

# RESULTS

## SELF-SURVEY PACKET

**Total Level IV Surveys Completed:**  
**71\***

\*Please Note that some hospitals completed *both* Level III and Level IV surveys.

# LEVEL IV

## PEDIATRIC STABILIZATION FACILITY

**Pediatric Facility Level IV:** A rural facility with the basic capabilities for the evaluation and initial resuscitation of seriously ill or injured pediatric patients. These facilities must have formalized transfer agreements to higher levels of pediatric care.

Contact Person for follow-up (if needed): \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_



**IF YOU FIND THAT YOU CAN EASILY MEET ALL OF THE FOLLOWING SUGGESTED CRITERIA, PLEASE LOOK AT THE LEVEL III SELF-SURVEY. REMEMBER, PEDIATRIC CATEGORIZATION IS NOT THE SAME AS TRAUMA DESIGNATION. YOU MAY VERY WELL BE A LEVEL III TRAUMA FACILITY AND A LEVEL IV PEDIATRIC HOSPITAL. HONEST ANSWERS AND FEEDBACK IS THE SORT OF INFORMATION WE NEED TO MAKE *REALISTIC* CHANGES TO THE CRITERIA IN ORDER TO PROPERLY IMPLEMENT CATEGORIZATION OF PEDIATRIC HOSPITALS IN TEXAS. IF YOU FEEL AS THOUGH YOU SHOULD BE A LEVEL III OR IV PEDIATRIC FACILITY, BUT DO NOT CURRENTLY MEET THE STATED CRITERIA, BY ALL MEANS LET US KNOW ABOUT IT! THE TEXAS DEPARTMENT OF HEALTH AND EMS-C DO NOT WANT TO MAKE THIS UNOBTAINABLE FOR ANY HOSPITAL IN THE STATE.**

**HOSPITAL ORGANIZATION:** All physicians/staff members listed shall be either Board Certified or Board eligible and actively seeking certification. This standard includes subspecialty Board/Certificates where applicable. Each member of the institution's medical staff shall be credentialed by the facility for the appropriate specialty, including trauma care where applicable. One individual with appropriate training and experience may cover more than one area of practice in the surgical specialties.

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### DEPARTMENTS

Do you **currently** have the following departments within your hospital?

- |  |                            |
|--|----------------------------|
| 1. Department of General Surgery   | Yes: 53 (75%) No: 18 (25%) |
| 2. Orthopedic Surgery  | Yes: 28 (39%) No: 43 (61%) |
| 3. Emergency Department  | Yes: 71 (100%) No: 0 (0%)  |
| 4. Pediatric Trauma Service-Organized approach to pediatric trauma<br>(Pediatric Trauma Team is not essential) | Yes: 41 (58%) No: 30 (42%) |
| 5. Child Abuse-Organized approach to child physical and sexual abuse and neglect                               | Yes: 43 (61%) No: 28 (39%) |
| 6. Radiology Department  | Yes: 70 (99%) No: 1 (1%)   |

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### SPECIALIST AVAILABILITY

Are these specialties available to your hospital or ED within 30 minutes?

- |  |                            |
|--|----------------------------|
| 1. Emergency Medicine<br><i>Or</i> a Family MD with experience in Pediatric Emergency Medicine (PALS or APLS training required)<br><i>Or</i> a Family MD, NP, or PA who maintains current competency or training in PALS or APLS | Yes: 69 (97%) No: 2 (3%)   |
| 2. Pediatrics  | Yes: 37 (52%) No: 34 (48%) |
| 3. Radiology   | Yes: 63 (89%) No: 8 (11%)  |
| 4. Family Medicine   | Yes: 68 (96%) No: 3 (4%)   |
| 5. General Surgery   | Yes: 44 (62%) No: 27 (38%) |

**DEPARTMENT OF NURSING**

Do the following positions exist at your facility?

- |    |                          |                          |
|----|--------------------------|--------------------------|
| 6. | Director of Nursing      | Yes: 70 (99%) No: 1 (1%) |
| 7. | Pediatric Nurse Educator | Yes: 6 (8%) No: 65 (92%) |

**EMERGENCY DEPARTMENT**

Are the following resources available to your ED?

