

**OVERVIEW OF THE 2019 REVISIONS TO THE PEDIATRIC DISASTER TRIAGE:
UTILIZING THE JUMPSTART METHOD INSTRUCTOR AND PROVIDER COURSE
CURRICULUM**

SLIDE NUMBER	REVISION	RATIONALE
5	Training slide added	EMSC recommendations for training, refreshers, and course conduction added based on feedback
8	Illinois population statistics updated	Provide a more accurate representation of Illinois' population
11	Examples of disaster events updated and placed in chronological order	Provide up to date examples of real life events and present in an organized fashion
12	2019 events added to text; information regarding non-intentional disasters added	Provide up to date examples of real life events; reorganized where information was provided for clarity
16	Respiratory slide modified	Information modified to more accurately convey anatomic respiratory differences for children; age for obligate nose breathers added
18	Modifications to how rib cage contributes to trauma	Information modified to more accurately convey how a child's rib cage can contribute to traumatic injury. In addition, lack of abdominal muscle development was added.
20	Added "pre-verbal"	Change made to encompass children that are pre-verbal (i.e. infants) and non-verbal (i.e. chronic condition)
24	Reorganized order of steps for secondary triage and changed name for location of secondary triage	There was confusion by stating that secondary triage can occur at alternate treatment sites (a term commonly used by hospitals). It is more accurate to state that secondary triage can occur at additional treatment locations.
30	Added intervention for bleeding control	It is important to identify and control any sources of uncontrolled bleeding and utilize strategies and tactics being taught through the Stop the Bleed Campaign. These patients should be categorized as immediate after bleeding is controlled.
32 (and throughout the slides/slide notes)	Notation added	To provide clarity, notations have been added throughout the module that children are categorized as expectant/deceased ONLY if they remain apneic after airway repositioning AND 5 rescue breaths

33 (and throughout the slides/slide notes)	Notation added to re-evaluate expectant/deceased patients as more resources become available	Based on feedback, it was important to emphasize that those tagged as expectant/deceased can be re-evaluated, especially if signs of life are still present.
34	Special Considerations	Based on feedback, an additional slide was added to discuss special considerations that need to be taken into account during a disaster event. It was separated from the four triage categories for clarity.
71-80	Scenarios	Additional information was incorporated into slide from slide notes to help providers categorize patients
Note: Throughout the slides and slide notes, there were minor grammatical, graphic, and formatting changes.		