

The following communication highlights news from the PTSF Fall Conference and PTSF Board of Directors and staff. The PTSF Board last met on September 15 and 16, 2022. If you have questions related to the content of this update, please contact [Juliet Altenburg](#), MSN, RN—Executive Director.

TRAUMA CENTER UPDATE

Congratulations to Lehigh Valley Hospital-Hecktown Oaks on their accreditation as a Level IV Trauma Center effective November 1, 2022! Head to the PTSF Website for the latest [PTSF Press Release](#) on changes to the trauma center landscape in PA.

PTSF STAFF UPDATE



PTSF welcomes new Accreditation Specialist, Kristen DiFiore, MSN, RN, TCRN. Kristen joined the PTSF staff in September 2022 as an Accreditation Specialist. Ms. DiFiore earned both her Bachelor of Science in Nursing and Master of Science in Nursing Leadership and Administration from Immaculata University. She received her Diploma in Nursing from Abington Memorial Hospital School of Nursing. Prior to joining the PTSF, Kristen served as the Lead Performance Improvement Coordinator for Penn Presbyterian Medical Center, a Level I Trauma Center, and previously worked in the surgical intensive care unit. Kristen also participated in the Penn Trauma Network's trauma program development outreach efforts. Additionally, Kristen co-authored chapter three, Performance Improvement and Patient Safety in Trauma Care, in *Trauma Nursing: From Resuscitation Through Rehabilitation, 5th Edition*, which was published in 2019. Please join the PTSF in welcoming Kristen!

ACCREDITATION AND SITE SURVEY UPDATE

[Amy Krichten](#) MSN, RN, CEN, TCRN, Director of Accreditation

- The 2023 [Site Survey Guidebook](#) is available on the PTSF website. Please review this resource for newly implemented changes.
- ESO anticipates the Application for Survey (AFS) update the first week of October. The PTSF will distribute an email when the 2023 AFS and 2023 AFS User Manual is available.
- As COVID data continues to diminish, we welcome back in-person invitations to the survey day meeting participants! Hospitals have the option to continue with hybrid meeting attendance if preferred. As we have done the past two years, final determination on COVID risk mitigation is made closer to survey day.
 - As long as COVID risk mitigation guidance permits, we will bring back hospital tours. Tours will now take place the afternoon of survey day and are contingent upon medical record review status. Please see the updated survey day schedule in the [Site Survey Guidebook](#).
- As announced in the April 2022 Board Update, Level I, II, and III accredited trauma centers that received a TQIP report (excludes pursuing and provisional centers) must submit the most recent report within the AFS and address the utilization of the report in the performance improvement process as a component of the PI presentation on survey day.
- The survey forms are updated. The Site Survey Information Form from our website was eliminated. In its place, a PTSF staff member will provide the TPM the new Survey Schedule & Participant Form upon closure of the AFS. Trauma centers must complete and return this form to the PTSF three weeks prior to survey.
- Surveyor Teams are being confirmed. Anticipate team bios later this year.
- Please refer to the Save-the-Date document for important site survey deadlines and details.

- 2024 centers can anticipate the Accreditation Team's communications regarding Save-the-Dates in the next few months.
- We welcome new Accreditation Team members, [Courtney Moraites, MPA](#), Accreditation Coordinator and [Kristen DiFiore MSN, RN, TCRN](#), Accreditation Specialist. Thank you for your assistance as we on-board our new colleagues!

TECHNOLOGY & TRAUMA REGISTRY UPDATES

[Lyndsey Diehl](#), RHIA, CHDA, CSTR, Director of Trauma Registry

2022 ESO Mid-Year Patch

ESO originally distributed the 2022 Mid-Year Patch via email in mid-August 2022. The Mid-Year Patch contains updates to Collector (Cv4), v5 Outcomes, and the ITDX Module. Further details and instructions were provided within the distribution email.

ESO is aware of the issues PA hospitals are experiencing with the Mid-Year Patch. For example, 'Favorites' list disappearing, 'custom data points in RW' cases, and logic checks for old cases (V5 Outcomes). To correct these issues, ESO plans to distribute an updated Mid-Year Patch via email within the next two weeks. Further information will be provided within the distribution email from ESO. If you continue to experience issues with the Mid-Year Patch, please submit a support ticket with as much detail as possible to ESO.

