

Pediatricians are ready for COVID-19 and other emergencies

By Alison Knopf

In January — just as COVID-19 was on the verge of being a worldwide pandemic — the American Academy of Pediatrics (AAP) and emergency medicine associations released a joint policy statement, “Pediatric Readiness in Emergency Medical Services Systems,” designed to bolster the emergency medical system so that children are well cared for.

It has been known for some time that emergency departments do a better job of taking care of children if there is a pediatric emergency care coordinator on hand. This is also true for Emergency Medical Services (EMS).

Recommendations

- Include pediatric considerations in EMS planning and the development of pediatric EMS dispatch protocols, operations, and physician oversight (for example, as outlined in the National Association of Emergency Medical Services Physicians position statement “Physician Oversight of Pediatric Care in Emergency Medical Services”).
- Collaborate with medical professionals with significant experience or expertise in pediatric emergency care, public health experts, and family advocates for the development and improvement of EMS operations, treatment guidelines, and performance-improvement initiatives.
- Integrate evidence-based, pediatric-specific elements into the direct and indirect medical oversight that constitute the global EMS oversight structure.
- Have pediatric-specific equipment and supplies available, using national consensus recommendations as a guide, and verify that EMS providers are competent in using them.
- Develop processes for delivering comprehensive, ongoing, pediatric-specific education and evaluating pediatric-specific psychomotor and cognitive competencies of EMS providers.
- Promote education and awareness among EMS providers about the unique physical characteristics, physiologic responses, and psychosocial needs of children with an illness or injury.
- Implement practices to reduce pediatric medication errors.
- Include pediatric-specific measures in periodic performance-improvement practices that address morbidity and mortality.
- Submit data to a statewide database that is compliant with the most recent version of the National Emergency Medical Services Information System and work with hospitals to which it transports patients to track pediatric patient-centered outcomes across the continuum of care.
- Develop, maintain, and locally enforce policies for the safe transport of children in emergency vehicles.
- Develop protocols for the destination of pediatric patients, with consideration of regional resources and weighing of the risks and benefits of keeping children in their own communities.
- Collaborate, along with receiving emergency departments, to provide pediatric readiness across the care continuum.
- Include provisions for caring for children and families in emergency preparedness planning and exercises, including the care and tracking of unaccompanied children and timely family reunification in the event of disasters.
- Promote overall patient- and family-centered care, which includes using lay terms to communicate with patients and families, having methods for accessing language services to communicate with non-English-speaking patients and family members, narrating actions, and alerting patients and caregivers before interventions are performed. In addition, allow family members to remain close to their children during resuscitation activities and to practice cultural or religious customs as long as they are not interfering with patient care.
- Have policies and procedures in place to allow a family member or guardian to accompany a pediatric patient during transport when appropriate and feasible.

- Consider using resources compiled by the Emergency Medical Services for Children program when implementing the recommendations noted here.

Message to families

It's understandable that parents are frightened, but pediatricians can be the calm voice they need. The AAP provides these tips to help.

Symptoms of COVID-19 can range from mild to severe and can include:

- fever,
- cough, and
- shortness of breath.

According to the Centers for Disease Control and Prevention (CDC), children do not seem to be at higher risk for getting COVID-19. However, some people are, including:

- older adults and
- people who have serious chronic medical conditions.
- Wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, use hand sanitizer. Look for one that is 60% or higher alcohol-based.
- Reduce close contact with others by practicing "social distancing" (which is really physical distancing). This means staying home as much as possible and avoiding public places where close contact with others is likely.
- Keep your kids away from others who are sick or keep them home if they are ill.
- Teach kids to cough and sneeze into a tissue (make sure to throw it away after each use!) or to cough and sneeze into their arm or elbow, not their hands.
- Clean and disinfect your home as usual using regular household cleaning sprays or wipes.
- Wash stuffed animals or other plush toys, following the manufacturer's instructions, in the warmest water possible and dry them completely.

- Avoid touching your face; teach your children to do the same.
- Avoid travel to highly infected areas.
- Follow local and state guidance on travel restrictions.

If your child has been exposed to COVID-19, or you are concerned about your child's symptoms, call your pediatrician immediately.

People who are mildly ill with COVID-19 are usually able to isolate at home during their illness. However, it may be recommended to take these additional steps:

- Separate family members with COVID-19 from others as much as possible. The person with the virus should stay in a specific room and away from other people in your home. Ideally, they should use a separate bathroom, if available. Limit visitors in the house.
- Call ahead before visiting the doctor. This will help them take steps to keep other people from getting infected or exposed.
- Engage in extra cleaning for all "high-touch" surfaces. Use a household cleaning spray or wipes and follow the instructions on the label.
- Monitor symptoms. Call your doctor right away if the illness gets worse.

As this issue went to press (mid-March), the pandemic was at full force — we hope — in the United States, with efforts aimed at preventing its spread. So if this handout is out of date — great! But hold onto it anyway. Flu viruses have a way of coming back in the fall.

For more information, go to healthychildren.org.

Source: AAP

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