POLICY:
To provide immediate, effective and efficient patient care to the trauma patient, designated nursing staff will respond to the trauma room when a trauma page is received.

TRAUMA CONTROL NURSE:
1) Role:
   a) The trauma control nurse (TCN) is a registered nurse (RN) with specialized training in the care of the traumatized patient, and who will function as the trauma team’s lead nurse.
   b) The TCN shall have successfully completed the Trauma Nurse Core Course (TNCC), Advanced Cardiac Life Support (ACLS), Emergency Nurse Pediatric Course (ENPC) or Pediatric Advanced Life Support (PALS), and role orientation with trauma services.
   c) Full-time employee or regularly scheduled part-time Emergency Department (ED) nurse.
   d) RN must have 6 months of LMH ED experience.

2) Trauma Control Duties:
   a) Inspects and stocks trauma room at beginning of each shift and after each trauma patient is discharged from the ED.
   b) Attempts to maintain trauma room temperature at 80-82 degrees Fahrenheit.
   c) Communicates with pre-hospital personnel to obtain patient information and prior field treatment and response.
   d) Makes determination that a patient meets Type I or Type II criteria and immediately notifies LMH’s Call System to initiate the Trauma Activation System.
   e) Assists physician with orders as directed.
   f) Acts as liaison with patient’s family/law enforcement/emergency medical services (EMS)/flight crews.
   g) Delegates duties to other team members and assists with roles/functions of the 3 W Surgical RN and ED RN as needed.
   h) Assures complete documentation on trauma documentation.
      a) Request obstetrics, pediatric, and/or operating room RN as needed.
      b) Call or delegate Unit secretary to call chaplain and/or social services as needed.
      c) Accompanies all trauma patients to testing and/or transfer to floor.

BEDSIDE TRAUMA NURSE #1 (Emergency Department RN):
1. Role:
a) The bedside trauma nurse is a registered nurse with specialized training in the care of the traumatized patient, is pre-assigned by the ED charge nurse every shift. He/she has the responsibility for direct patient nursing care under direction of the ED Physician and/or appropriate physician call.

b) The bedside trauma nurse shall have successfully completed the TNCC and role orientation with trauma services.

2. **Bedside Trauma Nurse Duties:**
   a) Initial and primary function is to obtain manual blood pressure within 5 minutes on patient arrival.
   b) Notify documenter of primary and secondary assessment findings.
   c) Reassess full vital signs (BP, HR, RR) every 30 min and/or as needed.
   d) Reassess manual blood pressure every 5 minutes if hypotensive. Assist with attaching monitor to patient.
   e) Assist with getting patient history and verbalize to TCN.
   f) Assist with administration of medications as ordered.
   g) Initiate 2 large bore IVs, assist and monitor administration of intravenous fluids, assure all fluids (including blood) are warm. Report fluid type, rate, intake and replacements to the TCN.
   h) Assist with Level I fluid warmer, as needed.

**BEDSIDE TRAUMA NURSE #2 (3 W Surgical RN/ED RN designee):**

1. **Role:**
   a) The bedside trauma nurse is a registered nurse with specialized training in the care of the traumatized patient, who is “pre-assigned” by the 3 W or ED charge nurses. He/she has the responsibility for direct patient nursing care under direction of the ED Physician and/or appropriate physician call.
   b) The bedside trauma nurse shall have successfully completed the TNCC and role orientation with trauma services.

2. **Bedside Trauma Nurse Duties:**
   a) Attach monitors (pulse oximeter, blood pressure cuff, cardiac monitor) to patient immediately on arrival.
   b) Remove all clothing, while maintaining full spinal immobilization.
   c) Apply warm blankets or forced-air warming blanket as needed.
   d) Assist, initiate and/or monitor administration of intravenous fluids and blood. Report fluid type, rate, intake and replacements to the TCN.
   e) Assist administration of medications as ordered.
   f) Collect all patient valuables, inform TCN with whom and where they were sent.

**PEDIATRIC NURSE:**

1. **Role:**
   a) The pediatric nurse is a registered nurse with specialized training in the care of the pediatric patient, who is pre-assigned by the women and children's services director or designee every shift. The pediatric RN is to respond to Type I and Type II trauma activations when the patient is
12 years of age or younger, per the discretion of the emergency department physician, appropriate physician call or designee.

2. **Bedside Pediatric Nurse Duties:**
   a) Monitor patient according to age-appropriate criteria.
   b) Assist with patient care, interactions and monitoring as ordered by EDP, surgeon or TCN.
   c) Accompanies patient for procedures, pediatric or medical/surgical bed, operating room or helicopter per the request of the ED physician, TCN or surgeon on call.

**OPERATING ROOM NURSE:**
1. **Role:**
   a) The operating room (OR) nurse is a registered nurse with specialized training as a surgical nurse who is assigned by the OR or designee and functions as an assistant to the surgeon in any surgical procedures performed in the ED per the request of the TCN, EDP or appropriate physician. In addition, under the direction of the surgeon, the OR RN communicates with the operating room and may assist with direct patient care and with transporting the patient to the OR per the TCN’s request.
   b) The OR RN will respond to Type I and Type II trauma activations if requested by the EDP, surgeon on call, or TCN. During regular business hours, the surgery department will be called directly at extension 3625 for assistance by the TCN or designee. Otherwise, the nursing supervisor will call OR staff and anesthesia as directed.

2. **Operating Room Nurse Duties:**
   a) If immediate intervention is not required, the OR RN will advise the OR and return to his/her duties.

**OBSTETRICS NURSE:**
1. **Role:**
   a) The obstetrics (OB) nurse is a registered nurse with specialized training in the care of the pregnant patient who is pre-assigned by the women and children services director or designee every shift. This RN will respond to Type I and Type II trauma activations on all traumatized OB patients at 20-weeks gestation or greater.
   b) The OB nurse will be notified by the TCN or designee to report to the ED/Trauma room per the request of the TCN, EDP or appropriate physician to obtain fetal heart tones (FHTs), assess, and assist with care of the OB trauma patient as needed.

2. **Obstetrics Nurse Duties:**
   a) Bedside assessment and care of pregnant patient
      i. Positioned or tilt on left side if possible.
      ii. Obtain FHTs and verbalize findings to TCN
      i. Initiate fetal monitoring (Tocodynamometer or doppler) if greater than 20 weeks
      ii. Obtain fundal height

**Original Date:** Trauma Medical Director 8/13, Trauma Committee 3/14, Standards Committee 3/14, Practice Council 4/14, COO 7/14, Director of Emergency Services, 7/14