

Simulation Trial of Telemedical Support for Paramedics

Status: RECRUITING

Eligibility Criteria

Sex: ALL

Age: 21 years and over

Healthy Volunteers: This study is NOT accepting healthy volunteers

Inclusion Criteria:

- Certified Emergency Medical Technicians (EMTs), Advanced EMTs (AEMTs), and Paramedics (EMT-Ps) who provide direct scene response.
- Board-certified Pediatric Emergency Medicine (PEM) and Emergency Medicine (EM) physicians whose practice includes online medical support for EMS are eligible.
- The control arm will include physicians who provide radio/telephone support in usual care at each site. In the intervention arm, experts will be PEM with/without EMS board-certification as they have relevant pediatric training and experience.

Exclusion Criteria:

- EMS personnel providing interfacility transport and/or pediatric specialty transport
- Resident physicians-in-training
- Non-physician providers

Conditions & Interventions

Interventions:

OTHER: Video teleconsultation, OTHER: Audio support

Conditions:

Emergencies, Cardiopulmonary Arrest, Acute Respiratory Failure, Status Epilepticus

Keywords:

Prehospital emergency care, Emergency medical services (EMS), Paramedics, Infant simulator mannequins, Telemedical support, Critically ill infants and children, Pediatric emergencies

More Information

Description:

In the United States, the current standard of prehospital (i.e. outside of hospitals) emergency care for children with life-threatening illnesses in the community includes remote physician support for paramedics providing life-saving therapy while transporting the child to the hospital. Most prehospital emergency medical services (EMS) agencies use radio-based (audio only) communication between paramedics and physicians to augment this care. However, this communication strategy is inherently limited as the remote physician cannot visualize the patient for accurate assessment and to direct treatment. The purpose of this pilot randomized controlled trial (RCT) is to evaluate whether use of a 2-way audiovisual connection with a pediatric emergency medicine expert (intervention = "telemedical support") will improve the quality of care provided by paramedics to infant simulator mannequins with life threatening illness (respiratory failure). Paramedics receiving real-time telemedical support by a pediatric expert may provide better care due to decreased cognitive burden, critical action checking, protocol verification, and error correction. Because real pediatric life-threatening illnesses are rare, high stakes events and involve a vulnerable population (children), this RCT will test the effect of the intervention on paramedic performance in simulated cases of pediatric medical emergencies. The two specific aims for this research are: * Aim 1: To test the intervention efficacy by determining if there is a measurable difference in the frequency of serious safety events between study groups * Aim 2: To compare two safety event detection methods, medical record review, and video review

Contact(s): Bradford McClain - bradford.mcClain@cchmc.org

Principal Investigator:

Principal Investigator ID:

Phase: NA

IRB Number:

System ID: NCT06441760

Thank you for choosing StudyFinder. Please visit <http://studyfinder.cchmc.org> to find a Study which is right for you and contact clinicalstudies@cchmc.org if you have questions or need assistance.