



**ARKANSAS DEPARTMENT OF HEALTH**  
**TRAUMA CENTER DESIGNATION INTENT APPLICATION**

**FACILITY INFORMATION**

**Hospital:** \_\_\_\_\_

**Physical Address:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City: State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Administrator:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**Facility is:**     Non-Profit             For-Profit  
                   Government         Other \_\_\_\_\_  
                  (City owned, County, etc.)

**Fiscal Year:** \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_

**Hospital Region** (check one) Arkansas Valley  Metropolitan  Northeast   
Northwest  North Central  Southeast  Southwest

**Trauma Center Level Requested** (check one)  
Level I  Level II  Level III  Level IV

**Licensed Beds** \_\_\_\_\_ **Staffed Beds** \_\_\_\_\_

**Critical Care/Intensive Care Unit** Y  N  **Number of Beds** \_\_\_\_\_

**Emergency Department**

Number of Beds \_\_\_\_\_

Number of ED visits last fiscal year \_\_\_\_\_

## Operating Suite

Number of Rooms \_\_\_\_\_

Number of surgical cases performed in hospital OR last fiscal year \_\_\_\_\_

## Trauma Service

### **Standard Required for Level I, Desired for Levels II-IV**

- a. *Specified delineation of privileges for the Trauma Service must occur by the medical staff Credentialing Committee*
- b. *Trauma Team: Organized and directed by a general surgeon expert in and committed to the care of the injured; all patient with multiple system or major injury must be initially evaluated by the trauma team when appropriate, and the surgeon who shall be responsible for overall care of a patient (the team leader) identified. A team approach is required for optimal care of patients with multiple-system injuries.*

1. Is there a functioning trauma team organized and directed by a general surgeon? Y  N
2. If no, is there a plan for a trauma team? Y  N
3. For facilities requesting Level I designation, detail the plan, progress toward the plan and projected date of completion. \_\_\_\_\_

## Emergency Department

### **Standard Required for all Levels**

*The Emergency Department staffing shall ensure immediate and appropriate care for the trauma patient. The Emergency Department physician shall function as a designated member of the trauma team, and the relationship between Emergency Department physicians and other participants of the trauma team must be established on a local level, consistent with resources but adhering to these standards and ensuring optimal care.*

*ATLS required at least once*

1. Are ED physicians in-house 24/7? Y  N . If no, what is the ED physician coverage? \_\_\_\_\_
2. If no, is there a plan for ED physician coverage 24/7? If so, detail the plan, progress toward the plan and projected date of completion. \_\_\_\_\_
3. Have all ED physicians completed ATLS? Y  N  If no, detail the plan for and projected date for completion. \_\_\_\_\_

## General Surgery

### **Standard Required for Levels I-III, Desired for Level IV**

*Board Certified (may be a surgeon who is a graduate of an Accreditation Council for Graduate Medical Education (A.C.G.M.E) or American Osteopathic Association (AOA) approved [O.G.M.E] approved residency and who is less than five years out of training.) If the surgeon fails to obtain board certification within five years, s/he is no longer eligible, even though s/he has obtained Advanced Trauma Life Support (ATLS) course completion). Alternatives to board certification may be applied as defined in Section I, Definitions: "Alternate Criteria."*

**Level I** *In-house and immediately available to the patient on arrival in the Emergency Department (assumes 5-minute pre-hospital notification). A Post Graduate Year 3 or higher Resident may be used to fulfill this requirement.*

**Level II** *On-call and promptly available to the patient upon activation of the trauma protocol.*

**Level III** *On-call and promptly available (within 30 minutes)*

*Surgeon must have full, unrestricted trauma surgery privileges for Levels I, II and III*

1. Are there board certified trauma surgeons on-call and available 24/7 in the time-frame required by designation level being requested? Y  N
2. If no, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

## Neurologic Surgery

### **Standard Full, unrestricted neurosurgery privileges. On-call and promptly available Required for Levels I-II, Desired for Level III**

