

NATIONAL STUDY ADDS TO EVIDENCE THAT

# KIDS MAY DO BETTER AT PEDIATRIC TRAUMA CENTERS LIKE CHILDREN'S MINNESOTA.

## ABOUT THE STUDY



Published in *Journal of Pediatric Surgery*

**28,000+**  
PATIENTS AGES 0 TO 17.

**FIRST STUDY** to look at children's outcomes by trauma center type following **MOTOR VEHICLE COLLISIONS (MVC).**

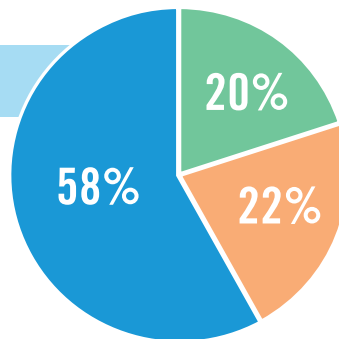
## INCLUDED

### THREE TYPES OF LEVEL I TRAUMA CENTERS

General Adult Trauma Centers **(ATC)**

Adult trauma centers with Level I pediatric qualifications **(ATC + PTC)**

Free-standing Pediatric Trauma Center **(PTC)**



## FINDINGS

The study showed

**BETTER OUTCOMES FOR KIDS**

with MVC-related injuries when treated

**AT A FREE-STANDING LEVEL I PEDIATRIC TRAUMA CENTER**

Even after adjusting for important factors including injury severity, the study showed:

Children aged 0–14 years were **50% less likely to develop at least one complication**, like pneumonia, or have a laparotomy if treated at a free-standing pediatric center rather than an adult trauma center.

Adolescents 15–17 years were **50% less likely to die** and **80% less likely to have a laparotomy** if treated at a free-standing pediatric center rather than an adult trauma center.

## CONCLUSION

“ Pediatric trauma care teams are often more comfortable recommending a conservative approach, including observation instead of aggressive treatment or diagnosis, compared to physicians at adult trauma centers who treat fewer pediatric patients. This, combined with **use of standardized pediatric care pathways in these centers, likely contributes to the better outcomes** we noted in this study. ”

Anupam B. Kharbanda, MD, Chief of Critical Care Services at Children's Minnesota and study author

Access full article: [jped surg.org/article/S0022-3468\(16\)30016-1/fulltext](https://jped surg.org/article/S0022-3468(16)30016-1/fulltext)

The study reviewed data from the American College of Surgeons (ACS) National Trauma Data Bank on 28,145 pediatric patients treated at a Level I trauma center between 2009 and 2012. Researchers adjusted for injury severity and other important risk factors.

The ACS verifies trauma centers, assigning Levels I-IV status based on the center's ability to care for the most serious trauma cases, with specific criteria for pediatric trauma centers.

# WHEN IT COMES TO TRAUMA, KIDS DO BETTER HERE.



Seven ways **EXPERIENCE** and **EXPERTISE** set us apart in pediatric trauma care:

1. **Dedicated solely to kids** as the only stand alone Level I Pediatric Trauma Center in Minnesota
2. **Treat 1,200 pediatric trauma patients annually** from around the region
3. **Dedicated professionals to support kids and families** throughout their trauma care
  - Largest pediatric trauma team with pediatric surgeons and critical care experts in house 24/7
  - Trauma Advanced Practice Providers (TAPPs) to provide continuity of care upon arrival to discharge
  - Social workers with experience in helping families and children address their mental health and emotional needs as well as social concerns
  - Child Life specialists to help kids cope with their injuries, prepare for their surgeries and treatments
  - Close collaboration with Midwest Children's Resource Center to assist with managing patients with injuries concerning for child abuse or neglect
4. **Exceptional facilities** featuring two trauma bays, a dedicated orthopedic room with fluoroscopy and advanced X-ray capabilities for fracture management; state-of-the-art surgical suites, neonatal and pediatric critical care and specialized cardiology and neuroscience units.
5. **Advanced treatments** available such as pediatric and adolescent extracorporeal membrane oxygenation (ECMO) for severe lung injury
6. **Minimize and treat pain** from injuries and procedures using Comfort Promise age-appropriate strategies
7. **Full spectrum of pediatric surgical care**, including specialists in:
  - Neurosurgery
  - Orthopedics
  - General surgery
  - ENT and facial plastic surgery
  - Cardiothoracic surgery
  - Plastic and hand surgery
  - Oral and maxillofacial surgery
  - Ophthalmology
  - Urology
  - Gynecology



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