



Trauma Center Practice Management Policy

*Iowa Methodist Medical Center and Blank Children's Hospital
Des Moines, Iowa*

NON-ADMITTED TRAUMA PATIENTS DISCHARGED FROM SURGERY TO AN ANCILLARY DEPARTMENT	
Policy #7	
ADULT AND PEDIATRIC Practice Management Policy	Effective: 11/20/1998
Contact: Trauma Center Medical Director/ Trauma Center Program Manager	Last Reviewed: 01/29/2017

- I. PURPOSE:** To provide guidelines which ensure that the appropriate level of care is maintained for the non-admitted trauma patient being transported to Radiology or any other ancillary department from the Operating Room.
- II. STATEMENT:** This policy will apply to non-admitted trauma patients who are discharged from the Operating Room to Radiology, Angiography, etc. before being admitted to a nursing unit or to PACU.
- III. PROCEDURE:**

 - A. POTENTIAL CRITICAL CARE ADMISSION**
 Patient's transported to CT, Angiogram or to Radiology for further evaluation directly from the OR and prior to admission to adult ICU or PICU must be accompanied/monitored by an appropriate staff member that can assist with monitoring and stabilizing the patient. The OR charge nurse will contact the ICU/PICU and the respective department will be responsible for sending appropriate staff to monitor and provide care for the patient.
 - B. POTENTIAL GENERAL FLOOR ADMISSION**
 Patients transported to CT, Angiogram or to Radiology for further evaluation directly from the OR and prior to admission to an adult or pediatric general floor, will be monitored and cared for by a PACU nurse until admitted to the general floor.
 - 1. The nurse assuming care of the non-admitted patients will receive a thorough report of the patient's condition from the anesthesiologist and the trauma resident or attending surgeon.

2. The Patient Care Coordinator should be involved to assist in identifying resources as early as possible, including but not limited to the MET team (Hospital policy RI #41 Medical Emergency Team.)

Revised Date: 11/20/98

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Revised and Approved by Trauma Committee, April 30, 2004

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