

Pediatric Emergencies: The Other Patients

How to make calls go smoothly by involving parents.

By Richard Huff



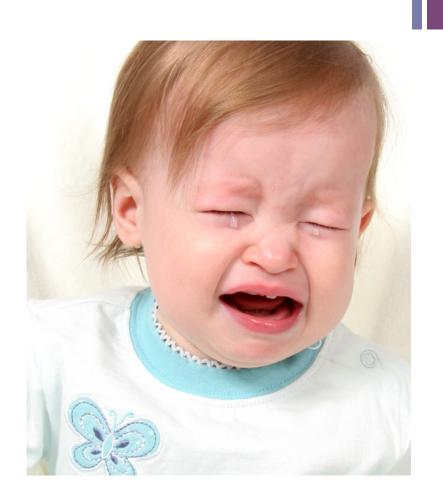
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- NREMT-B, NJ EMT-B
- Director At Large, National Volunteer Fire Council/ EMS/R
- New Jersey State First Aid Council
- New Jersey EMS Task Force
- Journalist
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Pediatric calls gone wrong?

- ■Bad calls?
- ■What did I do wrong?
 - What might have I done better?





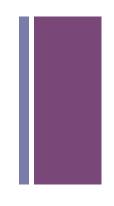
This Class

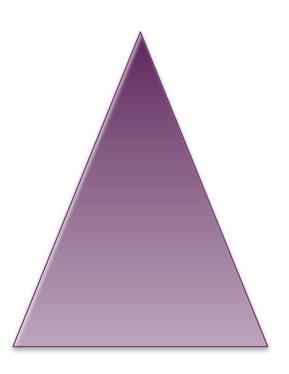
- The dynamics of pediatric calls.
- What we know, what we can change.
- Where things go wrong.
- How making parents part of the process is important.

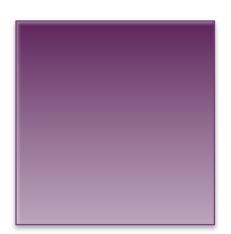




It's also about.....



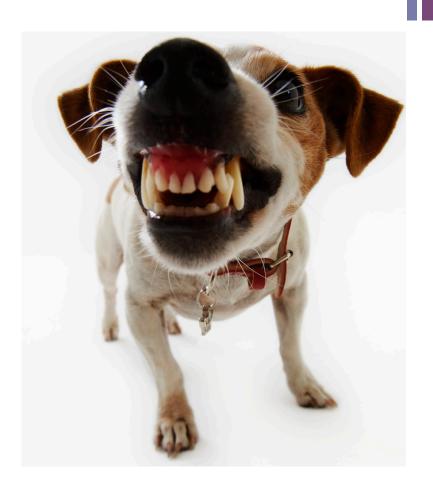






The call that got us here

- ■A father
- ■A son
- ■A dog





The call that got us here...

- ■How do you think the kid reacted?
- ■How about the parent?
- ■How about us?
- ■We'll come back to this later.



Some perspective

■In 2010, there were an estimated 129.8 million visits to emergency departments (EDs) of nonfederal short-stay and general hospitals in the United States. - CDC

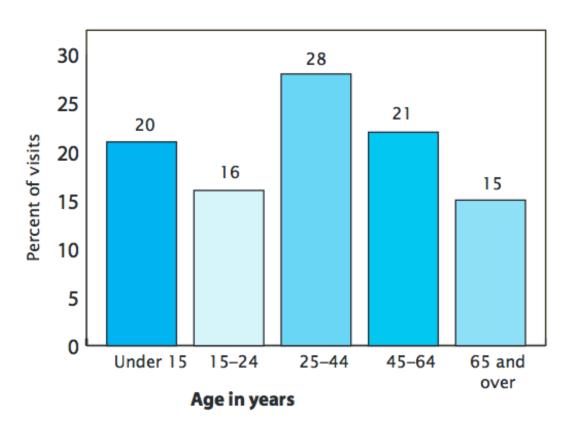


Pediatric volume

■In 2009–2010, there were an estimated 33.7 million annual average ED visits by persons aged 18 years and under in the United States, and 11.9 million (35.3%) of these visits were injury related. - CDC