While PTSF understands the apprehension surrounding the installation of this update, we encourage all centers to install the Mid-Year Patch with corrections as soon as possible. Important corrections and improved functionality have been added to the various software platforms, especially within the v5 Outcomes software. Please contact ESO Support for assistance with the installation of the patch or with any concerns after installation is completed.

If not already accomplished, PTSF highly recommends reviewing the TO-100 and Taxonomy educational webinar posted on the PTSF Web Portal homepage prior to installing the Mid-Year Patch. This session will provide valuable information related to new functionality within v5 Outcomes.

DocuSign Agreements

As a best practice, the Pennsylvania Trauma Systems Foundation routinely reviews its privacy practices. As part of this effort, and in furtherance of PTSF's commitment to protecting the privacy and security of data submitted by trauma centers, PTSF has made updates to agreements associated with our data security processes.

All PA pursuing and accredited trauma centers should have received an email from DocuSign. This email will provide you with access to the documents your center is required to sign and submit back to PTSF. There will also be a cover letter summarizing changes that were made to any associated documents. Within DocuSign, you will be able to "reassign" the documents to whomever is the appropriate reviewer and/or signer at your facility. ***If you have not received an email from DocuSign, please contact [Lyndsey](#).***

Please review and return these documents ***as soon as possible***. PTSF is unable to implement our updated data distribution process until all required documents are fully executed. Do not hesitate to contact Lyndsey with any questions you may have. PTSF thanks you for your time and cooperation!

Quarterly Reports

PTSF staff has continually been working through various technical issues to process quarterly reports for accredited trauma centers. We thank you for your patience and understanding as PTSF staff works as quickly as possible to release Q1 2022 reports. Please note that due to the extensiveness of the technical issues being experienced, there will be a delay in the release of quarterly reports for the remainder of 2022.

REMINDER: Resources Posted to PTSF Web Portal

The homepage of the [PTSF Web Portal](#) has been updated with new resources!

1. Policy TO-100 and Taxonomy Educational Webinar (mp4 and pdf)
2. PA V5 Interface Best Practices
3. PA CV4 TQIP File Generation Process

Resources such as the *PTOS Manual* and *Outcomes Manual* have also been transitioned from the PTSF website to the Web Portal. PTSF staff will now be updating the home page of the Web Portal regularly to keep you informed of all important information and provide you with educational resources related to accreditation, the trauma registry, and performance improvement.

ESO Customer Support Reminders

ESO Support is available **7 a.m.-7 p.m. CT, Monday-Friday**. For high priority items please call into ESO's Support line at **866-766- 9471 (select option 3)** to connect with a registry technical support representative. If you are not directly connected to a representative, please leave a voicemail and ESO Support will call you back **within one hour**. For lower priority items, place a support ticket by emailing ESO Support at support.ptsf@eso.com.

PTSF staff continues to advocate on behalf of PA Trauma centers when issues regarding ESO customer support arise. Please continue to copy Lyndsey (ldiehl@ptsf.org) on support tickets submitted to ESO Support and provide the assigned case #. This will provide PTSF with the information needed to discuss any concerns with ESO staff.

COMMITTEE UPDATES

STANDARDS COMMITTEE

Board Committee Chair: Patrick Kim, MD

PTSF Staff Liaison: [Darlene Gondell](#), MSN, RN, CCRN-K, CNRN, TCRN, Manager of Accreditation

The Standards Committee and the PTSF Board of Directors approved the following changes and clarifications to the Adult Level I-III and Pediatric Level I-II Standards of Accreditation.

Standard 2: Capacity & Ability

- Added that every bypass/diversion event must be reviewed by the trauma operations committee.
 - Expected compliance by 1.1.24

Standard 3: Trauma Program Medical Director (TPMD)

- Revised the board certification requirements for TPMDs. TPMDs must be a board certified or board eligible general surgeon. TPMDs can no longer be a general surgeon who is an ACS Fellow with special interest in trauma care.

