

Trauma Team Activation

The intent of this section is to demonstrate compliance with [WAC 246-976-700](#) regarding activation of the trauma team, patient criteria, general surgeon response, trauma team membership, and monitoring of activations.

Level: All

Section Item 1: A trauma team activation protocol consistent with the facility's trauma scope of service. The protocol must:

- Define the physiologic, anatomic, and mechanism of injury criteria used to activate the full and modified (if used) trauma teams.
- Identify members of the full and modified (if used) trauma teams consistent with the provider requirements of this chapter.

Section Item 2: Define the process to activate the trauma team. The process must:

- Consistently apply the trauma service's established criteria.
- Use information obtained from prehospital providers or an emergency department assessment for patients not delivered by a prehospital agency.
- Be applied regardless of time post injury or previous care, whether delivered by prehospital or other means and whether transported from the scene or transferred from another facility.
- Include a method to initiate and/or upgrade a trauma activation when newly acquired information warrants additional capabilities and resources.

Section Item 3: Yes No Staff and providers have easy access to the activation tool/form with criteria for all TTAs.

Level: I-III

Section Item 4: For full trauma team activations, include the mandatory presence of a general surgeon. The general surgeon assumes leadership and overall care using professional judgment regarding the need for surgery and/or transfer.

Level: Pediatrics, All

Section Item 5: For trauma team activations in pediatric designated trauma services, one of the following pediatric physician specialists must respond (within five minutes for level I). Check all that apply; skip to response item 1 if not pediatric designated.

- A pediatric surgeon;
 - A pediatric emergency medicine physician;
 - A pediatric intensivist;
 - A pediatrician;
 - A postgraduate year two or higher pediatric resident.

Respond to the following items:

Upload the following response items in the Supporting Documents section of the application. Label each with the corresponding Section number and Item number.

Note: Only facilities with general surgeons are expected to have full trauma team activations (FTTA). Facilities with no general surgeons can have only modified trauma team activations (MTTA).

Response Item 1: Upload the adult and/or pediatric trauma team activation (TTA) protocol(s), outlining the full and modified teams and responses for both. Include the items below in the protocol. Check the boxes indicating items included:

- Staff/providers authorized to activate the trauma team.
- Adult and pediatric trauma patient physiologic, anatomic, and/or mechanism of injury criteria for full and modified TTA. (Consider the Department of Health FTFA Criteria guideline as a basis to develop FTFA criteria. See Glossary).
- List members of the full trauma team required to respond for the activation.
- List members of the modified trauma team (if used) required to respond for the activation
- Procedure to upgrade to a full trauma team activation when newly acquired information warrants additional resources.
- How a “walk-in” patient is evaluated to determine the need for TTA.
- How a patient transferred-in from another facility is evaluated for TTA (if applicable)