

4.5 Specialty Liaisons to the Trauma Service—TYPE II

Applicable Levels

LI, LII, LIII, PTCI, PTCII

Definition and Requirements

The trauma program must have the following designated liaisons:

LI, LII, PTCI, PTCII:

- Board-certified or board-eligible emergency medicine physician
- Board-certified or board-eligible orthopaedic surgeon
- Board-certified or board-eligible anesthesiologist
- Board-certified or board-eligible neurosurgeon
- Board-certified or board-eligible radiologist
- Board-certified or board-eligible intensive care unit (ICU) physician
- Geriatric provider (applies only to LI and LII)

LIII:

- Board-certified or board-eligible emergency medicine physician
- Board-certified or board-eligible orthopaedic surgeon
- Board-certified or board-eligible anesthesiologist
- Board-certified or board-eligible neurosurgeon (applies only to LIII-N)
- Board-certified or board-eligible ICU physician

In Level I trauma centers, the orthopaedic trauma surgeon liaison must have completed an orthopaedic traumatology fellowship approved by the Orthopaedic Trauma Association (OTA). In Level I pediatric trauma centers, this requirement may be met by having a pediatric fellowship-trained orthopaedic surgeon.

Additional Information

Level III-N trauma centers are those that provide neurotrauma care for patients with moderate to severe TBI, defined as GCS of 12 or less at the time of emergency department arrival.

Refer to Appendix A for details on board certification, board eligibility, and the Alternate Pathway.

Orthopaedic Surgeon Liaison

Level I pediatric trauma centers may share the adult orthopaedic trauma surgeon liaison from a Level I trauma center to meet this requirement.

Alternate Training Criteria

In Level I trauma centers, orthopaedic trauma surgeon who have not completed an OTA-approved orthopaedic traumatology fellowship may serve as the liaison by meeting the following criteria, subject to approval after review of credentials and training:

- At least 50 percent of the physician's practice is dedicated to providing care to orthopaedic trauma patients
- Active trauma committee membership in a regional, national, or international organization (outside of parent hospital or institution) and attendance of at least one meeting during the reporting period
- Evidence of peer-reviewed publications/research in orthopaedic trauma over the past three years
- Participation in trauma-related educational activities as an instructor or educator (outside of parent hospital or institution) in the past three years

Anesthesia Liaison

For Level III trauma centers:

- In states where certified registered nurse anesthetists (CRNAs) are licensed to practice independently, they may serve as the anesthesia liaison.
- In states where CRNAs are not licensed to practice independently, they may serve as the anesthesia liaison only if there is not a board-certified or board-eligible anesthesiologist on staff.

Geriatric Provider Liaison

In Level I and II trauma centers, the geriatric liaison may be a geriatrician, or a physician with expertise and a focus in geriatrics, or an APP with certification, expertise, and a focus in geriatrics. The role of the liaison is to assist in the development and implementation of geriatric protocols and to be available for patient consultation.

Measures of Compliance

Documentation of individuals assigned to specific liaison roles and evidence of board certification, board eligibility, or Alternate Pathway approval

Resources

None

References

None