



Southern Minnesota Regional Trauma Advisory Committee

General Meeting
September 20, 2022 | 1:00 p.m. – 3:00 p.m.

Meeting web cast access on www.smrtac.org | [JOIN ZOOM](#)

Meeting ID: 835 5666 6189

Passcode: 899496

AGENDA

Time	Agenda Item	Presenter(s)	Action
2 minutes	Welcome, Call to Order	Dr. Daniel Stephens, MD	
3 minutes	Roll Call (<i>Establish if Quorum is Met</i>)	Dr. Daniel Stephens, MD	
3 minutes	Current Agenda and Minutes of June 14, 2022	Dr. Daniel Stephens, MD	Approval
3 Minutes	Consent Agenda: <ul style="list-style-type: none"> • Education & Outreach Subcommittee Minutes • PI Subcommittee Minutes • TPM Subcommittee Minutes 		
5 minutes	Chairperson’s Report: <ul style="list-style-type: none"> • Fiscal Report 	Dr. Daniel Stephens, MD/ Maria Flor/ Torrey Carlblom	Approval
10 Minutes	<p style="text-align: center;">SMRTAC Funding</p> <ul style="list-style-type: none"> • TOPIC Course Approval for 2 people (\$700) • RTTDC Training May 13 Winona (\$1,100) <ul style="list-style-type: none"> ○ 22 people x \$50 • RTTDC Training Dec 7 Cannon Falls (estimate same number of people \$1,100) • Minnesota Cares : A Wellness Workshop for our Healthcare Community will be held October 7th and 8th at the Minneapolis Convention Center request for member mileage reimbursement to attend (\$100 per person who applies up to 10 members) • Trauma Program Managers 101 funding for TPMs request for member mileage and hotel reimbursement to attend (\$200 per person who applies up to 5 members – approval to either fall or spring courses) • STB Scholarships awards update (\$750 to date) Vote to reaffirm 15 scholarships for new grant year (\$2,250 remains): <ul style="list-style-type: none"> ○ St. Charles EMS \$150 ○ Spring Grove EMS \$150 ○ Harmony EMS \$150 ○ Fillmore Co PH \$150 ○ Adams Area EMS \$150 • Meals for training 4 meetings a year \$800 	Dr. Daniel Stephens, MD/	Approval

	<ul style="list-style-type: none"> Instructor fee gift cards 4 a year at \$25 each totals \$100 Purchasing additional ZOOM Meeting storage for recordings of education sessions and meetings (\$30 GB - \$10/mo 200 GB - \$40/mo 1 TB - \$100/mo 5 TB - \$500/mo) <p>Grand Total for this year \$7,000 total of 2023 State Flex Grant</p>		
5 Minutes	<p>SMRTAC Voting Member Nominations:</p> <ul style="list-style-type: none"> Reaffirm Education and Outreach Co-Chair – nomination Mariah Raabe, <ul style="list-style-type: none"> Education & Outreach Subcommittee nomination for additional Co-chair facilitate a quarterly subcommittee meeting (work with the SMRTAC Coordinator to recruit members and schedule meetings) identify needed training for the year (work with the SMRTAC Coordinator to schedule and recruit instructors) report at the SMRTAC quarterly general meetings of the subcommittee work and any trainings work with the SMRTAC Coordinator to push out information thru email and website on trauma program information and education Vice Chair role – accepting nominations <ul style="list-style-type: none"> The Vice Chair is one of two officers of SMRTAC The Vice Chair takes on leadership of SMRTAC when the Chair is absent The Officers and the Regional Trauma Coordinator(s) shall constitute the Executive Committee of the SMRTAC The Executive Committee shall be responsible to set the agenda of each meeting of the SMRTAC, and shall carry out such other duties as are assigned by the SMRTAC. The Executive Committee shall meet, in person or virtual, as often as necessary to perform its duties. Position renewals or appointments for December 13 Annual Meeting <ul style="list-style-type: none"> Level IV Provider SMRTAC Voting member up for nominations at December annual meeting (Dr. Fogelson is stepping down) Aero Medical SMRTAC Voting member up for nominations at December annual meeting Pediatric Specialist SMRTAC Voting member up for nominations at December annual meeting 	Dr. Daniel Stephens, MD	Approval
5 Minutes	PMG Approval on Multi-modal Pain Management Therapy – address comments	Dr. Daniel Stephens, MD	Approval
2 Minutes	<ul style="list-style-type: none"> SMRTAC General Meeting December 13, 2022 hybrid meeting (in-person & zoom) discussion Approval for 2023 meeting dates: <ul style="list-style-type: none"> March 14 June 13 	Dr. Daniel Stephens, MD	Approval