- Effective immediately
- Clarified that the TPMD must be credentialed by the hospital to provide trauma care.
 - Effective immediately
- Added that Pediatric TPMDs who are board-certified in general surgery but not board-certified/board-eligible in pediatric surgery must maintain Pediatric Advanced Life Support (PALS) certification and have a written affiliation agreement with a pediatric TPMD who is board-certified in pediatric surgery at an accredited Level I pediatric trauma center.
 - Effective Immediately
- Added that Level I TPMD must hold active membership in at least one national trauma organization and have attended at least one meeting during a 3-year period.
 - Expected compliance by 1.1.24
- Added that Level II-III TPMD must hold active membership in at least one regional, state, or national trauma organization and have attended at least one meeting during a 3-year period.
 - Expected compliance by 1.1.24
- Revised that the 36 hours of CME in a 3-year period for Pediatric TPMDs must include 9 hours of pediatric-specific content.
 - Expected compliance by 1.1.24
- Added that TPMDs at hospitals pursuing trauma accreditation undergoing an initial site survey must have 12 hours of trauma-related CME during the reporting period.
 - Expected compliance by 1.1.24
- Clarified that TPMDs must have authority to ensure providers meet all requirements and adhere to institutional standards of practice, and correct deficiencies across departments and/or other administrative units.
 - Effective immediately

Standard 6: Performance Improvement & Patient Safety (PIPS) Program

- Clarified the following, which are effective immediately:
 - The trauma PI program must be independent of the hospital PI program with an organizational chart showing the relationship and bidirectional flow of information between the two programs.
 - The trauma PI program must have a means to report events and actions to the hospital PI program and the hospital PI program must provide feedback and loop closure to the trauma PI program.
 - The trauma PI program must be empowered to identify opportunities for improvement and develop actions to reduce the risk of patient harm, irrespective of the department, service, or provider.
 - the trauma program must use the results of benchmarking data (such as TQIP) to determine whether there are opportunities for improvement in patient care and registry data quality.
 - Pa V5 Outcomes must be utilized for documenting event identification, analysis, verification, corrective actions, loop closure and strategies for sustained improvement measured over time.
 - Trauma Centers with both adult and pediatric accredited program must have separate adult and pediatric trauma multidisciplinary PI meetings with distinct minutes.

- Revised the requirements for the trauma PI Plan. Expected compliance by 1.1.24.
 - Added that there must be an organizational chart demonstrating the structure of the trauma PIPS process, with a clearly defined relationship to the hospital PI program.
 - Clarified the trauma PIPS program must identify events from all phases of care from prehospital care to hospital discharge.
 - Clarified the use of PI indicator, opportunities for improvement, hospital events and audit filters definitions in the PTOS Manual and Outcomes Manual.
 - Added that each level of review must be defined, including which cases are reviewed at that level, who performs the review at that level and when cases can be closed or advanced to the next level of review.
 - Added that the Multidisciplinary PIPS Committee must be defined, including membership and responsibilities.
 - Clarified that action plan development and issue resolution (loop closure) must each be distinctively included in the trauma PIPS Plan.
 - Added the outline of an annual process for identification of priority areas for PI, based on audit filters, event reviews, and benchmarking reports, with the requirement that priority focus areas be data driven.
- Added PI specifics for non-surgical admissions (NSA). NSA with surgical consultation, an ISS ≤ 9 , or without other identified opportunities for improvement may be closed in primary review, however NSA without surgical consultation, an ISS > 9 , or identified opportunities for improvement must, at a minimum, be reviewed by the TPMD in secondary review. Includes the recommendation of utilization of the Nelson tool to review NSA.
 - Expected compliance by 1.1.24
- Added that all traumatic injury related mortality (DOA, died in ED or inpatient, and withdrawal of life-sustaining care) must be reviewed, and classified for potential opportunities for improvement (OFI). Best practice is for review at tertiary level, however at a minimum those with OFI must go to tertiary level while those without OFI can go to secondary review. The categories include event/mortality with an OFI, event/mortality without an OFI, and undetermined OFI. A death should be designated as “mortality with OFI” if any of the following criteria are met: anatomic injury or combination of severe injuries but may have been survivable under optimal conditions; standard protocols were not followed, possibly resulting in unfavorable consequences; provider care was suboptimal. Includes the recommendation to review patients discharged to hospice to ensure there were no OFI in care that might have significantly changed the clinical course that ultimately led to the decision for hospice care.
 - This is an addition to the Standards but a clarification from the Outcomes Manual
 - Effective immediately

