

IL Administrative Code, Section 515.2040
Level II Trauma Center Designation Criteria
[Note: IL Times and ACS times vary. We must abide by the
shorter of the two times in those instances.]

Activation of a Trauma Patient

- ED Physician can decide to activate patient based on criteria
 - Trauma Surgeon has 30 minutes to respond to a Cat I patient
 - Trauma Surgeon has 12 hours to respond to a Cat II patient
- ED Physician can determine if patient is isolated injury and can be treated by subspecialist (i.e. ortho, neuro, ENT, cardiothoracic, urology, OB, ophthalmologic, oral, etc.)
 - Responding physician must respond within 60 minutes

ED Requirements

- ED must be staffed 24/7 by a physician board certified in Emergency Medicine
 - Those not board certified in EM are not to be the only physician in the ED
- All ED physicians must have completed ATLS at least once
 - Those not board certified in EM (Drs. Gest, Mohammadi and Taylor) must remain current in ATLS
- All ED physicians must have 10 hours per year of trauma-related CME
- ED Director must be board certified in Emergency Medicine
- ED must be staffed at all times by 2 Trauma Nurse Specialists (TNS)
 - Or 1 TNS and an RN with TNCC
- ED RNs must have current PALS
- Trauma Flow Sheet for Cat I and Cat II patients documenting
 - Trauma category classification
 - Time and place of classification (in the field or in the ED)
 - Time of patient arrival to ED
 - Time TS was notified and time of arrival
- Equipment required
 - Airway control and ventilation equipment including laryngoscopes and endotracheal tubes of appropriate sizes, bag-mask, resuscitator, sources of oxygen, mechanical ventilator, pulse oximeter and CO₂ monitoring;
 - Suction device;
 - Electrocardiograph-oscilloscope-defibrillator;
 - Apparatus to establish central venous pressure monitoring;
 - All standard intravenous fluids and administration devices;
 - Sterile surgical sets of procedures standard for ED, such as cricothyrotomy, tracheostomy, thoracotomy, cut down, peritoneal lavage, and intraosseous;
 - Drugs and supplies necessary for emergency care;
 - X-ray and CAT scan capability, available within 30 minutes;
 - Spinal immobilization equipment;
 - Temporary pacemaker;
 - Temperature control device; and
 - Specialized pediatric resuscitation with measuring device cart in the emergency area. (Broselow Tape will meet this requirement.)
 - *Pediatric measuring device*
 - *Scale*

Trauma Surgeon Requirements

- Trauma Program Medical Director: Dr. Matt Vassy
- Must have 10 hours of trauma-related CME per year
- Must remain current in ATLS
- Must have a back-up process in place, listing both primary and back-up surgeon by name
- TS has 30 minutes to respond to Cat I patient
- TS has 12 hours to respond to Cat II patient
- TS must participate in trauma call and Trauma Mortality and Morbidity (“Peer Review”)

Anesthesiology Requirements

- Must arrive within 30 minutes after notification
- Can be anesthesiologist or CRNA

Laboratory Requirements

- Must be in-house 24/7
- Provide
 - Analysis of blood, urine and other body fluids
 - Type and cross-match
 - Coag studies
 - Blood gases and pH
 - UDS and ETOH screening
- Must have blood bank
- Must have microbiology
 - Ability to initiate aerobic and anaerobic cultures 24/7

Radiology Requirements

- Must be able to perform CAT scan within 30 minutes
 - Teleradiography acceptable
- Must have radiologist who can read CAT scan and perform angiography within 60 minutes of notification

ICU

- Trauma Surgeon must physically respond to an emergency in the ICU within 30 minutes
- Must have at least one RN per shift with 2 years of ICU experience and 4 hours of trauma-related critical care CE per year
- Equipment
 - Airway control and ventilation devices
 - Oxygen source with concentration controls
 - Cardiac emergency cart
 - Electrocardiograph-oscilloscope-defibrillator
 - Temperature control devices
 - Drugs, IV fluids and supplies
 - Mechanical ventilator-respirators
 - Pulmonary function measuring devices (i.e. pulse oximeter, CO2 monitoring)

Subspecialist Requirements

- All subspecialists (cardiology, neurology, internal medicine, ortho, ENT, etc.) must respond within 60 minutes

Operating Room and PACU

- Staffed and available within 30 minutes

Trauma Program Must Have

- Full time Trauma Program Coordinator dedicated to trauma program
- Transfer agreements with services not able to be provided at this facility
- Acute hemodialysis capability 24/7 or a transfer agreement
- Occupational therapy, speech therapy, physical therapy, social work, dietary, and psychiatry
- Helicopter landing capabilities
- PI Process
 - Review of all deaths
 - Review of all morbidities
 - Audit filters
- Written protocols
 - Activation criteria
 - Management of the trauma patient
 - Transfer of patients
 - ETOH draw on all MVC drivers
 - Suspension policy for TNS
 - Competency plan
- Job descriptions for
 - Trauma Center Medical Director
 - Trauma Coordinator
- Budget
- Trauma registry
- Injury prevention for community
- Diversion policy