I. PURPOSE: To establish guidelines for weekly trauma team rounds to ensure appropriate management and implementation of a plan of care for the trauma patients to facilitate appropriate care throughout the continuum of care and incorporating discharge planning.
   1. To develop a culture of safety.
   2. To facilitate communication among disciplines involved in the care of trauma patients.
   3. To develop a plan of care for each patient collaboratively with all disciplines involved in the care of trauma patients.
   4. To maximize appropriate resource utilization.
   5. To maximize resident and ancillary education.
   6. To minimize disruption to non-trauma services.
   7. To involve the patient and family in decision-making for the plan of care for the patient.
   8. To facilitate communication between the patient, family and all disciplines providing care for trauma patients.

II. STATEMENT: Workgroup discussion as a team allows for formation of close professional relationships as well as provision of organized and collaborative care to a large and diverse body of patients.

III. PROCEDURE:
   A. Multidisciplinary Adult Trauma Rounds (MDR’s) are usually held every Tuesday and Friday at 0800 in the CCU. MDR’s are held in/just outside each respective patient’s room.
   B. The Multidisciplinary Trauma Rounds are directed by the Trauma Surgeon covering the trauma service or his/her designee.
   C. The Multidisciplinary Trauma Rounds are coordinated by the Trauma ARNP and/or his or her designee.
   D. Involved team members will receive a list of prospective patients to be discussed on the morning of rounds to facilitate knowledge and contribution to the patient reviews.
   E. Team members will be notified ASAP if Multidisciplinary Trauma Rounds become canceled due to unavoidable events.
DISTRIBUTION: LIFE FLIGHT, EMERGENCY DEPARTMENTS: ADULT/PEDIATRIC, SURGERY, ICU, PICU, BLANK 3 AND 4, POWELL 4 AND 5, CHAPLAINCY, SOCIAL SERVICES, NUTRITIONAL SERVICES, PHARMACY, CASE MANAGERS, AND REHABILITATION TEAM MEMBERS.

NEW DATE: November 20, 1998

Revised and Approved by Trauma Committee, July 30, 2004

Revised and Approved by Trauma Committee, October 26, 2007

Revised and Approved by Trauma Committee, July 30, 2010

Revised and Approved by Trauma Committee, April 25, 2014