence intubation medications	E			
Sedatives and anti-anxiety medications	E			
Inotropic agents	E			
Vasopressor agents	E			
Vaccines	E			

4. FACILITIES				
Emergency Department	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
One identified area with capacity and equipment for pediatric resuscitation	D			
Access to two or more carts or bags with capacity and equipment to resuscitate medical/surgical and trauma pediatric patients	E			
Access to helicopter landing site within stretcher transport distance	D			

Support services	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Pediatric inpatient care beds	N/A			
Pediatric intensive care unit	N/A			

Operating Room	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Operating room team available 24/7	N/A			
One RN physically present in OR 24/7	N/A			
Second operating room available and staffed (within 30 minutes)	N/A			
Thermal control equipment	N/A			
X-ray capability (including C-arm)	N/A			
Endoscopes (all varieties)	N/A			
Craniotomy equipment (including ICP monitoring equipment)	N/A			
Invasive and non-invasive monitoring equipment	N/A			
Ventilation equipment	N/A			
Pediatric airway control equipment	N/A			
Defibrillator, monitor, (including internal and external paddles)	N/A			
Laparotomy tray	N/A			
Thoracotomy tray and chest retractors (of appropriate size)	N/A			
Synthetic grafts (all sizes)	N/A			
Spinal and neck immobilization equipment - surgical halo	N/A			
Fracture table with pediatric capability	N/A			
Auto-transfusion equipment with pediatric capability	N/A			
Pediatric drug dosage reference	N/A			
Tracheostomy tubes (neonatal through adolescent)	N/A			
Recovery Room	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
RNs and other essential personnel on call 24 hours/day	N/A			
Staff competent in the post-anesthesia care of the pediatric patient	N/A			
Airway control equipment	N/A			
Thermal control equipment to ambient room temperature	N/A			

Radiant warmer	N/A			
Blood warmer	N/A			
Resuscitation cart	N/A			
Immediate access to sterile surgical supplies for emergency	N/A			
Pediatric drug dosage reference	N/A			
(E* If surgery performed on pediatric patients)				

Laboratory services	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Hematology	E			
Chemistry	E			
Drug levels/toxicology	D			
Microbiology	D			
Blood bank	D			
Arterial blood gases	E			
Bedside blood glucose monitoring/testing	E			
Bedside blood gas testing	D			

Medical Imaging	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Radiology (24 hours per day)	E			
Computed tomography scan (24 hours per day)	D			
Ultrasound (available 24 hours per day)	D			
Magnetic resonance imaging (on call 24 hours per day)	NR			
Nuclear medicine (on call 24 hours per day)	NR			
Fluoroscopy/contrast studies (on call 24 hours per day)	NR			
Access to Angiography (on call 24 hours per day)	NR			

Other	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Pediatric echocardiography	NR			
Pediatric cardiac catheterization	NR			
Electroencephalography	NR			
Access to:				
▪ Poison Control Center	E			
▪ Hemodialysis capability/transfer agreement	D			
▪ Rehabilitation medicine/transfer agreement	N/A			
Acute spinal cord injury management capability or transfer agreement	E			

5. ACCESS, TRIAGE, TRANSFER, AND TRANSPORT	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Pre-hospital Care Report receiving process	E	✓		
Transfer agreements for:				
▪ In-patient pediatric care if not provided within the institution	E	✓		
▪ ICU pediatric care	E	✓		
▪ Major trauma care	E	✓		
▪ Burn care	E	✓		
▪ Hemodialysis	E	✓		
▪ Spinal injury care	E	✓		
▪ Rehabilitation care	E	✓		
Hyperbaric oxygen chamber policy and procedure for transfer agreement	E			
Accept all critically ill patients from lower-level facilities within the state	N/A			
Access to a pediatric transport team	E	✓		

6. EDUCATION, TRAINING RESEARCH, AND QUALITY ASSESSMENT AND IMPROVEMENT				
Education and Training	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Public education, injury prevention	D			
Assure staff training in resuscitation and stabilization (or a similar course approved by the Director of Public Health and/or by the EMSC Advisory Committee)	E	✓		
Current CPR certification for all nurses and respiratory therapists	E	✓		
Annual Pediatric Mock Codes	E	✓		
Ongoing pediatric continuing education for physicians, nurses and respiratory therapists from the ED	E	✓		
Offer educational resources for training all levels of health professionals within the state	NR			

Research	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Support state EMSC and Level I Care Center research efforts and data collection	E			
Participate in and/or maintain trauma registry	D			
Participate in regional pediatric critical care education	D			

Quality Assessment and Improvement	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Structured PI program with indicators and periodic review	E	✓		
Participate in regional quality review by EMSC and/or local EMS agency	E			

7. ADMINISTRATIVE SUPPORT AND HOSPITAL COMMITMENT	LEVEL IV	DOC	HAVE Y/N	REVIEWER INITIALS
Make available clinical resources for training pre-hospital personnel	NR			
Provide emergency care and stabilization for all pediatric patients	E			
Support networking education/training for health care professionals	E			
Participate in pediatric emergency care network	E			
Assure availability of:				
▪ Social services	D			
▪ Child abuse support services	D			
▪ Child life services	NR			
▪ On-line medical control for pre-hospital	D			
▪ Respiratory care	E			
▪ Pediatric Critical Care Committee	NR			
▪ Pediatric Trauma Committee	NR			
▪ Child development services	NR			

Initials	Printed Name

¹ All Medical specialists should have pediatric expertise as evidenced by board certification, fellowship training or demonstrated commitment and continuing medical education in their subspecialty area.

² Or substituted by a current signed transfer agreement with an institution with cardiothoracic surgery and cardiopulmonary bypass capability.