OR

*Physician with special competence, as judged by the Chief of Neurosurgery, in the care of patients with neural trauma, and who is capable of initial measures directed toward stabilizing the patient and initiating diagnostic procedures. In-house and immediately available **Required for Levels I-II***

1. Is a neurosurgeon on-call and available 24/7 within 30 minutes of a request for services?  
Y  N
2. How many neurosurgeons take trauma call? \_\_\_\_\_
3. If physicians with special competence are utilized, are these individual(s) in-house and immediately available 24/7? Y  N
4. If a combination of both neurosurgeons and physicians with special competence are utilized, provide details on coverage 24/7. \_\_\_\_\_

1. For facilities requesting Level 1 or II designation, if neurosurgery is not available 24/7, detail the plan for meeting the requirement, progress toward the plan and projected date of completion.  
\_\_\_\_\_

## **Other Surgical Services**

### ***Standard***

*Microsurgery capabilities (promptly available) Required for Level I, Desired for Level II*

*Hand Surgery (on-call and promptly available) Required for Level I, Desired for Level II*

1. Are microsurgery services available 24/7 within 30 minutes of a request for such services?  
Y  N
2. Are hand surgery services available within 30 minutes of a request for such services?  
Y  N
3. For Level I facilities, if services are not available, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

### ***Standard***

*Cardiac surgery (on-call and promptly available) Required for Levels I-II*

*Obstetric/Gynecological Surgery (on-call and promptly available) (exception is pediatric facilities) Required for Levels I-II*

1. Are cardiac surgery services available 24/7 within 30 minutes of a request for such services?  
Y  N
2. Are obstetric/gynecological services available 24/7 within 30 minutes of a request for such services? Y  N
3. For Level I and II facilities, if services are not available, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

### ***Standard***

*Ophthalmic surgery (on-call and promptly available) Required for Levels I-II, Desired for Level III*

*Thoracic Surgery (on-call and promptly available) Required for Levels I-II, Desired for Level III*

*Oral, Otorhinolaryngologic, **OR** Plastic/Maxillofacial Surgery (on-call and promptly available) Required for Levels I-II, Desired for Level III*

*Urologic surgery (on-call and promptly available) **Required for Levels I-II, Desired for Level III***

*Orthopedic Surgery (on-call and promptly available) **Required for Levels I-II, Desired for III-IV***

1. Are the following services available 24/7 within 30 minutes of a request for such services?
- |                           |                            |                            |                       |                            |                            |
|---------------------------|----------------------------|----------------------------|-----------------------|----------------------------|----------------------------|
| Ophthalmic                | Y <input type="checkbox"/> | N <input type="checkbox"/> | Thoracic              | Y <input type="checkbox"/> | N <input type="checkbox"/> |
| Oral/Otorhinolaryngologic | Y <input type="checkbox"/> | N <input type="checkbox"/> | Plastic/Maxillofacial | Y <input type="checkbox"/> | N <input type="checkbox"/> |
| Urologic                  | Y <input type="checkbox"/> | N <input type="checkbox"/> | Orthopedic            | Y <input type="checkbox"/> | N <input type="checkbox"/> |
2. For facilities requesting Level I or II designation, if any services are not available, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

### **Anesthesiology**

#### **Standard**

*Anesthesiology **Required for Level I and II, Desired for Levels III and IV***

*Anesthesiologist Level I In-house and immediately available to the patient upon arrival in the ED (assumes 15 minute pre-hospital notification)*

*Level II on-call and promptly available to the patient upon arrival in the ED (assumes 15 minute pre-hospital notification)*

*Anesthesiologist or certified nurse anesthetist Level III on-call and promptly available*

1. Are anesthesiology services available 24/7? Y  N
1. Are services available in-house  or by call ?
2. How many anesthesiologists take trauma call? \_\_\_\_\_
3. How many nurse anesthetists take trauma call? \_\_\_\_\_
4. For facilities requesting Level I or II designation, if services are not available, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

