

IFEM PEMSIG Newsletter October 2013

Greetings to all members!

Membership

Our membership is growing slowly, so a big welcome to those new members who have joined us. As we grow, it is hoped that we can share ideas and experiences of what has happened in our little bit of the world that may help others improve paediatric emergency care, with the hope that eventually paediatric emergency medicine is a recognised specialty in all countries.

ICEM 2014 – Hong Kong

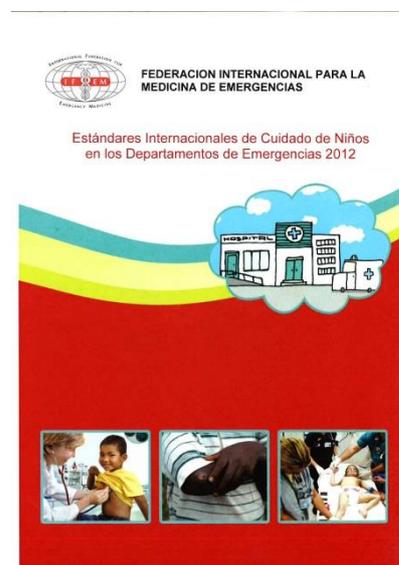
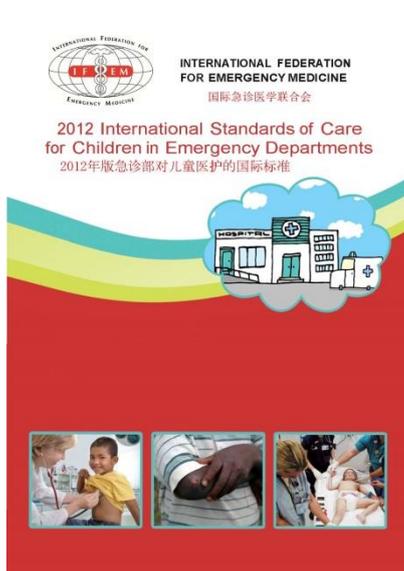
As this is an international group, we hope to meet as many of you as possible in Hong Kong next June. This is when the ICEM conference is, and our first AGM will be held there. If you need to plan your leave, book it soon 😊 I hear the food and the shopping in Hong Kong is great!!!



Standards Document - translations

Most of you will have had a “call to arms” to help have a look at the first version of the document “Standards in Paediatric Emergency Care” document. Thank you to those who have volunteered to look at it to ensure it remains reader friendly. As we are an international group, English is not the first language of everyone, so we need to ensure that the concepts in that document are clear.

Also, thanks to Liliana Careras for spearheading the creation of a Spanish version of the document, and Angelina Ang for spearheading the Chinese version of it. This is sure to make the ideas in this document more accessible to all.



Who we are and what we do

Finally, as we are all from different countries, we thought it would be nice to hear a little about where each of us come from. Here is the first of many to come, from Marianne Gausche-Hill in the USA:



I work in an urban, 453 bed county-based hospital in the county of Los Angeles, CA, USA. I am the pediatric emergency medicine division chief but am trained in emergency medicine and pediatric emergency medicine so I care for both adult and pediatric patients. We have separate emergency departments for adult and pediatric patients within the hospital but located very close to one another. We are a Level I Trauma Center (pediatric capable) and a pediatric critical care center. In the pediatric ED we saw 20,200 patients ages 0-20 years (up to 21st birthday). The mean median age was 6.7 years and 1,788 patients were admitted (8.9%) (315 patients to the PICU).

We are actively working on improving the pediatric readiness of our ED as well as addressing pain control early in the patient's visit. We have been promoting pediatric readiness of EDs in California and the Nation (www.pediatricreadiness.org).

While working in the ED I supervise medical students, interns, residents and pediatric emergency medicine fellows in caring for infants and children. Each day I am active in teaching on the floor and creating lectures, and in my spare time I review and/or write textbook chapters. I also do research, and both professional and volunteer work at local, state and national levels.

I know that we have a lot we can share with ourselves as well as our colleagues that can improve the care of children globally. I look forward to such sharing with each of you.

Respectfully,

Marianne Gausche-Hill, MD, FACEP, FAAP



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IFEM Forum

The IFEM Forum is aimed at facilitating communication amongst IFEM members. It is not available to the public at this stage.

Members can login to access the General and Disaster Medicine and Paediatric Emergency Medicine Forums.

To obtain a username and password, contact the IFEM Secretariat here.

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I AM LOOKING FOR ...

Our Forum

Don't forget the PEMSIG Discussion Forum – to view click [here](#). Need advice? Got a suggestion? Want to share an innovation? This is the place to have your say.

Forgotten your username and password? Contact the Secretariat [here](#).

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