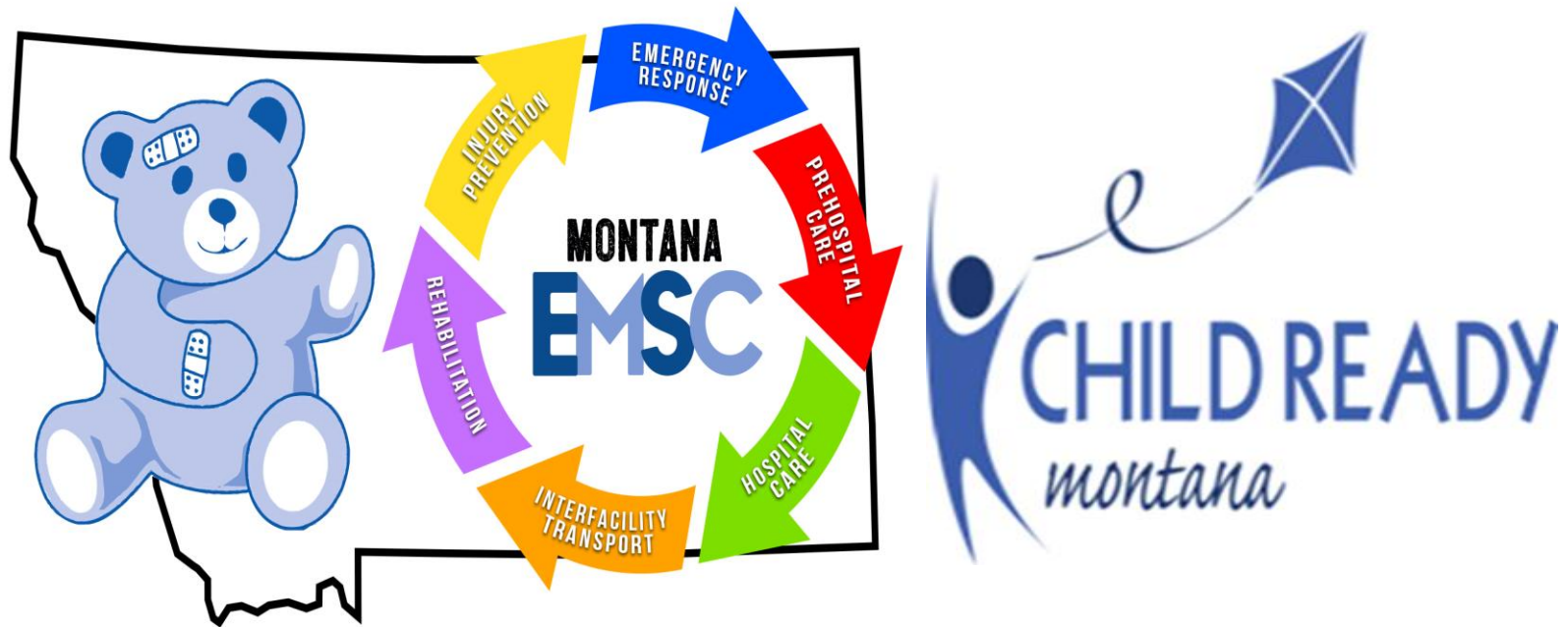


# EMERGENCY MEDICAL SERVICES FOR CHILDREN/CHILD READY MT (SPROC)





# **2013-2019 IN REVIEW**

## **EQUIPMENT EDUCATION**

**PEDIATRIC SCENARIO GUIDEBOOK  
MANIKIN CHECKOUT  
RECOGNITION CRITERIA  
SAFE TRANSPORT OF KIDS  
CULTURAL HUMILITY**



# 2015 & 2017 & 2019 PEDIATRIC SUPPLIES DISTRIBUTIONS





# —Pediatric education







- Emergency Nursing Pediatric Course (ENPC)

EMERGENCY  
PEDIATRIC  
CARE (EPC)



Advancing the EMS profession

# *PEDIA TRIC*

## SCENARIO GUIDEBOOK





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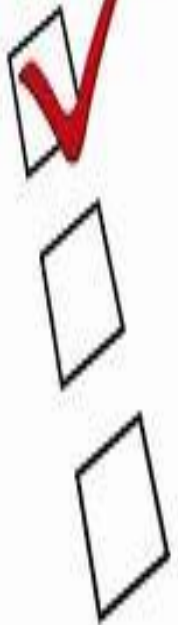
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This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under the Emergency Medical Services for Children Grants. This information or content and conclusions are those of the authors and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS, or the U.S. Government.