	<ul style="list-style-type: none"> ○ September 19 ○ December 12 		
5 Minutes	<p>Discussion on SMRTAC presentation and recording options because of Mayo Clinic system conflicts.</p> <ul style="list-style-type: none"> • Recommend purchase of a SMRTAC Laptop (\$800-\$1,000 for 1TB Hard Drive 16 GB memory computer) • Zoom (currently SMRTAC currently has ProPlan 5 GB of storage and has reached capacity) Additional plans are here https://zoom.us/pricing (30 GB - \$10/mo 200 GB - \$40/mo 1 TB - \$100/mo 5 TB - \$500/mo) but conflicts with Mayo System • Teams but conflicts with Mayo System • Google is free but limited storage and recording capability • Kaltura - https://corp.kaltura.com/video-content-management-system/personal-video-capture/?nowprocket=1 • Website (current 13 GB storage for wordpress) 	Dr. Daniel Stephens	Discussion
5 minutes	<p>STAC Update</p> <ul style="list-style-type: none"> • Dr. Klinkner or Chris Ballard 	Chris Ballard	Informational
10 minutes	<p>Subcommittee Chair Reports</p> <ul style="list-style-type: none"> • TPM- Gail Norris • PI – Chris Edmiston & Dr. Kasal • EMS – Tim Malchow • Pediatrics – Jill Hunchis • Education/Outreach- Mariah Raabe Co-Chair 	All Chairs	Informational
5 minutes	<p>Roundtable</p> <ul style="list-style-type: none"> • Minnesota Cares: A Wellness Workshop for our Healthcare Community will be held October 7th and 8th at the Minneapolis Convention Center. Free event, registration open now. • The Statewide Toward Zero Deaths conference is scheduled for October 12–13 in St. Cloud. Register by September 30. 	All	Informational
	Adjourn		

*Items with attachments are hyperlinked blue

Notation Items

[Member List](#) [Robert's Rule](#)

Future Topics

Dates to Note

2022 SMRTAC Meeting Dates:

- ~~3/8/2022~~
- ~~6/14/2022~~
- 9/20/2022
- 12/13/2022

2022 STAC Dates (Link to STAC website):

- ~~3/1/2022~~
- ~~6/7/2022~~
- 9/13/2022
- 12/6/2022

Voting Members		
Kathy Berns, RN <i>Aero-Medical Representative</i>	Jill Bondhus <i>Dispatch Agency Representative</i>	Dr. Bethany Corliss daRocha, MD <i>Medical Director of Level III/IV Representative</i>
David Radtke <i>EMS Agency Representative</i>	Peggy Sue Garber, RN <i>Injury Prevention Specialist</i>	Don Hauge <i>Regional EMS Representative</i>
Mike Juntunen <i>Regional Data Registry Specialist</i>	Dr. Daniel Stephens, MD <i>Level I Representative Chair, SMRTAC</i>	Terri Elsbernd, MS RN <i>Pediatric Specialist</i>
Jacki Niss <i>Disaster Planning Specialist Secretary, SMRTAC</i>	Angie Grimm, R.N. <i>Level IV RN Representative</i>	Dr. Elizabeth Fogelson, MD <i>Level IV Provider</i>
Jake Redden <i>Hospital Administrator</i>	<i>Open Vice-Chair SMRTAC</i>	
Administrative Staff		
Kristen Sailer <i>SMRTAC Co-Coordinator</i>	Brenda Knutson <i>Administrative Assistant</i>	
Alex Leonard <i>SMRTAC Co-Coordinator</i>		
Sub-Committee Chairs		
Holly Munkel <i>Regional Data Registry</i>	Chris Edmiston <i>PI Co-Chair</i>	Tim Malchow <i>EMS</i>
Jill Hunchis, RN, CNP <i>Pediatrics</i>	Chris Kasal, MD <i>PI Co-Chair</i>	Mariah Raabe, Co-chair <i>Education/Outreach</i>
Gail Norris, RN <i>Trauma Program Manager</i>		
Liaisons		
Chris Ballard <i>MN Statewide Trauma System</i>	Maria Flor <i>SMRTF Foundation Executive Dir.</i>	Torrey Carlblom <i>SMRTF Foundation Treasurer</i>
Dr. Denise Klinkner, M.D. <i>STAC Liaison</i>		

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Attendance of Voting Members			
Kathleen (Kathy) Berns RN		Jacki Niss EP Rep	
Jill Bondhus		Angie Grimm Level IV Hospital Rep	
Bethany Corliss daRocha MD		Daniel Stephens, M.D.	
David Radtke		Elizabeth Fogelson, .M.D.	
Don Hauge		Jake Redden Hospital Administrator Rep	
Michael Juntunen		Peggy Sue Garber RN	
Terri Elsbernd, MS RN			

X= attending; NA = not attending

Attendance of Subcommittee Members			
Holly Munkel		Gail L. Norris RN	
Chris Edmiston		Christopher Kasal, MD	
Tim Malchow		Jill M Hunchis RN, CNP	
Mariah Raabe RN			

X= attending; NA = not attending

SMRTAC Admin is inviting you to a scheduled Zoom meeting.

