



Ohio Administrative Code

Rule 3701-22-49 Personnel and staffing standards - pediatric intensive care service.

Effective: August 31, 2025

(A) Each PICU service will have a medical director whose appointment, acceptance and responsibilities will be in writing and on file in the PICU.

(B) The PICU medical director will be:

(1) An active service provider in the PICU where he or she is the medical director; and

(2) Be board-certified in one of the following:

(a) Pediatric critical care;

(b) Anesthesiology with practice limited to infants and children and with special qualifications in critical care medicine; or

(c) Pediatric surgery with added qualifications in surgical critical care medicine.

(C) The PICU medical director will:

(1) Participate in development, review, and implementation of PICU policies;

(2) Participate in budget preparation;

(3) Coordinate staff education;

(4) Maintain a data base and/or vital statistics that describe unit experience and performance;

(5) Supervise resuscitation techniques, including educational component;



(6) Supervise quality control, assessment and improvement activities, including morbidity and mortality reviews;

(7) Coordinate research;

(8) Have the authority to consult on any PICU patient; and

(9) Name qualified designees to fulfill the medical director's duties during absences.

(D) Other individuals may supervise the activities required in paragraph (C) of this rule, but the PICU director will participate in each.

(E) In addition to the pediatric intensivist required in paragraph (D) of rule 3701-22-48 of the Administrative Code, each PICU service will have a licensed physician assigned to the PICU who:

(1) Is available to provide bedside care to the patients in the PICU; and

(2) Is skilled in and has the credentials to provide emergency care to critically ill children.

These responsibilities may be shared or delegated to an advanced practice nurse with specialized training in pediatric critical care and credentials and privileges to provide care in the PICU.

(F) Each PICU service will have a nurse manager dedicated to the PICU who will be supervised by the director of pediatric nursing or equivalent. The PICU nurse manager will have specific training and experience in pediatric critical care. Pediatric critical care registered nurse (CCRN) certification is recommended for the nurse manager, but not required.

(G) The PICU nurse manager will participate in the following:

(1) Development, review, and implementation of written policies and procedures for the PICU;

(2) Coordination of multidisciplinary staff education;



- (3) Quality assurance;
- (4) Nurse research;
- (5) Budget preparation with the medical director; and
- (6) Name qualified designees to fulfill their duties during absences.

These responsibilities may be shared or delegated to advanced practice nurses, but the PICU nurse manager will maintain overall responsibility for these requirements.

(H) Nursing to patient ratios in the PICU service will be sufficient to accommodate the acuity level and volume of patients, usually ranging from two nurses to one patient to one nurse to three patients and adjusted as needed.

(I) Required nursing skills for PICU nurses will include:

- (1) Recognition, interpretation and recording of various physiologic variables;
- (2) Drug and fluid administration;
- (3) Cardio-pulmonary resuscitation (CPR) certification;
- (4) Pediatric advanced life support certification (PALS);
- (5) Respiratory care techniques including chest physiotherapy, endotracheal suctioning and management, and tracheostomy care;
- (6) Preparation and maintenance of patient monitors; and
- (7) Psychosocial skills to meet the needs of both patient and family.

(J) Each PICU service will provide the nursing staff and document in each nurse's personnel file the



following:

(1) An orientation performed by the PICU;

(2) A clinical and didactic orientation in pediatric critical care; and

(3) On-going pediatric critical care in-service education.

(K) Each PICU service will have respiratory therapy staff assigned to the unit in-house twenty-four hours a day, seven days a week who:

(1) Have clinical experience managing pediatric patients with respiratory failure; and

(2) It is recommended that all respiratory therapy staff have pediatric advanced life support (PALS) training or an equivalent course.

(L) Other PICU staff will include:

(1) Biomedical technicians (in-house or available within one hour on a twenty-four hours a day, seven day a week basis);

(2) A social worker;

(3) A pharmacist in-house twenty-four hours per day;

(4) A radiology technician;

(5) A registered dietitian;

(6) A physical therapist;

(7) An occupational therapist;



(8) A child life specialist; and

(9) A unit clerk.

(M) As part of a continuing education program, the PICU service will:

(1) Have staff participate in regional pediatric critical care education programs; and

(2) Provide regularly scheduled resuscitation practice sessions.

(N) Staffing requirements of this rule may be met by individuals with equivalent or greater qualifications if the replacement's scope of practice encompasses the duties of the required staff.