Health Department Funds Pediatric Training Courses for EMS Providers

Two-day training to be held this weekend, Feb. 21 and 22 at Vermont Technical College

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BURLINGTON – Critically ill pediatric patients are not just “little adults,” according to Bill Mapes, a paramedic who teaches a statewide course funded by the Vermont Department of Health’s EMS for Children program. Children need highly specialized care that requires additional training and equipment to stabilize patients and save lives.

The fourth and final two-day Pediatric Education for Prehospital Professionals (PEPP) training, which was designed by the American Academy of Pediatrics, will be held at Vermont Technical College in Randolph on Feb. 21 and 22.

Mapes is the training coordinator for the Regional Ambulance Service in Rutland and one of the state’s most respected first responders, with 32 years of experience.

“When Bill Mapes is leading a class, people listen,” said Chris Bell, director of public health preparedness and EMS for the Health Department. “And I think it says a lot about the dedication of the state’s EMS providers who consistently work to improve their skills. The three courses held to date were well attended.”

Courses were held in January and February at the University of Vermont, Castleton State College, and Lyndon State College. The training was offered regionally to cover all 13 EMS districts. More than 50 EMS personnel will complete the training, and some will become eligible to teach the course.

The training provides continuing education toward their licenses as well as the opportunity to brush up on their pediatric emergency skills. The Health Departments has furnished all 13 EMS districts with teaching resources to provide future PEPP courses locally led by the new instructors.

Approximately 10 percent of all EMS calls in Vermont are for children, and many calls involve respiratory (breathing) problems such as asthma attacks that need to be stabilized. EMS providers refer to the unexpected rapid collapse of a child who is having trouble breathing and then goes into a state of cardiac arrest as “falling off the table.” Unlike adults, a pediatric patient will show fewer signs of impending heart failure and will collapse quickly.

“Pediatric cardiac arrest is almost always preceded by respiratory failure and what’s required is rapid recognition, immediate airway control with oxygenation and ventilation, and transport to an appropriate facility where they can provide continuing care,” said Mapes. “Pediatric emergencies are always stressful, and what we are working toward is raising the level of care for all EMS providers in Vermont.”

A majority of the state’s nearly 3,000 EMS providers are volunteer first responders.

For more information on the Vermont Office of EMS and Injury Prevention visit: http://healthvermont.gov/hc/ems/ems_index.aspx

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