



PEDIATRIC EMERGENCY TEAM

The Best Care for Babies, Teens and In-Betweens

When the AAMC pediatric emergency team faced the daunting task of resuscitating a five-pound infant, there was no room for error. Communication and cooperation among the nurses, doctors and technicians had to be spot-on.

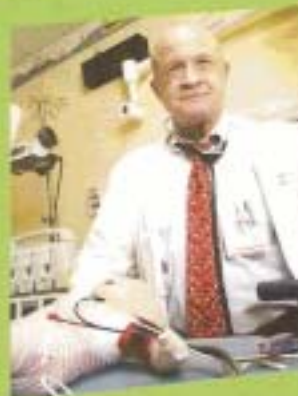
Coordination like that comes down to training as a team. Fortunately for the children who come through our doors, the Pediatric Emergency Department team members have been practicing their critical care skills with high-tech simulators unavailable to most community hospitals. That translates to the best care for your child.

Thanks to a generous donation from the Jess Carson Foundation, AAMC contracted with the Johns Hopkins Hospital simulation training laboratory. Together, they developed a customized program for pediatric emergency care.

During simulation training, doctors, nurses and technicians work in teams to "treat" lifelike manikins while physician trainers throw emergency scenarios at them. The manikins "tell" doctors

Happy
1st birthday,
pediatric
emergency
team!

Michael Clemmens, M.D.,
and nurses Ashley Abel,
Michele Bynum,
Adriane Breck,
and Teresa
Swift recreate
their pediatric
emergency
training scenario.



where it hurts, and they breathe rapidly or turn blue. Actors play the role of worried parents whose computerized "child" has stopped breathing or gone into cardiac arrest. The team checks pulses, reads electrocardiograms (EKG) and inserts IVs. They administer medicines and make care decisions while their "patients" improve or decline in response to their actions.

"The definition of a critical situation is that things can get better or worse very quickly," says Michael Clemmens, MD., medical director of the Pediatric Emergency Department and Inpatient Unit at AAMC, which celebrated its one-year anniversary in April. "When you're dealing with a child in critical condition, you want to be confident that you're making all the right decisions in a very timely manner."

One size doesn't fit all

"Adult care is one size fits all," Dr. Clemmens says. But in pediatrics, needs—everything from equipment size to medication and dosage—vary constantly. Nor long after the team resuscitated the tiny baby, they encountered a 300-pound teenager who required lifesaving intervention.

"We care for all of them," Dr. Clemmens says. "A 6-day-old is different from a 6-week-old, who is different from a 6-month-old or a 6-year-old."

"This training takes our skill sets to the next level. A vital part of that is ensuring that pediatric emergency care is as good as it can be. We want to be ready for any emergency."

 Improve your parenting skills and get expert advice from Denise White, AAMC family educator, at [facebook.com/SafeSmartU](https://www.facebook.com/SafeSmartU).



Working with the child life specialist, patient Vette Andersen-Tippett released his frustration with syringes filled with paint.

All in a Day's Work

Making Hospital Visits Less Scary for Kids

AAMC's Child Life Specialist Meghan Siegel's typical workday includes blowing bubbles for toddlers, demonstrating medical procedures on dolls, and encouraging teens to release their frustration by shooting paint-filled syringes on canvas or paper. She does all of this and more to help pediatric patients and their families cope with the social, emotional and psychological aspects of a child's illness or hospital visit.

Siegel says AAMC has enthusiastically welcomed her and her approach. "Everyone here is extremely receptive," she says. "They are embracing the Child Life Program and using it as much as they can to make things easier on the kids and the families."

