

## 5 Patient Care: Expectations and Protocols

### 5.1 - Clinical Practice Guidelines (Type II)

#### Applicable Levels

LI, LII, LIII, PTCI, PTCII

#### PRQ Question Text *[Field Type]*

- \*1. Upload a list of clinical practice guidelines, protocols, or algorithms with date of last revision. *[Attachment]*
- \*2. Confirm that the relevant clinical practice guidelines are also included in the medical records available for review. *[Radio button]*

## 5.2 - Trauma Surgeon and Emergency Medicine Physician Shared Responsibilities (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Upload documentation outlining the shared roles and responsibilities of trauma surgeons and emergency medicine physicians for trauma resuscitation. *[Attachment]*

## 5.3 - Levels of Trauma Activation (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Upload your center's trauma activation policy. This must include the level of activation, the criteria for activation, and the expected personnel. (This question is shared between Standards 5.3 and 5.5) *[Attachment]*

\*2. Complete the table below for all trauma activations at your center over the course of the Reporting Period:

Level	Number of Activations	Percentage of Total Activations
Highest		
Intermediate		
Lowest (Consult)		
Total		100%

## 5.4 - Trauma Surgeon Response to Highest Level of Activation (Type I)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

- \*1. Percentage of highest-level activations for which the attending trauma surgeon is present at the patient's bedside within 15 minutes (LI, LII) or 30 minutes (LIII) of patient arrival: *[Number]*
- \*2. Is the above answer equal to or greater than 80 percent? *[Radio button]*

## 5.5 - Trauma Surgical Evaluation for Activations below the Highest Level (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

- \*1. Upload your center's trauma activation policy. This must include the level of activation, the criteria for activation, and the expected personnel. (This question is shared between Standards 5.3 and 5.5) *[Attachment]*
- \*2. Provide the proportion of trauma activations (by level) over the course of the Reporting Period in which the surgical response time falls within the timeframe outlined in your policy. *[Text box]*

## 5.6 - Care Protocols for the Injured Older Adult (Type II)

### Applicable Levels

LI, LII

### PRQ Question Text *[Field Type]*

\*1. Upload care protocols for older trauma patients. *[Attachment]*

## 5.7 - Assessment of Children for Nonaccidental Trauma (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

- \*1. Describe your center's process for identifying children at risk. *[Text box]*
- \*2. Upload your center's relevant protocols/policies. *[Attachment]*

## 5.8 - Massive Transfusion Protocol (Type I)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Upload your center's massive transfusion protocol. *[Attachment]*



## 5.9 - Anticoagulation Reversal Protocol (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Upload your center's rapid reversal protocol that includes therapeutic options and indications for the use of each reversal agent. *[Attachment]*

## 5.10 - Pediatric Readiness (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

- \*1. Upload your center's current Pediatric Readiness Assessment Gap Report *[Attachment]*
- \*2. Describe your center's plan to address any gaps identified through the pediatric readiness assessment. *[Text box]*

## 5.11 - Emergency Airway Management (Type I)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

- \*1. Upload your center's plan for emergency airway management that specifies provider and means of escalation. *[Attachment]*
- \*2. Does your trauma center have equipment immediately available to establish an emergency airway? *[Radio button]*

## 5.12 - Transfer Protocols (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Upload transfer protocols that include the types of patients, expected time frame for initiating and accepting a transfer, and predetermined referral centers for outgoing transfers. *[Attachment]*

## 5.13 - Decision to Transfer (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Upload a report of all transfers out, with reason for transfer, over the course of Reporting Period. *[Attachment]*

## 5.14 - Transfer Communication (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

- \*1. Describe the communication processes for transfers in and out of your center, how transfers are documented, and how safe transition of care is assured. *[Text box]*
2. Upload any relevant policies, if available. *[Attachment]*

## 5.15 - Trauma Diversion Protocol (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Upload your center's diversion protocols that are approved by the TMD and include the agreement of the trauma surgeon in the decision to divert, notification of dispatch and EMS agencies, and logging of reasons for and duration of diversion. *[Attachment]*

## 5.16 - Trauma Diversion Hours (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Upload trauma diversion report that includes total hours on diversion during the Reporting Period. *[Attachment]*