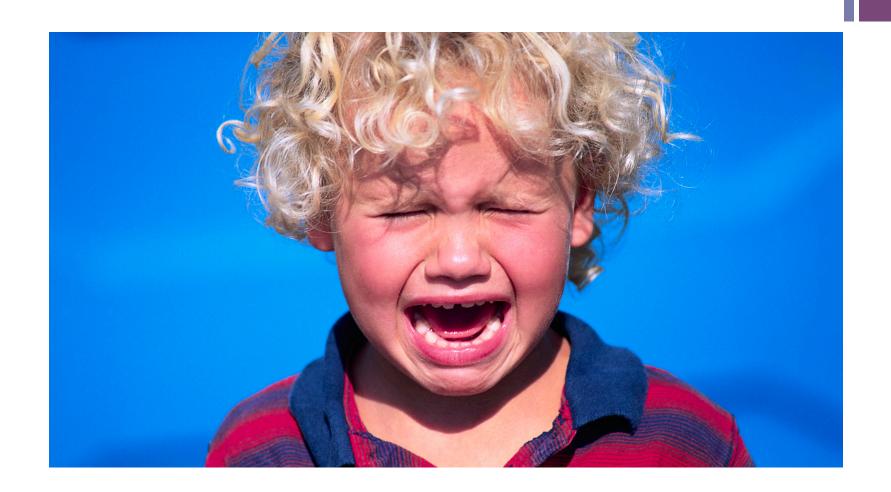








What does this mean?

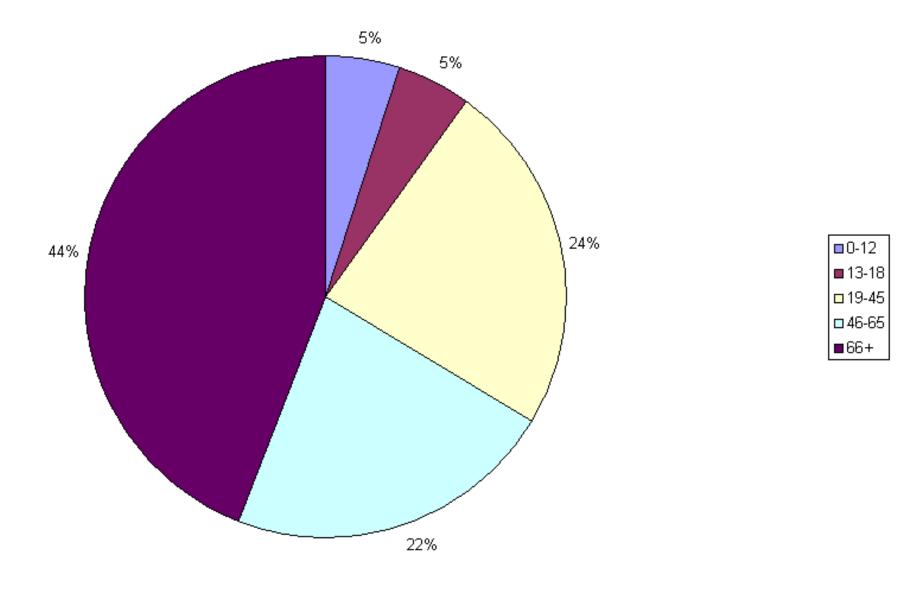




Lets visit my neighborhood

- Atlantic Highlands, NJ
- 600 EMS calls a year.
- Children and those under 18 represent roughly 10% of our customers.





By (C)Richard Huff - Pulse Check 2014



What happens

To this?

- Pager goes off....
- A four year old boy, difficulty breathing, in and out of consciousness.
- It's 10 p.m. on a weeknight.
- What happens on your squad?

