**TRAUMA SCHOOL DAY**

**January 29, 2024 – MHSU 4031**

**0700-1500**

**0700-0830 – PowerPoint**

**Land Acknowledgment**

*Royal Columbian Hospital is located on the ancestral, unceded, and traditional shared territories of the Kwantlen and Qayqayt First Nations, and home to the North Fraser Métis Association.​ I recognize I have the responsibility to help create and provide culturally safe and appropriate care in a system with inequitable and historical systemic racism.*

* Intros & Icebreakers
* Provide completed Trauma School Certificates from LH and ACLS/PALS plans
* Patient belongings and handling and charting
* Police evidence and investigations (handling evidence, blood work acquisition, recording, providing personal information)
* Social workers role
* Stroke will be covered with 1:1 shift (though a hands on practice and programming pump would be god)

**Trauma Preparation**

* ANTICIPATION AND PREPAREDNESS IS KEY! - CALL TEAM HUDDLE
* Roles & Importance of who is involved and who needs to be notified ( TTL, Ep (x1 or x2), RT, LAB, x-ray, ECG, PCC, Triage, other staff?) Team labels
* Consider meds for: Pain, RSI, Sedation, Pressure, Bleeding
* Set up bedside and equipment (hard board, pelvic sheet, suction, US)
* Preparation/ Anticipation for off unit: c-spine precautions, Security, med and transfer equipment, suction, physcian
* Review ENAR, Trauma nursing assessment Record, Resus record, clean up patient, remove sheet, glass etc
* ICU charting when to use
* Unknown Patient: remains unknown even if pt is verified until all diagnostics are resulted (important for MTP)

**0830-0900 Trauma Services – Guest or Abby**

* Trauma Team Activation
* mBIG
* Autotransfuser
* Splint – Long bone Fractures
* SEPS Drain (or do in Trauma with binder) – Abby or ED CNE

**0900-0930 Code Pink/Imminent Birth – Guest Monique and Anisha – Meet at Infant warmer, need hands on)**

* Warmer
* NRP Cart Stocking
* Code Pink activation in department
* Imminent Birth in department or main floor/parking lot
* Who to call, when and how

**0945-1000 Break**

**1000 – CARDIOVASCULAR ISSUES**

**CODE BLUE ADULT VS PEDS**:

* Calling code blue (adult vs pediatric)
* Who’s’ assigned?
* What to bring…active ACLS PALS required by FHA
* What’s your role?
* Resus record reference\* sign it
* Most attending workshop Feb 1
* How do we call code blue in ED? “RT STAT to Emergency”

**CARDIAC ARREST/STEMI**

* STEMI: Notification and Walk-in
* K Basin-ASA, clopidigrel, ticagrecelor, heparin, nitro
* Prep Cath lab: hand over form, iv pole, iv access, pads on chest upside down, lifepak

**CARDIAC ARREST**

* ACLS/ PALS – ensure up to date (required for Code Blue Team)
* Care Aid Role
* LUCAS (in trauma)
* IO Insertion practice (30 minutes)

**Post Intubation ROSC CARE:**

* Target Temperature Management (TTM) (bair hugger)
* OG, Foley (temp), ART line, Central line
* Sedation/infusions/RSI/Analgesia (opportunity to catch up and consider)
* RASS score -4 to 4
* ICU handover

**1100-1130 – ECMO – Guests Kyle and Melissa (may need 45 min or more focus on nursing (Melissa only?) – perhaps a short PP that could be adapted for ED Nursing)**

* Indication/Activation/Initiation
* Modes – VA VV
* Cases and Outcomes
* Nursing Role: Pt care/charting/drugs
* Nursing: Q1H Neuros with VA
* Nursing: Vascular Checks each limb accessed
* Equipment and location (C-Arm, LUCAS with placement)
* HCA: Request to assist perfusionist with gathering Trauma supplies during initiation

**1130-1200 – Respiratory Therapy – Guests Brennan or Delegate**

* Basic Vent Reviews
* Assessing ETT
* Trouble shooting patients and devices
* BiPap (adult/peds) Restraint use (do last and less time)
* ABG
* ART line prep

**1200-1230 LUNCH**

**1230 -1300 – Organ Donation – Guest – Sandra Bazley (mixed reviews – some said more and some said less)**

* Mandatory Reporting of deaths
* Organ Donation and Obtaining Consent
* EOL orders, Extubation Orders – Has Organ donation been discussed?
* Eye Care

**1300-1400: Pharmacy Presentation – Rebecca (positive reviews could do 90min review)**

* RSI
* analgesia
* Common pressers (phenyl)/infusions (alpha/beta receptors)
* Support with peds meds

Nurse responsibility: Drug administration and counting (45 seconds)

***Pediatric Medication***

* Broselow Cart FHA PDTM.
* Standard is Ketamine and Roc for sedation and induction
* Atropine is not routine but may be considered for less than 1 year old
* Morphine and Midazolam is the standard FHA post intubation medication
* Reminder – all peds drugs are weight based – stretcher will not work for less than 23kg (7 yrs). Use Broselow tape or caregiver best guess

**1415-1500 Break**

**1415-1500 – Hands on Scenarios**

**In Trauma Room**

* MTP Protocol: need to ask for units (know when to give calcium)
  + Unit Clerk Role
  + Pressure bag, preferred Belmont: dedicate one nurse
* Bair Hugger and Cooler/Warmer
* LUCAS
* Bed weight 23Kg
* Broselow Cart: Infusion & Med book
* Unknown pt in Omnicell
* PPOs- icu charting
* Pneumatic Tourniquet
* Point out ECMO Box and Poster
* Log rolls & C Collar Application
* Burns
* IO Practice (need to locate the SIMS equipment)

**What Next?**

* Orientation shifts
* Code Blue Worskhop
* Maintain Competencies with ACLS/PALS, STRUC, TNCC