

WHEN TIME IS CRITICAL



Trauma victims need immediate care. Our new trauma team helps them get it

In August, Salina Regional implemented a new level of response for traumatically injured patients. Now a specially designated team of individuals with highly defined roles descends on the emergency department as soon as a trauma call is received. It is all part of an effort to earn a Level III trauma designation from the American College of Surgeons (ACS) and enhance trauma care in the region.

A new system for triaging patients increasingly being utilized by Salina emergency services and referring emergency department physicians throughout north central Kansas kicks in to motion the hospital's response process where time between diagnosis and proper medical intervention is critical.

"We now have a dedicated team to serve this population," says Rachelle Giroux, R.N., Salina Regional's trauma services coordinator.

"Paramedics and doctors in the region have a dedicated line they call, which sets off a cascade of alerts to people on the response team."

COORDINATED EFFORTS GET RESULTS

The team includes a trauma surgeon, emergency department physician, trauma control nurse, intensive care nurse, surgical nurse and staff from radiology, laboratory, blood bank, respiratory care, security and chaplaincy. All of them report to trauma suite 4 in the emergency department, which is fully stocked to meet the care needs of all types of patients.

"We just had a case that from the time they came in the door to the time they were in surgery was 30 minutes," Giroux says. "That's a pretty incredible reaction time, but it will only get better."

A key component to earning a Level III trauma verification from the ACS happens behind the scenes and deals with performance improvement. All trauma patient charts are abstracted and entered into a database to track response times and patient outcomes. The data gleaned from this process are continually reviewed and utilized to improve response for future events. To become verified by the ACS, a hospital must have at least a year's worth of data on its performance-improvement initiatives.

IMPROVING TRAUMA CARE FOR ALL OF KANSAS

Salina Regional's efforts match those of a statewide initiative to have at least a Level III trauma center in each geographical region of Kansas. While there are Level I trauma centers available




Trauma surgeons Jake Breeding, M.D., and Jody Neff, M.D., and nurses Rachelle Giroux, R.N., and Sherree Baker, R.N., lead Salina Regional's trauma program.

in Kansas City and Wichita, and two Level II trauma centers in other largely populated communities, there are no current, verified trauma centers west of a line that runs from Topeka to Wichita.

The main difference between levels of trauma care is the type of service available. Level I and II trauma centers offer a complete line of services, including 24/7 neurosurgery. While Salina Regional does offer neurosurgery, it's not available 24/7.

Patients needing a higher level of care will still be treated and transferred to a Level I or II trauma center when needed.

"Not every trauma case needs Level I care," says Jody Neff, M.D., director of Salina Regional's trauma service. "Our goal isn't to provide 100 percent of the region's trauma care. It's to become part of a better statewide trauma system and save lives." 

LEARN MORE

To find out more about Salina Regional's emergency care services, visit srhc.com.

