

Survey Overview

The purpose of the Ohio EMSC Survey of Pediatric Care Policies and Equipment is to gather general information about your EMS agency in relation to pediatric emergency care. Specifically, the information that the Health Resources and Services Administration (HRSA) requires of its EMSC grantees (i.e., the Ohio EMSC Program) is the following:

1. The percentage of pre-hospital provider agencies in Ohio that have on-line and off-line pediatric medical direction at the scene of an emergency for Basic Life Support (BLS) providers and Advanced Life Support (ALS) providers.
2. The percentage of pre-hospital patient care units (see definition below) in Ohio that have the essential pediatric equipment and supplies, as outlined in the American Academy of Pediatrics (AAP)/American College of Emergency Physicians (ACEP) Joint Guidelines for Basic Life Support (BLS) ambulances and Advanced Life Support (ALS) ambulances.

Definitions

For the purposes of this survey, the following definitions are applied:

Pediatric: persons up to 16 years old.

Patient Care Unit: broadly defined as a vehicle staffed with EMS providers (BLS or ALS) dispatched in response to a 911 call to provide patient care. Examples include an ambulance, fire truck, hazmat vehicle or rapid response vehicle. This definition does NOT exclude chase cars used as non-transport vehicles to provide additional personnel resources.

On-line Pediatric Medical Direction: an individual available 24/7 on the phone, radio, or email to EMS providers who need online medical direction when transporting a **PEDIATRIC** patient to a hospital. This person must be a medical professional (e.g., nurse, physician, physician assistant, EMT) deemed to have **PEDIATRIC** expertise by the hospital in which they work and needs to have a higher level of pediatric training/expertise than the EMS provider to whom he/she is providing medical direction. If the EMS provider does not know the **PEDIATRIC** expertise of the person providing medical direction, for purposes of answering affirmatively on this survey, the EMS provider should feel confident in the information given by the medical professional.

Off-line Pediatric Medical Direction: Treatment guidelines and protocols used by EMS providers to ensure the provision of appropriate **PEDIATRIC** patient care, **available in written or electronic (e.g., laptop computer) form in the patient care unit or with a provider, at the scene of an emergency. Treatment guidelines and protocols located at the EMS station are not considered to be available at the scene of an emergency.**

Out of Scope of Practice: a state, regional, or local written instruction or statute that indicates a piece of equipment that a provider is not allowed to use and should not be on a patient care unit.

At the scene of an emergency: time from arrival of providers at the scene of an emergency through arrival of the pediatric patient at the hospital.

Pediatric equipment: appropriate pre-hospital equipment and supplies to care for ill and injured **PEDIATRIC** patients.

Essential: the item is necessary and should be carried; however, its use will depend on state/local scope of practice of the providers.

Mannequins

Each agency responding to this survey will be entered in a drawing to win a Nita Newborn mannequin or Pediatric Intubation Trainer mannequin. Two of each type of mannequin will be awarded by random selection.

**Ohio Department of Public Safety
Emergency Medical Services for Children (EMSC)
Survey of Pediatric Pre-Hospital Care Policies and Equipment**

SECTION 1: RESPONDENT IDENTIFICATION

Date of survey completion (mm/dd/yy): _____

Agency Name: _____

Agency ID Number: _____

Name of Person Responding: _____ (Optional)

Job Title of Person Responding: _____ (Optional)

Phone Number: _____ [format: (xxx) xxx-xxxx] (Optional)

Indicate your EMS agency service level: (check all that apply)

BLS

ALS

SECTION 2: PEDIATRIC MEDICAL DIRECTION

Questions 1-6 address your service's **PEDIATRIC** on-line and off-line medical direction at the scene of an emergency. Please re-read the following definitions and then answer accordingly.

○ **ON-LINE PEDIATRIC MEDICAL DIRECTION:**

1.) Has your EMS agency established some type of arrangement, agreement or understanding with an acute care facility or other professional medical personnel to provide on-line **PEDIATRIC-SPECIFIC** medical direction 24/7 (see definitions above) to your providers at the scene of an emergency?

