

PECARN Studies

- Adolescent STI - Improving Detection of STIs in PEDs ED: A Pragmatic Trial
- AZSWED - AZithromycin Therapy in Preschoolers with a Severe Wheezing Episode Diagnosed at the Emergency Department
- BEEPER - BEdside Exclusion of Pulmonary Embolism in children without Radiation
- Biosignatures II - RNA Biosignatures: A Paradigm Change for the Management of Young Febrile Infants
- C-Spine - Development and Testing of a Pediatric Cervical Spine Injury Risk Assessment Tool
- Disparities - Identifying and Understanding Racial/Ethnic Disparities in Pediatric Emergency Care
- ED-SAMS - ED-Initiated School-based Asthma Medication Supervision
- EDSTARS - Emergency Department Screen for Teens at Risk for Suicide
- FLUID - Fluid Therapy and Cerebral Injury in Pediatric Diabetic Ketoacidosis
- HEADACHE - HEADache Assessment of CHildren for Emergent Intracranial Abnormalities
- IMPROVE - The Effect of Emergency Department and After-Emergency Department Analgesic Treatment on Pediatric Long Bone Fracture Outcomes
- PECARN Registry - Pediatric Emergency Care Applied Research Network (PECARN) Registry
- PED Screen - Pediatric Sepsis EHR Registry, Clinical Outcomes, and Predictive Model
- P-RAPP - Procalcitonin to Reduce Antibiotic Use in Pediatric Pneumonia
- Probiotics - Impact of Emergency Department Probiotic Treatment of Pediatric Gastroenteritis
- PRoMPT BOLUS - Pragmatic Pediatric Trial of Balanced Versus Normal Saline (NS) Fluid in Sepsis
- SCIENCE - Implementation of Evidence Based Care for the Acute Treatment of Sickle Cell Disease Pain (Sickle Cell Improvement: Enhancing Care in the ED)
- SPEED - Development of computerized clinical decision to combat the overuse of antibiotics in children with pneumo
- STARt - Sickle Cell Disease Treatment with Arginine Therapy Trial nia or uri-nary tract infections
- STEC - Volume Expansion in Children with Shiga Toxin- Producing E. coli Infection to Prevent Hemolytic Uremic Syndrome
- TIC-TOC - Evaluating Tranexamic Acid (TXA) in Children with Traumatic Injuries

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DCC	U03MC00008	University of Utah
GLEMSCRN	U03MC28844	Nationwide Children's Hospital
HOMERUN	U03MC22684	Cincinnati Children's Hospital MC
PEM-NEWS	U03MC00007	Columbia University Medical Ctr
PRIME	U03MC00001	University of California Davis MC
CHaMP	U03MC33154	State University of NY at Buffalo
WPEMR	U03MC33156	Seattle Children's Hospital
SPARC	U03MC33155	Rhode Island Hosp/Hasbro Children's

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E. Brooke Lerner, PhD

E. Brooke Lerner is the PI of the CHaMP Node. She is a professor of emergency medicine and pediatrics at the University of Buffalo. Dr. Lerner serves as the chair of the PECARN steering committee.

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Rachel Stanley is the PI of the GLEMSCRN Node. She is Division Chief of Emergency Medicine at Nationwide Children's Hospital and Associate Professor of Pediatrics at the Ohio State University.



PECARN

Conducting High-Priority,
High-Quality Research in
Pediatric Emergency Care



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PECARN Nodes

Each PECARN node and their respective hospitals and EMS Affiliates:

GLEMSCRN Node

- Nationwide Children's Hospital, Columbus, OH
- University of Michigan, Ann Arbor, MI
- Children's Hospital of Pittsburgh, Pittsburgh, PA
- Columbus Division of Fire, Columbus, OH (EMS Affiliate)

HOMERUN Node

- Cincinnati Children's Hospital Medical Center, Cincinnati, OH
- Washington University SOM/St. Louis Children's Hospital, St. Louis, MO
- Children's Hospital of Wisconsin/Medical College of WI, Milwaukee, WI
- City of Cincinnati Fire Department, Cincinnati, OH (EMS Affiliate)

PEM-NEWS Node

- Morgan Stanley Children's Hospital/Columbia University, New York, NY
- Children's Hospital of Colorado, Denver, CO
- Texas Children's Hospital, Houston, TX
- Aurora Fire Department, Aurora, CO (EMS Affiliate)

PRIME Node

- University of California-Davis, Sacramento, CA
- Children's Hospital of Philadelphia, Philadelphia, PA
- Primary Children's Hospital/University of Utah, Salt Lake City, UT
- Sacramento Fire Department, Sacramento, CA (EMS Affiliate)

SPARC Node

- Hasbro Children's Hospital, Providence, RI
- Emory University School of Medicine, Atlanta, GA
- University of California- San Francisco, San Francisco, CA
- Alameda County EMS Agency, San Leandro, CA (EMS Affiliate)

WPEMR Node

- Seattle Children's Hospital, Seattle, WA
- Children's Hospital Los Angeles, Los Angeles, CA
- University of Texas - SW, Dallas, TX
- Seattle Fire/Medic One (EMS Affiliate)

CHaMP Node

- Milwaukee County EMS, Milwaukee, WI (EMS Affiliate)
- Mecklenburg EMS Agency (Medic), Charlotte, NC (EMS Affiliate)
- Houston Fire Department EMS, Houston, TX (EMS Affiliate)
- AMR of Western NY, Buffalo, NY (EMS Affiliate)



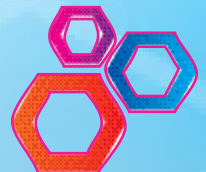
The PECARN Organization...

PECARN is comprised of seven Research Nodes and a Data Coordinating Center. Six of the Research Nodes contain three Hospital Emergency Department Affiliates (HEDAs) and one EMS Affiliate. The EMS Research Node contains three EMS Affiliates.

The PECARN hospitals represent diverse demographic and geographic areas and include:

- Academic hospitals
- Urban hospitals
- Children's hospitals

The PECARN network Emergency Departments serve approximately **1.3 million** acutely ill and injured children every year and the 9 EMS affiliates account for more than **113,000** pediatric runs annually.



**PEDIATRIC EMERGENCY CARE
APPLIED RESEARCH NETWORK**

About PECARN...

We would like to introduce you to the Pediatric Emergency Care Applied Research Network (PECARN). **PECARN** is a project of the Health Resources and Services Administration/Maternal and Child Health Bureau's (HRSA/MCHB) Emergency Medical Services for Children (EMSC) Program. The goal of this network is to conduct

high priority, multi-institutional research into the prevention and management of acute illnesses and injuries in children and youth of all ages.

PECARN is the first and only federally-funded pediatric emergency medicine research network.

PECARN provides the leadership and infrastructure needed to promote multi-center studies, support research collaboration among EMSC investigators, and promote informational exchanges between EMSC investigators and providers.