Standard 10: Physicians

- Revised requirements for board certification/board eligibility. At Level I & II Trauma Centers, board certification/board eligibility in the appropriate specialty board is required for Anesthesiology, Emergency Medicine, General Surgery, Neurosurgery, Orthopedic Surgery and Radiology. Other surgical and non-surgical specialties must be a board certified or board eligible physician with credentialed expertise (privileges at the institution through the institution’s credentialing process for the specialty) in the specific specialty. At Level III Trauma Centers, board certification/board eligibility is required for Emergency Medicine, General Surgery and Orthopedic Surgery.
 - Effective immediately

- Revised the requirement from Microvascular Surgery to Soft Tissue Coverage Expertise at Level I and II Trauma Centers. At Level I Trauma Centers the provider with soft tissue coverage expertise must be capable to address comprehensive soft tissue coverage of wounds, including microvascular expertise for free flaps, all open fractures, soft tissue coverage of a mangled extremity, and soft tissue defects of the head and neck. At Level II Trauma Centers there must be soft tissue coverage expertise 24/7/365, however it is acceptable to transfer highly complex/low-volume patients. If a Level II Trauma Center will transfer highly complex/low-volume patients, then a transfer plan and PIPS review of all patients transferred must be in place.
 - Effective immediately

Standard 22: Laboratory & Blood Bank

- Clarified that the blood bank in-house supplies must be based on the needs of the trauma center.
 - Effective Immediately

These changes are a product of the ongoing PTSF Standards Committee process of reviewing the American College of Surgeons' (ACS) updated publication of the Resources for Optimal Care of the Injured Patient and updating the PTSF Standards. This process will take time and will be completed across multiple Standards Committee Meetings and Board Meetings. Pennsylvania Trauma Centers do not need to make any changes at their institution based on the updated ACS Manual. Any update in the PTSF Standards of Accreditation and the timeframe for compliance will be communicated to all Pennsylvania Trauma Centers in future Board Updates.

The revised Standards of Accreditation will be available on the PTSF web site (dated 10.1.2022) with additional details. A presentation on the updated PTSF Standards and the process for incorporating the ACS updated Resources for Optimal Care of the Injured Patient will occur during the PTSF Annual Fall Conference on October 6th and 7th. Please contact Darlene Gondell at dgondell@ptsf.org with any questions or comments. Requests for Standards Committee topic discussion (for example, suggested new standard or clarification of current standard) should be submitted via this [form](#).

PIPS COMMITTEE

Committee Chair: Richard Lopez, DO

PTSF Staff Liaison: [Rebecca Geyer](#), MSN, RN, TCRN, Director of Performance Improvement

The PIPS Committee, Trauma Registry Committee and PTSF Board of Directors approved the following changes:

- **SBIRT Data Hierarchy** - trauma centers must create a data hierarchy, specifically for the SBIRT data elements.
- **SBIRT Data Elements** - three new data elements have been created and will be added to the PTOS Data Dictionary, as well as to the Collector software to abstract core elements on SBIRT Data. Software updates are anticipated with the end-of-year updates by ESO.
- **Audit Filters 4a, 4b and 5**- these audit filters have been updated to pertain to *trauma alert patients* (defined as an activated patient with full team resuscitation). Additionally, the endpoint of these audit filters has been further defined as ceasing when a provider order extends the frequency of vitals (or neuro documentation) to greater than hourly. After that provider order, the patient no longer falls into these audit filters and should be assessed for adequate monitoring and nursing documentation as indicated by the severity of patient status. It is recommended to use OFI: Monitoring for any additional OFIs related to nursing documentation, vital signs, neuro documentation, etc. at that point. Software updates are anticipated with the end-of-year updates by ESO.

The PIPS Committee and PTSF Board of Directors approved the following change to the Outcomes Manual:

- **Transfer: Double Transfer**- this new OFI will be added to the Outcomes Manual with end of year updates and the

software update will be submitted to ESO for update in the PaV5 software with their end of year updates. This OFI should be used to track patients that are transferred into your facility, and then transferred out.