# CHECKLIST



DEVELOPED SCENARIO **CHECKLISTS**

HELPS ENSURE **ESSENTIAL**

COMPONENTS **ARE NOT MISSED** IN

EACH SCENARIO



# MANIKIN TYPE(S)-- CHECK THE MANIKIN TYPE(S) NEEDED:

\_\_\_\_\_OB pelvic manikin with twins

\_\_\_\_\_Pediatric IO

\_\_\_\_\_Pediatric Airway

\_\_\_\_\_Pediatric Nick special needs baby comes with scenario booklet

\_\_\_\_\_AED trainer with pediatric pads

\_\_\_\_\_Pediatric manikin ALS trainer comes with scenario booklet

\_\_\_\_\_High def manikin available for mock codes (schedule with Jason Mahoney with 373 Consulting

jason@373consulting.com)



Advanced Childbirth Simulator



# PEDIATRIC AMBULANCE INSPECTIONS





# **PEDIATRIC PREHOSPITAL VOLUNTARY RECOGNITION**

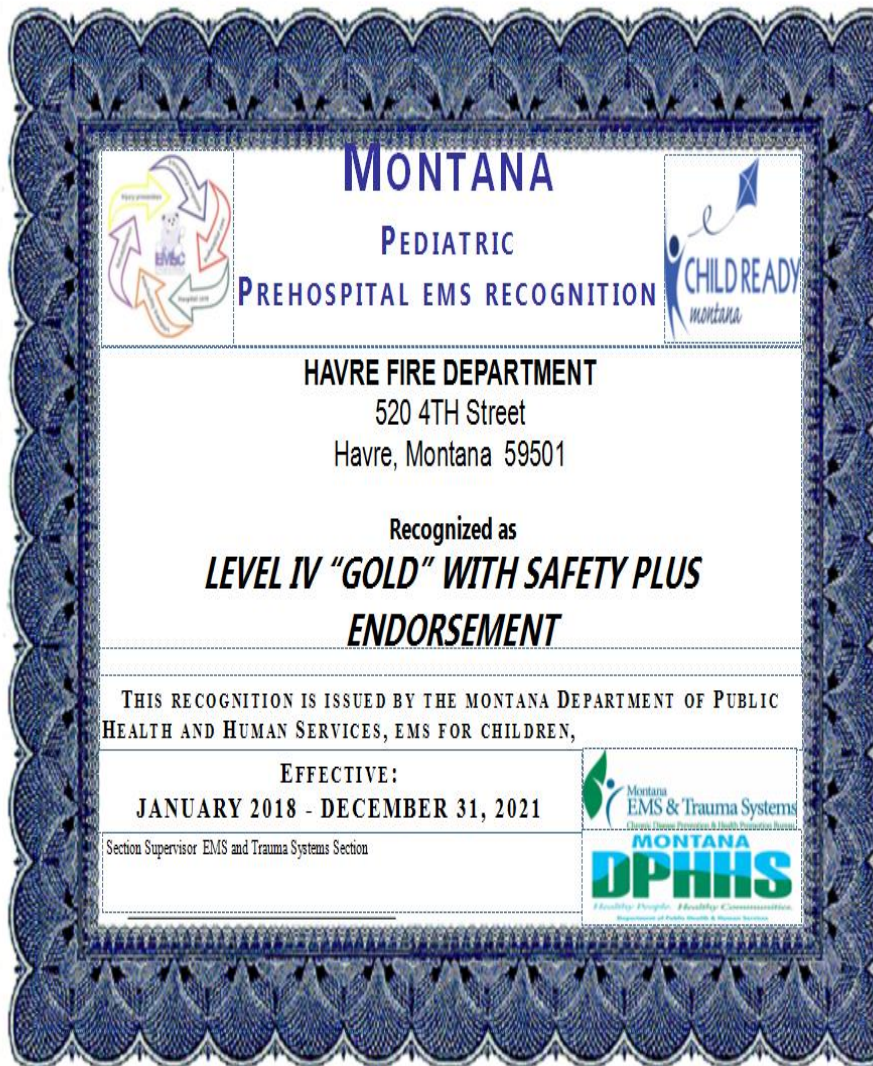
**Level I – Basic (BRONZE)– Equipment, Pediatric safe transport device and Assessments**

**Level II –(SILVER) – Pediatric Education & PECC**

**Level III- (PLATINUM) Community Outreach**

**Level IV- (GOLD) Child Passenger Safety Tech \*\*\***  
**HIGHEST LEVEL**

**SAFETY PLUS - Background checks**



## DECALS FOR AMBULANCES



# MONTANA'S PEDIATRIC FACILITY RECOGNITION CRITERIA

specific criteria for **personnel**, **POLICIES**, **training**,  
**equipment**, care team

that support **optimal care** for ill or injured  
infants, children, and adolescents.

