

## OREGON STATE TRAUMA ADVISORY BOARD MINUTES

July 29, 2005

Good Samaritan Regional Medical Center, Corvallis, OR

### Members Present:

Mary Barnum, RN; Merlin Curry, EMT-P via teleconference; Brian Graunke, EMT-P; John Hopkins; Susan Leathers, RN via teleconference; William Long, MD (Chair); Robert Read, MD (Vice Chair); Ritu Sahni, MD; Martin Schreiber, MD; Richard Urbanski, MD; Rhonda Wood RN.

### OHD Staff Present:

Susan Werner, Raelene Jarvis (recorder).

### Absent:

Will Bean, RN; Daniel Hamre, MD; Christine Heyen; Jon Jui, MD; Kerry Keeler, MD; Nathan Kemalyan, MD; Paul LeSage, EMT-P; Carla Smith, MD; Kevin Van Syoc, EMTP.

### In attendance:

Maureen Harrahill, RN; West Livaudais, MD; Bobbie O'Connell, RN; Ameen Ramzy, MD; Cheryl Battazzo, RN, Richard Edlich, MD.

Dr. Long, Chair, called the meeting to order at 11 :00 am.

### *Review of Minutes - Dr. Long*

It was motioned, seconded, and unanimously approved that the STAB meeting minutes of April 28, 2005 be approved as distributed.

## STANDING STAB REPORTS

### *Health Services Report - Susan Werner*

1. EMS administrative rule revisions are being considered. Trauma OARs will be evaluated for updates and changes in the next six months. STAB participants are encouraged to be involved in the subcommittee to be formed.
2. Oregon Trauma Registry (OTR): trauma registry software demonstrations were held July 11 & 12, attended by 30 participants from all trauma levels across the state. Users ranked the products, and with the fiscal information, a final offer for purchasing is expected by the end of August.
3. Legislative Update: The state budget is not yet final. EMSC and the Prehospital Database project are being affected by the end of session movement of state budget dollars. Budget outcomes won't be known until the legislative session ends.

**Action: For Information.**

*ATAB Reports:*

1. ATAB 1 - Presented. Met May 9th . Working on revising the ATAB plan, ROC study update, discussed hypertonic saline. Mr. Wish presented early activation criteria for air ambulance; discussed traumatic arrests in prehospital setting where CPR is initiated, showing 8 survivors in 2 years.
2. ATAB 2 - Received. Met July 21st. Only 3 out of 10 hospitals in ATAB 2 have gone live with the web-based hospital resource status system (an additional facility to go up in August); standard operating procedures for web use needed. Had guest speaker from NW Transplant Bank to address concerns from ATAB facilities. Data requested from NWTB, and the AT AB will send a formal letter expressing their concerns. Collecting info on injury prevention activities throughout the ATAB. 20% trauma volume increase in 2004 in ATAB 2 hospitals. Started a concurrent data collection on specialty transport services by both ground and air providers for interfacility transfers from 7/1/05-12/31/05. Educational presentation on hypothermia
3. ATAB 3 - Received. Met May 18th. At the Level II over the past 10 years, full trauma activations have doubled while the total number of trauma registry patients has tripled. A significant factor in this volume increase has been the number of patients transferred in to the Level II. With the implementation of a trauma transfer coordinator, it is hoped that transfers will be a seamless process. Additionally, with the recent acquisition of a traumatologist, the Level II hopes to extend orthopedic services throughout the A TAB region. Countywide disaster drill June 11,2005. Educational presentation on two complex trauma resuscitation cases. One patient was managed within the facility, while the other was transferred. Discussion on difficult intubations, and how aggressive pre-hospital should be with field-intubations. CO2 monitoring should be a standard of care in the field.
4. ATAB 5 - Presented. Met July 27th. Good attendance; working on revising the ATAB plan. Discussed patient care for patient with torn aorta. Being impacted by Jackson County having the highest suicide rate in the state. As of September 1st, there will be 4 neurosurgeons at Rogue Valley Medical Center, resulting in 24/7 coverage.
5. ATAB 6 - Received. Met July 19th. Discussed issues of transport difficulties with bad weather conditions, when the patient is unstable and needs rapid transport, but weather hinders movement. Will review issues on a case-by-case basis.
6. ATAB 7 - No report. Last meeting May 11<sup>th</sup>.
7. ATAB 9 - Received. The meeting was held at Grande Rhonde Hospital in La Grande with minimal attendance. Facility updates were presented by those present. No cases were presented.

