Clinical Procedure

Procedure Issue Date: 10/24/2012  
Last Revision Date: 02/26/2018  
Last Review Date: 02/26/2018

Trauma Activation

(PROC CM T-28A)

Corresponding Policy Name and Number:
CM T-28, Trauma Code Criteria

Equipment:
None

Procedure:

1. ED attending physicians or ED RN’s may activate a trauma code according to the criteria.

2. Trauma patients enter our system by one of three ways and notification will therefore follow one of three tracks: EMS from field, transfer from outside facility or by walk-in (see Fig. 2).

   EMS from field:
   - If patient is coming via EMS from the field, when radio report is received and it is known that patient meets trauma code activation criteria, the ED attending or RN will. Will activate via tablet electronic activation system or activation form.

 Transfer from outside facility:
   - If patient is coming via transfer from an outside facility, the RN receiving “nurse to nurse” report, ideally at time of patient departure, will determine if patient meets trauma code activation criteria. If the patient does meet criteria, the RN will fill out activation form and notify Patient Service Clerk to activate a “trauma standby” and hand them the form. At time of EMS notification, ideally 15 minutes out from Upstate, a second notification of the trauma activation will be sent out as a “trauma stat” alert.

 Walk-in:
   - If a patient arrives via walk-in, the registration staff will “triple page” the triage RN to waiting area. EM or RN will verbally tell registration clerk to activate trauma code, no form will be used. Pt escorted to trauma bay.
   - For all cases where form is used, after Clinical Leader reviews, the form will be returned to registration clerk for filing.

3. Electronic Activation Process:
   - The primary mode of activating the trauma system will be done directly via a tablet using the electronic activation system
4. Patient Service Clerk’s activation process:
   a. If the activation form process must be used, the Patient Service Clerk will activate the Trauma Team Pre-notification process by entering the following information on the communication website. Website location:
      Go to spok.com
      Click on “SEND MESSAGE”
   Enter the following information:
      i. Designation of Pediatric Trauma Patients: those patients transported to the trauma center who are 14 years old or less; Pediatric Number (467-2655).
      ii. Designation of Adult Trauma patients: Ages 15 and above - Adult Number (467-4929).
      iii. The categorization (1 or 2)
           1. Trauma One: 111-1111
           2. Trauma Two: 222-2222
      iv. The age and gender of the patient
      v. The mechanism and type of injury if available.
      vi. The estimated time of arrival.

   Patient Service Clerk will verify that the Trauma Team received the information on the Emergency Department’s Unit Trauma pager and document the trauma consult in Epic.

   **Trauma Pager:**
   If the Trauma Code information was not delivered on the Emergency Department’s Unit Trauma pager, the Patient Service Clerk will:
   - call the Hospital Operator using the code phone number (#4-4444)
   - instruct them to activate the Trauma Code Team with the Wordtrek and type in the ABOVE INFORMATION
   - Verify that the Trauma Team received the information on the Emergency Department’s Unit Trauma pager.

   If there is a known pager outage issue, the person discovering this will:
   - Notify the administrative supervisor
   - Administrative Supervisor will:
      a. Notify Residency Coordinator at 464-7261 OR
      b. If unable to reach Residency Coordinator during directly or during “off” hours, contact SPOK Directly at 1-888-957-7243
      c. Contact ED Clinical Leader to ensure that Patient Service Clerk will page team individually based on AMION using sections 5 and 6 to reference
   - When the paging system is functional again, Administrative Supervisor will notify ED Clinical Leader to resume normal procedure
Determination of Category Response Times:

<table>
<thead>
<tr>
<th>Level I Response Times:</th>
<th>Level II Response Times:</th>
<th>Consult</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team-Immediate</td>
<td>Team-Immediate</td>
<td>Admit to Trauma Service OR</td>
</tr>
<tr>
<td>Trauma Attending-15 minutes</td>
<td>Trauma Attending: Adult - Within 4 hours for ICU Admits – Adult Peds - Within 8 hours -</td>
<td>Trauma as Consult Service</td>
</tr>
</tbody>
</table>

5. The following personnel will respond immediately to a Level I:
   a. 1 - Chief trauma resident. (PGY 3, 4 or 5) and an Adult Trauma attending or Pediatric Trauma Attending (14 YEARS or Younger)
   b. 1 - Trauma Resident (PGY 1/2)
   c. 1 - Emergency medicine attending.
   d. 1 - Emergency medicine Resident
   e. 1 - ED Scribe RN
   f. 2 ED Trauma RNs
   g. 1 - Radiology Technologist
   h. 1 - Respiratory therapist
   i. 1 - Chaplain
   j. 1 - Social worker
   k. 1 – Administrative Supervisor
   l. 1 – Child Life Specialist (if available for patients aged 14 and younger)

Additional Team Members and consults – must respond within 30 min for Level I activations
   a. Neurosurgeon
   b. Orthopedic surgeon

6. Trauma Level II
   a. Chief trauma resident (PGY 4 or 5) or Trauma attending.
      - 1-Trauma Resident (PGY 3) and Adult Trauma Attending or Pediatric Trauma Attending (14 YEARS or Younger)
      **PLUS**
   b. 1 - Trauma Resident (PGY1 or 2)
   c. 1 - Emergency medicine attending.
   d. 1 - ED Scribe RN
   e. 1 - ED Trauma RN
   f. 1 - ED HCT, LPN or an additional ED trauma RN
   g. 1 - Radiology Technologist
   h. 1 - Respiratory therapists
   i. 1 - Chaplain or Social worker
   j. 1 – Child Life Specialist (if available for patients aged 14 and younger)
7. Level III (Trauma consult)
   Trauma Resident PGY 3

8. Identify role assignments per trauma guideline manual

9. Set up Trauma Room to accommodate treatment of Mechanism of Injury

10. Don Protective Personal Equipment