Dear Representatives King, Castor, Stewart, and Butterfield:

As organizations that care deeply about the health and safety of children, we offer our strong support for H.R. 6748, the Emergency Medical Services for Children Program Reauthorization Act of 2018. The EMSC program has made landmark improvements to the emergency care delivered to children all across the nation. As the only federal program dedicated to improving emergency care for children, EMSC has brought vital attention and resources to this important population.

Just this year, 30 million children will visit the emergency department, and emergencies involving children can occur anytime, anywhere. The EMSC program is designed to ensure that all children and adolescents – no matter where they live, attend school, or travel – receive appropriate care in a health emergency. Through EMSC, all states and territories have received state partnership grants to expand and improve their capacity to reduce and respond to emergencies. EMSC funding is used to ensure that hospitals and ambulances are properly equipped to treat pediatric emergencies, to provide pediatric training to paramedics and first responders, and to improve the systems that allow for efficient, effective pediatric emergency medical care.

EMSC has been successful in improving care for children. Emergency departments and pre-hospital EMS personnel have more appropriate medication, equipment, training, and systems in place to treat children. For example, doctors and nurses are better able to manage pediatric emergencies such as traumatic brain injuries, pediatric seizures, and bronchiolitis. The majority (90%) of EMS agencies in the US have consistent availability to online medical direction when treating a pediatric patient and 85% have off-line medical direction that includes protocols inclusive of pediatric patients. In the hospital setting, almost two thirds (67%) of hospitals have interfacility transfer agreements and 50% have interfacility transfer guidelines that incorporate recommended pediatric components. Looking ahead, EMSC aims to ensure all EDs are ready to care for children through the implementation of the National Pediatric Readiness Project, a national quality improvement initiative to ensure EDs have the essential guidelines and resources in place.

H.R. 6748 would reauthorize the EMSC program to continue its vital work for an additional five years. We thank you for your leadership in authoring this critical legislation for children and
appreciate your long-standing commitment to the quality of the emergency care children receive. We look forward to working with you in support of enactment of this legislation.

Sincerely,

Academic Pediatric Association
American Academy of Pediatrics
American Ambulance Association
American College of Emergency Physicians
American College of Surgeons
American Pediatric Society
American Pediatric Surgical Association
Association of Maternal & Child Health Programs
Association of Medical School Pediatric Department Chairs
Children's Health Fund
Children’s Hospital Association
Children's Hospital Association of Texas
Children's Hospital of Philadelphia
Children's Hospital of Wisconsin
Children’s Mercy Hospital, Kansas City
Cincinnati Children's Hospital Medical Center
Danny’s Dose Alliance
Emergency Nurses Association
Family Voices
First Focus
International Trauma Life Support
March of Dimes
National Association of County and City Health Officials
National Association of Emergency Medical Technicians
National Association of EMS Physicians
National Association of Pediatric Nurse Practitioners
National Association of State Emergency Medical Services Officials
National EMS Management Association
Nemours Children’s Health System
New Mexico Pediatric Society
Pediatric Policy Council
Rhode Island Parent Information Network
Seattle Children's
Society for Pediatric Research
The Paramedic Foundation
University of New Mexico Health Sciences Center
UPMC Children's Hospital of Pittsburgh
Wisconsin Chapter of the American Academy of Pediatrics