Vanderbilt University Medical Center

Division of Acute Care Surgery

Pre-Brief: Trauma Level One Operation

Introduction

Teamwork, communication, and leadership are the keys to a well-organized and efficient trauma operation.

Noise Discipline

Individual conversations should be kept at a minimum; the entire room should hear one voice.

Pre-Brief

Prior to the patient being moved onto the operating room table, a Quick pre-brief is suggested.

Trauma Team Checklist:

- <u>Crowd Control</u>: Intro of Surgeons, Anesthesiologists, RNs (ED, Scrub, Circulator #1 +/- #2) [All Readback]
 Summarize Injuries, Known or Suspected
- Outline Skin Preparation, Positioning, and Surgical Draping

Request Antibiotic & DVT prophylaxis (and Re-dosing plans)

Request or Confirm Instruments, Trays, Equipment

[Scrub/Circulator Team Readback] [Scrub/Circulator Team Readback] [Anesthesia Team Readback]

Summarize pre-OR Resuscitation (IVF, Blood, Massive Transfusion, Colloid, Rewarming with Response)

Delivering Nursing Team (from Emergency Room, ICU, Ward) Checklist:

- Clarify any pre-OR Resuscitation (IVF, Blood, Massive Transfusion, Colloid and Response)
- Summarize pre-OR sedation and analgesia (Requirements and Response)
- Outline Intravenous/Intraosseous Access
- Relay any threat features (e.g., weapons, hazardous materials, prisoner, restraints)
- Patient Verification: Check Arm Band with Receiving Nursing Team [Circulator Readback]

Receiving Nursing Team (OR Scrub/Circulator) Checklist:

- Ask for clarification about above
- Outline plan for any threat features
- Designate point-person for MTP Runner, Pagers, Phones, and Consultant Communication (e.g. Bloodbank, Radiology)

Anesthesiology Team Checklist

- Ask for clarification about above
- Relay new Access plans (e.g., Intravenous, Central line, Arterial line, Intraosseous)
- Outline OR Resuscitation and Rewarming plan
- If Sternotomy: Either Attending (Trauma or Anesthesiology) can request Cardiac Anesthesiology/TEE

Move Patient to Operating Room table

Oversight:

Division of Acute Care Surgery, Trauma Program Operational Process Performance (07/24/2024)

Revision Team:

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