Yes

In Process

No; please explain: _____

2.) Does your EMS agency ensure the availability of some kind of communication device (phone, radio, e-mail, Internet, PDA, or other) to BLS providers to contact on-line medical direction **at the scene of an emergency**?

- Yes, **always** available
- Yes, **almost always** available (80-99% of the time)
- Yes, **usually** available (50-79% of the time)
- Yes, available **sometimes** (less than 50% of the time)
- No, not available
- Not applicable (e.g. we have no BLS providers; we only respond to industrial accidents; we are not a 911 responder; etc.) Please specify why this question is not applicable:

3.) Does your EMS agency ensure the availability of some kind of communication device (phone, radio, e-mail, Internet, PDA, or other) to **ALS** providers to contact on-line medical direction **at the scene of an emergency**?

- Yes, **always** available
- Yes, **almost always** available (80-99% of the time)
- Yes, **usually** available (50-79% of the time)
- Yes, available **sometimes** (less than 50% of the time)
- No, not available
- Not applicable (e.g. we have no ALS providers; we only respond to industrial accidents; we are not a 911 responder; etc.) Please specify why this question is not applicable:

○ **OFF-LINE PEDIATRIC MEDICAL DIRECTION:**

4.) Has your EMS agency adopted for use written or electronic off-line **PEDIATRIC** medical direction (see definition above)? (select one)

- Yes
- No

SKIP to "SECTION 3: PEDIATRIC EQUIPMENT" if you answered "NO" on question 4.

5.) Based on the definitions above, does your EMS agency ensure the availability of **off-line pediatric medical direction** for **BLS** providers at the scene of an emergency (i.e., written or electronic **PEDIATRIC** protocols/guidelines in the patient care unit or carried by the EMS provider)?

- Yes, **always** available
- Yes, **almost always** available (80-99% of the time)
- Yes, **usually** available (50-79% of the time)
- Yes, available **sometimes** (less than 50% of the time)
- No, not available
- Not applicable (e.g. we have no BLS providers; we only respond to industrial accidents; we are not a 911 responder; etc.) Please specify why this question is not applicable:

6.) Based on the definitions above, does your EMS agency ensure the availability of **off-line pediatric medical direction** for **ALS** providers at the scene of an emergency (i.e., written or electronic **PEDIATRIC** protocols/guidelines in the patient care unit or carried by the EMS provider)?

- Yes, **always** available
- Yes, **almost always** available (80-99% of the time)
- Yes, **usually** available (50-79% of the time)
- Yes, available **sometimes** (less than 50% of the time)
- No, not available
- Not applicable (e.g. we have no ALS providers; we only respond to industrial accidents; we are not a 911 responder; etc.) Please specify why this question is not applicable:

SECTION 3: PEDIATRIC EQUIPMENT

7.) Total number of **BLS** patient care units currently in-service for this agency: _____

NOTE: Skip this section of the survey if you do not have any BLS patient care units in your agency’s fleet.

INSTRUCTIONS FOR NEXT PAGE:

On the following page, providers are asked to summarize what equipment is carried by each **BLS** patient care unit in an agency’s fleet for each piece of equipment.

You will be presented with a three column table; on the left hand side, you will notice a column labeled, “**BLS Essential Equipment and Supplies**.” This is the AAP/ACEP list of Essential Equipment and Supplies for BLS Patient Care Units¹. For some items, a range of sizes will be specified beneath the piece of equipment.

Please note that you are *not* reporting how many pieces of the specific equipment are on your patient care unit; rather, you are reporting whether each of your patient care units carries **at least one single item** of the equipment or size of equipment as indicated.

The next column labeled, “**# of Patient Care Units that Carry Item(s)**” is a fill-in-the-blank box where you will enter the number of patient care units out of the total number of BLS patient care units in your fleet that carry that piece of equipment/supplies. If the question is asked by size, you will need to enter in the number of patient care units in your fleet that carry that piece of equipment *by the indicated size*. Your answer must be in numeric format (i.e., “4” not “four”).