Topic: SMRTAC General Meeting

Time: Sep 20, 2022 01:00 PM Central Time (US and Canada)

Join Zoom Meeting

<https://us02web.zoom.us/j/83556666189?pwd=MUIMb2FVNEJpSFpnbTVnSDVZT3JwZz09>

Meeting ID: 835 5666 6189

Passcode: 899496

One tap mobile

+13092053325,,83556666189#,,,,*899496# US

+13126266799,,83556666189#,,,,*899496# US (Chicago)

Dial by your location

+1 309 205 3325 US

+1 312 626 6799 US (Chicago)

+1 646 931 3860 US

+1 929 205 6099 US (New York)

+1 301 715 8592 US (Washington DC)

+1 669 444 9171 US

+1 669 900 6833 US (San Jose)

+1 719 359 4580 US

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

+1 386 347 5053 US

+1 564 217 2000 US

Meeting ID: 835 5666 6189

Passcode: 899496

Find your local number: <https://us02web.zoom.us/u/kcoJ9qhm3>



Southern Minnesota Regional Trauma Advisory Committee

Minutes General Meeting June 14, 2022 | 1:00 p.m. – 3:00 p.m.

Minutes

Time	Agenda Item	Presenter(s)	Action
2 minutes	Welcome, Call to Order	Dr. Daniel Stephens, MD	
3 minutes	Roll Call (<i>Establish if Quorum is Met</i>)	Dr. Daniel Stephens, MD	Quorum met
3 minutes	Current Agenda and Minutes of March 8, 2022	Dr. Daniel Stephens, MD	No changes Jacki Niss motioned, Jake Redden seconded
5 minutes	Consent Agenda: <ul style="list-style-type: none"> • Subcommittee Minutes 	Dr. Daniel Stephens, MD	Information
5 minutes	Chairperson's Report: <ul style="list-style-type: none"> • Fiscal Report 	Dr. Daniel Stephens, MD/ Maria Flor/ Torrey Carlblom	Discussed SMRTAC funding
5 Minutes	<p style="text-align: center;">SMRTAC Funding</p> <ul style="list-style-type: none"> • Request for \$400 in funding to replace Driving Simulator steering wheel • TOPIC Course Scholarship – Mariah Raabe MCHS \$350 • Kristen Sailer mileage for SMRTAC exhibit at TZD Workshop and stop the bleed kits delivery and pick up total \$186.03 • STB Scholarships awarded (\$600 to date): <ul style="list-style-type: none"> ○ St. Charles EMS \$150 ○ Spring Grove EMS \$150 ○ Harmony EMS \$150 ○ Fillmore Co PH \$150 • State Flex Grant spending for remaining funding \$5,073 looking for ideas such as bike helmets, STB kit supplies, car seats, etc. • Discussion about Emergency Department/Telemedicine donations for Ukraine 	Dr. Daniel Stephens, MD/	<p>Positive balance remains- have not spent any large sums of funding.</p> <p>State Flex Grant- Brand new car seats are not being used in Mankato and had to be thrown because they expired. Gift cards are not an option under the grant. Is there an education outreach opportunity to teach the public on properly car seat installation? There is a program in the southern MN region that hands out approx. 40 car</p>

			<p>seats per month. Seems like the need is education about seat installation. Information can be placed on web page for someone to fill out and application for needs.</p> <p>Donation to Ukraine- Would like the grant funds to stay in MN and serve our local clients. Expired equipment is being collected by ER doctors for Ukraine in Rochester.</p> <p>Voted to approve 10 additional STB Kits. 10 car seats.</p> <p>Due to turn over requests are being made for attendance for Trauma Program 101 class in Grand Rapids. Mileage and Hotel. This would be under the grant that starts in August. More information will be gathered for next meeting.</p> <p>Terri Elsbernd motioned to approve funds listed on agenda. Elle Fogelson seconded motion. Majority voting approved</p>
5 Minutes	<p>SMRTAC Voting Member Nominations:</p> <ul style="list-style-type: none"> • Secretary role – alphabetical by voting member Jill Bondhus June 14 • Education and Outreach Chair – accepting nominations • Vice Chair role – accepting nominations 	Dr. Daniel Stephens, MD	<p>Secretary role - Jacki Niss volunteered to take minutes moving forward.</p> <p>Education and Outreach Chair-</p>