To this?

- Pager goes off...
- An 83-year-old woman, difficulty breathing. Also complaining of abdominal pains.
- It's 10 p.m. on a weeknight.
- What happens at your squad?

+ Question.....



What we tend to do...

- ■We panic.
- ■We run in.
- ■The parents panic.
- ■We look at the kid like it's an alien.
- We panic a little more.





What does that do?





Why do we react so?

- ■We have kids?
- ■We're afraid?
- Kid calls are exciting?
- ■We want to be heroes?



+Could it be...







What we're taught in school





Real sick or not so sick?







Using the triangle

- Quick assessment without touching the patient.
- Airway and Appearance: How is the child's airway? Crying or not. How are they reacting to parents?
- ■Breathing: How's that going? Are they struggling?
- Circulation to the skin: How's their color?



Levels of conversation





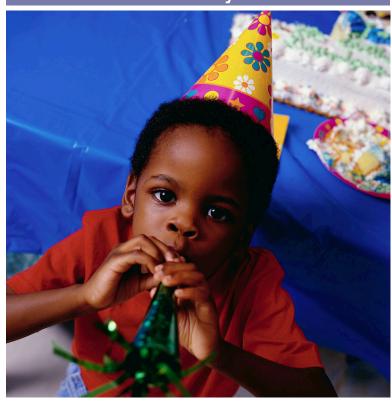
Tools





What's wrong with the PAT?



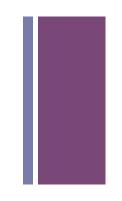


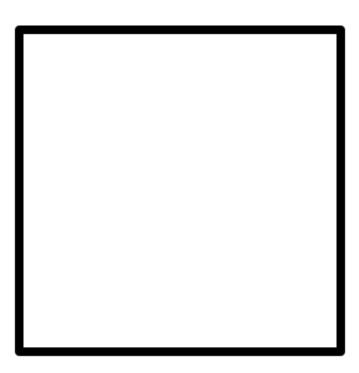
We should also look at parents





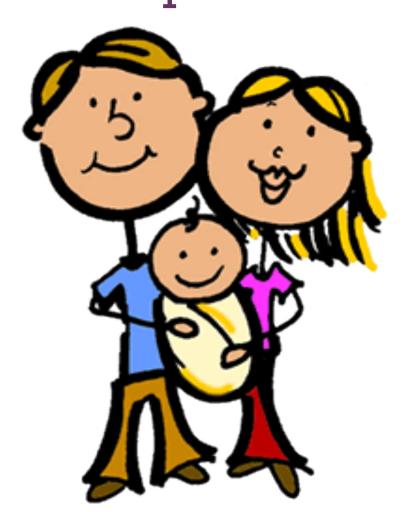








Make the parents one side of the square





Bedside manner?

- How often do you work on people skills?
- Critique a member's bedside manner?
- Members with attitude?





Become a human

Technicalvs.compassion

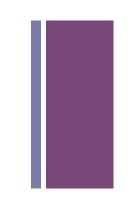


A plan of attack

■Stop, take a deep breath and think.



What did we learn in EMT class?



■Scene size up!



