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Pediatric Disaster Medicine Literature: A Scoping Review Yae Sul Jeong MD, MS^{1,2}, Cullen Clark MD^{1,2}, Sarita Chung MD^{3,4}, Nathan Timm MD⁵, Chris Wright MD¹, Brandon Kappy⁶, Elizabeth Hewitt Brumberg MD⁷, Eric Goralnick MD, MS^{8,4}, April Parish¹, Rachel Stanley MD, MHSA^{1,2}, Susi Miller¹, Caroline Stephens MD, MPH⁹

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Introduction: Over the last 20 years disasters have increasingly involved children, and pediatric disaster medicine research is growing. However, this research is largely reactive, has not been categorized in terms of the disaster cycle, and the quality of the research is variable. To understand the gaps in current literature and highlight areas for future research, we conducted a scoping review of pediatric disaster medicine literature. This work will help create recommendations for future pediatric disaster medicine research.

Method: Using a published framework for scoping reviews, we worked with a medical librarian and a multi-institutional team to define the research question, develop eligibility criteria, and to identify a search strategy. We conducted a comprehensive Medline search from 2001-2022, which was distributed to nine reviewers. Each article was independently screened for inclusion by two reviewers. Discrepancies were resolved by a third reviewer.

Inclusion criteria included articles published in English, related to all stages of the disaster cycle, and disaster education, focused on or included pediatric populations; published in academic, peer-reviewed journals, and policies from professional societies.

Results: 967 pediatric disaster medicine articles were imported for screening and 35 duplicates were removed. 932 articles were screened for relevance and 109 were excluded. In 2000, three articles met inclusion criteria and 66 in 2021. We noticed reactive spikes in the number of articles after major disasters. Most articles focused on preparedness and response, with only a few articles on recovery, mitigation, and prevention. Methodology used for most studies was either qualitative or retrospective. Most were single site studies and there were < 10 meta-analyses over the 20 years.

Conclusion: This scoping review describes the trends in and quality of existing pediatric disaster medicine literature. By identifying the gaps in this body of literature, we can better prioritize future research.

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Mass Gathering Events - Health Care Facility Notification Template

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Introduction: Every year many concerts, festivals, public meetings and major events take place in Ireland. Depending on the nature of the event such as: location, the number of attendees, and performers-these events present varying amounts of risk. The Health Service Executive is concerned with managing risks and advocates that event organizers put comprehensive event management plans in place. Healthcare arrangements for outdoor crowd events should be specified in the Event Medical Plan section of the event management plan by the event organizer. As part of the event notification process, event organizers engage with the HSE South Emergency Management Office which in turn liaises with the various care groups across the Cork Kerry region to inform them of events that may impact their service. Historically, event organizers have informed the Emergency Management office of events in a wide variety of formats and varying levels of information.

Method: The HSE South Emergency Management Office engaged with Cork University Hospital (Major Trauma Center) to identify the information hospitals require from various events around the region. In addition, the Emergency Management Office liaised with a subject matter expert in Mass Gatherings from Australia to discuss key indicators/data points healthcare facilities could benefit from knowing in advance of mass gathering events.

Results: A standardized Word document template was developed as a proof of concept that lists key data that healthcare facilities have identified as important for them to be made aware of as part of the notification process. This template now lends itself to be developed into an online editable form to enable event organizers to inform the relevant healthcare facilities of mass gathering events.

Conclusion: Health care facilities require timely and accurate information regarding mass gathering events to ensure appropriate plans and preparations are in place. A standardized notification template would assist in the preparation phase.

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Massive Influx of Victims: Staff Preparedness and Facility Readiness of Tunisian General University Hospitals.

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