South Dakota Trauma System

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SOUTH DAKOTA
DEPARTMENT OF HEALTH

APPLICAITION FOR COMMUNITY TRAUMA HOSPITAL (CTH) OR TRAUMA RECEIVING HOSPITAL (TRH)

INSTRUCTIONS: Type or print clearly. Submit application and requested documents to the State Trauma Program Manager approximately three weeks prior to schedule visit.

(E) = Essential (D) = Desirable   Name of Current CEO:

Date: Name/title of person completing application:

Purpose of Visit	Level of Application	Facility
Initial Designation	Community Trauma	Address
Re-designation	Trauma Receiving	City State Zip Code

Community Information	Hospital Information
City Population	Hospital Governance
County Population	
Est. Total Area Served	Physical Plant Upgrades Since Last Site Visit
Main Economy	

Trauma Medical Director (E)	RN Coordinator/Registrar (E)
Has there been a change in the Trauma Medical Director position since the last site visit? Yes No	Has there been a change in the Trauma Coordinator/Registrar position since the last site visit? Yes No
If so, please explain.	If so, please explain.
Physician Medical Director must be current in ATLS.	Is this a dedicated position? Yes No
	If no, what % of time is dedicated to the trauma?

Please list any recommendations cited on your last review that have not been addressed.

Please list any opportunities for improvement cited on your last review that have not been addressed.

Hospital Statistics		ER Beds	In-Patient Beds	Average Census-In Patient-Swing	Average Census-In Patient-Acute	OR Beds	PACU Beds	ICU Beds
Emergency Department (E) Yes No								

12 month reporting period used for this review: From   To

Total number of ED visits in 12 month period

Number of ED visits due to injury in 12 month period (includes discharges from ED)

Number of patients meeting the definition of a "trauma team alert" patient in 12 month period

Number of "trauma team alerts" activated in 12 month period

Number of patients transferred to a TTH/RTH/ATH due to injury in 12 month period

Number of trauma deaths, including DOA's, in 12 month period

Number of trauma cases entered to the trauma registry in 12 month period?

Trauma Personnel-Educational Requirements (E)

	Physician	Specialty	Current in ATLS		Mid-level Practitioner	Specialty	Current in ATLS
1.			Yes No	1.			Yes No
2.			Yes No	2.			Yes No
3.			Yes No	3.			Yes No
4.			Yes No	4.			Yes No
5.			Yes No	5.			Yes No
6.			Yes No	6.			Yes No
7.			Yes No	7.			Yes No
8.			Yes No	8.			Yes No

Note: Submit copies of ATLS certificates along with this application. (The Physician Medical Director must be current in ATLS)
If a provider named above is not current in ATLS, document proof of successfully completing ATLS at least once and provide documentation of 16 hours trauma CME per administrative rule.

Number of nurses covering the ED: (E)
Note: Submit a list of current TNCC certifications with expiration dates for all nurses covering the ED along with this application (E)

Emergency Medical Services

Name of Local EMS Agency

EMS Medical Directors Name

Is EMS currently invited to PI meetings?

How many EMS services routinely transport to your facility?

Has the local EMS Trauma Transportation Plan been reviewed by staff? When?

What is the primary method of transporting critical patients from your facility?   Rotor Wing   Fixed Wing   Ground

Hospital Organization

Is there a hospital-specific definition of a trauma team alert patient? (E)
Note: Submit copy of definition along with this application.

Is there an operational and performance improvement review committee in place? (E)
Note: Have meeting minutes and agendas available during site visit.

Is there a defined trauma team and roles and responsibilities for each member? (E)
Note: Submit copies of definition and roles and responsibilities along with this application.

Is there defined trauma team activation guidelines? (E)
Note: Submit copies of activation guidelines along with this application.

Is there defined trauma transfer protocols? (E)
Note: Submit copy of protocols along with this application.

Emergency Department

Twenty-four hours a day, seven days a week operation: (E)   Is there a dedicated medical director? (E)

CTH--Physician coverage of ED for all trauma team activations 24/7. If physician is on-call, physician must arrive within 15 minutes of patient arrival 85 percent of the time. (E)

TRH--Physician, physician assistant, or nurse practitioner on-call coverage with a maximum 30 minute response time: (E)

Registered nurse available in hospital and promptly available to ED: (E)

Note: Have copies of staff notification and arrival times available during site visit.