- **PEDIATRIC PREPARED FACILITY –**
- **PEDIATRIC CAPABLE FACILITY –**



# RENEWALS

## FORMAL RECOGNITION



MONTANA  
EMERGENCY MEDICAL SERVICES FOR  
CHILDREN

*Hospital*  
PEDIATRIC DISASTER PREPAREDNESS  
TOOLKIT



- ADDED:
  - HOSPITAL PEDIATRIC  
DISASTER CHECKLIST

# CULTURAL HUMILITY ASSESSMENT

- **Competency** –facility/staff/ providers
- Determine **GAPS**
- DEVELOP **Strategies** --Culturally competency
- Culturally Appropriate **Services**

# CULTURAL LIAISONS



**CDR LeeAnn Bruised Head, MPH (Crow-Kainai)**



**Lanette Perkins (Crow).**



**Lisa Whitford (Chippewa Cree)**



**Kassie Runsabove (Whiteclay from Fort Belknap)**



**John Wallace** - John is currently the Cultural Liaison Supervisor





# **Montana EMERGENCY MEDICAL SERVICES FOR CHILDREN/CHILD READY Culture of Care Toolkit**



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# SAFE TRANSPORT OF KIDS



Pedi Mate Plus, SKU 0314115

The Pedi Mate Pediatric Restraint System quickly adapts any ambulance cot for the safe transport of children ranging in size from 10-100 lb (4.5-45.4 kg).



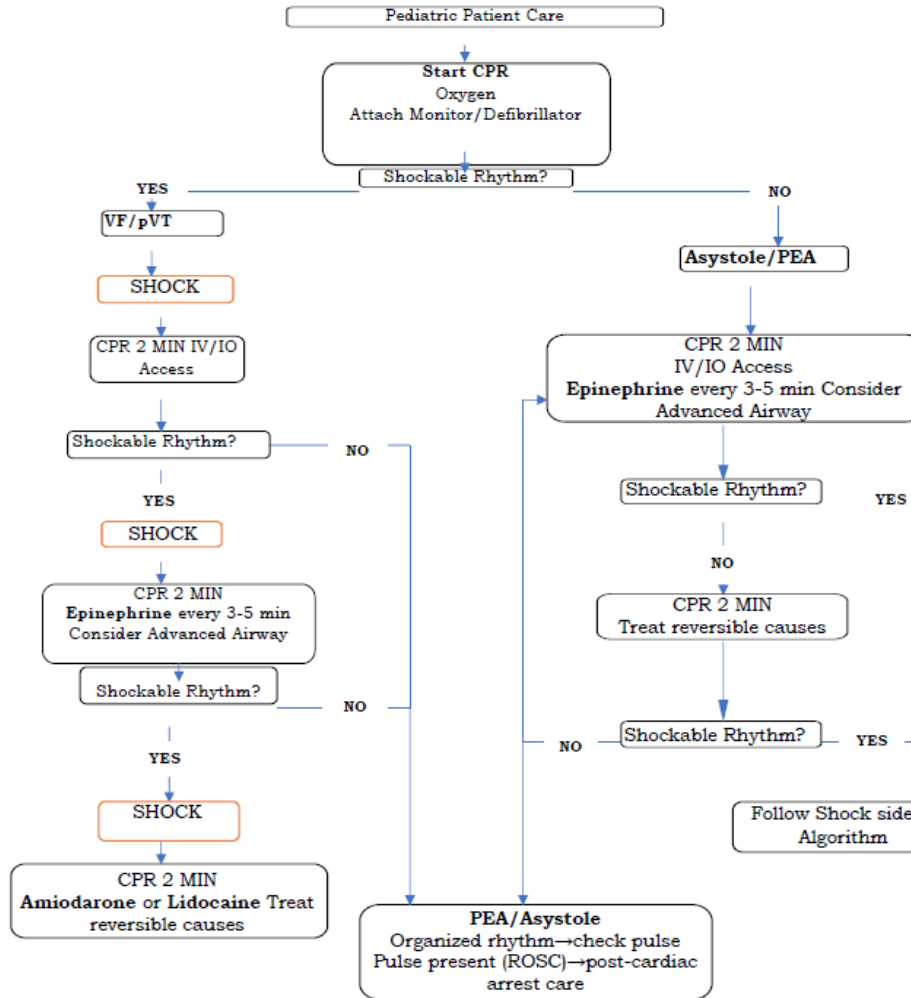
ROLL TO ZOOM IN





# Pediatric Cardiac Arrest

**\*\*Always follow current AHA PALS guidelines\*\***



# Pediatric Cardiac Arrest

**\*\*Always follow current AHA PALS guidelines\*\***

## History:

- Medical History
- Foreign Body?
- Respiratory Distress or Arrest
- Toxic/Poison Exposure?
- Congenital Disease
- Medication (maternal or infant)