## 5.17 - Neurosurgeon Response (Type II)

### Applicable Levels

LI, LII, LIII-N, PTCI, PTCII

### PRQ Question Text *[Field Type]*

- \*1. Provide a report of neurosurgical response times for patients meeting the criteria in the standard. *[Attachment]*
- \*2. Upload relevant policy that outlines criteria and requirements for neurosurgery response time. *[Attachment]*

## 5.18 - Neurotrauma Plan of Care for Level III Trauma Centers (Type II)

### Applicable Levels

LIII

### PRQ Question Text *[Field Type]*

- \*1. Are there limitations to the types of neurotrauma cared for in your center? *[Radio button yes/no]*
2. If yes, upload your center's policy that addresses which patients can be cared for and/or which must be transferred. *[Attachment]*

## 5.19 - Neurotrauma Contingency Plan (Type II)

### Applicable Levels

LI, LII, LIII-N, PTCI, PTCII

### PRQ Question Text *[Field Type]*

LI, LII, PTCI, PTCII:

\*1. Upload neurotrauma contingency plan. *[Attachment]*

LIII-N:

\*1. Upload neurotrauma contingency plan. *[Attachment]*

\*2. Describe whether your center's neurosurgery coverage is continuous and whether its neurosurgeons are also responsible for care at other centers when on call. *[Text box]*

## 5.20 - Treatment Guidelines for Orthopaedic Injuries (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Upload treatment guidelines for orthopaedic injuries as defined in the standard. *[Attachment]*

## 5.21 - Orthopaedic Surgeon Response (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

- \*1. Provide a report of orthopaedic surgeon response times over the course of the Reporting Period for patients meeting the criteria outlined in the standard. *[Attachment]*
- \*2. Upload relevant policy that outlines criteria and requirements for orthopaedic surgeon response time. *[Attachment]*

## 5.22 - Operating Room Scheduling Policy (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Upload policy that outlines targets for access to the OR based on level of urgency. *[Attachment]*

## 5.23 - Surgical Evaluation of ICU Patients (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Describe how your center's trauma program ensures that trauma patients admitted to the ICU either have had surgical evaluation or have ongoing involvement of surgeons in their care. *[Text box]*

\*2. Upload your center's ICU policy that specifies the requirement for timely evaluation and ongoing involvement of surgical services in the care of trauma patients. *[Attachment]*

## 5.24 - Trauma Surgeon Responsibility for ICU Patients (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Describe your center's model of ICU care for trauma patients and how the trauma surgeons retain responsibility for care delivery. *[Text box]*



## 5.25 - Communication of Critical Imaging Results (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

- \*1. Describe how critical imaging results are communicated to the trauma team at your facility. *[Text box]*
2. Upload any relevant policies. *[Attachment]*

## 5.26 - Timely Computed Tomography Scan Reporting (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Upload any institutional policies that address timely CT scan reporting for trauma patients. Be prepared to provide radiology reports at the time of your site visit. *[Attachment]*

## 5.27 - Rehabilitation Services during Acute Phase of Care (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

- \*1. Describe how and when patients at your center are typically assessed for their acute rehab needs. *[Text box]*
- \*2. Upload protocols that outline the process for identifying patients in need of rehabilitation services during their acute inpatient stay. *[Attachment]*

## 5.28 - Rehabilitation and Discharge Planning (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Describe your center's process for determining the level of care patients will require after discharge and the specific rehabilitation care services required at the next level of care. *[Text box]*

## 5.29 - Mental Health Screening (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

LI, LII, PTCI, PTCII:

- \*1. Upload mental health screening protocol. *[Attachment]*
- \*2. Describe your center's mental health referral process. *[Text box]*

LIII, LIII-N:

- \*1. Describe your center's mental health referral process. *[Text box]*

## 5.30 - Alcohol Misuse Screening (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

\*1. Upload alcohol misuse screening rate measured against criteria outlined in the standard. *[Attachment]*

## 5.31 - Alcohol Misuse Intervention (Type II)

### Applicable Levels

LI, LII, LIII, PTCI, PTCII

### PRQ Question Text *[Field Type]*

- \*1. Upload SBIRT protocol. *[Attachment]*
- \*2. Upload alcohol misuse intervention report as described in the standard. *[Attachment]*