Our pediatric critical care specialists provide state-of-the-art care for infants, children and adolescents with life-threatening medical and surgical conditions, around the clock.

Affiliated with top-ranked NewYork-Presbyterian Komansky Children’s Hospital, our Pediatric Critical Care Center is staffed by a full team of intensivists, critical-care nurses and other health-care professionals specifically trained to care for the needs of a critically-ill child. Each child’s condition is under the 24-hour supervision of the Pediatric Critical Care Center's team of physicians, with direct patient care provided by the Center's on-site attending intensivists and fellows in Pediatric Critical Care Medicine.
Our Center offers special expertise in:

- Circulatory shock
- Complication of diabetes
- Extracorporeal membrane oxygenation (ECMO)
- General pediatric trauma
- Post-surgical management of children following cardiac and neurosurgical procedures
- Psychological and emotional outcome of critical illness
- Respiratory insufficiency and failure
- Severe asthma
- Severe seizure disorders
- Transfusion medicine
- Traumatic brain injuries
- Other critical care and trauma conditions

Family-Centered, Child-Friendly Care

When a child is critically ill, the entire family is affected. We recognize how difficult hospitalization can be, and offer the following care:

- Parents are invited to spend as much time as possible with their child
- 24-hour visiting is encouraged, when possible
- Sleeping facilities are available for parents
- Families have full access to on-site social workers, chaplains, and psychiatrists
- Hospital parking
- Child Life specialists, who help children and their families – including siblings -- understand and manage the hospital experience

Your Team -- Experts in both Pediatrics and in Critical Care Medicine

The Pediatric Critical Care Center is staffed by a full team of intensivists, critical-care nurses and other health-care professionals specifically trained to care for the needs of a critically ill child. Each child's condition is under the 24-hour supervision of the Pediatric Critical Care Center's team of physicians, with direct patient care provided by the Center's on-site Attending Intensivists and Fellows in Pediatric Critical Care Medicine.

Our critical-care nurses are specially trained and experienced in caring for critically ill children, and play an integral role in the child's care. With the Center's physicians, they develop and implement the child's plan of treatment.

Also assigned to the Center is a diverse, professional team that includes:

- Respiratory and physical therapists
- Social workers
- Nutritionists
- Child Life Specialists
Parents are regarded as central members of the team and are encouraged to spend as much time as possible with their child. Visiting hours for parents are 24 hours, and sleeping facilities are available.

**Directions to the PICU**

Enter the hospital at 525 East 68th Street (main hospital entrance). Walk straight ahead to the information desk, make a right past, and walk down the hallway past the Gift Shop to the Greenberg Pavilion on the right-hand side. Take the Greenberg elevators to the 6th floor. Turn right on leaving the elevator bank and walk to the end of the hall to the Central Park mural. Make a left and follow the signs to 6 South.

**Patient Transfers**

*Our care begins with your call.*

Transfer/Consultation: 800-NYP-STAT  
Patient Referrals and Pediatric Critical Care Consultations: (212) 746-0308  
Director, Pediatric Intensive Care Unit (PICU): (212) 746-3056

The Center's expert Critical Care Transport Team is composed of Pediatric Critical Care trained Paramedics. The transport team coordinates transfers for each child needing it. This team is trained to work with all attending physicians -- to receive all necessary instructions and to immediately provide whatever urgent care is called for. They are the often the vital first link to NewYork-Presbyterian Hospital's Pediatric Critical Care Center.

When the referring physician calls, the Pediatric Intensivist provides management suggestions, if appropriate, and will advise on the next steps involved in the child's transfer process. In most cases, the Critical Care Transport Team will be dispatched immediately in our specially equipped Mobile Critical Care Unit.

If you are a parent and are considering having your child transferred to the Pediatric Critical Care Center, please discuss this with your child's physician. If you and your doctor determine that your child might benefit from our services, we would be happy to discuss it with your doctor and to provide any assistance we can in arranging the transfer. Your child's physician should feel free to contact us for a telephone consultation.