The next PIPS Committee meeting is Monday, November 7, 2022. Please send requests for discussion to Rebecca Geyer.

TRAUMA REGISTRY COMMITTEE

Board Committee Chair: Deborah Chappel, MSN, RN, CCRN-K

PTSF Staff Liaison: [Gabrielle Wenger](#) RHIT, CPC, CAISS, CSTR & [Lyndsey Diehl](#), RHIA, CHDA, CSTR

The Trauma Registry Committee and PTSF Board of Directors approved the following changes to PTOS/Collector. These changes are effective January 1, 2023 and will be reflected in the 2023 PTOS Manual and are anticipated to be included within the 2023 Collector software.

1. Revise PTOS Data Dictionary to include the statement that trauma centers must create a Data Hierarchy, specifically for SBIRT data elements.
2. Add three data elements to PTOS Data Dictionary to track SBIRT
 - o Was a screen completed to evaluate for substance abuse?
 - o Was the screen positive?
 - o Was a brief intervention offered?
3. Revise Audit Filters 4a, 4b, and 5
 - o Audit Filters 4a, 4b, and 5 involve tracking of hourly documentation (vital signs and sequential neurological documentation). The approved revisions require additional changes to PTOS:
 - Revision of the data element “Date and time of order to change vital signs to greater than one hour”
 - Addition of a data element to capture the date and time of order to change sequential neurological documentation to greater than one hour
 - Updating of the PTOS data elements used within these audit filters
4. Implementation of appropriate 2023 NTDS changes within the PTOS dataset
5. Retire the Sign of Life Data Element
6. Revise Audit Filters 3a, 16, and 20
 - o “Signs of Life” (retired above) will be replaced with the TQIP definition of dead-on arrival (DOA) within these audit filter criteria
7. Update language within the Procedures section of the PTOS Manual
8. Add “sutures” to Appendix 11/List B of the PTOS Manual

During the 2022 Fall Conference, a detailed review of all changes to PTOS/Collector for 2023 admissions was presented. A copy of the slides can be accessed on the homepage of the PTSF Web Portal at: <https://ptsf.centraisiteportal.com/> under Collector/Cv4 Additional Resources. The next Trauma Registry Committee meeting will be held November 17, 2022. Please send any requests for discussion to Gabrielle Wenger.

POLICY AND PROCEDURE COMMITTEE

Board Committee Chair: Jo Ann Miller, MSN, FNP-C, CCRN, TCRN

PTSF Staff Liaison: [Anna Over](#), MSN, RN, TCRN, EMT-I

The PTSF Policy & Procedure Committee, as well as the PTSF Board of Directors, recently approved a new policy [AC-141](#):

[Level I, II & III Virtual Survey Process](#). The purpose of the new policy is to describe the process by which a Level I, II or III Trauma Center may determine eligibility and elect to have a virtual survey, in lieu of an on-site survey. Eligible centers are those undergoing a site survey in 2024 or later, who also meet the following criteria:

- A. The Trauma Center has been continuously accredited by PTSF for \geq ten (10) years.
- B. The previous deliberation outcome granted the Trauma Center a 3-year accreditation certificate.
 - i. This also applies to Trauma Centers on a 3-year accreditation cycle with a 1-year extension.
- C. The last Accreditation Report does not contain any significant issues in the following categories:
 - i. Clinical Care
 - ii. Performance Improvement and Patient Safety Process (lack of issue identification, actions, or event resolution)
 - iii. Commitment
- D. The previous survey was completed on-site.

If eligible, a PTSF staff member will reach out to your facility. For more information, please review the [Virtual Survey Guidebook](#) or contact a member of the PTSF Accreditation Team.

PTSF ANNUAL FALL CONFERENCE UPDATE

Thank you to all who attended the PTSF Conference on October 6th and 7th. We had over 250 registrants! All registrants will be receiving an email from KnowledgeConnex outlining how to access Continuing Education for Physicians, Nurses, and Registrars.

