

2017

Pediatric Preparedness Resource Catalog

This catalog contains a pictorial listing of the pediatric preparedness resources that have been developed and disseminated by Illinois EMSC through funding from the Assistant Secretary for Preparedness and Response (ASPR).

Further information is available on the Illinois EMSC website at: www.stritch.luc.edu/emsc (click on the Disaster Preparedness page).



Illinois Emergency Medical
Services for Children



ILLINOIS
Emergency Medical Services for Children

Pediatric Disaster Preparedness Guidelines

Illinois Emergency Medical Services for Children is a collaborative program between the Illinois Department of Public Health and Loyola University Medical Center



Pediatric Disaster Preparedness Guidelines

<http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/resources/practiceguidelinestools/peddisasterguide.pdf>

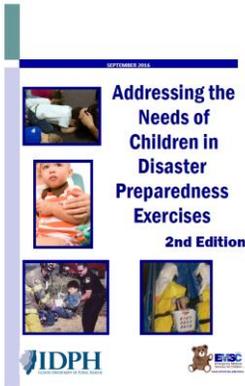
These guidelines were developed as a resource in addressing the needs of children during disaster planning. The four phases of disaster (prevention/mitigation, preparedness, response and recovery) are utilized as a framework throughout this booklet to outline the specific needs of children during a disaster event, as well as strategies and a checklist for addressing those needs.



Addressing the Needs of Children in Disaster Preparedness Exercises

[http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/disasterpreparedness/otherresources/disastertrainingandexercises/Addressing%20Needs%20of%20Children%20in%20Disater%20Prep%20Exercises%20Sept%202016%20Final\(2\).pdf](http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/disasterpreparedness/otherresources/disastertrainingandexercises/Addressing%20Needs%20of%20Children%20in%20Disater%20Prep%20Exercises%20Sept%202016%20Final(2).pdf)

This resource is for all agencies/organizations as they plan and conduct disaster drills and exercises. Inclusion of infants and children in disaster drills and exercises is an essential component in preparedness efforts and can assist in preparing agencies/organizations to meet the needs of children during an actual disaster or mass casualty incident. This second edition has expanded the target audience to all response agencies, which prompted the retitling of this edition from Disaster Preparedness Exercises Addressing the Pediatric Population (2006), to reflect the broader scope of the document.



Pediatric Disaster Triage: Utilizing the JumpSTART® Method

<http://ssom.luc.edu/emergency-medicine/children/disasterpreparedness/otherresources/masscasualtyincidentmctriage/>

JumpSTART® is an objective MCI triage system that parallels the START system and addresses the developmental and physiological differences of children. Provider and instructor courses are available that review pediatric MCI triage concepts, JumpSTART® and START triage methods, and includes a skills component where students apply both triage methods. The instructor course provides attendees with the tools they need to conduct their own provider courses.



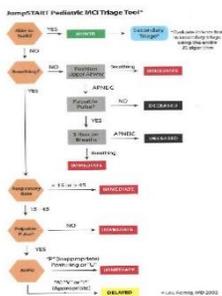
Pediatric Disaster Triage Scenarios: Utilizing the JumpSTART® Method

[http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/disasterpreparedness/otherresources/mcitrriage/emscjumpstarttrainingprogramandmaterials/JumpSTART%20Training%20Scenarios%202016%20final\(2\).pdf](http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/disasterpreparedness/otherresources/mcitrriage/emscjumpstarttrainingprogramandmaterials/JumpSTART%20Training%20Scenarios%202016%20final(2).pdf)

This document is offered as a resource to organizations as they conduct exercises/drills that involve mass casualty incident (MCI) triage and the use of START and JumpSTART® Triage methods. A review of START and JumpSTART® Triage is included along with six scenarios, three of which have sample victim lists.

2016

Pediatric Disaster Triage
Training Scenarios:
Utilizing the JumpSTART®
Method

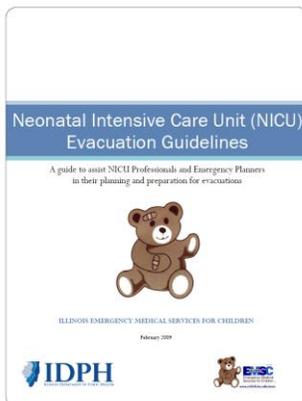
Pediatric Disaster Triage Algorithm

<http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/disasterpreparedness/otherresources/mcitrriage/JumpSTART%20Algorithm.pdf>

