

Regional Trauma Advisory Committee

March 2023 Meeting Minutes

Tuesday, 21st March 2023 @ 1:00 pm

1. Call to Order and Welcome: Call to Order: The meeting was called to order by Kurt Horst, the RTAC Chair, at 1 pm.
2. Introductions. Meeting attendance included the following:

Crystal Shelnutt, RXRTAC	Charles Partain, National EMS
Ryan Hollingsworth, SOEMS	Kurt Horst, RXRTAC
Marcus Crowe, Air Evac	Heather Morgan, Piedmont Athens
Don Cargile, National EMS	Christie Mathis, Morgan Medical
Kevin Locke, Barrow Co FD	Gina Soloman, GTC
Zach Hall, Barrow EMS	Alex Nichols, UGA EP
Bobby Smith, Madison Co EMS	Glenn Henry, UGA Football
Tim Bohannon, Elbert Co. EMS	Huey Atkins, National EMS
Chuck Almond, Elbert Co EMS	

3. Updates
 - Stop the Bleed
 - STB: Schools, Busses, & Government Buildings- During the Stop the Bleed conversations, we covered a range of important topics. Firstly, we reviewed the progress of the ongoing school and school bus training and kit distribution, which has achieved an impressive 100% completion rate. Please keep Crystal advised of new school openings in your county. The conversation also included discussions about the expanded government buildings STB program and the progress of the Region 10 Pilot Programs.
 - The GTC new kit distribution plan was discussed, and how the RTAC (Regional Training Advisory Committee) will now evaluate requests for approval on a quarterly basis. Greg Nickel, the new Stop the Bleed coordinator for GTC, will be key in coordinating the expanded offerings.



**GEORGIA TRAUMA
COMMISSION**

Bleeding Control Kit Application Notice

PROGRAM OVERVIEW

In March 2017, the Georgia Trauma Commission embarked on a campaign to provide bleeding control kits in every Georgia public school and bus and training to key school staff. As of August 2022, the kit distribution is open to public education institutions, law enforcement, and government agencies.

Qualifying organizations (based on priority):

1. Schools (K-12)
2. School Buses (K-12)
3. Public Education Institutions
4. Law Enforcement
5. Government Agencies

Organizations must complete or plan to complete STOP THE BLEED training for at least 10 staff to qualify for kit distribution. Please note, qualifying organizations receive a one-time allotment of kits.

KIT APPLICATION PERIOD

The Georgia Trauma Commission will have a STB kit application period for qualifying organizations. Applications will open on the first of the month and close on the last day of the month.

Kit Application Periods

MARCH 1-MARCH 31

MAY 1-MAY 31

JULY 1-JULY 31

After the following cycles, we will assess the current application and distribution periods and advise of future cycles.

KIT DISTRIBUTION PERIOD

After each application period, RTAC Coordinators will review applications and advise of kit pick up and distribution plan. Please note that kits are first come, first serve while supplies last.

Kit Review & Distribution Periods

MARCH 1-APRIL 30

MAY 1-JUNE 30

JULY 1-AUGUST 30

After the following cycles, we will assess the current application and distribution periods and advise of future cycles.

Bleeding Control Kit Application and more information:

Please scan the QR code or click the link to route to our website:
trauma.ga.gov



STOP THE BLEED School Response Program is funded by the Georgia Trauma Commission. For more information, please visit our website: trauma.ga.gov

- Online Training: <https://www.stopthebleed.org/training/online-course/> is still available, but participants must schedule a time to complete the hands-on component.
- Call/Email Crystal to reserve equipment or request help with a course
- Home Depot Purchases- after initially receiving 2 saws and safety equipment, no additional items have been received. Bobby Smith agreed for MCEMS to receive delivery and will keep the group updated if additional items are received.
- Trauma Skills Procedure Lab- June 2, 2023, Hosted in Barrow County. Seats are still open, and we request you share the flyer with your staff. Anyone with initial education programs is encouraged to reach out to Cathy White for group registration that allows the seat fee to be waived. PMDC students can use the cadaver intubations to meet COAEMSP requirements.
- Registration Link: https://www.surveymonkey.com/r/Trauma_Skills_Lab-2023FY

The group also discussed ways to bring more GEMSA funded trauma programs to the region. Per information received from GEMSA, there were no Farm Medic, TECC or PHTLS courses in the region this quarter, but several EMT classes received grants. Kevin Locke will reach out to Kim Littleton and Cathy White to advocate for Region 10 classes. Many services offered to host the classes.

4. New Business

- UGA & Region 10 RTAC Sports Medicine Conference- May 25, 2023- Because of the changes with the UGA/RTAC partnership, GTC had funds encumbered to UGA in support of regional trauma care. After much discussion and exploration, The UGA Athletic Association agreed to host a sports medicine conference at the UGA Football indoor practice facility. Seating will be limited to 200 participants; the committee is currently applying for EMS, nursing, and physician CE credits.

- Agenda Items will include head injuries, cardiac arrest on the field, orthopedic, and vascular trauma. The day will be a combination of lectures and labs and include breakfast and lunch.
- Regional vs. Statewide Attendance: After much discussion, the RTAC committee agreed to allocate six seats to each of the ten counties EMS providers, six seats to the trauma centers, and 3 to the other hospitals in the region. A flyer will be sent out first to Region 10 to fill the remainder of the seats, then several days later, it will be sent to all providers in the state. Crystal will be coordinating registration with UGA.
- New PAR Trauma Activation Criteria- Heather Morgan shared the new Trauma Activation Criteria with the group. She discussed the decision-making process and complications they have seen with activations. She discussed the importance of providing the highest heart rate and lowest BP during the radio report and asked that this information be shared with the medics.