Physician Personnel

- |    |  |                                 |
|----|--|---------------------------------|
| 1. | Designated Physician Director  | <b>Yes: 70 (99%) No: 1 (1%)</b> |
| 2. | Pediatrician or other Physician who maintains current training in PALS or APLS<br>Or a Family MD, NP, or PA who maintains current training in PALS or APLS | Yes: 56 (79%) No: 15 (21%)      |
| 3. | Pediatric consultant promptly <sup>1</sup> available (phone availability acceptable)   | Yes: 64 (90%) No: 7 (10%)       |

Nursing Personnel

- |    |   |                                   |
|----|---|-----------------------------------|
| 1. | Nursing Staff / General Staff experienced in pediatric emergency care<br>At least one nurse per shift in the hospital must have current PALS or ENPC  | <b>Yes: 52 (73%) No: 19 (27%)</b> |
| 2. | Staff Educator in Pediatrics <sup>2</sup>   | Yes: 20 (28%) No: 51 (72%)        |
| 3. | Crash / Critical area<br>(Designated resuscitation area equipped for the resuscitation and stabilization of neonatal, pediatric/adolescent patients and of adequate size to accommodate a full resuscitation team, including trauma.) | Yes: 66 (93%) No: 5 (7%)          |

**Comments and/or Recommendations regarding any of the above suggested criteria:**

<sup>1</sup> For purposes of this survey, prompt means available in 30 minutes or less

<sup>2</sup> May be substituted by the Pediatric Trauma Coordinator

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**EQUIPMENT: REQUIRED EQUIPMENT LIST<sup>3</sup>**

The following list of equipment should to be available to the ED 24 hours a day. It is NOT necessary for all of the equipment to be located in the ED. Written policies should address the necessary procedure(s) to access equipment not physically located in the ED.

1. Communication Equipment with EMS System Yes: 71 (100%) No: 0 (0%)

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2. Airway Management

- |  |                            |
|--|----------------------------|
| a. Clear oxygen masks: preterm, infant, child, and adult sizes                       | Yes: 69 (97%) No: 2 (3%)   |
| b. Non-rebreathing masks: infant, child, and adult sizes                             | Yes: 61 (86%) No: 10 (14%) |
| c. Laryngoscope handle: pediatric and adult  | Yes: 71 (100%) No: 0 (0%)  |
| d. Laryngoscopes: sizes 0-3 straight and 2,3 curved                                  | Yes: 71 (100%) No: 0 (0%)  |
| e. Bag-valve-mask resuscitators, self inflating: 450 and 1000 mL sizes               | Yes: 69 (97%) No: 2 (3%)   |
| f. Nasal cannulae: infant, child, and adult sizes                                    | Yes: 67 (94%) No: 4 (6%)   |
| g. Endotracheal tubes cuffed and uncuffed: 6.0-9.0 (cuffed) and 2.5-5.5 (uncuffed)   | Yes: 70 (99%) No: 1 (1%)   |
| h. Stylets: pediatric and adult sizes  | Yes: 69 (97%) No: 2 (3%)   |
| i. Suction and appropriate size catheters, 5-16 fr, yankauer                         | Yes: 66 (93%) No: 5 (7%)   |
| j. Airways- size 00-5 f (oral) and 12fr-30fr (nasal pharyngeal)                      | Yes: 68 (96%) No: 3 (4%)   |
| k. Oxygen with appropriate delivery devices  | Yes: 71 (100%) No: 0 (0%)  |
| l. Thoracostomy trays with chest tubes: Size 12-28 fr                                | Yes: 60 (85%) No: 11 (15%) |
| m. Magill forceps: pediatric and adult sizes   | Yes: 66 (93%) No: 5 (7%)   |
| n. Nasogastric tubes: sizes 6-14 fr  | Yes: 66 (93%) No: 5 (7%)   |
| o. Chest tubes: sizes 8-40 fr  | Yes: 52 (73%) No: 19 (27%) |
| p. Tracheostomy tubes: sizes 00-6 (pediatric sizes availability within the hospital) | Yes: 51 (72%) No: 20 (28%) |
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3. Monitoring

- |   |                           |
|---|---------------------------|
| a. Cardiopulmonary monitors with pediatric capability and strip recorder                        | Yes: 70 (99%) No: 1 (1%)  |
| b. Monitor-defibrillator (0-400 J capability) with pediatric and adult paddles (4.5 and 8.0 cm) | Yes: 71 (100%) No: 0 (0%) |
| c. Pediatric and adult monitor electrodes   | Yes: 68 (96%) No: 3 (4%)  |
| d. Pulse oximeter with sensors (sizes newborn through adult)                                    | Yes: 69 (97%) No: 2 (3%)  |
| e. Thermometer/rectal probe with range 25° - 44°C   | Yes: 63 (89%) No: 8 (11%) |
| f. Sphygmomanometer   | Yes: 71 (100%) No: 0 (0%) |
| g. Blood pressure cuffs: neonatal, infant, child, adult, and thigh                              | Yes: 71 (100%) No: 0 (0%) |
| h. Doppler for blood pressure monitoring  | Yes: 63 (89%) No: 8 (11%) |