Neonatal Intensive Care Unit (NICU) Evacuation Guidelines

[http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/disasterpreparedness/otherresources/evacuation/NICU%20Evacuation%20Guidelines%20Final%202009\(2\).pdf](http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/disasterpreparedness/otherresources/evacuation/NICU%20Evacuation%20Guidelines%20Final%202009(2).pdf)

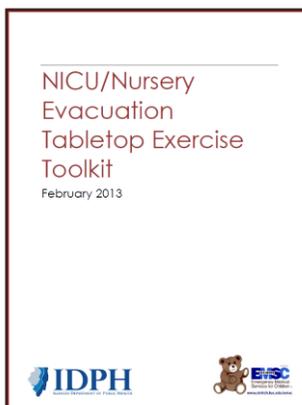
Evacuation of an NICU is a high risk activity and requires a carefully planned approach due to the fragile medical condition of these infants, the various medical technology/devices they depend upon for survival, and the overall surge capacity/transfer pattern in managing an increase in NICU patients. This set of guidelines has been developed to assist in ensuring a statewide consistent approach to the evacuation process.



NICU/Nursery Evacuation Tabletop Exercise Toolkit

[http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/disasterpreparedness/otherresources/disastertrainingandexercises/NICU_Nursery_EvacuationTTX_Toolkit%20FINAL\(2\).pdf](http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/disasterpreparedness/otherresources/disastertrainingandexercises/NICU_Nursery_EvacuationTTX_Toolkit%20FINAL(2).pdf)

This toolkit utilizes information from the Illinois EMSC NICU Evacuation Guidelines as well as several NICU/Nursery Evacuation Tabletop exercises conducted by Illinois EMSC. These exercises focused on resource allocation and other key coordination components as medically fragile and technologically dependent infants needed to be mobilized and evacuated during various disaster scenarios. The toolkit provides hospitals with guidance on planning, conducting and evaluating tabletop exercises that address the NICU/Nursery population, and includes excerpts from key exercise documents such as the Situation Manual (SitMan), Master Scenario Exercise List (MSEL), Exercise Evaluation Guide (EEG) and After Action Report (AAR). Note that the concepts outlined in this toolkit are applicable in exercises that address other pediatric patient populations.



State of Illinois
Illinois State Government
Department of Public Health
June 2015, MS2 101

Creating Liquid

Amoxicillin

for infants and children exposed to a disease

How to Make Liquid Amoxicillin
(17 mg per 5 mL suspension)

Step 1

1. Wash your hands with soap and water.
2. Crush 100 mg amoxicillin tablets.
3. Weigh the crushed tablets to ensure the correct amount of the suspension.
4. Transfer the crushed tablets to a clean container.
5. Add water to the container to make 100 mL of suspension.
6. Mix well and use the suspension.

Step 2

Weight-based chart for children:

Weight (kg)	Dose (mg)	Dose (mL)
10	100	10
12	120	12
15	150	15
20	200	20
25	250	25
30	300	30
40	400	40
50	500	50
60	600	60
70	700	70
80	800	80
90	900	90
100	1000	100

Amoxicillin Instructional Brochure

http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/disasterpreparedness/organizationalresources/communityfamily/AmoxicillinDosingBrochureFINAL_Aug_2015.pdf

This brochure would be used for mass prophylaxis/treatment during a mass antibiotic prophylaxis/treatment incident if insufficient quantities of Amoxicillin suspension are available. The instructional material provides parents/caregivers with step-by-step instructions on how to create liquid suspension by crushing/dissolving adult strength tablets and how to properly dose children based on their weight.

State of Illinois
Illinois State Government
Department of Public Health
June 2015, MS2 101

Creating Liquid

Ciprofloxacin

for infants and children exposed to a disease

How to Make Liquid Ciprofloxacin
(25 mg per 5 mL suspension)

Step 1

1. Wash your hands with soap and water.
2. Crush 250 mg ciprofloxacin tablets.
3. Weigh the crushed tablets to ensure the correct amount of the suspension.
4. Transfer the crushed tablets to a clean container.
5. Add water to the container to make 100 mL of suspension.
6. Mix well and use the suspension.

Step 2

Weight-based chart for children:

Weight (kg)	Dose (mg)	Dose (mL)
10	250	5
12	300	6
15	375	7.5
20	500	10
25	625	12.5
30	750	15
40	1000	20
50	1250	25
60	1500	30
70	1750	35
80	2000	40
90	2250	45
100	2500	50

Ciprofloxacin Instructional Brochure

<http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/disasterpreparedness/organizationalresources/communityfamily/CiprofloxacinDosingBrochure%20Aug%202015%20Final.pdf>

This brochure would be used for mass prophylaxis/treatment during a mass antibiotic prophylaxis/treatment incident if insufficient quantities of Ciprofloxacin suspension are available. The instructional material provides parents/caregivers with step-by-step instructions on how to create liquid suspension by crushing/dissolving adult strength tablets and how to properly dose children based on their weight.

