

Procedure

CCHMC Trauma Service Operation Manual Procedure	Procedure Number	TR-17
	Effective Date	8/18/2022
Car Seat – Primary Care Centers (Burnet, Hopple, & Fairfield)	Page	1 of 2

1.0 SCOPE

- 1.1 To ensure the safety of CCHMC patients during transportation in a private vehicle who do not currently have an appropriate child restraint system (car seat/booster seat)

2.0 DEFINITIONS

- 2.1 **Convertible seat:** Seat that can be used *either rear or forward facing* depending on the age/weight/height of child; current seat can be used rear facing 5 – 40 pounds with height of at least 19 inches; forward facing 22 – 65 pounds and height of less than 54 inches
 - 2.1.1 Child must remain rear facing until a **minimum** of 2 years old per manufacturer's instructions; however, the *American Academy of Pediatrics* recommends that a child remain rear facing to the upper weight/height limit of the car seat
- 2.2 **Booster seat:** *Forward facing only* seat used once the child outgrows a harnessed car seat, and who is at least 4 years of age (per manufacturer's instructions); assists with proper positioning of lap and shoulder belts.
 - 2.2.1 Booster seats can be either high back or no back.
 - 2.2.2 High back boosters can be used 40 – 120 pounds and height of 44 – 57 inches. High back booster can be used when a headrest is not present in child's seating position.
 - 2.2.3 No back boosters can be used from 40 – 120 pounds with height of 44 – 57 inches. There must be a headrest behind child when using a no back booster.

3.0 PROCEDURES

- 3.1 **CCHMC staff member on the patient's care team identifies that family may not have appropriate car seat for patient**
- 3.2 **Determine eligibility**
 - 3.2.1 Family/patient must meet all of the following:
 - 3.2.1.1 Patients of a CCHMC Pediatric Primary Care Center (Burnet, Hopple, or Fairfield), for well child checkup ONLY
 - 3.2.1.2 There is a financial need, at the discretion of the CCHMC staff member distributing the car seat
 - 3.2.1.3 Child does not currently have an appropriate car seat or booster seat (due to motor vehicle collision; seat is expired; child never had one; etc.)
 - 3.2.2 Exclusions:
 - 3.2.2.1 NOT for the family that forgot their seat, already has a seat or for other family members; these families may purchase a seat at the Family Resource Center at the Burnet Campus
 - 3.2.2.2 NOT for temporary use or loan
 - 3.2.2.3 NOT for patients who have already received a car seat from *any* location noted above in 3.2.1.1; limit **one** seat per MRN
- 3.3 **Obtain physician written order**
 - 3.3.1 Order should be placed in the patient's medical record
- 3.4 **Select appropriate car seat (see definitions above)**
 - 3.4.1 Seats can be found in clinic's designated storage location
 - 3.4.2 Stocks are automatically replenished by Materials Management
 - 3.4.2.1 (BURNET ONLY) If stock is depleted prior to replenishment, center staff will review educational video (per 3.5, below) and complete packet materials (per 3.6, below) with parent/caregiver during the original appointment time. Once the seats have been restocked, center staff will notify the parent/caregiver that their seat is now available and set up a time to return to the clinic with the patient. During that return visit, center staff will properly fit the car seat to the child and will answer any remaining questions.
 - 3.4.2.2 (HOPPLE OR FAIRFIELD ONLY) If stock is depleted prior to replenishment, center staff will ask the parent/caregiver to call back in about one week to see if the proper seat has been restocked. Once so, the parent/caregiver returns to the clinic with the patient to watch the educational video (per 3.5, below), and to complete packet materials (per 3.6, below). During that return visit, center staff will properly fit the car

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seat to the child and will answer any remaining questions.

3.5 Center staff provides education to parent/guardian

3.5.1 Please refer to appropriate car seat video on Trauma eChirp or MyChart Bedside

3.6 Distribution and documentation

3.6.1 Distribute new car seat to family

3.6.2 Select the car seat packet that corresponds to the type of car seat being distributed from the department's designated storage location, and then complete **all** fields of the *In-House Distribution Form*

3.6.2.1 Verify that the *In-House Distribution Form* has the appropriate box **correctly marked**, corresponding to the car seat being distributed

3.6.2.2 If available, place a patient sticker in the upper right corner of the original and yellow copies of the form

3.6.2.3 Form must be signed/dated by caregiver **and** staff

3.6.2.4 Place **Original** page of *In-House Distribution Form* into the patient's medical record; **Yellow** copy should be placed into the provided envelope and mailed back to Trauma Services (MLC 3019); **Pink** copy should be given to the caregiver

3.6.2.5 The additional packet materials are educational pieces on car seats that may be provided to the caregiver

3.6.2.6 When your location begins to run low on *In-House Distribution Forms*, please contact **803-RIDE (7433)** or carseats@cchmc.org so additional packets are sent

3.6.3 For further car seat assistance **Monday through Friday (excluding CCHMC holidays), 10 am – 4 pm**, please call the **Comprehensive Children's Injury Center (CCIC)** at **803-RIDE (7433)**

3.6.4 **Note: CCHMC staff members (excluding CPST's) DO NOT assist with installation of car seats into vehicles.**

4.0 REFERENCES

4.1 "Selecting and Using the Most Appropriate Car Safety Seats for Growing Children: Guidelines for Counseling Parents," *Pediatrics* Vol. 109, No. 3, April 2002; pgs 550 – 553

4.2 National Highway Traffic Safety Administration *Fatality Analysis Reporting System* online at www.nhtsa.gov

4.3 "Car Safety Seats: Information for Families for 2010" *American Academy of Pediatrics* April 12, 2010

4.4 Ohio Revised Code Section 4511.81

5.0 APPROVALS

The Comprehensive Children's Injury Center (CCIC) with Trauma Services and appropriate content experts will periodically review and update this procedure as appropriate. Procedures will be reviewed at least every 3 years. Questions regarding this procedure shall be directed to, and authority over this procedure shall vest with, the CCIC/Trauma Services Program Manager.

HISTORY	
Original Date	1/08
Revision Date	11/10, 3/16, 7/17, 10/17, 05/18, 9/19, 12/20, 8/22
Review Date	