**The Transfer Team**

The team consists of Pediatric Critical Care trained Paramedics. This team works with the referring physician to assure your child's condition is stable before moving them to our Pediatric Critical Care Center, providing the safest possible, state-of-the-art transfer. Attending physicians are immediately available to provide necessary instructions for whatever urgent care is required.

**Keeping Referring Physicians Informed**

The referring physician's involvement with your child during this time doesn't end with transfer to the Pediatric Critical Care Center. Your child’s progress will be relayed to the referring physician by
one of our Center's staff. When the child is ready to leave the Center, transportation to the original referring hospital may be arranged, if needed, and a detailed medical summary will be prepared by the Center's staff and sent to the referring physician.

**Services & Programs**

**Pediatric Critical Care Center**

The Pediatric Critical Care Center consists of 23 beds on the 6th floor of the Greenberg Pavilion, and is designed for the care of the critically ill child who requires intensive treatment and monitoring. In addition, the Center includes intermediate care beds designed for children requiring less intensive monitoring.

The bed assigned to your child is based on your child's condition. Your child may be moved within the Pediatric Critical Care Center or transferred to an intermediate care or general pediatric unit at any time. The physician in charge and the Nursing Care Director or their designee will determine the area in which your child is most appropriate for your child’s care.

**Your Child's Needs**

Each day, your child is assigned a nurse who is responsible for his or her care. Your child's doctor and nurse will share with you whatever information is available and try to answer your questions clearly.

We encourage you to participate in your child's care. Please feel free to ask the nurse how you may participate (e.g. feeding, bathing, diaper changing). There will be times when the nurse must concentrate on what needs to be done for your child and may not be able to answer your questions right away. It can be easy to forget what to ask when you meet members of the health care team, so it may be helpful to write down questions as they come to you.

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**Dr. Bruce Greenwald**

Executive Vice Chair of Operations, Department of Pediatrics  
Chief, Pediatric Critical Care Medicine  
Director, Pediatric Intensive Care Unit  
Professor of Clinical Pediatrics  
Attending Pediatrician  

View Dr. Greenwald's Profile
Dr. Naomi Bishop
Director, Pediatric Critical Care Medicine Quality and Performance Improvement
Assistant Professor of Clinical Pediatrics
Assistant Attending Pediatrician
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Dr. Robert Finkelstein
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Assistant Attending Pediatrician
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Dr. Peggy Han
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Dr. Joy Howell
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Dr. Christine Joyce
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Assistant Attending Pediatrician
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Dr. James Killinger
Associate Professor of Clinical Pediatrics
Associate Attending Pediatrician
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Dr. Marianne Nellis
Assistant Professor of Pediatrics
Assistant Attending Pediatrician
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Research

Cornell Assessment for Pediatric Delirium (CAPD)
Delirium affects 25% of children in the PICU, according to a Komansky Center-led study that screened patients at 25 PICUs in the United States, the Netherlands, New Zealand, Australia, and Saudi Arabia. Our doctors and nurses are leaders in monitoring for and managing this potentially dangerous condition. We have identified a host of risk factors for developing delirium, including staying in the PICU for over five days, being on a ventilator, being on oxygen, or taking a sedative or narcotic. To combat this, we have implemented practices such as ensuring that children are able to get out of bed and move around even while hooked up to machines; keeping their sleep-wake cycles consistent; eliminating physical restraints; and more closely involving families. The simple, low-cost screening tool we developed to evaluate patients, the Cornell Assessment for Pediatric Delirium (CAPD), is now used all over the world, and has helped reduce needless suffering for thousands of critically ill children.

Learn more about Dr. Chani Traube's research
What Sets us Apart

- Multidisciplinary comprehensive care for the full spectrum of critical illness and injury. As part of the NewYork-Presbyterian Phyllis and David Komansky Children’s Hospital, patients receive seamless support from pediatric medical and surgical consultants.

- Highly trained and skillful dedicated pediatric nursing staff.

- Outstanding supportive staff including on-site social workers, child life specialists, respiratory and physical therapists and dedicated chaplainry services.

- Nationally recognized fellowship training program in pediatric critical care medicine.

JUMP TO:
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