State of Illinois
Illinois State Government
Department of Public Health
June 2015, MS2 101

Creating Liquid

Doxycycline

for infants and children exposed to a disease

How to Make Liquid Doxycycline
(25 mg per 5 mL suspension)

Step 1

1. Wash your hands with soap and water.
2. Crush 100 mg doxycycline tablets.
3. Weigh the crushed tablets to ensure the correct amount of the suspension.
4. Transfer the crushed tablets to a clean container.
5. Add water to the container to make 100 mL of suspension.
6. Mix well and use the suspension.

Step 2

Weight-based chart for children:

Weight (kg)	Dose (mg)	Dose (mL)
10	100	5
12	120	6
15	150	7.5
20	200	10
25	250	12.5
30	300	15
40	400	20
50	500	25
60	600	30
70	700	35
80	800	40
90	900	45
100	1000	50

Doxycycline Instructional Brochure

<http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/disasterpreparedness/organizationalresources/communityfamily/DoxycyclineDosingBrochure%20March%202017%20Final.pdf>

This brochure would be used for mass prophylaxis/treatment during a mass antibiotic prophylaxis/treatment incident if insufficient quantities of Doxycycline suspension are available. The instructional material provides parents/caregivers with step-by-step instructions on how to create liquid suspension by crushing/dissolving adult strength tablets and how to properly dose children based on their weight.

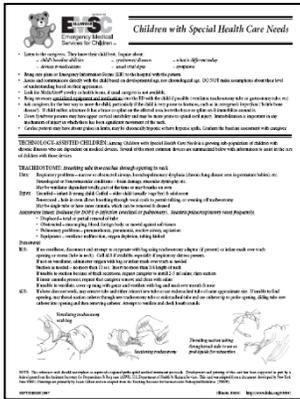
Region 8 Pediatric Resources

Region	County	Hospital	Address	Phone	ICU	PICU	ED	Level	Transport	Notes
Region 8	Cook	Northwestern Memorial Hospital	676 N. Lake Shore Drive	312.555.4000	Yes	Yes	Yes	Level 1	Yes	Level 1 Trauma Center
		Northwestern Children's Hospital	277 E. Chicago Ave	312.555.4000	Yes	Yes	Yes	Level 1	Yes	Level 1 Trauma Center
		Northwestern Memorial Hospital	676 N. Lake Shore Drive	312.555.4000	Yes	Yes	Yes	Level 1	Yes	Level 1 Trauma Center
		Northwestern Children's Hospital	277 E. Chicago Ave	312.555.4000	Yes	Yes	Yes	Level 1	Yes	Level 1 Trauma Center
		Northwestern Memorial Hospital	676 N. Lake Shore Drive	312.555.4000	Yes	Yes	Yes	Level 1	Yes	Level 1 Trauma Center
		Northwestern Children's Hospital	277 E. Chicago Ave	312.555.4000	Yes	Yes	Yes	Level 1	Yes	Level 1 Trauma Center
		Northwestern Memorial Hospital	676 N. Lake Shore Drive	312.555.4000	Yes	Yes	Yes	Level 1	Yes	Level 1 Trauma Center
		Northwestern Children's Hospital	277 E. Chicago Ave	312.555.4000	Yes	Yes	Yes	Level 1	Yes	Level 1 Trauma Center
		Northwestern Memorial Hospital	676 N. Lake Shore Drive	312.555.4000	Yes	Yes	Yes	Level 1	Yes	Level 1 Trauma Center
		Northwestern Children's Hospital	277 E. Chicago Ave	312.555.4000	Yes	Yes	Yes	Level 1	Yes	Level 1 Trauma Center
		Northwestern Memorial Hospital	676 N. Lake Shore Drive	312.555.4000	Yes	Yes	Yes	Level 1	Yes	Level 1 Trauma Center

Regional Pediatric Resource Guides

http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/home/Region%201-11_and_Burn_final_4_2016.pdf

Resource guides have been developed for each of the eleven Illinois EMS Regions containing hospital information related to PCCC/EDAP/SEDP designation, PICU, perinatal level, trauma center and transport team resources/contact info. In addition, burn center, poison center, local health department and the self-assigned Pediatric System Decompression Category for each hospital to be used during large scale disasters is also accessible on these guides. Annual updates will be made to these guides as necessary.