			<p>Jake Redden may have a connection and Maria. Requested a letter of interest to be submitted for review.</p> <p>Vice Chair role- No nominations made</p> <p>Teri Elsbernd motioned</p> <p>Elle Fogelson seconded motion. Majority voting approved</p>
2 Minutes	SMRTAC General Meeting Sept 20 in person discussion	Dr. Daniel Stephens, MD	
10 Minutes	<p>Discussion for future educational topics (need input and suggestions for instructors):</p> <ul style="list-style-type: none"> • Treatment of neurogenic shock in the trauma patient • Treatment of cardiogenic shock in the trauma patient • Assessment and interventions for bilateral femur fractures in anti-coagulated trauma patient over 65 	Dr. Daniel Stephens, MD	<p>Asking everyone to consider educational topics and speaker information</p> <p>Are trauma metrics driving us towards any topics?</p> <p>Suggestion for training on Blunt Agonal Arrest</p> <p>Chris Ballard – met in person last week.</p>
5 minutes	<p>STAC Update</p> <ul style="list-style-type: none"> • Dr. Klinkner or Chris Ballard 	Chris Ballard	<p>Maria Flor's resigned her position and replaced by Angie Grimm. 2023 dates were adopted- available on their website.</p> <p>Legislature update- There was proposal to restructure some funding. Had broad support but did not get heard.</p> <p>Getting data flow going again in the next week or two.</p> <p>Marty is retiring the end of June.</p>

			<p>Lynn Marie Harris will take his role. Currently manages a level 3 and level 4 program.</p> <p>E learning modules are being built. Their contract runs until August.</p> <p>There is a new trauma level hospital software.</p> <p>Dr Weber from Gillett's is retiring. Will need to fill this role with a new orthopedic surgeon. Should be posted soon.</p> <p>Dillion Ferguson gave a presentation on finding in EMS report.</p>
10 minutes	<p style="text-align: center;">Subcommittee Chair Reports</p> <ul style="list-style-type: none"> • TPM- Gail Norris • PI – Chris Edmiston & Dr. Kasal • EMS – Tim Malchow • Pediatrics – Jill Hunchis • Education/Outreach- Chair position open 	All Chairs	<ul style="list-style-type: none"> • TPM- Did not meet – last meeting was in Feb • PI – No cases submitted for review. Would like to find a way to get cases so processes and systems can be reviewed. Gail Norris will take this back to the TPM group. • EMS – No report for

			<p>a while- have discussed meeting again.</p> <ul style="list-style-type: none"> • Pediatric s – Have not met but Teri will ask to meet again. <p>Education/Outreach- Chair position open</p> <p>Will have further discussion</p>
10 minutes	<p>Roundtable</p> <ul style="list-style-type: none"> • Mayo Clinic Trauma and Acute Care Surgery Symposium September 8-10, 2022 – Mayo Clinic Rochester. Designed for advanced practitioners including physician assistants and nurse practitioners. In addition, physicians, clinical nurse specialists, nurse educators and nursing staff in trauma, acute care surgery, emergency medicine, and hospital medicine may benefit from this course. • The Statewide Toward Zero Deaths conference is scheduled for October 12–13 in St. Cloud. For more information about the conference, please contact Linda Dolan at ldolan@umn.edu • Melissa Beaver from Owatonna reported issues with getting on call surgeons to the facility within an hour causing 3-4 patient transfers. Dr Kasal would be willing to look at any cases to review. 	All	Informational
	Adjourn		Adjourned at 2:24

*Items with attachments are hyperlinked blue

<u>Notation Items</u>
Member List Robert's Rule

<u>Future Topics</u>

<u>Dates to Note</u>
<p>2022 SMRTAC Meeting Dates:</p> <ul style="list-style-type: none"> • 3/8/2022 • 6/14/2022 • 9/20/2022 • 12/13/2022