Level 1 Activation (Full)	Level 2 Activation (Partial)	Level 3 Alert
Traumatic Arrest Vital Signs (<i>brachycardia with known chronic A-fib can be excluded at CRN discretion</i>) Geriatric (>64 years of age) Systolic Blood Pressure less than 100 mmHg Pulse less than 60 bpm or greater than 110 bpm Adolescent/Adult (11 to 64 years of age or older) Systolic Blood Pressure less than 90 mmHg Pulse less than 50 bpm or greater than 140 bpm Children (13 months old to 10 years old) Systolic Blood Pressure less than 70 mmHg Pulse less than 60 bpm or greater than 150 bpm Infants (≤ 12 months old) Systolic Blood Pressure less than 50 mmHg Pulse less than 80 bpm or greater than 180 bpm Respiratory Rate less than 20 bpm Heart Rate greater than Systolic BP <i>Adults 15-64yo Only</i> Extremities Amputation above the wrist or ankle Tourniquet above the knee or elbow Crushed, mangled or pulseless extremity Airway/Breathing/Ventilation Any intubated patient Any patient requiring assistance to maintain an airway or ventilation Needle Decompression/Sucking Chest Wound Circulation Uncontrolled Hemorrhage Patients receiving blood products or vasopressors to maintain vital signs Disability/Neuro GCS less than or equal to 11 attributed to traumatic injury Depressed or open skull fractures P or U on AVPU Scale New Onset Paralysis attributed to traumatic mechanism Penetrating Trauma (Regardless of Vitals Signs) GSW to the head, neck, torso or groin Stab Wounds or Impaled Objects to the neck, torso or groin <i>Other patients that DO NOT meet Level 1 criteria are at the ED Physician discretion</i>	Mechanism of Injury MVC with the following high energy mechanisms - Death in same compartment - Extrication greater than 15 minutes - Roll Over - Ejection - Compartment intrusion greater than 18 inches - High speed impact (highway speed) Pedestrian/Bicycle vs Auto greater than 20 mph Motorcycle/ATV Crash greater than 20 mph Falls greater than 20 feet or 2x patients height in children High Voltage Electrocution or Explosion Airway/Breathing/Ventilation Respiratory Rate less than 10 in adults Subcutaneous emphysema Disability/Neuro GCS 12 to 13 attributed to traumatic injury Extremities Tourniquet below knee or elbow Suspected fracture in 2 or more of these body areas - (upper arm, forearm, upper leg, lower leg) Unstable pelvis fracture Any long bone open fracture Age > 64 with any type of traumatic injury that have the following Head Injury (with associated AMS or on anticoagulants) Blunt chest trauma Blunt abdominal trauma Burns Greater than 10% total body surface area Burns to the face, hands/feet or genitalia <i>Consider upgrade to Level 1 if more significant injuries</i> Pregnancy Pregnant greater than or equal to 20 weeks with chest trauma, abdominal trauma or vaginal bleeding <i>Other situations at Charge RN discretion</i> <i>EMS reports that are concerning for mechanism of injury or patient condition please consult an ED Physician if a trauma activation is appropriate</i>	Patient does not meet Level 1 or Level 2 Criteria but has concerning mechanism/injury Mechanism of Injury Motorcycle/ATV crash less than 20 mph Pedestrian/Bicycle vs Auto less than 20 mph Anticoagulants Patients with associated traumatic injuries to the Head, Chest or Abdomen who are on anticoagulant or antiplatelet therapy <i>Other situations at Charge RN discretion</i>
Inter-facility Transfers Level 1 Activation - meets any Level 1 Criteria Level 2 Activation - Meets Level 2 Criteria		
Activation Time: _____		
Mode of Arrival (Circle one) EMS or POV		
Place patient ID sticker here		
Hanging <i>At the ED Physician discretion</i> <i>(Discuss with ED MD if an activation is appropriate)</i>		
Activate if injury within 24 hours. Injuries greater than 24 hours consider activation.		
What was the lowest BP, highest, lowest HR? Ask if not provided by EMS		

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Please circle the appropriate Level Activation that was indicated for this patient and/or the criteria that was met.



- Future Trauma Center Data Presentations- Heather Morgan asked and discussed with the group whether they would like quarterly presentations of Piedmont's regional trauma data and how we might use it in regional educational needs assessments. All were in favor of making those presentations a recurring agenda item. Gina Soloman with GTC added that she could provide additional data front the region and in

comparison to other regions. The group also discussed doing case presentations once we navigate concerns confidentially.

- Coming Soon- RTAC Website- is finally here! The go-live date for each regional website is April 15th. This will be an excellent repository for regional activities, classes, and information on what resources are available (examples: car seats and other EMS-C offerings).
- Injury Prevention Committee- Kristi Perkins will chair the newly created IPC. Volunteers are welcome!
- BIS Assessment last updated 2016; Regional Trauma Plan last updated 2018- Crystal plans to begin updating these; you will receive emails requesting information and participation. Thanks in advance for helping to update these plans!

5. Questions

6. Adjournment