- Registrants will have free access to audio recordings and PowerPoints from the conference which will be outlined by KnowledgeConnex. (Anticipated date of availability is 10/24.) For those who did not register, you can listen to all the recordings for a \$50.00 fee.
- Several handouts are available on the PTSF Website in the “resources” area under the 2022 PTSF Fall Conference tab including research abstracts from the PTOS and Pina Templeton Injury Prevention Competition, CME information, trauma hours certificates, and a CSTR certificate.
- A copy of the slides presented during the 2023 Collector Update session at the PTSF Fall Conference can be accessed on the homepage of the PTSF Web Portal at <https://ptsf.centralsiteportal.com/> under Collector/Cv4 Additional Resources.
- Photos from the conference are available for free download at:
<https://www.rogerthatphotography.com/Pennsylvania-Trauma-Systems-Foundation/PTSF-Annual-Fall-Conference-2022/n-jtgk5s>

Congratulations to the winners of the PTOS Research Competition!

This annual competition is hosted by the PTSF Research Committee. Competitors submit an abstract noting research completed using PTOS data during the prior year. Monetary awards of \$500, \$300, and \$200 are given for 1st, 2nd, and 3rd prize winners. Judging occurs by members of the PTSF Research Committee at the time of the live presentation at the PTSF conference. A strict Conflict of Interest policy is in effect.



First Place: Daniel Muchnok, NRP - *Association of Prehospital Needle Decompression with Mortality Among Injured Patients Requiring Emergency Chest Decompression.* University of Pittsburgh School of Medicine



Second Place: Shivayogi V. Hiremath, PhD - *Evaluating Associations between Trauma-related Characteristics and Functional Recovery in Individuals with Spinal Cord Injury,* Temple University Hospital



3rd Place: Anna E. Garcia Whitlock, MD - *Longitudinal Patient Reported Outcomes in Trauma and the COVID-19 Pandemic.* Perelman School of Medicine, University of Pennsylvania

Congratulations to the winner of the best PTOS Data Request Competition!

This annual competition is hosted by the PTSF Research Committee. Any Trauma Center researcher who submits a PTOS data application is automatically eligible to compete. Judging occurs by members of the PTSF Research Committee in a blinded fashion utilizing the Conflict-of-Interest policy through an online scoring tool. The winner receives a cash prize of \$1000 and is automatically eligible to compete in the PTOS completed research competition the following year. The 2022 winner is:



L. Grier Arthur, III, MD, FACS, FAAP: *Development and Evaluation of a Trauma Triage Algorithm – A database Study*

Principle Investigator:

L. Grier Arthur, III MD, FACS, FAAP

Program Director of Pediatric Surgery Fellowship

Associate Trauma Director

Director of Undergraduate and Graduate Surgical Training

Associate Professor of Surgery, Division of Pediatric General, Thoracic, and Minimally Invasive Surgery, St. Christopher's Hospital for Children

Congratulations to the winner of the Pina Templeton Injury Prevention Award!

This annual competition in honor of Dr. Pina Templeton, a strong supporter of PA Injury Prevention, is hosted jointly by the American Trauma Society, PA Division and the PTSF Research Committee. Competitors present injury prevention research or programs live at the PTSF Conference. Judging occurs by members of the ATS-PA Board of Directors and PTSF Research Committee in a blinded fashion utilizing the Conflict-of-Interest policy through an online scoring tool. The winner receives a cash prize of \$1000. The 2022 winner is:



Rodney Babb, Violence Recovery Specialist, Penn Medicine
The Penn Trauma Violence Intervention Program: The First Year

All research abstracts from the competition are saved on the PTSF website in the Resources area for the 2022 PTSF Fall Conference.

EDUCATION

NEW TRAUMA PROGRAM NURSE LEADER ORIENTATION: NOVEMBER 9, 2022

Nurse leaders, new to their roles in both accredited trauma centers and hospitals pursuing trauma accreditation, are welcome to join us for the bi-annual *PTSF New Trauma Program Nurse Leader Orientation* to be held virtually on Wednesday, November 9, from 10 a.m. - 3 p.m. The course, taught by a variety of PTSF staff members, highlights National Trauma Organizations and Resources, the American College of Surgeons (ACS), the PTSF, Trauma Registry, Trauma Performance Improvement, Site Survey & Accreditation, Trauma Program Resources, and “Hot Topics in Trauma.” The primary audience includes new Trauma Program Coordinators/Managers, Trauma Program Directors, Performance Improvement Coordinators, Nurse Registrars, Educators, and other nurse leaders working with the trauma program. [Click Here](#) to Register!