If the item is out of your state/regional/local **scope of practice**, enter a “0” (zero) and put an “X” in the column labeled, “**Item out of Scope of Practice**.”

For example:

If my agency has a total of 5 BLS patient care units in my fleet, I would enter the number of patient care units out of my 5 BLS patient care units that carry the items listed in the column “BLS Essential Equipment and Supplies.”

If 4 out of 5 of my patient care units carry “Size 00” of the “Oropharyngeal airways” and 5 out of 5 of my patient care units carry “Size 3” of the same piece of equipment, etc., then I would enter a “4” in the column labeled “# of Patient care units that Carry Item(s)” for “Size 00”; and a “5” for “Size 3.” See example in chart below.

If the item listed as “Portable suction unit with a regulator” is out of my state/regional/local **scope of practice**, I would enter a “0” (zero) in the column labeled, “# of Patient care units that Carry Item(s)” and put an “X” in the column labeled, “Item out of Scope of Practice.”

BLS Essential Equipment and Supplies	# of Patient care units that Carry Item(s)	Item out of Scope of Practice
Oropharyngeal airways:		
a) Size 00	4	
b) Size 3	5	
Portable suction unit with a regulator	0	X

¹ Committee on Ambulance, Equipment, and Supplies, National Emergency Medical Services for Children Resource Alliance: Guidelines for pediatric equipment and supplies for basic and advanced life support ambulances. *Ann Emerg Med* December 1996;28:699-701.

8.) Please indicate the number of **BLS** patient care units that carry **at least one single item** of the equipment or size of the equipment as indicated below (of the total number of BLS ambulances in your agency's fleet). **See instructions and example on the previous page.**

BLS Essential Equipment and Supplies		# of Patient Care Units that Carry Item(s)	Item out of Scope of Practice
1.	Oropharyngeal airways:		
	a) Size 00		
	b) Size 0		
	c) Size 1		
	d) Size 2		
	e) Size 3		
	f) Size 4		
	g) Size 5		
2.	Self-inflating resuscitation bag: (A self-inflating resuscitation bag should be self refilling, should have an oxygen reservoir and should not have a pop-off valve. A child bag has a reservoir of 450 mL, whereas an adult bag has a reservoir of at least 1,000 mL.)		
	a) Child size		
	b) Adult size		
3.	Masks for bag-valve-mask device:		
	a) Infant size		
	b) Child size		
	c) Adult size		
4.	Oxygen masks:		
	a) Infant size		
	b) Child size		
	c) Adult size		
5.	Non-rebreathing mask:		
	a) Pediatric size		
	b) Adult size		
6.	Pediatric Stethoscope		
7.	Pediatric Backboard		
8.	Cervical immobilization device:		
	a) Infant size		
	b) Child size		
	c) Adolescent size		
	d) Adult size		

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BLS Essential Equipment and Supplies		# of Patient Care Units that Carry Item(s)	Item out of Scope of Practice
9.	Blood pressure cuff:		
	a) Newborn/ Infant size		
	b) Child size		
	c) Adult size		
10.	Portable suction unit with a regulator		
11.	Suction catheters:		
	a) Tonsil-tip (aka: Yankauer)		
	b) Size 6 french		
	c) Size 8 french		
	d) Size 10 french		
	e) Size 12 french		
	f) Size 14 french		
12.	Extremity splints: pediatric sizes		
13.	Bulb Syringe		
14.	Obstetric pack		
15.	Thermal blanket A thermal blanket may help minimize heat loss. Hypothermia will complicate many illnesses and injuries, particularly in infants and young children. The type of material used will depend on local preference, protocols, and procedures but may include Mylar, standard blankets, or aluminum foil for small infants.		
16.	Water-Soluble lubricant		

9.) If any of the items in the above table are not carried because they are "Out of Scope of Practice," please indicate why this is the case (check all that apply):

- Limited funding
- These items are not included in our protocols
- The use of these items has been restricted or prohibited by our Medical Director, EMS Director, or law/regulation
- Non transporting unit
- Other (Please specify): _____

