

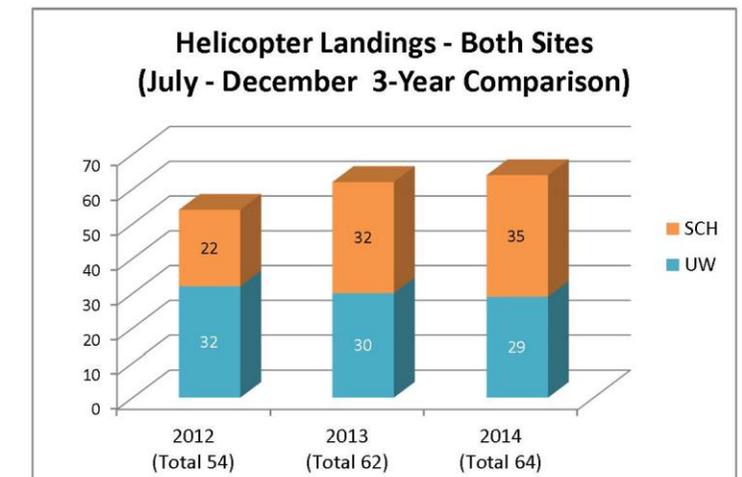
Patients Transported by Airlift Northwest to Seattle Children's Helistop: July to December 2014

Diagnoses Requiring Landing During This Period

- **Altered Level of Consciousness (LOC)** - Any measure of arousal other than normal. Level of consciousness (LOC) is a measurement of a person's arousability and responsiveness to stimuli from the environment.
- **Asthma/Reactive Airway Disease** - A disease of the respiratory system involving airway constriction, inflammation, and mucous leading to difficult breathing, wheezing, shortness of breath, chest tightness, and coughing.
- **Bowel Obstruction** - A potentially serious condition where the intestines are blocked. If blockage occurs, food and drink cannot pass through the body. Both the small intestine and large intestine (colon) can be affected.
- **Cardiac Dysrhythmia** - An abnormal heart rhythm that may require urgent stabilization and resuscitation.
- **Cardiopulmonary Arrest** - Respiratory failure progressing to cardiac arrest.
- **Congenital Heart Defect** - An abnormality in your heart's structure that you're born with.
- **Cardiovascular Valve Failure** - Heart valve disease occurs when your heart's valves do not work the way they should.
- **Diabetic Ketoacidosis (DKA)** - An abnormal build-up of sugar and acids in the blood resulting in a decreased level of consciousness.
- **Femur and humeral fracture** - Femur is a strong bone that provides support to the entire skeletal structure and helps in the movement of our legs.
- **Ingestion** - Consuming a large amount of medicine or any substance; this can be accidental or intentional.
- **Intussusception** - The inversion of one portion of the intestine within another.
- **Liver Failure** - The inability of the liver to perform its normal synthetic and metabolic function as part of normal physiology. Two forms are recognized, acute and chronic.
- **Meconium Aspiration** - Neonatal pneumonia due to inhalation of birth fluid containing meconium.
- **Increase Intracranial Pressure** - A rise in the pressure inside the skull that can result from or cause brain injury.
- **Respiratory Distress** - Increased breathing difficulty that doesn't respond to oxygen therapy.
- **Respiratory Failure** - Failure to adequately exchange oxygen and/or carbon dioxide
- **Retropharyngeal Abscess** - Serious, life threatening infection of the neck.
- **Sepsis** - A life threatening systemic inflammatory response to infection.
- **Status Asthmaticus** - Prolonged severe attack of asthma that is not responsive to standard therapy, that may lead to respiratory failure.