### **Other Specialty Capability**

#### **Standard**

*Cardiology (On call and promptly available) **Required for Levels I and II, Desired for Level III***

*Pediatrics (On-call and promptly available) **Required for Levels I and II, Desired for Level III***

*Radiology (On-call and promptly available) **Required for Levels I and II, Desired for Levels III and IV***

- Are the following services available 24/7 within 30 minutes of a request for such services?  
 Cardiology Y  N  Pediatrics Y  N   
 Radiology Y  N
- For facilities requesting Level I or II designation, if services are not available, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

**Standard**

*Chest Medicine* **Required for Level I, Desired for Level II**  
*Gastroenterology* **Required for Level I, Desired for Level II**  
*Infectious Disease* **Required for Level I, Desired for Level II**  
*Psychiatry* **Required for Level I, Desired for Level II**

- Are the following services available 24/7 within 30 minutes of a request for such services?  
 Chest Medicine Y  N  Gastroenterology Y  N   
 Infectious Disease Y  N  Psychiatry Y  N
- For facilities requesting Level I designation, if services are not available, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

**Standard**

*Internal Medicine* **Required for Levels I, II and III**  
*Hematology* **Required for Levels I and II, Desired for Level III**  
*Nephrology* **Required for Levels I and II, Desired for Level III**  
*Pathology* **Required for Levels I and II, Desired for Level III**

- Are the following services available?  
 Internal Medicine Y  N  Hematology Y  N   
 Nephrology Y  N  Pathology Y  N
- For facilities requesting Level I or II designation, if services are not available, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

**Emergency Department**

**Standard**

*Designated Physician Director* **Required for Levels I, II and III, Desired for Level IV**

*Full-time emergency medicine practitioner with special competence in the care of the critically injured patient and ATLS certified at least once* **Required for Levels I and II, Desired for Levels III and IV**

*Physicians who are qualified and experienced in caring for the patients with traumatic injuries and who can initiate resuscitative measure and ATLS certified at least once **Required for Levels III and IV***

*In-house and immediately available **Required for Levels I, II, and III***

*On-call and promptly available **Required for Level IV***

1. Is there a designated physician director for the emergency department?    Y     N
2. Is there a full-time physician in-house in the emergency department 24/7?    Y     N   
If not, what is the arrangement for physician staffing of the emergency department? \_\_\_\_\_
3. If current physician staffing for the emergency department does not meet requirements for level of designation requested, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

**Standard**

*Emergency Department Nurse who is ACLS, PALS or ENPC (as appropriate) certified and who has had a sixteen hour Trauma Life Support course*

*In the ED and immediately available **Required for Levels I, II and III***

*In-house and immediately available **Required for Level IV***

1. For facilities requesting Level I, II or III designation are there nurses dedicated to the emergency department 24/7?    Y     N
2. If yes, how many are routinely scheduled per shift? \_\_\_\_\_
3. If current nurse staffing for the emergency department does not meet requirements for level of designation requested, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_
4. Do nurses meet certification and training requirements?    Y     N   
If no, detail the plan and date for completion. \_\_\_\_\_

**Operating Suite**

**Standard**

*In-house staff and Operating Room immediately available to patient upon arrival in the emergency department (assumes 5 minute pre-hospital notification) **Required for Level I***

*Immediately available to the patient upon arrival in the Operating Room or when requested by surgeon (may be satisfied by one RN in-house and immediately available to the Operating Suite with the remainder of the crew on-call and promptly available) **Required for Level II***

*Operating Room adequately staffed and equipped for trauma care (promptly available) **Required for Level III and IV, Desired for Level IV***

1. For facilities requesting Level I designation is there in-house staff and the 24/7 availability of an operating room within 5 minutes of notification of need? Y  N
2. For facilities requesting Level II designation is there 24/7 availability of an operating room and at least one RN available to the room? Y  N   
Is the remainder of the operating room crew on-call and promptly available? Y  N
3. For facilities requesting Level III designation is there an operating room adequately staffed and equipped for trauma care that is promptly available? Y  N
4. If the answer is no to any question above detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

