



Indiana Emergency Medical Services for

Children Newsletter

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National Preparedness Month

September is National Preparedness Month. How prepared is your facility and your family in the event you are essential staff in a disaster? Have you educated your patients with special health care needs regarding disaster preparedness? I-EMSC, in collaboration with MESH, Indiana American Academy of Pediatrics Chapter, Riley Hospital for Children, Peyton Manning Children's Hospital, Indianapolis Public Schools, Indiana Perinatal Network, Indiana State Department of Health, Marion County Public Health Department, and IUPUI, have created the family readiness guide to better prepare families within the community available at: <http://www.indianaemsc.org/resources/>

Preparing Families of Children with Special Health Care Needs for Disasters

A recent study, conducted by Children's of Alabama, revealed families caring for children with special health care needs when provided with a patient education intervention, aimed at increasing levels of disaster preparedness, experienced significant differences between pre and post-test scores. Families caring for children with special health care needs pose a unique challenge in post-disaster response. Physician offices can assist families to complete the AAP Emergency Information Form available at: <http://www.indianaemsc.org>. Additional pediatric disaster preparedness materials are available at: <http://www.childrensnational.org/EMSC> for clinicians and families. For more information regarding this study visit: <http://www.ncbi.nlm.nih.gov>

PECARN Study: Presentations and Outcomes of Children with Intraventricular Hemorrhages (IVH) Following Blunt Head Trauma

Of 15,907 patients evaluated with computed tomography following blunt head trauma (BHT), 7.3% of patients had intracranial injuries, 3.7% had non-isolated IVH's, & 0.9% had isolated IVH's. Results revealed children with non-isolated IVH's following BHT typically present with Glasgow Coma Scale (GCS) scores of less than 14, frequently require neurosurgery, and experience high mortality rates (Lichenstein, et al., 2012). Data further revealed children with isolated IVH's typically present with normal mental status and are low risk for developing acute adverse events. Available at: <http://www.ncbi.nlm.nih.gov/pubmed>

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