Helicopter Landings at Seattle Children's			
Date	↓Landing at	↑Departure	Transported from
July			
7/14/2014	3:24 PM	5:27 PM	Whatcom
7/16/2014	2:11 PM	3:29 PM	Island
7/21/2014	5:50 PM	7:16 PM	Skagit
7/24/2014	1:42 PM	3:38 PM	Jefferson
August			
8/6/2014	12:06 PM	12:40 PM	Lewis
8/19/2014	8:18 PM	8:47 PM	Multnomah (OR)
8/25/2014	12:13 AM	1:15 AM	Whatcom
September			
9/9/2014	11:11 PM	12:04 AM	Yakima
9/10/2014	6:02 PM	7:07 PM	Snohomish
9/11/2014	8:06 AM	8:57 AM	Skagit
9/11/2014	6:27 PM	7:06 PM	Whatcom
9/13/2014	1:25 AM	2:14 AM	Ellensburg
9/16/2014	1:00 PM	1:41 PM	Kitsap
9/16/2014	10:32 PM	11:15 PM	Skagit
9/20/2014	4:47 PM	5:33 PM	Clallam
9/21/2014	6:33 AM	7:26 AM	Bloomsburg
9/22/2014	12:08 PM	12:50 PM	Thurston
9/23/2014	11:29 AM	12:23 AM	Kitsap
9/29/2014	6:28 PM	7:33 PM	Island
October			
10/1/2014	6:27 PM	6:39 PM	Pierce
10/2/2014	12:47 AM	1:50 AM	Thurston
10/12/2014	2:04 PM	2:57 PM	Bloomsburg
10/16/2014	5:01 PM	5:58 PM	Whatcom
10/19/2014	9:57 PM	10:10 PM	King
November			
11/3/2014	8:09 AM	8:59 AM	Bloomsburg
11/7/2014	4:50 PM	5:56 PM	Whatcom
11/14/2014	8:52 AM	9:44 AM	Whatcom
11/20/2014	12:22 AM	1:09 AM	Whatcom
11/26/2014	12:59 PM	1:41 PM	Island
December			
12/10/2014	2:56 AM	3:59 AM	Thurston
12/10/2014	3:12 PM	3:45 PM	Skagit
12/15/2014	3:59 PM	4:33 PM	Skagit
12/16/2014	4:38 PM	5:35 PM	Island
12/16/2014	10:31 PM	11:14 PM	Whatcom
12/28/2014	2:51 AM	3:26 AM	Kitsap

Ages of Patients July - December 2014	
7	Newborn - 1 Month
7	Infant (1 month-1 Year)
3	Toddler (1-3)
10	School Age (4-11)
8	Adolescent (12-18)
0	Organ Transplant
35	Total
# of Cases	Outcomes
0	Discharged (DC) from ED
9	DC Less than 48 hrs
15	DC 48 hrs to 7 days
5	DC 7-30 days
4	DC 31 days or more
0	Transported from SCH
2	Died
0	Organ Transplant
0	Hospitalization Ongoing
35	Total



To Our Neighbors:

This is our semi-annual report to the community summarizing emergency medical helicopter landings at Seattle Children's Hospital.

The Medical Review Committee meets twice a year to review all emergency medical landings at Children's Emergency Department. This committee includes two representatives from neighborhoods surrounding Children's, a representative from the City of Seattle Department of Neighborhoods, a representative of Seattle-King County Department of Public Health, two physicians independent of Children's and key medical and nursing leadership from Children's.

In addition, an internal medical review team comprised of medical leadership and the nursing transport team from Children's and Airlift Northwest meet routinely and review all landings on an ongoing basis.

The committees continue to find that the overwhelming majority of these emergency medical landings are limited to critically ill patients for whom immediate pediatric care or intervention is indicated. We continue to evaluate each situation to determine whether a safe alternative to the landing at Children's is available.

Landings at the helistop at Children's must meet established medical criteria and only occur for our most critically ill patients. For example, any one of the following conditions would qualify for landing at Children's helistop:

- *inability to maintain oxygenation or airway*
- *inability to maintain adequate cardiac circulation*
- *inability to maintain adequate blood pressure or*



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A Summary of Flight Activity July to December 2014

A Report to the Community About Emergency Medical Helicopter Landings at Seattle Children's Hospital

As a neighbor of Children's you may be interested to learn more about the life saving emergency medical services the Hospital provides to children in our region.

The following information summarizes the use of the Helistop at Children's and describes the medical needs of children served by emergency landings.

These landing reports are now available online at:
<http://construction.seattlechildrens.org/helicopter-landing-reports/>

If you have any comments or questions, please call:
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Chief of Staff to CEO
Vice President, External Affairs & Guest Services
(206) 987-2125

You may also write to her at Seattle Children's Hospital,
PO Box 5371, Mailstop RB.2.419, Seattle, WA 98105-0371



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