2022 STAC Dates (Link to STAC website):

- ~~3/1/2022~~
- ~~6/7/2022~~
- 9/13/2022
- 12/6/2022

Voting Members		
Kathy Berns, RN <i>Aero-Medical Representative</i>	Jill Bondhus <i>Dispatch Agency Representative</i>	Dr. Bethany Corliss daRocha, MD <i>Medical Director of Level III/IV Representative</i>
David Radtke <i>EMS Agency Representative</i>	Peggy Sue Garber, RN <i>Injury Prevention Specialist</i>	Don Hauge <i>Regional EMS Representative</i>
Mike Juntunen <i>Regional Data Registry Specialist</i>	Dr. Daniel Stephens, MD <i>Level I Representative Chair, SMRTAC</i>	Terri Elsbernd, MS RN <i>Pediatric Specialist</i>
Jacki Niss <i>Disaster Planning Specialist</i>	Angie Grimm, R.N. <i>Level IV RN Representative</i>	Dr. Elizabeth Fogelson, MD <i>Level IV Provider</i>
Jake Redden <i>Hospital Administrator</i>	<i>Secretary, SMRTAC Vice-Chair SMRTAC</i>	
Administrative Staff		
Kristen Sailer <i>SMRTAC Co-Coordinator</i>	Brenda Knutson <i>Administrative Assistant</i>	
Rick Wulfekuhle <i>SMRTAC Co-Coordinator</i>	Alex Leonard <i>SMRTAC Co-Coordinator</i>	
Sub-Committee Chairs		
Holly Munkel <i>Regional Data Registry</i>	Chris Edmiston <i>PI Co-Chair</i>	Tim Malchow <i>EMS</i>
Jill Hunchis, RN, CNP <i>Pediatrics</i>	Chris Kasal, MD <i>PI Co-Chair</i>	OPEN <i>Education/Outreach</i>
Gail Norris, RN <i>Trauma Program Manager</i>		
Liaisons		
Chris Ballard <i>MN Statewide Trauma System</i>	Maria Flor <i>SMRTF Foundation Executive Dir.</i>	Torrey Carlblom <i>SMRTF Foundation Treasurer</i>
Dr. Denise Klinkner, M.D. <i>STAC Liaison</i>		

Attendance of Voting Members	
Roll Call (need 7 for quorum)	Roll Call

Voting Item	
Kathleen (Kathy) Berns RN	
Jill Bondhus	X
Bethany Corliss daRocha MD	X
Terri Elsbernd, MS RN	X
Peggy Sue Garber RN	
Angi Grimm, R.N.	X
Elizabeth Fogelson, .M.D.	X
Don Hauge	X
Michael Juntunen	
Jacki Niss	X
David Radtke	
Jake Redden	X
Daniel Stephens, M.D.	X

X= attending; NA = not attending

Attendance of Subcommittee Members			
Holly Munkel		Gail L. Norris RN	X
Chris Edmiston		Christopher Kasal, MD	X
Tim Malchow		Jill M Hunchis RN, CNP	

X= attending; NA = not attending

Other Attendees(taken from participant listing)			
Name	Attend	Name	Attend
Stephanie Huber	X	Chris Ballard	X
Mariah Raabe	X	Maria Pellowski	X
Gwen Meyer	X	Todd Dorn	X
Taylor Burke	X		
Brad Deler	X		

X= attending; NA = not attending



Southern Minnesota Regional Trauma Advisory Committee

Education & Outreach Subcommittee Meeting Minutes

September 7, 2022 | 10:00 a.m. – 11:00 a.m.

Attendees: Mariah Raabe Co-chair, Kristen Sailer, Maria Pellowski

General Discussion:

- Mariah provided an update on contacts for education instructions. She is having some trouble getting responses back.
- Mariah will try to contact Mike Juntunen and Gwen Meyer to see if they can help with any contacts.
- Maria commented Winona Health staff and first responders were a little disappointed in the RTTDC level of information and training. It would be nice to include higher level training and some on scene trauma response techniques.
- Maria could use help with trauma criteria for activation in certain scenarios. It was recommended to bring these to the next TPM meeting for discussion.
- Maria asked about trauma boarding patients in the ER. Can't get transportation for burns quickly. Continuous evaluation and monitoring for inpatient education for staff. The patients end up in the ER and the staff needs the education.

Topics discussed for education:

- Education sessions requested to be recorded and posted to SMRTAC website
- Training for fiber optic airway intubation
- Case reviews for auto launches whether they need to be stabilized locally or on the helicopter, etc.
- Training on the criteria – 1 hour session on different scenarios. This would allow smaller hospitals to offer the training to staff because of high staff turnover. Sessions for trauma medical metrics or criteria for level IV.
- In house trauma training for in-patient nursing requirements for Level IV if possible – rib/hip fractures, etc.
- Trauma 101 course closer to our region or hold virtual
- Case findings by medical director for auditing
- HazMat Decon and chemical exposures and MCI for all ED staff, medical and ICU nurses
- Trauma on the scene- EMS protocol for c-spine/c-collar and extrication training- putting the collar on and backboard. Chainsaw injuries, for people who just show up to the ER and they didn't call the ambulance.

