The Need is Now
Emergency Department and Level 1 Pediatric Trauma Center

Phoenix Children's Hospital Foundation

At Phoenix Children’s Hospital we have these essential pieces in place. We take great pride in the fact that our mortality rate is half the average of children’s hospitals nationwide – at just 0.6 percent. Making sure that kids survive is a critical aspect of what we do. But it’s just as rewarding to know that here, these children don’t just survive. They thrive. That’s the real measure of our success. And it’s why we are fighting for these children.

Our unwavering commitment to our patients and families compelled us to launch “The Need is Now” capital campaign. It’s crucial that we expand our Emergency Department and Level 1 Pediatric Trauma Center. As our community grows, and the number of children we treat continues to rise exponentially, our ability to provide emergency and trauma care in the future is at risk.

Simply put, we need more space to care for our state’s most critically ill and injured children. Our community relies on us to save their lives. It’s what we do best. We’ve managed to take exceptional care of these patients in a space that is less than ideal. But we are fast approaching a time when it’s no longer a matter of ideal. The Need is Now because there will come a day when we simply won’t be able to accommodate the children who need the level of care that only Phoenix Children’s can provide.

With your support we can continue to serve every child who comes through our doors – now and in the future – in an environment they need and deserve.

Please join us.

Sincerely,

David Notrica, MD,
Trauma Medical Director
MEETING THE DEMAND

Built in 2002, the current Phoenix Children’s Hospital Emergency Department was designed to accommodate 22,000 patients annually – a number that is expected to reach more than 85,000 over the next five years.

Multiple factors triggered a steep rise in the number of patients we treat:

- The pediatric population of Phoenix has grown to nearly 1 million today, and is expected to swell to more than 1.5 million by 2030, placing increasing demands on pediatric emergency care.
- In 2008, Phoenix Children’s created the state’s first and only American College of Surgeons-verified Level 1 Pediatric Trauma Center. With trauma patients accounting for 13 percent of all emergency visits, it steadily increased the overall volume of the Emergency Department.
- With the Hospital’s strategic alliance with Dignity Health Arizona in 2011, it was estimated that we would incur an additional 2,000 emergency and trauma patients annually. However, by August 2011, the trauma volume alone had increased 86 percent over August 2010.

THE NEED IS NOW TO:

- Increase the number of beds from 23 to 75, more than tripling our current capacity.
- Expand the number of trauma bays/critical care rooms from 4 to 9 so we can treat multiple trauma patients at the same time.
- Have the flexibility to expand in the future as the need arises.

PATIENTS TREATED ANNUALLY IN OUR EMERGENCY DEPARTMENT:

- in 2002 – 13,035
- in 2003 – 39,253
- in 2004 – 43,649
- in 2005 – 56,038
- in 2006 – 56,287
- in 2007 – 59,750
- in 2008 – 60,275
- in 2009 – 65,851
- in 2010 – 58,556
- in 2011 – 67,508
- in 2012 – 80,000+
It was just a normal Saturday afternoon. But Kristine and Richard later realized it was one of those days when they wished they had hugged their son goodbye when he left to spend the night at a friend’s house.

Thirty minutes later they got a phone call from the 14-year-old’s cell phone that forever changed their lives. It was a police officer. Ethan had been shot. One of the friends had seen a shotgun on the wall of the other boy’s bedroom. He grabbed the gun – not knowing it was loaded – and pulled the trigger. Ethan turned the corner into the doorway and was shot in his left hip. “I looked down and didn’t see the hole through my leg yet,” says Ethan. “But with all of the blood I could see, I didn’t think I was going to make it. The chance of living was very small.”

Trauma surgeons were waiting for Ethan at Phoenix Children’s. “I took one look at Ethan and I was very concerned,” says Dr. Kathleen Graziano, pediatric trauma surgeon. “He had massive blood loss at the scene. He was dying. It’s amazing that he didn’t die in the house that night.”

By the time Ethan arrived he had no blood pressure and no palpable heart rate. He had a hole nearly eight centimeters wide through his femoral artery and vein. Surgeons first worked to control the bleeding to save his life, then they would try to save his leg. They saved both as they operated throughout the night.

Over the next seven weeks, Ethan underwent 13 surgeries. Today, he not only has his leg, he’s walking – and hopes to soon be skateboarding again. “It really is a miracle what they did,” Kristine says. “Ethan would not have lived if it had been a different hospital. We’re lucky that we have a miracle story.”
When Every Second Counts

Children have a better chance of surviving at Phoenix Children’s. Emergency medical service providers who transport patients to our Hospital know it. A child who is seriously ill or wounded shouldn’t be anywhere else.

The need is now to:

- Locate the Emergency Department directly below the helipad, placing patients just seconds away from trauma/resuscitation bays, operating rooms, imaging and the Pediatric Intensive Care Unit.

- Provide direct access for emergency medical responders so they can quickly drop off patients arriving by ambulance and return to service.

Did you know

- 39% of patients arrive by ambulance
- 28% are transferred from other hospitals
- 7% arrive by medical helicopter
- 17% are brought to Phoenix Children’s from outside of Maricopa County and/or Arizona
- 50% are transported directly from the scene

6:11 PM
December 13: Discharged

Undergoes 9 additional surgeries
Cassie was driving a golf cart around her neighborhood with friends. When she took a sharp turn, the golf cart flipped and landed on her leg. In a rush of adrenaline, her friends were able to lift the vehicle off of Cassie, but the then 13-year-old’s right leg was crushed. “When I was trying to stand up, my leg just stayed on the ground,” explains Cassie. She had a spiral compound fracture of both the tibia and fibula. But shockingly, she also had areas on her foot that were becoming blacker as time went on.