10.) As this recommended list will probably be updated, it is important to know if and why your patient care units do not carry all of the recommended BLS equipment other than being out of scope of practice. If you are missing equipment that is not out of your scope of practice, please indicate why this may be the case (check all that apply):

- No state/local equipment requirements exist
- Funding is very limited
- Don't believe separate pediatric equipment is necessary for adequate care
- Certain pediatric items are used too infrequently to justify the expense
- Certain pediatric items are not reusable and are too expensive to replace
- Other (please specify): _____

11.) Total # of **ALS** patient care units currently in-service for this agency: _____

NOTE: Skip this section of the survey if you do not have any ALS patient care units in your agency’s fleet.

INSTRUCTIONS FOR NEXT PAGE:

On the following page, providers are asked to summarize what equipment is carried by each **ALS** patient care units in an agency’s fleet for each piece of equipment.

You will be presented with a three column table; on the left hand side, you will notice a column labeled, “**ALS Essential Equipment and Supplies.**” This is the AAP/ACEP list of Essential Equipment and Supplies for ALS Patient Care Units². For some items, a range of sizes will be specified beneath the piece of equipment.

Please note that you are *not* reporting how many pieces of the specific equipment are on your patient care unit; rather, you are reporting whether each of your patient care units carries **at least one single item** of the equipment or size of equipment as indicated.

The next column labeled, “**# of Patient Care Units that Carry Item(s)**” is a fill-in-the-blank box where you will enter the number of patient care units out of the total number of ALS patient care units in your fleet that carry that piece of equipment/supplies. If the question is asked by size, you will need to enter in the number of patient care units in your fleet that carry that piece of equipment *by the indicated size*. Your answer must be in numeric format (i.e., “4” not “four”).

If the item is out of your state/regional/local **scope of practice**, enter a “0” (zero) and put an “X” in the column labeled, “**Item out of Scope of Practice.**”

For example:

If my agency has a total of 7 ALS patient care units in my fleet, I would enter the number of patient care units out of my 7 ALS patient care units that carry the items listed in the column “ALS Essential Equipment and Supplies.”

If 6 out of 7 of my patient care units carry “Size 00” of the “Oropharyngeal airways” and 7 out of 7 of my patient care units carry “Size 3” of the same piece of equipment, etc., then I would enter a “6” in the column labeled “# of Patient Care Units that Carry Item(s)” for “Size 00”; and a “7” for “Size 3.” *See example in chart below.*

If the item listed as “Portable suction unit with a regulator” is out of my state/regional/local **scope of practice**, I would enter a “0” (zero) in the column labeled, “# of Patient Care Units that Carry Item(s)” and put an “X” in the column labeled, “Item out of Scope of Practice.”

ALS Essential Equipment and Supplies	# of Patient Care Units that Carry Item(s)	Item out of Scope of Practice
Oropharyngeal airways:		
a) Size 00	6	
b) Size 3	7	
Portable suction unit with a regulator	0	X

² Ibid.

12.) Please indicate the number of **ALS** patient care units that carry **at least one single item** of the equipment or size of the equipment as indicated below (of the total number of ALS ambulances in your agency's fleet). **See instructions and example on the previous page.**

ALS Essential Equipment and Supplies	# of Patient Care Units that Carry Item(s)	Item out of Scope of Practice
1. Oropharyngeal airways:		
a) Size 00		
b) Size 0		
c) Size 1		
d) Size 2		
e) Size 3		
f) Size 4		
g) Size 5		
2. Self-inflating resuscitation bag: (A self-inflating resuscitation bag should be self refilling, should have an oxygen reservoir and should not have a pop-off valve. A child bag has a reservoir of 450 mL, whereas an adult bag has a reservoir of at least 1,000 mL.)		
a) Child size		
b) Adult size		
3. Masks for bag-valve-mask device:		
a) Infant size		
b) Child size		
c) Adult size		
4. Oxygen masks:		
a) Infant size		
b) Child size		
c) Adult size		
5. Non-rebreathing mask:		
a) Pediatric size		
b) Adult size		
6. Pediatric Stethoscope		
7. Pediatric Backboard		
8. Cervical immobilization device:		
a) Infant size		
b) Child size		
c) Adolescent size		
d) Adult size		
9. Blood pressure cuff:		
a) Infant size		
b) Child size		
c) Adult size		
10. Portable suction unit with a regulator		