### **Intensive Care Unit**

#### *Standard*

*Designated Medical Director **Required for Level I and II***

*Physician on duty in ICU 24/7 or immediately available **Required for Levels I and II, Desired for Level III***

*Nurse-patient minimum average ratio of 1:2 per shift for trauma patients **Required for Levels I, II and III***

1. For facilities requesting Level I or II designation is there a Medical Director for the Intensive Care Unit? Y  N
2. For facilities requesting Level I or II is there a physician on duty 24/7 or immediately available to the ICU? Y  N
3. For facilities requesting Level I, II or III designation is the nurse-patient ration 1:2 per shift for trauma patients in the Intensive Care Unit? Y  N
4. If the answer is no to any question above detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

### **Postanesthetic Recovery Room (surgical intensive care unit is acceptable)**

#### *Standard*

*Registered Nurses and other personnel 24/7 **Required for Levels I, II and III, Desired for level IV***



1. For facilities requesting Level I, II or III designation is there a postanesthetic recovery room staff with registered nurses and other personnel 24/7? Y  N
2. If no, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

### Acute Hemodialysis

#### *Standard*

*Acute hemodialysis capability or transfer agreement **Required for Level I, Desired for Levels II and III***

1. For facilities requesting Level I designation is there hemodialysis capability within the facility? Y  N   
If not is there a transfer agreement? Y  N
2. If no, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

### Organized Burn Care

#### *Standard*

*Physician-directed burn center staffed by nursing personnel trained in burn care and equipped properly for care of the extensively burned patient **or** a transfer agreement with nearby burn center or hospital with a burn unit **Required for Levels I, II, III and IV***

1. Is there a burn center within the facility? Y  N
2. If not, is there a transfer agreement with a burn center or hospital with a burn unit? Y  N   
How far in miles is the burn center to your hospital? \_\_\_\_\_
3. If there is no in-house burn unit and no transfer agreement detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

### Acute Spinal Cord Capability

#### *Standard*

*In circumstances where a designated spinal cord injury rehabilitation center exists in the region early transfer should be considered; transfer agreements should be in effect **Required for Levels I, II III and IV***

*In circumstances where a head injury center exists in the region, transfer should be considered in selected patients; transfer agreements should be in effect. **Required for Levels I, II III and IV***

1. Are there transfer agreements in place for transfer of designated spinal cord injures and head injuries? Y  N

2. If not, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

### **Rehabilitation Medicine**

#### ***Standard***

*Physician-directed Rehabilitation service staffed by nursing personnel trained in rehabilitation care and equipped properly for the care of the critically injured patient or transfer agreement when medically feasible to a nearby rehabilitation service. **Required for Levels I, I, III and IV.***

1. Are rehabilitation services offered by your facility? Y  N
2. If not, is there a transfer agreement in place for patients needing rehabilitation services?  
Y  N
3. If not, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

### **Pediatric Service**

#### ***Standard***

*Nursing personnel caring for pediatric patients are properly trained and equipped **Required for Level I and II, Desired for Level III***

1. For facilities requesting Level I and II designation, have nursing personnel received special training in caring for pediatric patients? Y  N
2. If not, detail the plan for meeting the requirement, progress toward the plan and projected date of completion. \_\_\_\_\_

**For the Sections below, if applicable for the level of designation being requested, place a checkmark in the yes column if your facility currently has the supplies, medications, equipment, etc. and a checkmark in the no column if your facility does not. If no, and the item is a requirement, please provide a date when your facility plans to have the item.**

### **Special Services, Supplies, Medications and Equipment**

#### ***Standard***

*Equipment in the Emergency Department for resuscitation and to provide life support for the critically or seriously injured shall include but not be limited to:  
**All of the items listed below are required for Levels I, II, III and IV unless otherwise specified.***

