

DIVINE SAVIOR HEALTHCARE
Portage, WI
Trauma Coordinators

DATE: November 27 2007

PRESENT: Laura Ahola, Kevin Kaminski, Shari Ruesga, Amy Franklin, Ellie Moyer, Jennifer Lopez, Brain Cushman, Cella Janisch, Misty Streif, Mary Crowler, Kari Ratzloff, Lynne Sears, Linda Tyler-Doundra, Joe Ketarkus, Theresa Weiland, Janet Volk, Shelly McGuire, Sheryl Krause

ABSENT:

<i>TOPIC</i>	<i>DISCUSSION</i>	<i>CONCLUSIONS/RECOMMENDATIONS /ACTIONS</i>	<i>FOLLOW-UP</i>
New EMS Coordinators position has been filled in both Watertown and Platteville Hospitals.	Contact information is needed for both of these new coordinators.	Anyone with contact information please email Laura Ahola at lahola@dshealthcare.com Once contact information is received Laura will give both people a call to inform of the meeting dates as well as offer trauma coordinator support.	
Trauma Registry Update	Approximately ½ of this regions trauma coordinators or designee attended the state registry in-service. The over all feeling was that it left people feeling frustrated and still a little lost within the system. There is another registry course offering in January. Go to the DHFS web site for more information and to register.	If you or your institution has questions regarding the registry, bring them to the next trauma coordinators meeting. We will problem solve together	Registry question 1. Patient injured in Iowa, treated and released, seen later at WI hospital, admitted for medical complication, possibly related to the trauma injury that the patient was already treated for and released. This patient was not seen by the surgery team. Should this patient be entered into the trauma registry? No, the patient was admitted for orthopedic reasons not for an acute stay. This patient was not admitted for traumatic injury nor was he seen by a trauma doctor.
Educational component	Last meeting we decided to provide an educational component to our meetings. This month Kari Ratzlaff presented grade three splenic injuries.	It is important for us all to remember that grade three spleens may look stable, but if that encapsulated injury should decide to rupture, the patient will require immediate surgery. It would be good for us to review splenic injuries with our nursing staff. If you would like to use Kari's notes go ahead.	
Site Survey Update	Preparation for your site survey will help speed the process along. If you need help with preparation just ask the hospitals who have already been thru the survey. It is most helpful if all of your trauma policies are in one place, if your patient review required charts are flagged for the components that are required (see your pre-site survey letter from the state) and if your trauma deaths have been identified. The following web sites are most helpful when preparing for your survey: http://dhfs.wisconsin.gov/ems/Trauma/pdf/SurveySchedule.pdf http://dhfs.wisconsin.gov/ems/Trauma/pdf/SiteReviewFAQs.pdf http://dhfs.wisconsin.gov/ems/Trauma/pdf/Site Review Process Summary.pdf http://dhfs.wisconsin.gov/ems/Trauma/pdf/ProcessTimelines.pdf http://dhfs.wisconsin.gov/forms/DPH/dph07479.pdf	If your hospital would like to participate in a pre-survey mock site visit contact Lynn Sears at UW. She has helped a few of our hospitals in our region. This tends to be most helpful for our administrative teams. The mock last approximately 3 hours.	
PI plans	If you have not started with your PI a good place to start is with the trauma deaths in your facility. Another place to start is with level of transfers. See attached tool prepared by one of our own trauma coordinators. Other required elements will be GCS at scene (EMS will need some education on this) LOS in your ED prior to the transfer of a patient.		

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New Business	The trauma coordinators have expressed an interest in helping WATS prepare CEU for long term trauma patient care. This would include rehab, floor nursing care etc.	Any one interested should come up with a list of ideas and present at the next trauma coordinators meeting.	
Meeting adjourned Next meeting January 22 4pm – 5 pm Location TBA			