

Emergency Trauma Center Roles and Positioning

Airway Physician
EM resident

- Performs and reports primary survey
- Manages Airway
- Performs and reports secondary survey
- Obtains AMPLE history
- Responsible for continued care and EM documentation
- Performs Procedures

Secondary Resus Nurse

- Obtains 2nd iv
- Places Foley
- Sets up chest tube chamber

Airway Attending
Anesthesia or EM attending

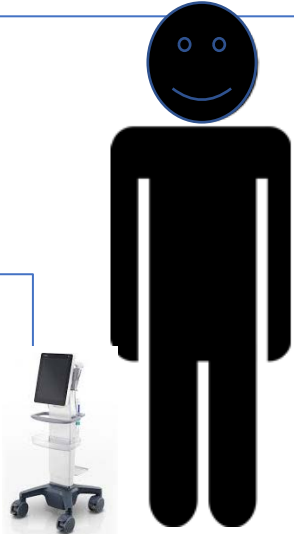
- Supervises airway
- Manages sedation

Primary Resus Nurse

- Obtains primary iv
- Administers meds/blood
- Sets up rapid infuser

Surgery Resident

- Performs primary/secondary survey in coordination with Airway Physician
- Performs FAST in collaboration with EM residents
- Rolls and checks back
- Performs procedures
- Accompanies to imaging
- Responsible for surgical documentation



EM/Surgery Resident 2
EM or surgery resident *if available and needed*

- Collaborates in performing assessments and procedures as directed by TTL

Trauma Team Leader
Trauma or EM Attending

- May be Surgery or EM senior resident if delegated by Trauma or EM Attending
- Assigns physician roles
- Coordinates and directs resuscitation
- Updates diagnostic and treatment plans with the Trauma Team
- Wears red cap

Scribe Nurse

- Documentation
- Coordinates MTP
- Enforces Red Line
- Crowd and volume control



Universal Trauma Principles

- ✓ 20 second “Moment of Silence” for EMS report
- ✓ Primary survey completed within 2 minutes
- ✓ Fully undress and roll/check back
- ✓ Employ closed loop communication
- ✓ Eliminate non-closed loop communication
- ✓ Role flexibility: assist with others when requested
- ✓ **NOTIFY TRAUMA TEAM LEADER** if safety -*patient or provider*- is compromised

Inside when needed

Respiratory Therapist

- O2 management via NC/NRB
- Aids in securing airway
- Manages ventilator

Tech

- Obtains vitals
- Places on monitor
- Ensure blood is sent for testing
- Assists in CPR

Xray

- Performs imaging studies

Inside
Outside