First order of business

- ■Look at yourself
- ■Slow down
- ■We set the tone
- ■We can lose control



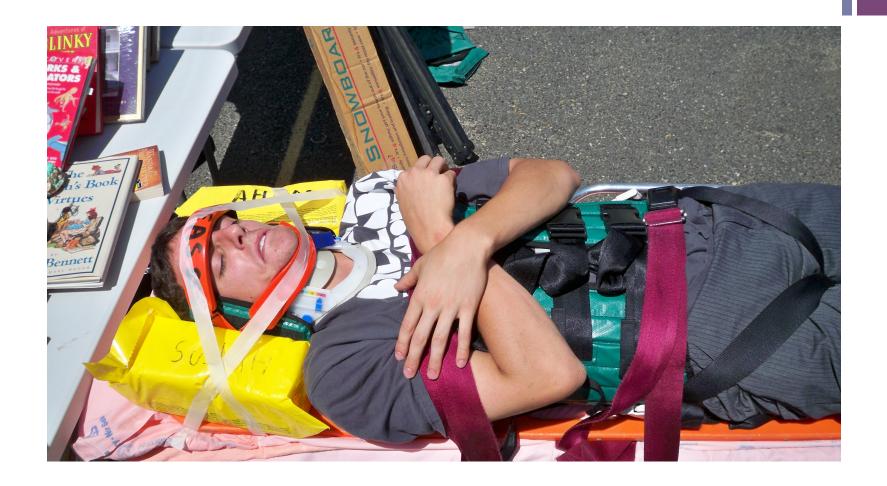


Make it the pediatric square

- How is the parent doing?
- ■Think about that for a second....
- ■Can the parent help?
- Now think of calls that went bad....



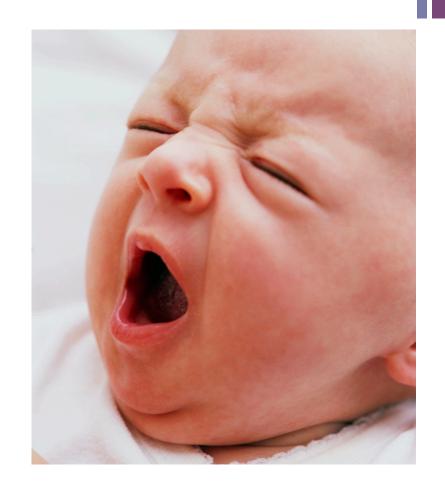
Think like a parent





The scenarios

- Screaming parents
- Screaming kids





Parent's emotions?



- Frightened
- Angry
- Helpless
- **■** Embarrassed
- **■** Guilty



And then we walk in...





Have a game plan





Some of us are parents

- Use those parenting skills
- •Understand helpless feeling
- **■**Know the failures
- Assign technical and bedside teams



Make parents part of the team

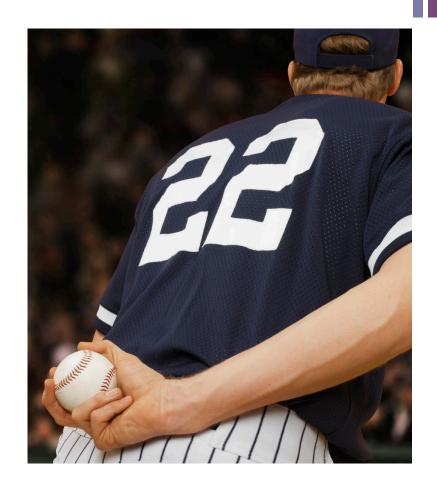
- Stay calm
- Their knowledge versus ours
- Praise them
- Special needs
- Plain language





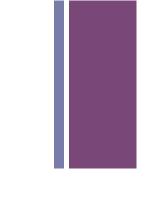
"Don't tell me to calm down!"

- ■Telling anyone to calm down is harder than you think.
- ■Throw them a curve ball.





Don't scold the parents







Really

- Managing parent is as important as managing the kid.
- Simple, off topic questions, help when emotional.





More Tips

- ■Separate kid from parent if needed.
- Role of parent changes with age of kid.







More Tips

- Reassurance
- Acknowledge fears without saying you understand
- Skip dreaded "sweetheart" and "dear"
- ■Up not down



Added benefits?

- Less stress on us?
- Less stress on the system?
- Better treatment of patients?





- How do you think the kid reacted to the bite?
- ■How do you think the parent reacted?





- Talk about managing kid cases before they happen.
- Put together a training program.
- Reach out to local organizations for help in dealing with special populations.
- Urge everyone to slow down and take a few more seconds before getting on the ambulance.
- Get people talking after kid calls.

+ Questions?



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