

**Region 8 Trauma Rotation Committee
SPECIAL MEETING
Tuesday, December 7, 2021- 5:30 p.m.**

**Oklahoma County Medical Society
313 N.E. 50th Street, Suite 2
Oklahoma City, Oklahoma 73105**

The meeting notice was filed with the Oklahoma Secretary of State on September 21, 2021 at 3:52 p.m. The meeting notice/agenda was posted on the Oklahoma State Department of Health website on November 22, 2021 at 4:21 p.m.

MINUTES

- I. Call To Order David W. Smith, MD, Chair
The meeting was called to order at 5:30 p.m. by Chair Dr. David W. Smith.

- II. Roll Call David W. Smith, MD, Chair
Roll call was taken and guest introduced with the following members present: Dr. Roxie Albrecht, Dr. David W. Smith, Dr. Thomas P. Lehman, Dr. Ross Martin, and Dr. Ryan Wicks. Dr. Chad Borin, Dr. Eric Friedman, Dr. Zachary M Hurwitz, and Dr. John Nalagan were absent.

- III. Approval of Minutes-September 14, 2021. David W. Smith, MD, Chair
A motion to approve the September 14, 2021 minutes as written was made by Dr. Thomas Lehman and seconded by Dr. Ryan Wicks. There was no discussion and the motion passed 5-0.

- IV. Reports
 - A. Region 8 Prehospital Trauma Transport Statistics David Howerton
David Howerton was not present to report. Zachary Sinsheimer presented data from the EMSA-West division regarding the number of Priority 1, 2, and 3 trauma patients by trauma patient destinations and the initial acuity impressions from July through November 2021. The RTAB prehospital trauma transport report is currently being developed with the project approximately 50% completed. The hope is to have a report available in OKEMSIS that will pull the same data reported by EMSA-West to share with Region 8 EMS agencies as well as all Oklahoma licensed EMS agencies outside of the region for report to the RTAB and Trauma Rotation Committee. Dr. David W. Smith requested that the data be sent to members after the meeting for review, comments, and suggestions for improvement. Mr. Sinsheimer noted the data presented did not include data regarding provider primary impression but will be included in the shared report made available on OKEMSIS in order to determine specialty care needs. The shared report will be sent to Emergency Systems by the end of 2021 to determine if data can be pulled from all state agencies for report at the first quarter Region 8 meetings.

 - B. TReC..... Jessie Leslie
Jessie Leslie presented data from January 1 through October 1 of 2021 regarding Regions 8 and 7 patient refusals to include the total accepted TReC calls on the day a facility was on call, how many times each specialty was requested on TReC call, and specialty refused with data reflecting highs and lows. If a patient is denied by an on call facility, TReC generally selects the next geographically closest facility with the capability to treat that patient. Patients refused in Region 7 are not typically transferred into Region 8 with placement of those patients determined by the region's trauma plan and approved rotation. For the data presented, only three patients denied by a Region 8 on call facility were transferred to Region 7. Specific data was not available regarding patients who were transported into Region 8 after being denied by a Region 7 on call facility; Mr. Leslie noted that the number of patients was bigger but not exponential. The most common reason for refusal is capacity rather than capability. Data was not available regarding refusals due to capability but Mr. Leslie noted the decision to transfer due to capability is most often made by the hospitals or transfer administrator. Members noted the percentage of refusals for face was higher compared to other specialties. Mr. Leslie was unable to provide reasons for the higher percentage

but stated he would follow up with the committee regarding questions. Members noted that the data presented did not include patient transfers that bypassed TReC and were transported from Region 7 into Region 8. Mr. Leslie noted the data included only patients that required an immediate ER to ER transfer. Grace Pelley noted transporting agencies are required to notify TReC when entering into Regions 7 or 8 but not all EMS agencies call. Transports not reported to TReC should be entered into OKEMIS by the EMS agencies for data collection. Ms. Pelley reminded members TReC data represents unassigned patients and does not include direct calls between facilities. Dr. Lehman noted that, in Region 8, it is recognized where hand patients need to go and those patients are not typically diverted as it makes more sense to treat the patient when able rather than transfer to the only Level I Trauma Center that is most likely as overwhelmed as the transferring facility. Dr. Lehman also noted that request for hand transfers are typically due to no specialist on call or, most often, facility divert. Dr. David W. Smith discussed the regional quality improvement process and encouraged members to submit issues regarding specialty transfers to the CQI Committee for review. CQI referral forms are available on EM Resource and will be emailed to members after the meeting. Dr. Lehman discussed issues regarding hand transfers due infections noting that, even though the on call rotation is only for trauma, it should be recognized by the region that these transfers should be delivered to and treated by the on call facility.

