

Evaluating the Need for Pediatric Procedural Sedation Training in Pediatric Critical Medicine Fellowship

Authors(s): MC Hooper¹, P Kamat², KG Couloures¹

Affiliation: 1) Yale School of Medicine, New Haven ; 2) Emory University, Atlanta

Introduction: Pediatric Procedural Sedation (PPS) is becoming a more common component of Pediatric Intensivist responsibilities and should be a part of critical care training. We hypothesized that PPS was not a routine component of Pediatric Critical Care fellowship training and that most physicians received on the job training after fellowship.

Methods: We devised a 10 question survey to evaluate the current level of training provided to PCCM fellows and if the need for more training would be considered valuable. Using Qualtrics survey software we distributed our survey to 64 US academic institutions to be completed by 3rd-year PCCM fellows. We sent out three reminders over a 2-month period to alert participants that the survey was available for completion.

Results: We received 49 responses: 37% of respondents said there was specific training at their institution and 63% of those said it was mandatory, while 38% reported it was elective. 66% thought their training was sufficient in PPS. Most fellows were able to sedate outside of the unit (86%). Of the 14% who did not sedate outside the unit, 64% reported it was a hospital policy and 36% reported lack of supervision. A majority of respondents (92%) reported they did not participate in PPS simulation. When asked if training in PPS would be beneficial when seeking employment, 88% reported yes. The results were nearly equal when asked if a position that incorporated PPS would be preferred, 48% answered yes and 52% answered no. Finally, most fellows (75%) reported logging their cases into a database to keep track of procedures performed.

Discussion: PPS is an expanding field that does not have a clearly defined training pathway. As PCCM fellows graduate they will be increasingly asked to work in sedation programs as attending staff. We propose that all PCCM fellows should be trained and become proficient with PPS. Our data reflects that most (88%) would find PPS a valuable skill set. We propose that each ACGME PCCM fellowship provide PPS training that includes both exposure out of the unit and includes critical incident simulation training.