

Newsletter July 2024



Upcoming Events:

Pediatric MCI Drill Jonesboro, AR

September 21, 2024
Time and Location TBA

EMSC Advisory
Meeting

October 30, 2024 at 3:00pm

5800 W. 10th St., RM. 801

Little Rock, AR 72204

(Teams meeting available upon request)

Emergency Medical Services for Children was honored to award EMSC Crew of the Year 2024 this year at the AEMTA EMS Conference this past week to Micah Piker, John McConnell, Andrew White, and Matthew Lutz. In May of 2024, Russellville Fire Department was dispatched to a 10-year-old male patient who was found unresponsive by family secondary to a hanging. When Russellville Fire Department arrived on scene, they located the patient with a GCS of 3 with agonal respirations, heart rate in the 100's, and pulse ox in the 60's. The decisions was quickly made to intubate this patient. Russellville Fire Department set up for intubation, administered the correct weight-based medication dosages for intubation, and successfully obtained a patent airway for this patient. Because of the quick actions that Russellville Fire Department took this night, this patient was able to return home with full function in daily life.

Congratulations to Micah Piker, John McConnell, Andrew White, and Matthew Lutz!





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Upcoming Events:

Pediatric MCI Drill Little Rock, AR

October 12, 2024 8:00am-12:00pm

During the AEMTA EMS Conference, Emergency Medical Services for Children was proud to recognize Med-Tech EMS and MEMS and award them with the Pediatric Readiness Achievement Award. These two EMS services that have gone above and beyond by achieving pediatric readiness recognition through the Arkansas Prehospital Pediatric Readiness Recognition Program. These two services are leaders in prehospital pediatric emergency care and have achieved their recognition by meeting state and national recommendations for pediatric readiness. While pediatric emergencies are low in volume, they are high in acuity which makes it crucial that EMS services are always prepared for all pediatric emergencies.

Emergency Medical Services for Children also recognized and awarded Preston Freeman, paramedic and PECC with Med-Tech, and Niki Taylor, paramedic and PECC with MEMS, with Pediatric Emergency Care Coordinator of the Year. Med-Tech and MEMS could not have done it without the dedication from their Pediatric Emergency Care Coordinators. These two individuals made this program their priority and ensured that their service was pediatric ready at all levels, while fulfilling their duty of being prehospital providers and answering 911 calls.

Congratulations to Med-Tech, MEMS, Preston Freeman, and Niki Taylor on your achievement with pediatric readiness!





Peds Pearls Topic Catch, Clean, and Clamp Emergency Newborn Care

Imminent delivery... Few situations are met with the same level of apprehension and fear, even in the most experienced of medics or ED nurses such as prospect of delivering a baby in an emergency setting. Whether this is while traveling to the hospital or even in the hospital getting to the place where they routinely do that sort of ting, most of us would agree that delivering a baby is best left to others. But remember this, if we talk with L&D nurses who like to deliver babies (and do it on a very regular basis), they will remind us that over 90% of babies do not need the sorts of things we do in the ED on a regular basis (intubation, CPR, or emergency intravenous access). In the vast majority of cases, we really need to remember three and only three things... Catch, Clean, and Clamp.

Catch: Self explanatory. Catch the baby. For thousands of years (yes, even before you and I entered healthcare), babies were delivered successfully by people without any initials after their name. So take a breath, relax, and hold out your hands!

Clean: Despite what we might see on TV or in the movies, babies are messy (and slippery) when they first enter this world. Cleaning off the baby will accomplish a variety of important steps:

- A—Cleaning in and around the mouth and nose helps clear the airway.
- **B**—Cleaning the body provides stimulation which may initiate breathing.
- **C**—Drying the baby will reduce the cooling effect and improve circulation.
- **D**—Cleaning and drying the baby helps to avoid dropping.

Newborns are slippery, cold little creatures so grab a blanket or towel (the warmer the better!) and hold on tight! But, if you drop them, what do you do? Pick 'em up. How long can they stay on floor? What's the rule? Ask any Mom, she will tell you—five seconds!! (just like an ice cream cone).

Clamp: When you get a free minute, clamp the cord. In the past, as soon as the baby was all the way out, we frantically clamped the cord. Nowadays, many places wait at least 30-60 seconds before clamping. If the baby is sick and immediate resuscitation is required, clamp the cord and care for the baby. But, in most cute and healthy newborns, there's no huge rush to clamp the cord as long as baby and Mom are kept at the same level (i.e., baby not the floor, Mom on the bed.... That's bad!) In healthy newborns, delayed cord clamping has shown clear benefits to the babies by increasing their volume.

When you clamp, how close to the baby do you put the clamps? Four to five inches (8-11cm) is great, Three feet (1m) is a bit much. Leaving a little cord for the nursery to play with is truly appreciated, especially is the baby is sick. But remember the first rule of basic carpentry; "Measure twice, cut once." In our case, it's "clamp twice, cut once." If you clamp once and cut once, someone is going to bleed. So clamp twice and cut once (between the clamps).

So, if Mom screams those sweet words we dread hearing..."I've got to push!!!!" Just remember "Catch, Clean, Clamp."

Delivering babies is not...

Baseball—We don't catch and throw to another player!

Basketball—We don't dribble after catch!

Football—We don't spike after a successful catch!

Or even...

Fishing—We don't catch and release!



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