Future Meetings:

Next meeting Wednesday, Dec 7 at 10am

Adjourned meeting at 11:05 am



Southern Minnesota Regional Trauma Advisory Committee

PIPs Committee Minutes

9/6/2022	Start @ 1605
Meet & Greet	
Approve last meetings minutes	N/A
Old Business	None
New Business	1 person resigned – 8/24/22 email to SMRTAC Leadership for email that we need a new participant Level 4 Critical Access (RN or APP)
Case Review	Case 2022-01: Regional Issue r/t NS admits outside the State Level 4 Admission Criteria. Terri Elsbernd is taking a form to TPM Sub-committee to start collecting data on all NS admits. Initial thought was retrospective, but Terri thought it would be too hard on TPMs that are already taxed in their positions. Chris Edmiston agreed.
Round Table	n/a
Next Meeting	TBD
	Concluded @ 1632

Sent for approval: 9/7/22 to Dr Kasal

Approved: pending

Attendance: R- Remote; X – Not in attendance; V-Vacation

	Member	Position / Representative	Organization
X	Dr. Dan Stephens	SMRTAC Chair	Mayo Clinic – Rochester Level 1 Adult
R	Dr. Chris Kasal	Co-Chair	Mayo Clinic – Red Wing
R	Chris Edmiston, RN	Co-Chair	Mayo Clinic – SEMN TPM
X	Sharon Wiita, RN	Level 1	Mayo Clinic – Rochester Adult TPM
R	Terri Elsbernd, RN	Pediatric Trauma	Mayo Clinic – Rochester Peds TPM
V	Gail Norris, RN	Level 3	Mayo Clinic – SWMN TPM
~	Vacant, RN	Level 4 Critical Access	

X	Dr. Bethany DaRocha	Level 4	Wynonna Health TMD
X	Tim Wallerich, EMT	EMS provider BLS service	Wabasha EMS
X	Tim Malchow, Paramedic	EMS provider ALS service	Cannon Falls EMS/Fire
R	Kathy Berns, RN	EMS provider Aeromedical service	Mayo Clinic - Rochester
X	Tammy Baker, PA	APP from Critical Access hospital	Mayo Clinic – Waseca
R	Dr. Eduardo Antpack	Level 4 TMD	Mayo Clinic – Austin/Albert Lea TMD
X	Steve Sandvik, Sheriff	Law Enforcement	Mower County Sherriff




SMRTAC TPM Meeting Minutes

September 14, 2022

10:30-11:15

Present: Alex W, Tayler B, James M, Kari W, Melissa B, Jen M, Kristin S, Kim J, Maria P, Peggy Sue G, Terri E, Alisha, Sharon W, Mariah R, Greg H, Angi G, Gail N

Item	Discussion	Accountability
Welcome	Any new members?	
On-line Nursing education	<ul style="list-style-type: none"> Trauma educational modules plan to be available Jan.1, 2023 	All
Trauma Program Managers 101	<ul style="list-style-type: none"> Provided by STAC, Grand Rapids, September 22 	All
SMRTAC funding for Trauma Program Managers 101	<ul style="list-style-type: none"> Will request funding from SMRTAC for mileage and hotel 	
Data collection for SMRTAC PI Committee and MDH related to transfers/admission	 <p>NS Data Collection (002).docx</p> <ul style="list-style-type: none"> Please collect the date for patients admitted to your facility for August 2022 through December 2022. Angi Grimm will create a spread sheet for collection. It will be sent out when available. Kristin will investigate a SMRTAC folder to store the documents. The link will be sent out when available. 	
Case finding and considering Rhabdomyolysis, Chemical (ingestion or exposure), or certain poisoning as trauma cases. In TNCC they talk about these forms of trauma injury, but it seems even under the circumstances that these Non Trauma Alert patients are admitted or transferred they don't require audit and registry entry correct?	Committee suggested to include if these conditions were the result of a traumatic event.	Maria Pellowski

<p>Do other TMP's or MDH have any guidance/clarification on the following? I run into some patients who have late hypotension. They weren't a trauma alert activation, maybe most of their scans, labs etc are back, and for some reason they have hypotension episodes. I look to see if the nurse or the provider addressed it and explained it away or maybe they added on more testing because of it. We have a bit of difficulty determining when to categorize it as a missed TTA then. Our interpretation is very subjective to so many variables. Sometimes the hypotension occurs after admitted or while being medically boarded in the ED. Is there a point where were documenting an end time to the trauma alert activation would be helpful in closing that window? If so, how would we determine when the end time is? When all results are back and dispo is planned?</p>	<p>Committee suggested upgrading the activation if recognized timely. Other considerations for review:</p> <ul style="list-style-type: none"> • Heartrate • Medications • Provider awareness/recognition/documentation • Any other signs of hemorrhage 	<p>Maria Pellowski</p>
<p>Round Table</p>	<p>STAC Updates: Angi G</p> <ul style="list-style-type: none"> • Level IV admission criteria extended to June 30th, 2023 • Criteria 10.1 and 10.2 revisions to be posted on the State Trauma website • Primary reviews to be completed within 2 weeks of patient discharge <p>SMRTAC Updates: Kristin S</p> <ul style="list-style-type: none"> • Mariah Rabbe accepted the Education/Outreach Co-chair position • An additional co-chair is needed • Educational offering for 9/20/22. Rhiannon Osborne will present a case involving a patient who opened the helicopter door while in flight from 11:30-12:30, lunch will be provided. • Opening positions for 2023: Pediatric Specialist, Aeromedical member, and Vice Chair. • Send additional SMRTAC agenda items to Kristin today. 	<p>All</p>
<p>Next Meeting</p>	<p>TBD</p>	<p>All</p>



