

## Alternate Pathway

**Complete the chart below for any physician(s) applying for Alternate Pathway approval.**

**For physicians previously approved by the Alternate Pathway, only complete the following columns: Physician Name, Specialty, and Total CME.**

Physician Name(s)	Specialty	Total CME hours accrued over the Verification Cycle <sup>a</sup>	ATLS ID	ATLS Expiration Date (MM/YYYY)	Membership(s) in a national or regional trauma organization(s) and date(s) of meeting(s) attended*	PIPS committee meeting attendance Rate (%)*	Confirmation that proof of trauma care credentials has been uploaded to the PRQ? (Y/N)	Confirmation that documentation (such as PI Report by TMD demonstrating morbidity and mortality results for patients treated by the physician) has been uploaded to the PRQ?

\*During the Reporting Period

<sup>a</sup>Prorated to 12 hours annually for new hires

Shaded blue cells indicate required upload to online PRQ

## Alternate Pathway

### NEUROSURGEON

**Neurosurgical injuries (List charts with a minimum of 5 charts from each of the subcategories in the drop-down list.)**  
**Please list charts for adults and children cared for by the alternate pathway physician. Include operative cases and consults (if available) during the Reporting Year. The radiographs of the selected cases must be available at the time of the visit.**

#	Category	Unique Hospital Identifier	Age (ONLY list if >80 or <2)	ISS	Was imaging (CT/X-ray) used? (Y/N)	Mechanism	Injuries	Issues Identified	OR (Y/N)	Death (Y/N)	Notes	Length of Stay	Peer Reviewed (Y/N); if yes, what level?	PIPS/hospital events	PIPS/hospital events, if "other"	Loop Closure (Y/N)
1																
2																
3																
4																
5																

### ORTHOPAEDIC SURGEON

**Orthopaedic injuries (List charts with a minimum of 5 charts from each of the subcategories from the drop-list.)**  
**Please list charts for adults and children cared for by the alternate pathway physician. Include operative cases and consults (if available) during the Reporting Year. The radiographs of the selected cases must be available at the time of the visit.**

#	Category	Unique Hospital Identifier	Age (ONLY list if >80 or <2)	ISS	Mechanism	Injuries	Issues Identified	OR (Y/N)	Notes	Length of Stay	Peer Reviewed (Y/N); if yes, what level?	PIPS/hospital events	PIPS/hospital events, if "other"	Loop Closure (Y/N)	
	EXAMPLE														
1															
2															
3															
4															
5															