* table continued on next page

ALS Essential Equipment and Supplies	# of Patient Care Units that Carry Item(s)	Item out of Scope of Practice
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11.	Suction catheters: a) Tonsil-tip (aka: Yankauer) b) Size 6 french c) Size 8 french d) Size 10 french e) Size 12 french f) Size 14 french		
12.	Extremity splints: pediatric sizes		
13.	Bulb Syringe		
14.	Obstetric pack		
15.	Thermal blanket A thermal blanket may help minimize heat loss. Hypothermia will complicate many illnesses and injuries, particularly in infants and young children. The type of material used will depend on local preference, protocols, and procedures but may include Mylar, standard blankets, or aluminum foil for small infants.		
16.	Water-Soluble lubricant		
17.	Transport Monitor		
18.	Defibrillator: a) Pediatric paddles b) Adult paddles		
19.	Monitoring electrodes: pediatric sizes		
20.	Laryngoscope: a) Straight blade size 0 b) Straight blade size 1 c) Straight/curved blade size 2 d) Straight/curved blade size 3 e) Straight/curved blade size 4		
21	Endotracheal tube stylets: a) Pediatric size (6 french) b) Adult size (14 french)		

table continued on next page

ALS Essential Equipment and Supplies	# of Patient Care Units that Carry Item(s)	Item out of Scope of Practice
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22.	Endotracheal tubes:		
	a) Uncuffed size 2.5 mm		
	b) Uncuffed size 3.0 mm		
	c) Uncuffed size 3.5 mm		
	d) Uncuffed size 4.0 mm		
	e) Uncuffed size 4.5 mm		
	f) Uncuffed size 5.5 mm		
	g) Uncuffed size 6.0 mm		
	h) Cuffed size 6.0 mm		
	i) Cuffed size 6.5 mm		
	j) Cuffed size 7.0 mm		
	k) Cuffed size 7.5 mm		
	l) Cuffed size 8.0 mm		
23.	Magill forceps:		
	a) Pediatric size		
	b) Adult size		
24.	Nebulizer		
25.	IV catheters:		
	a) 16 Gauge		
	b) 18 Gauge		
	c) 20 Gauge		
	d) 22 Gauge		
	e) 24 Gauge		
26.	Intraosseous needles		
27.	Length/weight-based drug dose chart or tape		
28.	Needles:		
	a) 20 Gauge		
	b) 22 Gauge		
	c) 24 Gauge		
	d) 25 Gauge		
29.	Resuscitation drugs and IV fluids that meet the local standards of practice		

13.) If any of the items in the above table are not carried because they are "Out of Scope of Practice," please indicate why this is the case (check all that apply):

- Limited funding
- These items are not included in our protocols
- The use of these items has been restricted or prohibited by our Medical Director, EMS Director, or law/regulation
- Non transporting unit
- Other (Please specify): _____

14.) As this recommended list will probably be updated, it is important to know if and why your patient care units do not carry all of the recommended **ALS** equipment other than being out of scope of practice. If you are missing equipment that is not out of your scope of practice, please indicate why this may be the case (check all that apply):

- No state/local equipment requirements exist
- Funding is very limited
- Don't believe separate pediatric equipment is necessary for adequate care
- Certain pediatric items are used too infrequently to justify the expense
- Certain pediatric items are not reusable and are too expensive to replace
- Other (please specify): _____

SECTION 4: COMMENTS

21.) Please add any comments you may have about this survey: its format, length, objectives, ease of use, clarity, etc.

22.) Please add any comments you may have about pediatric prehospital care in Ohio, and your ideas about improving care for children.

Thank you for your time in completing this survey.