

# 11<sup>th</sup> International Conference on **Clinical Pediatrics** & 2<sup>nd</sup> International Conference on **Pediatric Surgery**

June 29- July 01, 2017 London, UK



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### **A pediatric trauma program: What is the value proposition of the hospital?**

Trauma is the leading cause of death and disability in children. There is a paucity of information regarding the value of trauma admissions for a children's hospital. The aim of this study is to assess trauma volume, outcomes and revenue at one children's hospital, Children's Medical Center Dallas, compared to all hospital admissions. In four years, there were 5,514 trauma admissions, 18.2% of the 67,429 hospital admissions. Trauma Activations (TA) were called in 1,346 (24%) patients, 47.3% required an operation and 46% had an Injury Severity Score (ISS) that was moderate or higher. Trauma ICU Length of Stay (LOS) was 3.6±5.6 days vs. 7.0±16.0 days for all hospital admissions. Total trauma LOS was 2.5±4.6 days vs. 5.2±10.3 days for all hospital patients. ICU admission and Insurance (private vs. government) were comparable in both groups. Trauma hospital revenue was \$188M, 4.3% of the \$4.37B for all hospital admissions. Trauma patients are the third most common admitting diagnosis, and have medical acuity with a significant TA, ICU admission rate, operative need, and elevated ISS. Outcomes included a 1.6% trauma mortality rate, lower than the National Pediatric Trauma Registry (2.3%), and a LOS one half of all hospital patients. The trauma patient management and resource utilization is a function of the continuity of care of the multidisciplinary trauma service, and may be a model for other hospital service lines. The trauma program offers a unique resource, a priceless value for injured children and the community.

### **Biography**

Robert P Foglia, MD is a Professor of Surgery and Pediatrics, Chief of Pediatric Surgery at the University of Texas Southwestern Medical Center and Surgeon-in-Chief at Children's Medical Center Dallas. He is Co-Editor of a major textbook of Pediatric Surgery and has 30+ years of experience in Perioperative Management and Performance Improvement. He is responsible for the clinical growth of surgical programs at Children's and leads process improvement initiatives in the areas of quality, service, and stewardship.

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