

HOSPITAL TUANKU JA'AFAR

Trauma Team Activation (TTA)

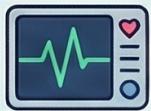


HTJS Trauma Team Activation (TTA) Protocol



ACTIVATION TRIGGERS & CRITERIA

Clinical & Physiological Triggers



Traumatic Arrest



SpO2 < 90%

SBP < 90 mmHg

Airway Compromise

Mechanism & Anatomic Markers



Falls
> 4 meters



Vehicle
Rollovers



Pelvic
Fractures



Penetrating
Torso/Neck Wounds

Physician Discretionary Power



Mass Casualty
or Clinical
Judgment

Activation Level Comparison (Optional)



Activation A

Primary Teams: Surgery, Anaesthesia, Radiology

Authority: Emergency Physician

Notifications: Radiology & Blood Bank MOs



Activation B

Activation B (Primary Teams)

Surgery, Anaesthesia, Orthopaedic, Radiology

Authority: Emergency Physician

Notifications: Radiology & Blood Bank MOs

ACTIVATION SEQUENCE & QUALITY TARGETS

The 3-Step Alert Chain



EP
Notifies
Operator



Operator
Calls "TRAUMA
ACTIVATION L1"



Team



15-Minute Response Deadline

All response team
members must
physically present
at the ETD within
15 minutes.

Critical Time-to-Treatment Targets



CT Scans
Completed



Booking to
Incision Times
Completed



ACTIVATION CRITERIA

TRAUMATIC ARREST

ABC COMPROMISE

- Airway compromise (i.e unable to secure airway, destructive upper airway injury)
- SPaO₂ < 90%
- SBP < 90 mmHg at any time

MECHANISM CRITERIA WITH ABC COMPROMISE

- Fall > 4 meters in height
- Vehicle rollover
- MVA with the occupant of the same vehicle dead on the scene

ANATOMIC CRITERIA

- Pelvic fracture (with ABC compromise)
- Mangle limb (with ABC compromise)
- Any penetrating wound to the cardiac box
- Any penetrating wound to torso, neck, or extremity (with ABC compromise)

OR

As requested by the Emergency Physician based on current
judgment of situation (i.e mass casualties)



TRAUMA TEAM ACTIVATION

ACTIVATION A

A

ACTIVATION AUTHORITY:

Emergency Physician

TEAM RESPONSE:

- Emergency Physician
- Emergency Registrar/Medical Officer
- 1 x ED Nurse
- Trauma Surgeon or General Surgeon On-call
- Trauma Fellow/Surgery Registrar
- Surgery Medical Officer
- Anaesthesiologist
- Anaesthesia Registrar/Medical Officer
- Emergency Radiographer

TEAM NOTIFICATIONS:

- Radiology MO On-call
- Blood Bank Doctor On-call

ACTIVATION B

B

ACTIVATION AUTHORITY:

Emergency Physician

TEAM RESPONSE:

- Emergency Physician
- Emergency Registrar/Medical Officer
- 1 x ED Nurse
- Trauma Surgeon or General Surgeon On-call
- Trauma Fellow/Surgery Registrar
- Surgery Medical Officer
- Anaesthesiologist
- Anaesthesia Registrar/Medical Officer
- Emergency Radiographer
- Orthopaedic Surgeon
- Orthopaedic Registrar/Medical Officer

TEAM NOTIFICATIONS:

- Radiology MO On-call
- Blood Bank Doctor On-call



TRAUMA TEAM ACTIVATION

OPERATOR TO CALL

	ACTIVATION A	CHECK
A	SURGERY <ul style="list-style-type: none">• Trauma Surgeon• General Surgeon Oncall	
	ANAESTHESIOLOGY <ul style="list-style-type: none">• Pakar Peri Oncall	
	RADIOLOGY <ul style="list-style-type: none">• Juru X-ray Oncall	
	TO NOTIFY <ul style="list-style-type: none">• Radiology MO Oncall• Blood Bank MO Oncall	

	ACTIVATION B	CHECK
B	SURGERY <ul style="list-style-type: none">• Trauma Surgeon• General Surgeon Oncall	
	ORTHOPAEDIC <ul style="list-style-type: none">• Orthopaedic Surgeon Oncall	
	ANAESTHESIOLOGY <ul style="list-style-type: none">• Pakar Peri Oncall	
	RADIOLOGY <ul style="list-style-type: none">• Juru X-ray Oncall	
	TO NOTIFY <ul style="list-style-type: none">• Radiology MO Oncall• Blood Bank MO Oncall	



TRAUMA TEAM ACTIVATION

ACTIVATION SEQUENCE

- 1 Activating authority (criteria met or upon discretion) calls the hospital information service (switchboard) ----> **“TRAUMA ACTIVATION”** (no details should be given)
- 2 Switchboard operator ----> individuals within response and notify groups via phone lines such as Speed Dial (SD) ----> **“TRAUMA ACTIVATION L1”** (no details should be given)
- 3 Each member of the **response team** (that receives the trauma activation) shall **physically present** themselves at ETD immediately. **No communication** by any of the responding team members will be entertained by phone before the arrival in ETD.
- 4 All members of the **“notified” team** (that receives the trauma notification call) will be called by the respective staff members from the ETD when the need arises to discuss details.
- 5 For “after working hour” activation, the Consultant Trauma Surgeon can be consulted at any time on selected cases or circumstances if he/she is not part of the team.
- 6 The Emergency Physician team leader briefs the team on the condition of the patient and begins to assign duties.
- 7 All members of the **response team** shall participate in the process of resuscitation according to the **Trauma Team Resuscitation Protocol**.

STAND DOWN

The Attending Emergency Physician has the sole right to issue a “Stand-Down” from “Activation” status if the situation warrants it. The stand-down order can be issued by paging system as a “Trauma Activation Stand Down” message or verbally if the team has assembled in ETD.



QUALITY INDICATORS

TEAM MEMBERS RESPONSE after "Trauma Activation" Attendance and arrival times will be recorded on the Trauma Team Activation Form.	≤15 MINUTES
CT REQUEST TO SCAN TIME	≤1 HOUR
OT BOOKING TO INCISION TIME	≤1 HOUR