Southern Minnesota Regional Trauma Foundation
Transaction Report
 June 9, 2022 - September 12, 2022

SMRTF Checking (4815)	Bank Balance as of 6/9/2022	55,884.61
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Date	Num	Name	Memo/Description	Deposit	Withdrawal
Income					
Total Income				\$ 0.00	
Expenditures					
5/25/2022	5238	Fillmore Co Public Health	Stop the Bleed		150.00
6/7/2022	5239	Kristen Sailer	Mileage		186.03
8/4/2022	Capital One CR	Capital One Preauthorized			192.44
8/24/2022	7787660000	Walmart			45.08
8/24/2022	3440590000	North America Rescue Prod			936.16
8/29/2022	6005800000	Virtual Driver Interact			360.00
8/30/2022	135760000	Walmart			1,417.14
8/20/2022	5240	Mayo Clinic Trauma Center	Winona RTDC		1,100.00
Total Expenditures					\$ 4,386.85

Net Activity during Period		(4,386.85)
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SMRTF Checking (4815)	Bank Balance as of 9/12/2022	51,497.76
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Outstanding Items					
9/23/2021	5227	Springfield Public Schools	Stop the Bleed		150.00
5/1/2022	5237	Mariah Raabe	TOPIC		300.00
8/26/2022	5241	Adams Area Ambulance	Stop the Bleed		150.00
Total Outstanding Items					\$ 600.00

Outstanding Charges					
Total Outstanding Charges					\$ 0.00

SMRTF Funds	Funds Balance as of 9/12/2022	50,897.76
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Southern Minnesota Regional Trauma Advisory Committee (SMRTAC)

Regional Practice Management Guideline

Multimodal Pain Management Therapy

Adult Practice Management Guideline	Effective: DRAFT 3/2022
Contact: SMRTAC Coordinator	Last Reviewed: Initial Development

Purpose

Evidence-based approach to multimodal pain management that improves patient satisfaction, pain control, and patient functional status while minimizing opioid-related adverse events, decreasing length of stay, and decreasing risk of long-term opioid dependence.

Definitions

Policy Statements

1. Trauma patients often have significant levels of pain that has been traditionally been managed chiefly with opioids.
2. The opioid epidemic was responsible for more than 64,000 deaths in 2016 and continues to worsen.
3. Many addicts' first exposure to opioids is from physician prescriptions.
4. An abundance of evidence indicates multiple other modalities can provide adequate and even equivalent analgesia compared to opioids, with a satisfactory side effect profile and a decrease in total opioid requirement.
5. Usage of multiple medications with differing mechanisms of action allows for better analgesia with lower opioid usage.
6. It is possible to achieve adequate analgesia in patients with significant injury patterns and after significant surgery without IV opioids. **Can we include something about after initial diagnosis or in the inpatient setting? This statement seems to also include acute injury.**
7. Further research has demonstrated that opioid exposure can be decreased while achieving similar pain control with fewer, and generic formulations of, analgesics.

Procedure Statements

1. Multimodal therapy should be initiated on admission and continued throughout the duration of the patient's hospital stay or until they no longer have pain.
2. Pain control for the duration of the hospitalization should consist of the following, unless specific contraindication exists:
 - a. Acetaminophen 1000 mg p.o. q 6 hours scheduled.

