



## Illinois EMSC

# **Sample Emergency Department Pediatric Quality Improvement Markers/Indicators**

### ***Asthma***

- Prior ICU admission
- Onset of wheezing, prior treatments
- O<sub>2</sub> sat, BP, HR and RR documented
- Peak Flow pre and post treatment
- Reassessment/documentation identifying progress

### ***Child Maltreatment***

- Screening mechanisms
- Social work evaluation
- DCFS reporting documentation

### ***Diabetic Ketoacidosis (DKA )***

- Time to VBG and BS
- IV fluid bolus appropriate
- K+, Na+, Ca and Phos documented
- HCO<sub>3</sub> administered? Indication?
- Mental status documented
- Serial examinations documented
- Hourly glucose documented
- Documentation of total fluids administered on the child that is transferred out
- Reassessment/documentation identifying progress

### ***Hematology/Oncology***

- Time to antibiotic administration (fever/neutropenia)
- Reassessment/documentation identifying progress

### ***Head Trauma***

- Timely airway management when GCS < 8
- Child maltreatment assessment completed
- Reassessment/documentation identifying progress
- Documentation of indicator if a head CT is obtained.

### ***Length of Stay in the ED***

- Time to interfacility transfer
- Reassessment/documentation identifying progress

### ***Mock Codes***

- Evaluate dosing calculations and procedures
- Reassessment/documentation identifying progress

### ***Moderate Sedation***

- Reassessment/documentation identifying progress
- Appropriate monitoring

### ***Neonatal Fever***

- Time to antibiotics
- Lumbar puncture
- Reassessment/documentation identifying progress

### ***Pain Management***

- Door to first pain medication
- Documentation of relief
- Pulse oximetry
- Reassessment/documentation identifying progress

### ***Patient Safety/Monitoring***

- Obtaining accurate weight (using kg)
- Was weight obtained upon ED admission or was verbal weight conveyed by parent
- Vital signs routinely documented on kids, i.e. temp
- Reassessment/documentation identifying progress
- Abnormal VS reassessed/addressed prior to discharge
- Monitoring medication error rates
- Assuring compliance with EDAP/SEDP equipment guidelines

### ***Pneumonia***

- Complete VS documented: Temperature, BP, HR, RR and Pulse oximetry
- Time to first antibiotic
- Reassessment/documentation identifying progress

### ***Rapid Response Team***

- Assess pediatric preparedness
- Reassessment/documentation identifying progress

### ***Seizures***

- Airway management
- Medication delivery
- Reassessment/documentation identifying progress
- Current medications documented

### ***Sickle Cell fever***

- Similar to neonate with fever
- Complete VS documented: Temperature, BP, HR, RR and Pulse oximetry
- Reassessment/documentation identifying progress

### ***Trauma***

- Complete VS documented: Temperature, BP, HR, RR and Pulse oximetry
- Adequate volume resuscitation in patients presenting in shock condition
- Timely transfer (if not a trauma center)

### ***VP shunt complaints***

- Complete VS documented: Temperature, BP, HR, RR and Pulse oximetry
- CT Head
- Fundoscopic exam
- Shunt series
- Time to neurosurgical consultation
- Reassessment/documentation identifying progress