

# Trauma PI Tracking Form

<p style="text-align: center;"><b>Demographics</b></p> <p>Date of report: <i>3/11/15</i></p> <p>Date(s) of occurrence: <i>3/9/08</i></p> <p>Medical record #: <i>95472246</i></p>	<p style="text-align: center;"><b>Source of Information</b></p> <p><input type="checkbox"/> Trauma program coordinator</p> <p><input type="checkbox"/> Nurse manager</p> <p><input type="checkbox"/> Staff nurse</p> <p><input type="checkbox"/> Physician</p> <p><input type="checkbox"/> Patient relations</p> <p><input type="checkbox"/> Rounds</p> <p><input type="checkbox"/> Multi-disciplinary conference</p> <p><input type="checkbox"/> Registry</p> <p><input checked="" type="checkbox"/> PI chart audit</p> <p><input type="checkbox"/></p>	<p style="text-align: center;"><b>Location of Issue</b></p> <p><input type="checkbox"/> EMS</p> <p><input checked="" type="checkbox"/> ED</p> <p><input type="checkbox"/> OR</p> <p><input type="checkbox"/> ICU/PACU</p> <p><input type="checkbox"/> Floor</p> <p><input type="checkbox"/> Radiology</p> <p><input type="checkbox"/> Lab</p> <p><input type="checkbox"/> Rehab</p> <p><input type="checkbox"/></p>
<p><b>Complication, problem or complaint:</b></p> <p><i>Length of stay in ED was 109 minutes. Patient was seriously injured and met criteria for transfer. Transfer delayed for imaging.</i></p>		
<p><b>Date of review:</b> <i>3/16/16</i>      <b>Reviewed by:</b> <i>Dr. Payne, MD</i></p>		
<p style="text-align: center;"><b>Determination</b></p> <p><input type="checkbox"/> system-related</p> <p><input type="checkbox"/> disease-related</p> <p><input checked="" type="checkbox"/> provider-related</p> <p><input type="checkbox"/> unable to determine</p>	<p style="text-align: center;"><b>Outcome</b></p> <p><input checked="" type="checkbox"/> expected outcome</p> <p><input type="checkbox"/> unexpected outcome</p>	<p style="text-align: center;"><b>Preventability</b></p> <p><input type="checkbox"/> without opportunity for improvement</p> <p><input checked="" type="checkbox"/> with opportunity for improvement</p>
<p style="text-align: center;"><b>Corrective action</b></p> <p><input type="checkbox"/> not necessary      <input type="checkbox"/> guideline/protocol      <input type="checkbox"/> resource enhancement</p> <p><input checked="" type="checkbox"/> trend/track similar occurrences      <input type="checkbox"/> individual counseling      <input type="checkbox"/> privilege/credentialing review</p> <p><input type="checkbox"/> education      <input checked="" type="checkbox"/> provider case review      <input type="checkbox"/> _____</p>		
<p><b>Action Plan(s) &amp; Effect(s):</b></p> <p><i>Sent to provider case review on 3/20/15 (see meeting minutes). Providers agreed that LOS was unnecessarily long; reviewed trauma transfer policy; general agreement that trauma patients' transfer should be expedited. Team will continue to monitor length of stays with the PI filter "length of stay &gt; 60 minutes."</i></p> <p><i>4/1/16: 28 cases reviewed; 90% were transferred appropriately. Loop closed. Program will continue to monitor length of stays.</i></p>		
<p><b>Signature:</b> <i>Macon Payne, MD</i></p>	<p><b>Date:</b> <i>4/1/2016</i></p>	