## Differential:

- Respiratory effort
- Foreign body
- Hypovolemia (dehydration)
- Hypoxia
- Hydrogen ion (acidosis)
- Hypo-/hyperkalemia
- Hypoglycemia
- Hypothermia
- Toxins
- Tamponade, cardiac
- Tension pneumothorax
- Thrombosis (coronary or pulmonary)
- Trauma (hypovolemia, increased ICP)

## NOTE:

- All skills and procedures must be done within the ECP's licensure level and/or endorsement.
- CPR Quality – Push hard and fast ( $\geq 1/3$  of anteroposterior diameter of chest & 100-120/min). Allow for complete chest recoil.
- Avoid excessive ventilation
- Subsequent shocks are at  $\geq 4$  J/kg, maximum 10 J/kg or adult dose.
- Epinephrine IO/IV dose: 0.01 mg/kg of the 0.1 mg/mL concentration. Repeat every 3-5 min
- Amiodarone IO/IV dose: 5 mg/kg bolus during cardiac arrest. May repeat up to 2 times for refractory VF/pulseless VT.
- Lidocaine IO/IV dose: Initial: 1 mg/kg loading dose. Maintenance: 20-50 mcg/kg per minute infusion.
- The formula for estimation of proper endotracheal tube size for children 2 to 10 years of age, based on the child's age:
  - Uncuffed ET tube size = (age in years/4) + 4
  - Cuffed ET tube size = (age in years/4) + 3.5
    - Follow manufactures recommendation for appropriate cuff inflation.

Weight	3 kg	4 kg	5 kg	6-7 kg	8-9 kg	10-11 kg	12-14 kg	15-18 kg	19-23 kg	24-29 kg	30-35 kg
Joules 1 <sup>st</sup> Shock	6 J	8 J	10 J	13 J	17 J	30 J	26 J	33 J	40 J	56 J	66 J
Joules 2 <sup>nd</sup> Shock	12 J	16 J	20 J	26 J	33 J	40 J	52 J	66 J	80 J	106 J	130 J
Epinephrine 1:10,000	0.03 mg	0.04 mg	0.05 mg	0.065 mg	0.085 mg	0.1 mg	0.13 mg	0.17 mg	0.21 mg	0.27 mg	0.33 mg
Amiodarone	15 mg	20 mg	25 mg	32 mg	42 mg	50 mg	65 mg	80 mg	105 mg	130 mg	165 mg
Lidocaine	3 mg	4 mg	5 mg	6.5 mg	8.5 mg	10 mg	13 mg	17 mg	20 mg	27 mg	33 mg

# PEDIATRIC DISASTER EXERCISES



The Tragic School Bus 2  
Virtual Tabletop Exercise Series

SIXTEEN SESSIONS -- April 25 -- May 30, 2019



## Call for Abstracts: 2019 National Healthcare Coalition Preparedness Conference

You can access your Abstract at any time by [clicking here](#).

### Abstract Type:

Oral Presentation

### Abstract Status:

Complete

### Abstract ID:

689477

### Abstract Title:

*EMS PECC's: Tempt, Train or Shame Your Way to Success!*

### Presenter(s)

1. [Jason P. Mahoney, AAS, NRP, CEDP, CHCM, CHEC III, CHEP, CHSP, NHDP-BC](#) (Role: Primary Presenter)

## Presentation Description and Categories



# SUSTAINABILITY

- Development is DONE!

Have processes In place!

NO, WE ARE NOT THERE YET!

- Continue to:
  - Formally recognize hospitals & MT EMS Agencies
  - Provide pediatric education (funding\$\$\$\$!)
  - Seek additional funding (GRANTS)
  - Collaborate with Stakeholders!
  - Work to have pediatric education & Other Pediatric requirements in State Administrative Rules/Protocols!



# DIVE A LITTLE DEEPER?

contact me for more information



© Seth Casteel

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