

TEAM Revision

Meeting Minutes-Conference Call

February 15, 2008

Present: Jill Mackey-Feist, Patrea Kroll, Michelle Haun-Hood, Cathy Murphey, Karisa Thede, Mark Anderson, Susan Werner, and Lesa Beth Titus

Next meeting: February 27, 2008; Phone Conference @ 0930

Initial discussion revolved around whether there was a need to revise the TEAM skill stations in addition to revamping the core lecture material.

Current skills stations:

Airway, Circulation, Chest, Spinal, Adult resuscitation, and Pediatric Resuscitation

There seemed to be a general consensus that the assessment process needs to be enhanced. In addition, it was recommended that the airway station include discussion of RSI and the role of the nurse in intubation as well as really emphasizing the importance of appropriately bagging (BVM) the patient.

Other skill station recommendations/questions included:

Adding a triage (critical thinking emphasis) station
Combining/shortening the circulation station
Adding optional stations to target specific hospital needs

Cathy Murphey submitted a TEAM Project Manager Job Description. The group approved the job description with minor changes. Cathy will re-submit with changes. Conversation then encompasses where to post or how to distribute the Project Manager Job Description. Susan Werner will check with contract personnel at the State to find out if it can be posted on the State website since it is actually funded by a grant from Samaritan Health. Jill will share the project leader job description with Jeff Larson, the foundation leader to see if the foundation wants to be part of making the selection with input from the TEAM Revision committee.

Susan Werner also recommended emailing the job description to trauma coordinators around the state. She will supply Jill with a group distribution list of the trauma coordinators in Oregon.

Chapter/Lecture updates:

Chapter	Who reviewed	Comments
Thoracic	Michelle	Include blunt cardiac injury instead of cardiac contusion. Consider eliminating the irritable focus slide If the chest skills station is eliminated, be sure to include information on needling the chest and chest tube insertion. Mention transesophageal echo Enhanced dissecting aorta Various use of radiological technology in diagnosing thoracic injury Enhance tracheal-bronchial injury section

Hypovolemia	Jeff	Update pending
Abdominal	Lesa Beth	Update statistics Add slide about solid vs. hollow organ Add specific information on spleen, liver, kidney injuries (findings, etc) as well as care of the patient with eviscerated bowel Discuss non-operative management Delete slide on peritoneal lavage (this could be an optional skill station topic) Add slide that summarizes care of the trauma patient with abdominal injury Separate the pregnancy into a different lecture Add slide with specific questions for the pregnant patient (gravida, para, prenatal care) Consider adding slide addressing abuse in pregnancy Add slide discussing importance of early OB consultation (both MD and RN)
Role	Lesa Beth	Include slide about the trauma triad of death Add information about early consideration to transfer—to start thinking about this during secondary survey Update initial trauma statistics Combine blunt and penetrating slide (# 11/12) Add slide discussing mass x velocity concept Include discussion about cavitation in penetrating trauma Primary survey section: Make sure slides are consistent. If interventions is mentioned in one, (either Airway, Breathing or Circulation), then mention in all. Consider a slide to summarize the role that emphasizes the nurse's ongoing role of assessing/reassessing.
Ortho	Cathy	Information seems to be consistent w/ current standards. Add pelvic sling discussion
Head Trauma	Karisa	Update pictures Have someone who specializes in neuro/head trauma review section
Spinal	Nancy	Should steroid protocol remain Use Oregon statistics for this chapter since Oregon has so many SCI patients
Facial	Mark	Pending
Burn	Patrea	Kirsten Balding RN, the Education and Outreach Coordinator for the Oregon Burn Center updated the burn lecture. The changes are in red on the Word doc and will be easy for the team or the new project manager to complete. This included updating our "slides" with a power point that has new "HIPPA" friendly pictures. The only thing left to update is the bibliography

		and removal of the burn insignia from the power point. Patrea gave Michelle a copy of the changes and the new power point to review.
Transport	Ted	Pending
Pediatric	Mark	Pending

Suggestion was made to develop a special population's lecture that would include pregnancy, pediatrics, and geriatrics. All seemed to be in favor, but will be revisited at the next meeting.

Time line: Have project leader by April 1st, 2008. Role out a pilot in October 2008 with a final deliverable in December.

To do list for next meeting:

Consider changes for skill stations

Consider whether a special population section should be added

Mark will report on Facial and Pediatric suggested changes

Ted will report on transport suggested changes

The next meeting will be via conference call on February 27 at 0930. Jill will make the arrangements for the conference call.