

Indiana State Trauma Care Committee (ISTCC) – Designation Subcommittee Meeting Notes

Time: Wednesday, January 25, 2017, 11am EST

Location: Eskenazi Health, 2nd Floor, Room 401, Conference Call line was also utilized.

Called by: Dr. Gerardo Gomez, Chair, ISTCC Designation Subcommittee

I. Attendees

ISTCC Designation Subcommittee Members	
ISTCC members	
Ben Zarzaur, MD	Smith Level I Shock Trauma Center at Eskenazi Health
Gerardo Gomez, MD, <i>Chair</i>	Smith Level I Shock Trauma Center at Eskenazi Health
Lewis E. Jacobson	St. Vincent Indianapolis Hospital
Lisa Hollister	Parkview Regional Medical Center
Scott Thomas, MD	Memorial Hospital South Bend
Spencer Grover	Indiana Hospital Association
Stephanie Savage, MD	IU Health – Methodist Hospital
Subcommittee participants	
Amanda Pickett	St. Vincent Indianapolis Hospital
Emily Fitz, MD	Indiana American College of Emergency Physicians
Jennifer Konger	Parkview Regional Medical Center
Jennifer Mullen	Methodist Hospitals, Northlake Campus
Judi Holsinger	St. Vincent Indianapolis Hospital
Kevin Loeb, MD	Indiana American College of Emergency Physicians
Matthew Sutter, MD	Indiana American College of Emergency Physicians
Melissa Hockaday	IU Health – Methodist Hospital
Teri Joy	Smith Level I Shock Trauma Center at Eskenazi Health
Wendy St. John	Smith Level I Shock Trauma Center at Eskenazi Health
ISDH Staff	
Art Logsdon	Assistant Commissioner, Health & Human Services Commission
Katie Hokanson	Director, Trauma and Injury Prevention
Ramzi Nimry	Trauma System Performance Improvement Manager

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I. Agenda

1. Welcome & Introductions
2. 1 Year Reviews
 - a. St. Anthony Health Crown Point
 - i. Requested a copy of the emergency department call schedule.
 - ii. Needed Continuing Medical Education (CME) documents for trauma surgeons.
 - iii. Needed Registrar registration for courses.
 1. Once requested documents are received, 1 year review is approved.
 - b. Reid Health
 - i. Requested a copy of the emergency department call schedule.
 - ii. Needed peer review committee meeting attendance.
 - iii. Needed the total number of trauma patients transferred after 120 minutes.
 1. Once requested documents are received, 1 year review is approved.
 - c. Terre Haute Regional
 - i. Needed more information regarding trauma surgeon response times.
 - ii. Needed operational process performance improvement committee meeting attendance.
 - iii. Needed peer review committee meeting attendance.
 1. Once requested documents are received, 1 year review is approved.
3. Additional Discussion/Topics
 - a. Potential additions to 1 year review documents:
 - i. Ask facilities to indicate who the liaison is for Operational Process Performance Improvement committee and Trauma Peer Review Committee.
 - ii. Ask facilities to include signatures for committee meetings.
 - b. Identify who will be responsible for reviewing parts of application and 1-year review documents.