- *Airway control and ventilation equipment including laryngoscope and Endotracheal tubes of all sizes, valve-mask resuscitator, sources of oxygen, pulse oximeter, CO2 monitoring and mechanical ventilator* Y  N
- *Suction Devices* Y  N
- *Electrocardiograph-oscilloscope-defibrillator* Y  N
- *Standard IV fluids & administration devices, including IV catheter* Y  N
- *Intravenous fluid and blood warmer* Y  N
- *Sterile surgical sets for standard ED procedures* Y  N
- *Gastric lavage equipment* Y  N
- *Drugs and supplies necessary for emergency care* Y  N
- *Two-way radio linked with vehicles of the pre-hospital system* Y  N
- *Skeletal Traction devices for spinal injuries (spinal backboard immobilization devices may be used as an alternative)* Y  N
- *Special equipment for pediatric patients, readily available* Y  N
- *Apparatus to establish central venous pressure monitoring. **Required for Levels I, II, and III, Desired for Level IV*** Y  N
- *X-ray capability 24 hours coverage by in-house technician **Required for Levels I and II, Desired for Levels III and IV*** Y  N  *or*  
*Technician on-call and promptly available to patient upon arrival in the emergency department **Required for Levels III and IV*** Y  N

### **Intensive Care Unit**

*All of the items listed below are required for Levels I, II and III.*

- *Immediate access to clinical laboratory services* Y  N
- *Oxygen source with concentration controls* Y  N
- *Airway control and ventilation devices* Y  N
- *Cardiac emergency cart* Y  N
- *Temporary transvenous pacemaker* Y  N
- *Electrocariograph-oscilliscopes-defibrillator* Y  N
- *Mechanical ventilator-respirators* Y  N
- *Patient weighing devices* Y  N

- Pulmonary function measuring devices Y  N
- Temperature control devices Y  N
- Drugs, intravenous fluids and supplies Y  N

*All of the items listed below are required for Levels I and II, Desired for Level III*

- Cardiac output monitoring Y  N
- Electronic pressure monitoring Y  N
- Intracranial pressure monitoring devices Y  N

### **Postanesthetic Recovery Room (surgical intensive care unit is acceptable)**

*Appropriate monitoring and resuscitation equipment Required for Levels I II and III, Desired for Level IV* Y  N

### **Radiological Special Capabilities**

- Comprehensive range of angiography services **Required for Levels I and II, Desired for Level III** Y  N
- Sonography **Required for Levels I and II, Desired for Level III** Y  N
- Nuclear Scanning **Required for Level I, Desired for Level II** Y  N
- In-house computerized tomography **Required for Levels I and II** Y  N
- In-house radiologic technician **Required for Levels I and II** Y  N
- Technician on-call and promptly available **Required for Level III** Y  N

### **Operating Suite Special Requirements**

*All of the items listed below are required for Levels I, II, III and IV unless otherwise specified.*

- Thermal control equipment for the patient Y  N
- Thermal control equipment for blood Y  N
- X-ray capability Y  N
- Monitoring equipment Y  N
- Cardiopulmonary bypass capability **Required for Level I and II** Y  N
- Operating Microscope **Required for Level I, Desired for Level II** Y  N

- Endoscopes **Required for Levels I, II and III, Desired for Level IV** Y  N
- Craniotome **Required for Levels I and II, Desired for Levels III and IV** Y  N

**Standard Laboratory Services Available 24 hours a day**

*All of the items listed below are required for Levels I, II, III and IV*

- Standard analyses of blood, urine, and other body fluids Y  N
- Blood typing and cross-matching Y  N
- Coagulation studies Y  N
- Comprehensive blood bank or access to a community central bank and adequate hospital storage facilities Y  N
- Blood gases and pH determination Y  N

*All of the items listed below are required for Levels I, II, III and desired for IV unless otherwise specified.*

- Microbiology Y  N
- Serum alcohol determination Y  N
- Drug screening Y  N
- Serum and urine osmolality **Required for Levels I and II, Desired for Levels III and IV** Y  N