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<sup>3</sup> Assure availability of pediatric sizes within the hospital

i. Non-invasive blood pressure monitor Yes: 69 (97%) No: 2 (3%)

4. Vascular Access

a. Catheter-over-needle devices: 14-24 gauge Yes: 71 (100%) No: 0 (0%)

b. Intra-arterial lines: 3-8 fr, 16-24 gauge Yes: 34 (48%) No: 37 (52%)

c. Intraosseous needles: 16 and 18 gauge  
Standard bone marrow aspiration needles acceptable (13 or 15 gauge)  
(3%) Yes: 69 (97%) No: 2

d. Butterfly needles: 19-25 gauge Yes: 66 (93%) No: 5 (7%)

e. Infusion Pumps and fractional cc infusion capability Yes: 60 (85%) No: 11 (15%)

f. Tubing for above Yes: 64 (90%) No: 7 (10%)

g. Arm Boards: infant, child, and adult sizes Yes: 66 (93%) No: 5 (7%)

h. Umbilical vein catheters: sizes 3.5 fr and 5 fr (available within the hospital) Yes: 61 (86%) No: 10 (14%)

i. Seldinger technique vascular access kit  
with pediatric sizes 3,4,5 fr catheters Yes: 27 (38%) No: 44 (62%)

5. Resuscitation Medications

a. Printed pediatric drug dosage reference material readily available Yes: 69 (97%) No: 2 (3%)

b. Advanced Life Support medications per current AHA standards Yes: 67 (94%) No: 4 (6%)

c. IV solutions Yes: 71 (100%) No: 0 (0%)

d. Specialized Pediatric Trays Yes: 53 (75%) No: 18 (25%)

e. Venous cut down Yes: 64 (90%) No: 7 (10%)

f. Suturing Yes: 71 (100%) No: 0 (0%)

g. Plastics  
(24%) Yes: 54 (76%) No: 17

h. Tube thoracotomy with water seal drainage capability Yes: 66 (93%) No: 5 (7%)

i. Lumbar puncture and subdural: spinal needle sizes 20, 22 gauge Yes: 65 (92%) No: 6 (8%)

j. Urinary catheterization with pediatric Foley catheters sizes 6-16 fr Yes: 64 (90%) No: 7 (10%)

k. Obstetric pack Yes: 71 (100%) No: 0 (0%)

l. Newborn kit with umbilical vessel cannulation supplies  
and meconium aspirator Yes: 68 (96%) No: 3 (4%)

m. Surgical airway kit (may include any of the following items:  
tracheostomy tray, cricothyrotomy tray, ETJV (needle jet)) Yes: 63 (89%) No: 8 (11%)

6. Fracture Management

- a. Extremity and femur splints in child and adult sizes Yes: 66 (93%) No: 5 (7%)
- b. Casting materials Yes: 70 (99%) No: 1 (1%)
- c. Cervical immobilization equipment Yes: 67 (94%) No: 4 (6%)

7. Miscellaneous

- a. Pediatric and standard scales for weight measurements Yes: 70 (99%) No: 1 (1%)
- b. Infant formula and oral rehydrating solutions Yes: 65 (92%) No: 6 (8%)
- c. Heating source Yes: 67 (94%) No: 4 (6%)  
 Overhead warmer immediately available in the institution.  
 May be met be infrared lamps, overhead warmer, or warming blanket, although use of overhead warmers is recommended in the ED.
- d. Towel rolls/ blanket rolls or equivalent Yes: 70 (99%) No: 1 (1%)
- e. Pediatric restraining devices Yes: 69 (97%) No: 2 (3%)
- f. Resuscitation board Yes: 70 (99%) No: 1 (1%)
- g. Sterile linen available within hospital for burn care Yes: 69 (97%) No: 2 (3%)
- h. Medical photography capability Yes: 55 (74%) No: 16 (26%)
- i. 3 and 5 fr feeding tubes Yes: 60 (85%) No: 11 (15%)