By the time she arrived at Phoenix Children’s, battery acid from the golf cart had already burned through the skin of her foot and into the muscle. “She was going to lose her foot if we didn’t get the battery acid off,” says Dr. David Notrica, pediatric trauma surgeon and Trauma Center director.

Two hours after the incident Cassie was in surgery. Trauma specialists, an orthopedic surgeon and a plastic surgeon all worked together to save Cassie’s leg. They did.

She has now undergone more than 15 surgeries, with more to come. But with the swift thinking and care she received at Phoenix Children’s, the family hopes that Cassie will someday even run track again. “They saved Cassie’s leg that day,” says her mom, Susan. “We insisted they take her to Phoenix Children’s. Thank God we did.”
WE KNOW KIDS

Being a pediatric emergency or trauma physician isn’t about being a hero. It’s about being part of a special team – one where each member has specialized training in pediatrics. At Phoenix Children’s we offer more pediatric subspecialties than any other hospital in the state. And during an emergency or trauma situation, they are available for all patients, all day and night.

When 13 percent of all patients treated in our Emergency Department will be admitted (accounting for roughly half of the Hospital’s total admissions) this raises the stakes even higher: Turning a patient away means they will be managed at other hospitals that may lack the subspecialty care we offer for even the most rare and complex conditions, as well as the critical services that help kids and families cope with an illness or injury.

THE NEED IS NOW TO:

• Provide rooms in our Emergency Department for patients with chronic illnesses and those who need specialized medical care. This will allow us to get them to a room more promptly with nurses trained in those specific diseases.

• Build dedicated “safe rooms” for behavioral health patients who pose a danger to themselves.

• Upgrade technology that will be built into the design, including overhead X-ray machines.

• Improve design to allow for more immediate triage and intervention.
Cooper, along with his dad and uncle, had gone scouting for deer one morning just outside of Payson. But the day of male bonding took a life-changing turn when the then 7-year-old slid out of the six-passenger Ranger they were riding in when it tipped over. Cooper was pinned underneath. The two were able to lift the large off-road vehicle off of Cooper in a matter of seconds. But his dad Justin, a firefighter, knew that Cooper was showing signs of shock. The blood vessels in his face had ruptured, and he was complaining of arm and back pain.

The area was so remote that, even after calling 911, Justin had to carry Cooper up the mountain to reach help—a heart wrenching trek that took another agonizing 40 minutes. At times they would have to stop, with Justin holding his son in his arms trying to comfort him, and Cooper telling his dad that everything would be OK. But Cooper was deteriorating mentally.

A medical helicopter airlifted Cooper and his dad off the mountain to Phoenix Children’s, where emergency and trauma physicians were standing by. “Cooper was showing signs of asphyxiation,” explains Dr. Juan Acosta, pediatric trauma surgeon. “He had a crushing injury to his chest that didn’t allow him to breathe. Between the asphyxiation and the lacerated spleen, the injuries were potentially life-threatening. If they hadn’t been able to lift the vehicle off of him he wouldn’t have made it.” But they did. And Cooper pulled through.

When the unthinkable happens, Cooper’s dad knows that children like his son are in good hands. “I’m just one small part of the emergency medical system,” he explains. “I experienced it firsthand and can tell you that every step is flawless. And to have the final product be this amazing hospital—it was something else.”
TAKING CARE OF FAMILIES

Bringing a child to the Emergency Department is a stressful situation for parents. Our goal is to save lives while providing a better overall experience for our families.

THE NEED IS NOW TO:

• Decrease time families spend in the waiting room and overall time spent in the Emergency Department.

• Afford privacy for our families with enough rooms for every patient that comes through our doors.

• Make the Emergency Department more visible to families by locating it directly off of Thomas Road.

• Provide direct access to the pharmacy, cafeteria and other public amenities as the new Emergency Department will be built adjacent to the new main patient tower.

Dwayne
10:32 AM arrival time
Complications related to Sickle Cell disease

11:00 AM
October 12:
Discharged
TIME IS OF THE ESSENCE

There’s a reason why children should come here. Kids aren’t just small adults. They heal differently. They have different reactions to drugs and their injuries are less likely to show up on X-rays. Recovery is unique. We understand the long-term effects injuries have on a child, and that kids can’t always communicate pain like an adult has learned to. And we know we’re doing something right when we perform exceedingly better than most children’s hospitals.

But this expansion is imperative. Without it, we will limit children’s access to timely care that is needed in emergency and trauma situations. Because of the enormous growth we’ve already experienced, and will continue to experience, there will be more demand than there is space to take care of the sick and injured children in our community – and beyond.

With your support we will not have to turn these patients away. You can help ensure that our emergency and trauma teams have the space they need to do what they do best – save children’s lives.

The Need is Now to Help
THE NEED IS NOW

And you can help today:

Call: (602) 933-4483
Email: TheNeedisNow@phoenixchildrens.com
Visit: www.TheNeedisNowPCH.com

Visit www.TheNeedisNowPCH.com to watch the compelling videos of Ethan, Cassie and Cooper as they, their parents and our surgeons recount firsthand what happened on the fateful days of their injuries.

Antonio
10:35 AM arrival time
Broken arm
Phoenix Children’s Hospital Foundation
(602) 933-4483
www.phoenixchildrens.com/ways-of-giving
facebook.com/FriendsofPCH

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