05/21/15 NCRTAC PI committee minutes

Closed head injuries-The group discussed the incidence of CHI/mild TBI in our region. It is a very common injury for patients (300 St. Mike's, 1800 Aspirus) who get discharged home from ED's. Nancy from St. Mike's shared their PI project surrounding this. They are considering making follow up phone calls from the ED on CHI for symptom follow up and to check on follow up appointment status. She mentioned there is a need for public education on the diagnosis process as she feels there is a trend with inappropriate CT scans due to parent request. The group brainstormed direction for this project including future education for RTAC members, creating documents for community teaching including up to date discharge instructions, and ways that we can track data.

ED PI filters-The group shared what PI filters they use for EMS. These included the appropriateness of spinal precautions and proper documentation if using selective spinal immobilization protocols, scene time >20 minutes, cardiac arrest PTA, documentation of vital signs including GCS, whether the ED was notified PTA in the ED, and reviewing proper clinical care. Regarding scene times, the group discussed that it is better to only worry about ST >20 mins if the ISS is >15 or it was activated at your highest level. This was well received as we were concerned about doing PI that was not a big issue due to many scene delays due to pain med administration.

The group reviewed the ED LOS cases >3 hrs. They will continue to review these cases in the future and appreciate the hospitals sending the PI forms to the committee.

The committee decided to spend \$1000 on back rafts to be distributed to the various hospitals. Also, they would like to spend \$1000 on bike helmets of various sizes from child to adult to be distributed to patients from ED's in order to kick off our mild TBI project.

Sara will research ways to track the use of tourniquet application and outcomes in the region.

In the future we will go through coding examples and registry data points at each meeting. We would like to do some ICD-10 coding education in the future.

We would also like to distribute minutes from this meeting to the trauma coordinators.

Respectfully submitted,

Sara Steen

PI Committee Chair