

2.10 - Trauma Program Manager Requirements (Type II)

Applicable Levels

LI, LII, LIII, PTCI, PTCII

PRQ Question Text *[Field Type]*

- *1. Describe the responsibilities of the TPM and estimate their FTE commitment associated with these responsibilities. *[Text box]*
- *2. Upload the roles and responsibilities document for the TPM's position, including allocation of FTE across roles described above. *[Attachment]*
- *3. Upload the TPM's CE certificates or transcripts obtained during the Verification Cycle or Reporting Period for centers undergoing a consultation or initial verification review. *[Attachment]*
- *4. Upload appointment letter from national or regional trauma organization. *[Attachment]*