

Vanderbilt Trauma/Emergency Medicine Trauma Response by Activation Level

	Level I	Level II	Level III/Trauma Consult	Burn Alert
Personnel Response	Full Team <ul style="list-style-type: none">Trauma AttendingTrauma SeniorTrauma JuniorEM AttendingEM R2/3 AirwayPrimary NurseSecondary Nurse/MedicPCTScribeRespiratory TherapistRadiology Tech	Full Team minus trauma attending <ul style="list-style-type: none">Trauma SeniorTrauma JuniorEM AttendingEM R2/3 AirwayPrimary NurseSecondary Nurse/MedicPCTScribeRespiratory TherapistRadiology Tech	Standard ED response; Consult Trauma Service as needed	<ul style="list-style-type: none">EM AttendingBurn Resident JuniorEM R2/3 AirwayPrimary NurseSecondary Nurse/MedicPCTScribeRespiratory TherapistRadiology Tech

Patient Prioritization CT
Level I and Level II patients have the same priority ie: meaning as quickly as possible.

CT Scanning of Females of Child-Bearing Age
Every effort should be made to consent the patient if it is known they are pregnant, otherwise CT scans should be obtained with a standard disclaimer placed into the patient's chart by the Trauma and/or ED Attending.

Level II Considerations

- When patients require upgrading a call should be placed to Flightcomm asking that a page be sent out asap. The Trauma Attending should also be notified via phone.
- Prioritization of CT Scanning shall be determined by the Trauma and/or ED Attending

Level III Considerations

Patients with documented injuries on outside hospital studies that have been confirmed by the ED attending and require inpatient care do not need a formal Trauma Surgery Consult prior to initiating the bed request process. such circumstances, the ED attending or their designee will page the Trauma Chief Resident, provide a brief report of the pertinent injuries and hemodynamic stability of the patient, and a Trauma Bed Request will be placed.

Trauma Attending Mobile Phone
Number 615-480-1149

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	Level I		Level II	Level III	Burn Alert
Response time for team	Prior to patient arrival		Prior to patient arrival	ED Discretion	Prior to patient arrival
Response time for Trauma Attending	15 Minutes from patient arrival		2 Hours from patient arrival	6 Hours from patient arrival	2 Hours from patient arrival
Team Prebrief?	Yes		Yes	ED Discretion	Yes
Video Recording?	Yes		Yes	ED Discretion	Yes
Team members wear PPE?*	Yes		Yes	No*	Yes
Sequential/Standard Management Flow?	Yes		Yes	ED Discretion	Yes
Use of Stat Name?	Yes		Yes for scene patients** No for interhospital transfers	No	Yes for scene patients** No for interhospital transfers
Room Assignment***	A-Pod Trauma Bay		A-Pod Trauma Bay	ED Discretion	A-Pod Trauma Bay
Use of Trauma Narrator?	Yes		Yes	Yes	Yes
FAST Exam	Per Trauma staff; as clinically indicated		Per Emergency Medicine staff	ED Discretion	Per Emergency Medicine staff; as clinically indicated

* staff may always elect to wear PPE at any time even if it isn't mandated for the specific resuscitation

**unless patient is already pre-registered

***caution with moving undifferentiated or unstable patients to the Bpod OR patients requiring procedures