

Children Have Unique Needs in Emergency Departments and Pre-Hospital Settings

Each year 30 million children and adolescents will visit emergency departments (EDs) in the United States. This patient population presents unique challenges for health care providers during an emergency. Supplies, equipment and medications that are specific for pediatric patients must be available during an emergency to ensure they receive the best care possible.



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Diseases and injuries manifest themselves differently in children as compared to adults. In addition, equipment such as oxygen masks, endotracheal tubes and IV catheters need to be sized for the anatomic features of children.

The EMSC Program Has Made Landmark Improvements to the Emergency Care Delivered to Children

As the only federal program dedicated to improving emergency care for children, the Emergency Medical Services for Children (EMSC) program has brought vital attention and resources to this important population. It is designed to ensure that all children and adolescents — no matter where they live, attend school or travel — receive appropriate care in a health care emergency.

As a result of the EMSC program, both hospital EDs and pre-hospital emergency medical services (EMS) personnel have improved access to appropriate medication, equipment, training and systems. For example, nurses and doctors are better able to manage pediatric emergencies such as traumatic brain injuries, childhood seizures and bronchiolitis.

Looking forward, EMSC is working to ensure all EDs improve care for children through the implementation of national quality improvement initiatives. Further, the program is supporting multi-center pediatric emergency research to guide future advances in care for children.

EMSC Improves Pediatric Emergency Care

State Partnership Grants

All states and territories receive state partnership grants to expand and improve their ability to respond to pediatric emergencies. The grants help both to enhance the delivery of care by EMS providers and the pediatric readiness of hospitals, including EDs.

State Partnership Regionalization of Care Grants

These grants assist in establishing regionalized care models to improve emergency care capacity in rural and tribal communities and in U.S. territories.

Targeted Issues Grants

These grants support innovative, cross-cutting projects focused on improving outcomes for patients. Proposed projects must be of national significance, translatable into practice, meet a demonstrable need and relate directly to improving the quality of pediatric emergency care services.

Pediatric Emergency Care Applied Research Network (PECARN)

PECARN is the only federally-funded network for research in pediatric emergency care in the U.S. It is comprised of six regional centers, each of which includes three hospital EDs and one EMS agency. These entities conduct multi-institutional research on the prevention and management of acute illnesses and injuries in children.

The Emergency Medical Services for Children Reauthorization Act (H.R. 6960/S. 3765)

This legislation reauthorizes the EMSC program for an additional five years — fiscal years 2025-2029.

The EMSC program has enjoyed strong, bipartisan support since its enactment in 1984. It is also supported by a broad coalition of health care and patient advocate organizations. The EMSC program was last reauthorized in 2019, when it passed by an overwhelming margin in both the House and Senate.

House Status: The Emergency Medical Services for Children Reauthorization Act, H.R. 6960, was introduced by Rep. Earl “Buddy” Carter, R-GA, on January 11, 2024. The bill was passed by the House of Representatives on May 15, 2024 by a 399-13 vote.

Senate Request: Cosponsor and Support the Emergency Medical Services for Children (EMSC) Reauthorization Act (S. 3765).

S. 3765 was introduced by Sen. Robert Casey, D-PA, on February 7, 2024. The bill was approved by the HELP Committee on May 23, 2024.