

RTAB Region 8 Trauma Rotation Subcommittee
Oklahoma State Medical Association Board Room
313 N.E. 50th Street - Oklahoma City, OK
April 22, 2015 - 5:30 pm

MINUTES

<p><u>Members Present:</u> Jay P. Cannon, MD, Chair David Hunter, MD, Vice-Chair Roxie Albrecht, MD John Sacra, MD David Smith, MD</p> <p><u>Members Absent:</u> Eric Friedman, MD Roy Greenway, Jr., MD Steven Sands, DO Lance Watson, MD Thomas M. Lehman, MD</p>	<p><u>Guests:</u> OCMS: Jana Timberlake, Executive Director</p> <p>INTEGRIS: John Adams</p> <p>RTAB Chair: David Howerton</p> <p><u>OSDH Staff:</u> Brandon Bowen (Phone)</p>
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AGENDA ITEM	DISCUSSION	ACTION	PERSON(S) RESPONSIBLE
Call to Order			Dr. Cannon
Vote on the, September 3, 2014 Meeting Minutes	None	Motion made and second to approve the minutes as written; motion passed with a unanimous vote.	Dr. Cannon Vote by Committee
Assignment of non-traumatic head bleeds to	Dr. Sacra suggested that the following verbiage be added back into the call schedule: “ Effective May 16, 2005,	Work with Emergency Systems to determine	Dr. Sacra

stroke centers	isolated Priority 1 neurologically-injured patients and time-sensitive non-traumatic neuro patients managed by TReC will be assigned to the on-call hospital.” Dr. Sacra wanted to continue to work on the verbiage to clarify patients that are managed by TReC. Brandon Bowen was able to call into the meeting and explain the stance of the Oklahoma State Department of Health on these types of patients. He explained that the state is in support of establishing appropriate destinations for stroke patients. He continued by explaining, Emergency Systems is being to develop a stroke plan. At the time of this meeting, stroke rules are not in effect for Oklahoma, but it is anticipated the rules will be in effect soon. Brandon would make himself available to meet with any organization to continue this discussion if it would help.	which hospitals would be appropriate to serve on an on call schedule for TReC to assist with unassigned priority 1 and 2 non-traumatic neurologic patients.	
Hospital Network non-traumatic patients	<p>There was some discussion about patients, which are seen at a smaller hospital that has an affiliation with a larger hospital in Oklahoma City. The question is, what makes a patient assigned vs unassigned.</p> <p>The committee agrees that TReC should try to place calls within the network hospital on non-trauma patients.</p> <p>This will be implemented with the understanding that time sensitive patients will not bypass hospitals with the capability and capacity to provide definitive care for said patient.</p>	<p>A motion made and second to move forward with the plan for TReC to assist medical patients by referring to network hospitals.</p> <p>Vote passed with a unanimous vote.</p>	Dr. Cannon
Trauma Referral Center (TReC) Report	TReC is going to provide information on non-traumatic stroke patients and all medical patients at the next meeting. These data will reflect those patients that used TReC and will not encompass all stroke or medical patients.	No action taken.	Dan Oller
Miscellaneous	Stroke patients within Region 8 should be transferred to the closest most appropriate stroke center for the time being. Region 8 RTAB will work on establishing a		Committee

	<p>regional stroke plan.</p> <p>The Committee reviewed the call schedules, which Jana provided.</p> <p>There was some discussion about pressing hospitals within Oklahoma City to step up and become a Level II trauma center. It is obviously a commitment from the entire hospital to make the step from a Level III to a Level II. Some concern was mentioned about a Level II hospital taking too many patients from the Level I.</p>	<p>The Committee declined the September schedule and Jana will move forward with a revision.</p>	
Adjournment	No further business.	Meeting adjourned	Committee