**Action: For Information.**

*State EMS Committee Report - Jon Jui, MD*

*Bioterrorism / WMD - Jon Jui, MD*

Dr. Jui not present; No report.

*Airmedical Transport Committee - Ameen Ramzy, MD*

Ken Parsons is now chair of AAMRO. The air ambulance resource guide is available on the state EMS website <http://egov.oregon.gov/DHS/ph/ems/airmed/index.shtml> and the group will be adding a service area map. Ongoing discussions: use of defined service areas, criteria for early air ambulance activation.

**Action: For Information.**

OLD BUSINESS

*Orthopedic Hand Call- William Long, MD*

As of September 1st, there will be 3 physicians at Legacy covering hand call in addition to the hand surgeons available at OHSU.

**Action: No further action needed.**

*Aeromedical transport of non-life-threatening but time-sensitive trauma - William Long, MD*

*Discussion:* General consensus is that in cases of time-sensitive traumatic injury, the use of the most expeditious transport to definitive care should be considered, which includes air transport. It was noted that it cannot be assumed that air transport is always the fastest method of transferring the patient.

**Action: Follow up at next STAB meeting.**

*STAB Patient Management Guidelines - Group*

It was agreed that the STAB Guidelines are in need of updates.

**Action: Dr. Sahni agreed to start with an update to the Neurotrauma Management Guidelines. The remaining guidelines will be distributed for update at the next STAB meeting.**

*Medical Response Plan / Surge Capacity - Jon Jui, MD*

No report.

*Bioterrorism Hospital Capacity System - Susan Werner*

The Trauma System is working in conjunction with the HRSA-sponsored State Bioterrorism Group to require use of the Hospital Capacity website. Ms. Werner and Ms. Jarvis will be providing training to the trauma hospitals on use of the website. A letter to the hospital administrators is being drafted with additional information.

**Action: For Information.**

NEW BUSINESS

*Autopsy Results for STAB/ATABs - Raelene Jarvis*

ATABs and trauma programs have had some difficulties obtaining autopsy results for quality improvement purposes. The State Medical Examiner has been very supportive of this need, but at the local level there has not always been good

follow up. Ms. Jarvis and Ms. Werner are communicating at the state level to help smooth the process. ATAB 1 and ATAB 5 are fortunate to have deputy MEs as ATAB members.

**Action: For Information. Follow-up at next STAB meeting.**

*Surgeon representation on State EMS Committee - William Long, MD*

ACS/COT recommends having a trauma surgeon as a voting member on the State EMS Committee. In Oregon, this would require a change to the OARs, or appointment by DHS.

**Action: Dr. Long will write a letter of interest to Dr. Jui, Chair, State EMS Committee.**

*Other New Business - Richard Edlich, MD*

Two articles were distributed: "Maryland State Police Aviation Division. A Model Emergency Medical System for Our Nation" and "A Tribute to William Long Jr. and William B. Long III" published in the Journal of Long-Term Effects of Medical Implants, and content was reviewed.

*Discussion:* The group affirmed that adequate funding is needed for all trauma care, including air transport.

**Action: For Information.**

MEETING SCHEDULE

2005

Friday, October 28, 2005                      Portland State Office Building

2006

Friday, January 27, 2006                      Locations TBA

Friday, April 28, 2006

Friday, July 28, 2006

Friday, October 27, 2006

There being no further business, the meeting was adjourned at 1:30 pm.

Recorder: Raelene Jarvis, RN, Trauma Coordinator, DHS