



TRAUMA CENTER DESIGNATION STANDARDS

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I. Purpose

To define the standards that Santa Clara County EMS Agency (Agency) uses to designate a hospital as a Trauma Center.

II. Trauma Centers

A. Trauma Center Organization

Trauma centers shall meet the following criteria:

1. Trauma Service shall be:
 - a. Located within the Department of Surgery.
 - b. Directed by a surgeon certified by the American Board of Surgery.
2. Maintain an Emergency Department with a special permit from the State of California to operate either as a Basic or a comprehensive Emergency Medical Service, Physician-on-duty, Department, and conform to the requirements of Title 22, California Code of Regulations, Chapter 5, Article 6, Section 70411 et seq.
3. Surgery Departments/Divisions/Staffs/Sections shall be staffed by specialists qualified in:
 - a. Cardiothoracic surgery.
 - b. General surgery.
 - c. Maxillofacial surgery.
 - d. Neurological surgery.
 - e. Obstetrics and gynecology surgery.
 - f. Ophthalmic surgery.
 - g. Oral surgery.



- h. Otorhinolaryngologic and plastic surgery.
 - i. Pediatric surgery.
 - j. Urologic surgery.
 - k. Vascular surgery.
4. Non-surgical Departments/Divisions/Staffs/Sections shall be staffed by specialists qualified by board certification in the following:
- a. Anesthesia.
 - b. Cardiology.
 - c. Gastroenterology.
 - d. Hematology.
 - e. Infectious disease.
 - f. Internal medicine.
 - g. Nephrology.
 - h. Pathology.
 - i. Pediatrics.
 - j. Pulmonary medicine.
 - k. Radiology.
- B. Personnel Requirements
- 1. Trauma Service:
 - a. The Director of Trauma shall:
 - 1. Coordinate in-hospital services and their relationship with the Emergency Department.
 - 2. Be Board Certified in General Surgery.
 - 3. Be a researcher in trauma care (required only at Level I center).



4. Meet the requirements of medical staff below.
 5. Participate in the Trauma System Quality Improvement process and serve as a resource to the EMS Medical Director in EMS system trauma policy development.
 6. Be currently certified in Advanced Trauma Life Support (ATLS).
 7. Attend on average sixteen (16) hours per year or forty-eight (48) hours in three (3) years of verifiable external trauma related Continuing Medical Education (CME).
- b. Medical Staff shall:
1. Be Board Certified in General Surgery, or become Board Certified within three (3) years of eligibility, or be a senior surgical resident (minimum PGY 4).
 2. Have successfully completed an American College of Surgeons/Advanced Trauma Life Support course.
 3. Have current identifiable involvement in trauma care.
 4. Demonstrate special expertise in trauma care.
 5. For the Trauma Surgeons, Pediatric Surgeons, and specialty panel members (emergency medicine, neurosurgery, orthopedic surgery, and ICUs) participating on the trauma call panel, staying current with their board certification satisfies the CME requirement.
- c. The Trauma Program Manager shall:
1. Be a Registered Nurse (RN) currently licensed in the State of California working full time in the position.
 2. Provide evidence of educational preparation, clinical expertise in care of the adult/pediatric trauma patient, and administrative abilities.
 3. Demonstrate active participation in regional professional organizations.



4. Complete a minimum of sixteen (16) hours of trauma-related continuing education annually.
 5. Coordinate day-to-day clinical process and performance improvement of nursing and ancillary personnel.
 6. Collaborate with the trauma program medical director to carry out the educational, clinical, research, administrative, and outreach activities of the trauma program.
- d. Trauma Registrars shall:
1. Attend education and training related to the use of the trauma registry as may be reasonably required by the EMS Agency.
 2. Have registrars at each designated trauma center in sufficient numbers to accommodate the volume of trauma registry cases.
- e. Trauma Resuscitation Nurses shall:
1. Be registered nurses (RNs) licensed in the State of California.
 2. Maintain verification of successful completion of the trauma nursing core course (TNCC) or equivalent education, ENPC or equivalent education, or Flight Nurse Trauma Course. This education requirement shall be determined by the Trauma Medical Director and approved by the EMS Agency.
 3. Maintain a minimum of six (6) hours of continuing education annually in trauma nursing. RNs with five (5) years or more in trauma nursing experience may substitute fifty percent (50%) of hours with documented prevention activities.
2. Emergency Department
- a. The Designated Medical Director shall:
1. Be Board Certified by the American Board of Emergency Medicine.



