Office Preparedness for Pediatric Emergencies: Too Much Variability between Practices Is a Cause for Concern

by Lewis First MD, MS, Editor in Chief, Pediatrics

It is important to remember that emergencies can happen in all settings. Children in distress might present to any clinic and need immediate care that cannot wait for transfer to an emergency department. How prepared are pediatric medical offices in terms of having the right equipment and adhering to AAP policies and protocols for acute care situations? Abulebda et al evaluated this question in a study we are early releasing this week (10.1542/peds.2020-038463).

The authors led a multicenter, observational study over 15 months (December 2018-March 2020) involving 48 teams from 42 offices across nine states. The offices were inspected to see if they adhered to checklists that reflected AAP guidelines for both essential equipment and supplies as well as having appropriate policies and protocols in place. In addition, teams participated in office-based simulations to determine the degree to which their actions matched expectations for care. There were two simulations - a child with asthma and a child with a seizure. The good news is that 82% of the practices included in this study had the appropriate equipment (although the bad news is that 18% did not). More concerning is that only 57% of the practices in this study had policies and protocols in place for dealing with emergencies. As you might expect, there was substantive variability between practices, with independent and smaller being less prepared and more variable in performance.

What can we do to improve our readiness? To answer that question, we invited office-based pediatrician Dr. Jesse Hackell to share his thoughts with an accompanying commentary (10.1542/peds.2021-051830). Dr. Hackell provides important insight as to why the variability exists, such as cost of equipment and supplies and lack of practice. He calls on us to focus on how we can be better prepared and suggests that academic medical centers partner with practices in the community to ensure that all children have high quality access to emergency care starting in any office setting. How is your practice doing in its emergency preparedness? Becoming familiar with the AAP Policy on this issue is a great first step followed by linking to this study and commentary to compare your practice with those discussed in these two important articles.