GUIDELINES AND PROTOCOLS

Lyndon B. Johnson General Hospital Trauma Services Department

Guideline/Protocol Number: T21

Guidelines and Protocols

TITLE: TRAUMA NURSING CARE PROTOCOL

PURPOSE:

To ensure timely and appropriate nursing care of a trauma patient while in the Emergency Center and to establish systematic approach outlining the documentation standards for the trauma patient.

PROCESS:

I. PROTOCOL
   A. Trauma team members will be activated on all patients that meet trauma criteria.
   B. All trauma activation patients will be assessed by a RN hourly beginning at arrival, through time spent in radiology and until patient is admitted, transferred or death.
   C. An RN and Resident will escort and remain with all patients leaving the emergency center for diagnostic work-up who meet the following criteria:
      1. Patient undergoing angiography.
      2. Patients who are intubated.
      3. Any patient who is combative, uncooperative, or requires restraints.
   D. Orders must be written to move the patient from the Resuscitation Room.
   E. Once orders received for admission the vital signs may be performed per routine of the unit to be admitted.
   F. The following data will be documented on all trauma activation patients:
      1. Trauma team response times
      2. Mechanism of injury
      3. Assessments
4. Interventions
5. Response to intervention
6. Vital signs shall be monitored and documented hourly while in the resuscitation room
   a) Temperature
   b) Pulse
   c) Blood Pressure
   d) Glasgow Coma Scale
   e) Respiration
   f) Intake and Output

G. Intake and output must be totaled in each location that the patient moves to throughout the emergency center.

REFERENCE / BIBLIOGRAPHY:

OFFICE OF PRIMARY RESPONSIBILITY:

LYNDON B. JOHNSON HOSPITAL TRAUMA SERVICES

REVIEW / REVISION HISTORY

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