



REGION 11 CHICAGO EMS SYSTEM POLICY	Title: Pediatric Patient Destination
	Section: Transportation
	Approved: EMS Medical Directors Consortium
	Effective: December 6, 2023

PEDIATRIC PATIENT DESTINATION

I. PURPOSE

- A. Identify pediatric patients with complex conditions that require transport to a designated Pediatric Critical Care Center (PCCC).
- B. Identify pediatric patients with emergency conditions that require transport to a designated Emergency Department Approved for Pediatrics (EDAP).
- C. For pediatric trauma criteria and Level 1 Pediatric Trauma Centers, refer to the Trauma Patient Destination Policy.

II. PEDIATRIC CENTERS

A. Pediatric Critical Care Center (PCCC)

- 1. Hospitals that have a pediatric intensive care unit (PICU) and can provide specialty inpatient services for the pediatric patient.
- 2. All PCCC level centers must also maintain EDAP status.

B. Emergency Department Approved for Pediatrics (EDAP)

- 1. Hospitals that can provide comprehensive emergency services and meet pediatric emergency care requirements.
- 2. Pediatric emergency care requirements include appropriately trained staff, effective processes (policies, guidelines, training requirements, and quality improvement initiatives), and resources (medications, supplies, and equipment) to care for children who present to the emergency department (ED).

C. Emergency Department Without Pediatric Designation

- 1. Hospitals that can stabilize and may transfer pediatric patients.

III. PEDIATRIC DESTINATION CRITERIA

A. Pediatric Critical Care Center (PCCC)

- 1. Pediatric stroke
- 2. Other complex conditions that require specialty care in consultation with online medical control



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B. Emergency Department Approved for Pediatrics (EDAP)

1. Pediatric cardiac arrest (preferentially PCCC)
2. Status epilepticus
3. Brief Resolved Unexplained Event (BRUE)
4. Abandoned newborn

C. Emergency Department Without Pediatric Designation

1. Low acuity conditions

IV. HOSPITAL COMMUNICATION

- A. All pediatric patient transports are considered Systems of Care patients and require contact with Online Medical Control.
- B. When possible, preferential transport to the pediatric patient’s medical home can facilitate timely and efficient care.
- C. Region 11 Hospitals that are Base Stations with PCCC capabilities may be contacted preferentially for Online Medical Control including refusals.
 1. Ann & Robert H. Lurie Children’s Hospital of Chicago
 2. UChicago Medicine Comer Children’s Hospital



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REGION 11 PCCC/EDAP CENTERS

PEDIATRIC CRITICAL CARE CENTER (PCCC)

Advocate Christ Medical Center
 Advocate Lutheran General Hospital
 Ann & Robert H. Lurie Children’s Hospital of Chicago*
 Loyola University Medical Center
 UChicago Medicine Comer Children’s Hospital*
 UI Health

EMERGENCY DEPARTMENT APPROVED FOR PEDIATRICS (EDAP)

Advocate Illinois Masonic Medical Center
 Ascension Saint Francis Hospital
 Ascension Saint Joseph Hospital, Chicago
 Ascension Saints Mary & Elizabeth Medical Center - St. Mary Campus ONLY
 John H. Stroger, Jr. Hospital of Cook County*
 Loyola MacNeal Hospital
 Mount Sinai Hospital
 Northwestern Memorial Hospital
 OSF Little Company of Mary Medical Center
 Rush University Medical Center
 Saint Anthony Hospital
 West Suburban Medical Center

The following Region 11 Emergency Departments are **NOT** designated by the Illinois Department of Public Health Emergency Medical Services for Children (EMSC) program as having the essential resources and capabilities in place to meet the emergency and critical care needs of seriously ill children:

Advocate Trinity Hospital Ascension Resurrection Medical Center Community First Medical Center Endeavor Health Swedish Hospital Holy Cross Hospital Humboldt Park Health Insight Hospital and Medical Center Jackson Park Hospital & Medical Center	Jesse Brown Veterans Administration Medical Center Loretto Hospital Provident Hospital of Cook County Roseland Community Hospital Saint Bernard Hospital & Health Care Center South Shore Hospital Thorek Memorial Hospital Weiss Memorial Hospital
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***Region 11 Pediatric Level I Trauma Centers**

Updated 12/22, 7/23, 12/23, 9/24