Introduction: A mass-casualty event (MCE) involving pediatric patients within the New York City metropolitan region could overwhelm existing pediatric resources. Because “children are not small adults”, their different physiology and behavior require specialized triage, transport, and treatment. The New York City Department of Health and Mental Hygiene (NYCDOHMH), recognizing the need to plan for MCEs with large numbers of pediatric victims, created and funded the New York City Pediatric Disaster Coalition (PDC). The PDC’s goal is to establish an ongoing collaboration that addresses gaps in the ability and infrastructure of the NYC regional health care system to provide effective and timely, large-scale pediatric care during a MCE.

Methods: The PDC involves experts in pediatric emergency preparedness, emergency medicine, trauma surgery, and intensive care from 11 of 43 NYC Pediatric and Children’s Hospitals, the NYCDOHMH, the New York City Office of Emergency Management, and the New York City Fire Department Office of Medical Affairs. Under the aegis of a Central Leadership Council, two committees met twice monthly to develop Pediatric Prehospital Triage/Transport and PICU Surge Capacity plans.

Results: After extensive literature review and multiple draft revisions, a Pediatric Triage/Transport Plan was formulated. The plan includes: (1) a modified START algorithm that adds rescue breaths and an uptriage option; (2) priority evacuation and transport; (3) pediatric disaster receiving hospitals; and (4) a pediatric transfer consultant. Once implemented, it will provide specific pediatric triage criteria for transport that matches acuity/severity of illness to appropriate tiered resources.

Conclusions: The PDC has provided an effective multidisciplinary approach to planning for a large scale regional MCE involving pediatric patients. Specific Pediatric Triage and Transport Protocols were created, and are being integrated into regional EMS system protocols. This approach, and the EMS protocols it has generated, could be used as a model for other large urban centers.

Keywords: coalition; disaster; New York City; pediatrics; preparedness; triage

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Supplement