

Adopting pediatric readiness standards found to improve survival in hospital emergency departments

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Emergency departments that have the highest levels of coordination of health care, personnel, procedures and medical equipment needed to



care for ill and injured children have far higher rates of survival than hospitals with low readiness, according to a new study.

Researchers found that more than 1,400 <u>children</u>'s deaths may have been prevented if hospital emergency departments had adopted national pediatric care readiness standards as laid out by the National Pediatric Readiness Project. The six-year study of 983 emergency departments in 11 states followed nearly 800,000 children.

The National Pediatric Readiness Project was established to ensure that all emergency departments have the coordination of health care, personnel, procedures and <u>medical equipment</u> needed to care for ill and injured children. According to the project's checklist, standards include specifications for physician and nurse certification, patient assessment, triage, medication administration, and trauma resuscitation and stabilization.

In the current study, researchers sought to determine if adopting the readiness standards would lower the death rate among children admitted to emergency departments for serious injury or illness. They ranked the emergency departments into four segments (quartiles) according to the extent they had implemented the readiness standards.

Compared to children cared for in low-readiness departments, children with injuries cared for in high-readiness departments had a 60% lower chance of dying in the hospital; and children with medical illness had a 76% lower chance of dying while they were in the hospital. Similarly, among roughly 545,000 children in six states, injured children in the highest quartile had a 41% lower chance of dying within a year and children with medical issues had a 66% lower chance of dying within a year, compared to children cared for in hospitals in the lowest readiness quartile.



The study was conducted by Craig D. Newgard, M.D., of Oregon Health & Science University, Portland, and colleagues. It appears in *JAMA Network Open*.

More information: Craig D. Newgard et al, Emergency DepartmentPediatricReadiness and Short-term and Long-termMortality Among ChildrenReceiving Emergency Care, *JAMA Network Open* (2023). DOI: 10.1001/jamanetworkopen.2022.50941

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