- i. IV should be used if there is no enteral access. (NB: PR acetaminophen has not been validated for analgesia.)
 - ii. If MELD >15 or Child C cirrhotic (this needs to be defined, most likely in an attachment), 1000 mg p.o. q 8 hours.
 - iii. If patient weighs less than 50 kg, 75 mg/kg/day max dose, divided in 4 doses.
 - iv. Consider checking a level 3 hours after third dose if there are concerns about accumulation. Otherwise, it is safe to use the above doses in all patients.
 - b. Naproxen 500 mg p.o. q 12 hours.
 - i. Contraindicated in patients with eGFR <30 mL/min
 - ii. Discuss with surgeon prior to starting on fistula takedown patients.
 - c. Gabapentin 300 mg p.o. q 8 hours.
 - i. 100 mg q 8 hours for eGFR <30 mL/min.
 - ii. Titrate higher as indicated for uncontrolled pain. Max dose 1200 mg q 8 hours.
 - iii. For patients already on pregabalin or gabapentin, incrementally increase dose by 50 mg for pregabalin and 150 – 200 mg for gabapentin for the starting dose. For patients on pregabalin, do not switch to gabapentin.
 - d. Lidoderm 5% topical patch, apply for 12 hours on, then 12 hours off daily
 - i. Apply up to 3 patches in 24 hours.
 - ii. Attempt to place in location of injury, but they are still effective when not used in injury location due to systemic absorption.
 - e. As needed opioids for breakthrough pain
 - i. For moderate pain
 - 1. Tramadol 50 mg p.o. q 6 hours prn pain 4-6, or
 - 2. Oxycodone 5 mg p.o. q 4 hours prn pain 4-6.
 - ii. For severe pain
 - 1. Tramadol 100 mg p.o. q 6 hours prn pain 7-10, or
 - 2. Oxycodone 10 mg p.o. q 4 hours prn pain 7-10.
3. For severe pain not responding to oral medications:
- a. First and foremost, re-assess patient for missed injury, complication, or impending complication such as compartment syndrome.
 - b. ONE-TIME rescue medication for pain crisis:
 - i. Hydromorphone 0.5 mg IV
 - ii. Fentanyl 50 mcg IV
 - c. For patients with rib fractures, review patient with trauma consultant for candidacy for erector spinae block.
 - d. Consider pain medicine consult *for regional block only*. Trauma or HSS will continue to manage their multi-modal pain regimen. Anesthesia will not adjust IV or enteric medication regimen.
 - e. If severe pain continues refractory to the above interventions, document complete physical exam and start PCA.
 - f. Ketamine drip, initial bolus of 0.1 to 0.5 mg/kg. Titrate drip from 0.1 to 0.3 mg/kg/hr.
 - i. Approved for floor use.
 - g. Lidocaine drip, 20 mcg/kg/min
 - i. Contraindicated with ejection fraction <20%.
 - ii. Child C cirrhosis not a contraindication, use with caution.
 - iii. Patient must be admitted to the ICU.
 - h. If severe pain continues refractory to the above interventions, document complete physical exam and start PCA, notifying consultant.
4. De-escalation
- a. Meds should be tapered to goal of acetaminophen, naproxen, gabapentin, and prn tramadol.
5. As prn oxycodone use falls to 1-2 uses daily, change to tramadol.
6. Additional adjunct medications to consider during inpatient hospitalization:
- a. Dronabinol 5 mg q 12 hours for history of substance abuse or adjunct in the opioid tolerant
 - b. Naloxegol 25 mg once daily for opioid induced constipation.

7. Bowel regimen, for all patients.
 - a. Senna 17.2 mg PO every 12 hours.
 - b. Polyethylene glycol 3350 17 g p.o. every 12 hours
 - c. Bisacodyl suppository 10 mg rectally daily PRN for no bowel movement
 - d. Note that multiple randomized controlled trials have shown no increased efficacy of docusate over placebo. It should not be prescribed as it offers no benefit.
8. Discharge medication regimen (do we also need to include the continued bowel regimen?)
 - a. Acetaminophen 1000 mg p.o. q 6 hours (four week supply)
 - i. Maximum total acetaminophen dose should not exceed 4 grams in 24 hours
 - ii. See weight restrictions above for patients <50kg
 - iii. Do not provide outpatient acetaminophen to any patient with cirrhosis (any
 1. Child's class)
 - b. Gabapentin 300 mg p.o. q 8 hours (four week supply)
 - c. Naproxen 500 mg p.o. q 12 hours (four week supply)
 - d. Opioids
 - i. Goal again to discharge only on tramadol.
 - ii. If still requiring oxycodone on the day prior to dismissal, dismiss on oxycodone.
 1. Dismissal opioid quantity guideline, for both tramadol and oxycodone
 - a. If no opioids taken the day prior to dismissal, prescribe none.
 - b. If 1 to 3 pills are taken, prescribe 15 tablets.
 - c. If 4 or more are taken, prescribe 30 tablets.

Resources/Links

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- Harvin JA, Albarado R, Truong VTT, Green C, Tyson JE, Pedroza C, Wade CE, Kao LS; MAST Study Group. Multi-Modal Analgesic Strategy for Trauma: A Pragmatic Randomized Clinical Trial. *J Am Coll Surg.* 2021 Mar;232(3):241-251.e3. doi: 10.1016/j.jamcollsurg.2020.12.014. Epub 2021 Jan 21. PMID: 33486130; PMCID: PMC7914202.

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Disclaimer: This is a general guideline and is not intended as a substitute for clinical judgment or as a protocol for the management of all trauma patients.