- C. Emergency Systems Jennifer Woodrow
Jennifer Woodrow introduced Nena West as the new Assistant Director for Medical Facilities and announced current open positions to include Administrative Assistant, EMS Administrator, Statistical Research Specialist, and Epidemiologist. The new application period for Trauma Fund opened October 22 with forms available on the Emergency Systems website. An email was sent to EMS agencies, hospitals, and physicians requesting the name of their collaborator for Box. Emergency Systems' points of contact and contact information was provided in the member packet for questions regarding program areas to include Trauma Registry, Stroke Registry, EM Resource, and/or Data Management and Research. The contact information will be emailed to all members along with the Trauma Fund Handout and a CQI referral form. An EM Resource interface capability is available for hospitals to provide National Emergency Department Overcrowding Score (NEDOCS) reporting eliminating the need to manually enter the date fields to calculate. Facilities ready to utilize this feature should email EMResource@health.ok.gov. The Oklahoma Trauma and Emergency Response Advisory Council (OTERAC) is scheduled to meet on December 8, 2021. Data regarding physician specialist availability and Oklahoma trauma transfers from 2018 through 2020 will be presented during the meeting with members encouraged to attend. The next scheduled OTERAC meeting will be held on February 2, 2022.

V. Business

- A. Discussion, consideration, possible action and vote to approve any recommendations to committee workgroups and/or needed scheduling or coverage changes regarding hand, OMFS, and neurosurgery coverage David W. Smith, MD, Chair
Chair Dr. David W. Smith asked members to identify any issues regarding current hand, OMFS, and neurosurgery coverage and/or scheduling with no issues identified. Dr. Smith noted that any coverage issues that occur should be immediately entered into EMResouce for communication to Oklahoma hospitals, EMS agencies and TReC.
- B. Discussion, consideration, possible action and vote to approve proposed Code of Ethics and possible recommendations regarding Priority 2 trauma patient follow-up requirements ... David W. Smith, MD, Chair
Dr. Albrecht presented the proposed Code of Ethics noting almost every surgery society Code of Ethics was referenced for the development of the document in regards to operation guidelines. Members reviewed the document with the following changes recommended:
- **Time sensitive injury consultations: General surgery, neurosurgery, orthopedic, face and hand surgery** will evaluate defined time sensitive conditions per hospital/trauma center designation guidelines and/or guidelines.

- **The consultation, evaluation, and recommendation of a treatment plan of a patient in the emergency department or in the hospital is the establishment of a doctor-patient relationship.** The recommendation of a treatment plan to a patient in the hospital or emergency department to include the assignment of a patient to the on-call physician also establishes a doctor-patient relationship for the purposes of follow-up obligation noted in this document.

Dr. Smith acknowledged the high standard created by the document and thanked Dr. Albrecht for her efforts. Members discussed possible ways to implement the Code of Ethics with Jennifer Woodrow offering to bring the document to the December 16, 2021 Region 8 Regional Planning Committee for recommendation to add as an appendix to the Region 8 Trauma Plan.

A motion to approve the proposed Code of Ethics to send to the RPC with changes noted above was made by Dr. Thomas Lehman and seconded by Dr. Ryan Wicks. There was no further discussion and the motion passed 5-0.

- C Discussion, consideration, possible action and vote to approve proposed Call Schedules from February 2022 through July 2022 David W. Smith, MD, Chair
Alison Fink presented the proposed schedules with possible scheduling conflicts discussed to include distribution of holidays and OU Health November orthopedic training dates. Dr. David W. Smith acknowledged the time and work dedicated by Ms. Fink in crafting the call schedules.
A motion to approve the call schedules as proposed was made by Dr. Roxie Albrecht and seconded by Dr. Thomas Lehman. There was no discussion and the motion passed 5-0.

VI. New Business (For matters not reasonably anticipated 48 hours prior to the meeting)
The Committee discussed member attendance with issues identified.

VII. Next Meeting

- A Oklahoma Trauma and Emergency Response Advisory Council
December 8, 2021-1:00 p.m.
- B Region 8 Regional Trauma Advisory Board
January 11, 2022 -1:00 p.m.
- C Region 8 Trauma Rotation Committee
March 29, 2022 - 5:30 p.m.

Dr. David W. Smith announced the next meeting dates with Jennifer Woodrow noting the date corrections noted above.

VIII. Closing, Adjournment, and Dismissal

A motion to adjourn was made by Dr. Thomas Lehman and seconded by Dr. Roxie Albrecht. The meeting adjourned at 6:27 p.m.

Approved,



Dr. David Smith, Chair
Region 8 Trauma Rotation Committee
March 29, 2022