**Comments or Recommendations regarding required equipment:**

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## SUPPORT SERVICES

### In house<sup>4</sup> 24 hours per day

1. Respiratory Therapy  
\*Can be met by nurse crossed-trained in respiratory therapy      Yes: 61 (86%) No: 10 (14%)
2. X-ray availability      Yes: 54 (90%) No: 17 (10%)
3. Laboratory with microcapability and blood gas analysis, blood bank capabilities  
Yes: 63 (89%) No: 8 (11%)

### On-call and promptly<sup>5</sup> available by phone

1. Clinical Social Worker      Yes: 45 (63%) No: 26 (37%)
2. Pastoral Care      Yes: 62 (87%) No: 9 (13%)
3. Clinical Laboratory,
  - a. Available 24 hours per day      Yes: 70 (99%) No: 1 (1%)
  - b. Blood bank **T**      Yes: 69 (97%) No: 2 (3%)
  - c. Blood gases **T**      Yes: 71 (100%) No: 0 (0%)
  - d. Chemistry **T**      Yes: 71 (100%) No: 0 (0%)
  - e. Hematology **T**      Yes: 71 (100%) No: 0 (0%)
  - f. Microsampling capability      Yes: 68 (96%) No: 3 (4%)
  - g. Access to Poison control centers **T**      Yes: 71 (100%) No: 0 (0%)
4. Sub-unit Capability / Transfer Agreement
  - a. Transport guidelines and transfer agreements for critically ill / injured pediatric / neonate patient such as Acute Spinal Cord injury, burn, etc., **T**      Yes: 70 (99%) No: 1 (1%)
  - b. Adherence with RAC guidelines regarding care of pediatric patients **T**  
Yes: 71 (100%) No: 0 (0%)
5. Helipad or designated landing zone      Yes: 69 (97%) No: 2 (3%)
6. Pharmacy staffed by licensed pharmacists or promptly available      Yes: 64 (90%) No: 7 (10%)
7. Organ procurement program and agreement      Yes: 68 (96%) No: 3 (4%)

**Area for Comments/Recommendations in continued on the *Following page***

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**T** Level IV Trauma facility Criteria

<sup>4</sup> For purposes of these guidelines, in-house means available in 5 minutes or less

<sup>5</sup> Promptly means in 30 minutes or less

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## PERFORMANCE IMPROVEMENT

- |   |                            |
|---|----------------------------|
| 1. ED physician audit of pediatric patients including 48 hour re-admits | Yes: 47 (66%) No: 24 (34%) |
| 2. Multi-disciplinary pediatric resuscitation conferences <b>T</b>      | Yes: 42 (59%) No: 29 (41%) |
| 3. Participation in county or area child fatality review team           | Yes: 27 (38%) No: 44 (62%) |
| 4. Participation in state trauma registry <b>T</b>                      | Yes: 70 (99%) No: 1 (1%)   |
| 5. Pediatric nursing audit  | Yes: 40 (56%) No: 31 (44%) |
| 6. Review of all pediatric deaths / child abuse / neglect cases         | Yes: 65 (92%) No: 6 (8%)   |
| 7. Review of all pediatric transports and prehospital care              | Yes: 45 (63%) No: 26 (37%) |
| 8. Review of regional systems of pediatric care                         | Yes: 33 (46%) No: 38 (54%) |
| 9. Structured Program   | Yes: 42 (59%) No: 29 (41%) |
| 10. Participation on Regional Advisory Council <b>T</b>                 | Yes: 67 (94%) No: 4 (6%)   |

### Comments and/or Recommendations:

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## COMMUNITY PROGRAMS

DO YOU CURRENTLY PROVIDE THE FOLLOWING COMMUNITY PROGRAMS?

- |   |                            |
|---|----------------------------|
| 1. Continuing education programs on pediatrics for professional staff | Yes: 54 (76%) No: 17 (24%) |
| 2. Consultation with physicians and pediatric referral institutions   | Yes: 54 (76%) No: 17 (24%) |
| 3. Pediatric education for prehospital care providers                 | Yes: 35 (49%) No: 36 (51%) |
| 4. Public education, including injury prevention                      | Yes: 65 (92%) No: 6 (8%)   |

**Feel free to write any comments, suggestions, and concerns anywhere on any page of the survey or in the blank space provided. Remember, your input will help shape the future of this project so that a comprehensive network can develop to ultimately reduce childhood morbidity and mortality in Texas. Thank you for taking part and spending your time to complete these questions.**

Contact Person for follow-up (if needed): \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_