The Trauma Service Surgeons and Trauma Service’s Staff wish to thank everyone who contributed to the development of this manual. This manual contains clinical guidelines which are strictly “suggestions” and educational tools for the management of the Trauma patient and the performance of procedures. In no way are they intended to be limited approaches to the problems presented to the Trauma team. Many interpretations of these guidelines can be made which are quite appropriate to Trauma care in individual circumstances. The approach to each patient should be individualized to fit the particular needs of the patient and the available resources.

PURPOSE AND GOALS:
In medicine, few situations can be so complex or foreboding as the initial management of the multiply injured patient. The successful outcome of a resuscitation of a seriously injured patient is determined
by the level of skills of the resuscitating team, the speed and teamwork with which the resuscitation is carried out, and the precision of the diagnosis and treatment used.

At Deaconess Hospital, a great effort has been made over recent years to improve trauma care in order to provide outstanding service to the community of Evansville and the surrounding counties. In order to fulfill this commitment, all of the members of the Trauma Program must work together to continuously upgrade their skills. Since there are many rotating physicians who are involved with the Trauma Program, one of the best ways to ensure optimal care is the standardization of all techniques utilized in the resuscitation of the patient as well as his or her continuing care.

This manual was written to accomplish the following goals:
   A. To improve the delivery of resuscitation care to the trauma patient.
   B. To aid in the appropriate utilization of resources.
   C. To help in the orientation of new physicians and rapidly acquaint them with their roles on the Trauma Team.
   D. To optimize resuscitation teamwork between surgeons and ED physicians.
   E. To demonstrate to the community that Deaconess Hospital functions smoothly and efficiently, thereby encouraging the proper utilization of our services.
   F. To provide a “model” system of resuscitation for other regional trauma programs.

For the purposes of this manual, we shall assume that the Trauma Team is notified for patients who will have multiple injuries and be unstable. It is important to remember that the resuscitation scheme should be implemented for all patients who appear to meet the criteria and the assumption will be that each patient is potentially critically injured. If the injuries are found to be less severe, then the resuscitation protocols can be modified accordingly.

Reviews and Revisions:
This manual is reviewed and approved annually by the Trauma Medical Director, Trauma Performance Improvement Medical Director, Trauma Resource Clinician, and Trauma Program Manager in conjunction with the Trauma Peer Review Committee and the Trauma Operational Committee. Any suggestions for changes or adjustments should be given to the Trauma Medical Director &/or the Trauma Program Manager. Before implementation of changes to the Illinois Level II Trauma Center Plan, Deaconess will submit such changes to the IDPH for approval.

References:
RESOURCES FOR THE OPTIMAL CARE OF THE INJURED PATIENT: 2014 Committee on Trauma American College of Surgeons.

ADVANCED TRAUMA LIFE SUPPORT FOR DOCTORS: American College of Surgeons Committee on Trauma.

THE EASTERN ASSOCIATION FOR THE SURGERY OF TRAUMA (EAST):  Trauma Practice Guidelines.