If you have any questions about New Trauma Program Nurse Leader Orientation please contact Anna Over, Manager of Trauma Center Development at aover@ptsf.org.

THE TRAUMA TERTIARY SURVEY

The PTSF Level III/IV Workgroup recently welcomed Dr. Chuck Bendas, Surgical Intensivist and Traumatologist from the St. Luke’s University Health Network, for a presentation titled “The Trauma Tertiary Survey.” The presentation discussed the purpose and importance of the trauma tertiary survey, how to properly conduct and document the survey, as well as other program and quality improvement that pair well with the tertiary survey process. This education is now available on the [PTSF Knowledge Connex](#) platform for all level trauma centers to view. Thank you Dr. Bendas for sharing your expertise and knowledge with our state!

PI PART 1: THEORY & OVERVIEW

The PTSF recently posted a recorded webinar titled, PI Part 1: Theory & Overview. This course is designed specifically for PI Coordinators, Trauma Program Managers and anyone working in PI. It is especially helpful if you’re new to PI but is also a great refresher for anyone that has been working in PI for a while. This course covers an overview of trauma PI, and how to use our software to document your PI initiatives. The course is approximately 90 minutes long and can be viewed at your convenience. Registration is through KnowledgeConnex and can be accessed [here](#). It is password protected, so please contact Rebecca Geyer (rgeyer@ptsf.org) for the password to access this course. Instructions on how to register on KnowledgeConnex can be found [here](#).

NELSON TOOL REPORTING

The PTSF has recently posted a recorded webinar entitled Nelson Tool Reporting. This course is designed specifically for Trauma Registrars, PI Coordinators, Trauma Program Managers, and anyone working in data analysis. This three-part course describes the use of the Nelson scoring algorithm for review of nonsurgical or non-trauma service patients. Session two provides instruction on building a report in PA-specific Collector v4 report writer to utilize the Nelson scoring tool. Session three provides instruction on building a macro for practical application of your report to support the PI review. Registration is through KnowledgeConnex and can be accessed [here](#). This course is password protected. Please contact [Lyndsey Diehl](#) or [Gabrielle Wenger](#) for the Special Access Code. Instructions on how to register on KnowledgeConnex can be found [here](#).

STATE, NATIONAL, AND INTERNATIONAL CONFERENCES/MEETINGS

Save the Date . . . for upcoming events. Remember to check these organization's websites—dates are subject to change based on the latest COVID-19 guidance. A complete [listing](#) [2022 and future dates] of local, state, national, and international meetings is posted to the website and updated monthly.

October 12-15, 2022 – [Orthopedic Trauma Association \(OTA\) Annual Meeting](#)

October 16-20, 2022 – [American College of Surgeons \(ACS\) Clinical Congress](#)

November 2-5, 2022 – [Pediatric Trauma Society \(PTS\) Annual Meeting](#)

December 11-13, 2022 – [American College of Surgeons \(ACS\) Trauma Quality Improvement Program \(TQIP\) Conference](#)

PTSF DIRECTORY

The PTSF maintains a directory for Accredited Trauma Centers and hospitals pursuing accreditation. The directory is distributed twice each year, to all trauma programs, in January and July. It is important to carefully review contact information to assure that the PTSF office maintains the most accurate and up-to-date email groups. Please submit any changes for your hospital's directory page as soon as they occur to [Courtney Moraites](#).

PTSF COMMUNICATIONS FROM HOSPITALS

We encourage hospitals to **email all communications** to the appropriate staff person at the PTSF office in lieu of paper mail to expedite communications and avoid delays with the postal service. Exceptions include trauma center payments which may be mailed to the address noted below.

PTSF Mailing Address

Pennsylvania Trauma Systems Foundation
275 Cumberland Parkway, #234
Mechanicsburg, PA 17055