

Pediatric injury prevention in the emergency department

By Lisa Widas, RN, BSN

Injuries are a common cause for pediatric emergency department visits, and are the leading cause of death in children. As many of us are aware, most injuries are preventable. Emergency nurses are an integral part of injury prevention, especially with the pediatric population. Emergency nurses provide patient education daily for our pediatric populations, and injury prevention education can help reduce future injuries or injury severity. Finding that “teachable moment” for kids and families about injury prevention is paramount.

Here are some tips that you can give to parents and children in your emergency department to help keep children safe this fall and winter, or you can post them for reading in your waiting room.

10 tips to keep your child safe this fall/winter

- 1. Road safety.** It only takes a second to forget to look both ways when crossing a road. Remind children, that even when they see a car and think the car sees them, to make eye contact with the driver and be *certain* that they are seen, even in a crosswalk.
- 2. Car seats.** Staged car seats (rear-facing, forward-facing, booster) are intended to protect your child during a collision. Ensure you are familiar with provincial/national regulations and that your seats are installed correctly.
- 3. Cycling on the road.** Children, until they are about 10 years old, do not have the capacity to process all the information required to ride a bicycle on the road (street signs, speed of traffic, side streets, shoulder checking, etc.). Ride with them or have them stay on bike paths.
- 4. If it has wheels, wear a helmet.** Helmets can significantly reduce the risk of brain injury for all ages when worn appropriately. Start early—children should wear a helmet when on wheeled devices, even tricycles. A fall from as little as two feet can result in significant trauma to a child’s brain.
- 5. Winter sports.** An adult should check winter sports areas for things such as ice thickness where outdoor skating and hockey are popular. Other hazards such as trees or roads need to be considered for tobogganing or skiing/snowboarding. Always keep to designated areas.
- 6. Snowmobiles.** The Canadian Pediatric Society does not endorse children under the age of six riding as passengers on snowmobiles as they “...do not have the strength or stamina to be transported safely...” (Canadian Pediatric Society, 2004). They also recommend that children younger than 16 years do not operate snowmobiles.
- 7. Be aware of choking hazards and poisons at home or away.** Many homes that you visit may not be child-proofed. Be aware of choking hazards that are within an infant or toddler’s reach. Also be aware of medications in other’s homes, or in purses or bags placed on the floor.
- 8. Hot water will burn.** Children often reach for mugs or bowls of hot liquid on tables and counters. If near a child, use a mug with a tight lid, or drink hot liquids away from small children. Keep pots/kettles/soup bowls and cords out of reach of young ones. Tap water set at 60°C can burn an infant’s skin in one second. Turn your hot water tank down to 49°C, and mix with cool water when running a child’s bath.
- 9. Fireplace safety.** The glass of a gas fireplace can cause a third degree burn on contact. A fireplace gate could help keep a child away from the glass and safe from these severe burns.
- 10. Autumn and winter holidays.** Fireworks and sparklers can cause significant burns (a sparkler can burn as hot as 700°C and will not go out even when doused in water). Remember, when decorating your home for the winter holidays, to childproof decorated areas especially for electrical cords and candles.

Let’s all work together to keep our children safe this fall/winter. 

Reference

Canadian Pediatric Society. (2004, November 1). *Position Statement: Recommendations for Snowmobile Safety*. Retrieved from <http://www.cps.ca/en/documents/position/snowmobile-safety>

About the author



Lisa Widas has been Manager, Trauma Program, BC Children’s Hospital, since 2003. The Trauma spectrum includes injury prevention, pre-hospital, acute care and rehab. She is also experienced in Pediatric Emergency and Intensive Care and as an Emergency Nursing Pediatric Course Instructor. She has been an active ENABC member since 2005. Lisa is also the current president of the Interdisciplinary Trauma Network of Canada, a subgroup of the Trauma Association of Canada. She keeps balance in her life by working half-time to allow for time with her husband and their triplet girls.