Children With Special Health Care Needs (CSHCN) Reference Guide
<http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchild/en/documents/disasterpreparedness/otherresources/cschn/Children%20with%20Special%20Healthcare%20Needs%20Reference%20Guide.pdf>

In a disaster event, typical interfacility transfer patterns to pediatric tertiary care centers may be disrupted. Children with chronic conditions may need to be cared for at community hospitals. This one-page resource provides healthcare providers with quick reference information on troubleshooting assistive devices that may be seen in children with chronic conditions, ie tracheostomy, PICC line, CSF shunt, gastrostomy, colostomy, ureterostomy.

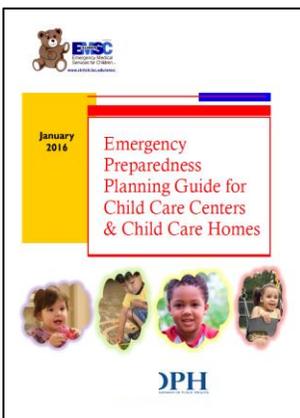
Characteristics of Biologic, Nuclear, Incendiary and Chemical Agents
<http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchild/en/documents/disasterpreparedness/organizationalresources/communityfamily/Characteristics%20of%20Biological%20Nuclear%20Incendiary%20and%20Chemical%20Agents.pdf>

This handy one-page reference sheet utilizes 3 resources to provide information on the incubation period, duration of illness, signs/symptoms and other characteristics of biologic, nuclear, incendiary and chemical agents.



Children and Facemasks
http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchild/en/documents/disasterpreparedness/organizationalresources/communityfamily/Children%20and%20facemasks_March%202017.pdf

Maintaining facemasks on children during an influenza event can be a challenge. This resource provides healthcare professionals and parents/caregivers with key information related to why children need to wear facemasks, who is at higher risk for infection, strategies on keeping facemasks on children, assessing children while they are wearing facemasks, and what to do when supplies of pediatric facemasks are limited.

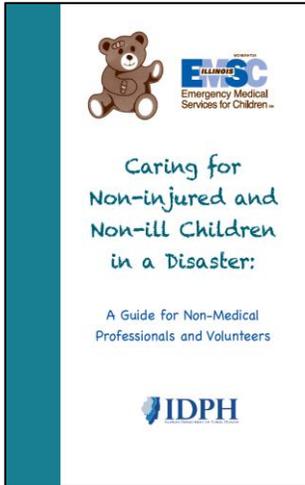


Emergency Preparedness Planning Guide for Child Care Centers & Child Care Homes
[http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchild/en/documents/resources/practiceguidelinetools/Emergence%20Preparedness%20Planning%20Guide%20for%20Child%20Care%20Centers%202016\(2\).pdf](http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchild/en/documents/resources/practiceguidelinetools/Emergence%20Preparedness%20Planning%20Guide%20for%20Child%20Care%20Centers%202016(2).pdf)

Many children under the age of five spend their daytime hours away from their parents. Most of these children are in a child care center/child care home. Emergencies occurring during hours of operation require pre planning. Therefore, it is imperative to have a comprehensive written disaster plan, commonly referred to as the Emergency Operations Plan (EOP) with policies and procedures to be followed when a disaster occurs. These guidelines were developed for child care centers/child care homes in the State of Illinois to help with their development of a plan for emergency situations.

Caring for Non-injured and Non-ill Children in a Disaster: A Guide for Non-Medical Professionals and Volunteers

[http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/disasterpreparedness/organizationalresources/communityfamily/Caring%20Children%20Disaster%20Book_updated_5_2016\(2\).pdf](http://ssom.luc.edu/media/stritchschoolofmedicine/emergencymedicine/emsforchildren/documents/disasterpreparedness/organizationalresources/communityfamily/Caring%20Children%20Disaster%20Book_updated_5_2016(2).pdf)



Since children comprise nearly a quarter of the U.S. population, they will likely be impacted by any natural or man-made disaster that occurs. Non-medical professionals and community volunteers may find themselves in the position to care for, watch over or consider the needs of non-injured and non-ill children during and after a disaster. Because these individuals may not normally care for children on a day-to-day basis, they may not be aware of the specific needs of children. This guide was designed as a resource for these individuals and includes a basic understanding of how children react to disasters and responders; the specific needs (physical and emotional) of children of all ages; tips for caring for and talking to children; information on children with chronic medical or behavioral conditions; and caring for unaccompanied children.