2. Attend on average sixteen (16) hours per year or forty-eight (48) hours in three (3) years of verifiable external trauma related Continuing Medical Education (CME).
 3. Have successfully completed an American College of Surgeons/Advanced Trauma Life Support course.
- b. Medical Staff shall:
1. Be Board Certified by the American Board of Emergency Medicine or become Board Certified within three (3) years of eligibility.
 2. Have successfully completed an American College of Surgeons/Advanced Trauma Life Support course.
 3. Attend on average sixteen (16) hours per year of continuing medical education or demonstration of participation in an internal educational process conducted by the trauma program.
- c. Designated Clinical Supervisors or ED Nurse Managers shall attend continuing education in trauma and related fields.
- d. Staff Nurses shall:
1. Be registered nurses (RNs) currently licensed in California.
 2. Maintain a minimum of six (6) hours of continuing education annually in trauma nursing. RNs with five (5) years or more in trauma nursing experience may substitute fifty percent (50%) of hours with documented prevention activities.
 3. Complete an approved trauma orientation and have evidence of completion of a trauma nursing triage and resuscitation course, which includes combined didactic and skills content (similar to TNCC). This education requirement shall be determined by the Trauma Medical Director and approved by the EMS Agency.



- e. Nurses' Aides/Orderlies/ED Technicians shall be present in adequate numbers to support the medical and nursing staff.
3. Intensive Care Units shall have:
 - a. A designated Medical Director.
 - b. A physician on-duty and available twenty-four (24) hours per day.
 - c. A designated Clinical Supervisor or Nurse Manager with trauma nursing experience, and meet the requirements of staff nurses.
 - d. Staff nurses:
 1. Must be present in numbers adequate to maintain a nurse-patient ratio of one-to-two (1:2) on each shift at all times.
 2. Must attend continuing education in trauma and related fields. RNs with five (5) years or more in trauma nursing experience may substitute fifty percent (50%) of hours with documented prevention activities.
 - e. Paraprofessional staff in numbers required to support the services offered.
 4. Post anesthesia Recovery Room (PAR):
 - a. Physician supervision available in-hospital twenty-four (24) hours per day.
 - b. Registered nurses and other essential personnel on-duty 24 hours per day.
 5. Other essential personnel:
 - a. Clinical laboratory and pulmonary laboratory technicians available in-hospital twenty-four (24) hours per day.
 - b. Certified Radiological Technician available in-hospital twenty-four (24) hours per day.
 - c. CT Scan Technician available in-hospital twenty-four (24) hours per day.



- d. Pharmacist available in-hospital twenty-four (24) hours per day.
- B. Equipment and Facilities
1. Equipment for resuscitation and diagnosis and to provide advanced life support for the critically and seriously injured adult and pediatric patient shall include, but not be limited to, that required for a licensed general acute care hospital with a special permit for Basic Emergency Medical Services, Physician-on-duty, Department in accord with the California Code of Regulations, Title 22, Chapter 5, Article 6, Section 70411 et seq.
 2. Intensive Care Units (ICU) for trauma patients shall:
 - a. Have a bed available within three (3) hours of notification of need for use by a trauma patient.
 - b. Meet all pertinent statutes and regulations.
 - c. Have immediate access to clinical and pulmonary laboratory services.
 - d. Have necessary equipment to provide intensive care, monitoring (including invasive monitoring), and resuscitation.
 3. Operating Suite shall:
 - a. Meet all pertinent statutes and regulations.
 - b. Have an operating room staffed and available twenty-four (24) hours per day.
 - c. Have a second operating room staffed and available within thirty (30) minutes should the first room be occupied by a trauma patient.
 - d. Have a cardiopulmonary bypass pump-oxygenator and team on call back and promptly available.
 4. Post anesthesia Recovery Room (PAR) shall have appropriate monitoring and resuscitation equipment.
 5. Clinical Laboratory Services.
 6. Radiological Special Capabilities shall be available twenty-four (24) hours per day include:



- a. Angiography.
 - b. Ultrasound.
 - c. Computerized Tomography.
 - d. Magnetic Resonance Imaging (MRI).
7. Pharmacy.
 8. Acute Hemodialysis Capability in-hospital and immediately available twenty-four (24) hours per day.
 9. Organized Burn Care shall be provided in a Burn Unit that meets any pertinent statutes and regulations, in-house or by agreement with another Burn Unit.
 10. Acute Spinal Cord Injury Management Capabilities shall be provided in a Spinal Cord Injury Unit that meets any pertinent statutes and regulations, in-house, or by agreement with another Spinal Cord Injury Unit.
 11. Rehabilitation Programs shall provide:
 - a. In-hospital consultation for immediate or acute rehabilitation.
 - b. Physical Medicine and Rehabilitation.
 12. Human Support Services that meet all pertinent statutes and regulations including:
 - a. Occupational Medicine or an agreement with an outside facility to provide this service.
 - b. Physical Medicine.
 - c. Social Services.
 - d. Nutrition Services.