ED Equipment

Airway control and ventilation equipment including laryngoscope and ET tubes of all sizes. Other invasive airway adjuncts, bag-mask resuscitator, pocket masks, and oxygen. (E)

Pulse Oximetry (E)   End-Tidal CO2 detection (E)   Suction devices (E)   Electrocardiograph-oscilloscope-defibrillator (E)

Pediatric resuscitation equipment (E)

Standard IV fluids and administration devices, including large bore IV catheters (E)

Sterile surgical sets, including:

Airway control, cricothyrotomy, thracheostomy trays, or throacotomy (E)

Vascular access (E)   Needle decompression or chest tubes (various sizes) (E)

Gastric decompression or nasal gastric tubes (E)

X-ray availability 24/7 (E)

Two-way communication with emergency transport vehicles (E)

Thermal control equipment for patients, blood and fluids (E)

Vascular Doppler (E)

Hospitals Medical Capabilities--Section essential only for those seeking CTH designation

Anesthesia services by licensed anesthesia provider (E)

Trauma or general surgeon coverage to ED at least 292 days of each calendar year (E)
Note: Submit ED surgical coverage along with this application.

Defined referral protocols in place for times when no surgeon is available (E)
Note: Submit protocols along with this application.

Hospital Surgical Services--Section essential only for those seeking CTH designation

Operating room team on-call with a maximum 30 minute response, 85 percent of the time (E)
Note: Have Staff notification and arrival times available during site visit.

Thermal control equipment for patients, blood and fluids (E)

Rapid infuser system which may include pressure bags (E)

Hospital Post-anesthesia Care Unit Services--Section essential only for those seeking CTH designation

Registered nurses available 24/7. On call acceptable (E)
Note: Have staff notification and arrival times available during site visit.

PACU Equipment--Section essential only for those seeking CTH designation

Pulse Oximetry (E)

End-tidal CO_2 detection (E)

Patient re-warming and thermal control monitoring (E)

Hospital Intensive Care Unit Services--Section essential only for those seeking CTH designation

Trauma Surgeon director or co-director (E)

Pulse Oximetry (E)

End-tidal CO_2 detection (E)

Patient re-warming and thermal control monitoring (E)

Hospital Radiology Services

Radiology technologist on-call with a maximum 30 minute response time (E)
Note: Have staff notification and arrival times available during site visit.

Conventional Radiology (E)

Hospital Laboratory Services

Clinical lab available 24/7 (E)
Note: Have staff notification and arrival times available during site visit.

Standard analysis of blood, urine, and other body fluids (E)

O-negative blood supply (E)

Coagulation studies (E)

Blood gas and pH determination (E-CTH)

Hospital Support Services

Respiratory services (E)

Acute hemodialysis capability, either on-site or via transfer agreement (E-CTH)

Hospital Performance Improvement and Patient Safety

Does the facility have an organized and structured performance improvement program? (E)

Is there a multidisciplinary performance improvement review committee? (E)

Is there collection and submission of trauma data to the state trauma registry? (E)

Is there hospital and pre-hospital trauma care performance review? (E)

Are there quarterly mortality and morbidity case reviews? (E)

Is there a published on-call schedule for trauma team members? (E)

Is there collaborative involvement in pre-hospital protocols? (E)

Note: Have meeting minutes and agendas available during site visit.

Operation performance improvement review program including notification and arrival times for:

Community Trauma Hospital (CTH)	Trauma Receiving Hospital (TRH)
Trauma Surgeon (E)	Physician/PA/NP (E)
Anesthesiologist or CRNA (E)	Radiology technologist (E)
Radiology technologist (E)	Laboratory technician (E)
Laboratory technician (E)	Respiratory therapist (if on trauma team) (E)
Surgery team (E)	
Post-anesthesia recovery team (E)	
Respiratory therapist (if on trauma team) (E)	
Note: Have staff notification and arrival times available during site visit.	**Note: Have staff notification and arrival times available during site visit.**

Tertiary Facilities

Our facility receives routine feedback from tertiary facilities.

Our facility receives education from tertiary facilities.

Our facility has been included in PI from tertiary facilities or regional PI.

State Trauma System Participation

Does the Trauma Coordinator and/or registrar routinely attend the fall trauma meeting?

Does the trauma coordinator and/or registrar routinely participate in the monthly conference calls? If so, what frequency?

Does the trauma coordinator and/or registrar submit trauma registry data routinely to the trauma registry and quarterly data when requested to the state?

Diversion

Has a request to transfer a critical patient ever been denied due to diversion of a tertiary facility? If so, explain.