Virtual Visit Documentation Requirements

All data and materials must represent trauma activities during the review period consistent with the reporting year. The program documentation must be provided to the reviewers 14 days prior to the virtual visit via the file transfer application. Program documents must be converted into a portable document format (PDF), organized into one document, and bookmarked based on the categories below. This process replaces the binders required for on-site verification visits.

Trauma Service

- ☐ Trauma guidelines manual, including, but not limited to:
    - ☐ Guidelines/protocols for attending surgeon response to lower activation patients requiring hospital admission (CD 5-16) (*Level III only*)
    - ☐ Non-surgical admission guideline (*Level III only*)
    - ☐ Transfer agreements
    - ☐ Emergency Department resuscitation guidelines/protocols for trauma patients
- ☐ Organ procurement policy
- ☐ Review period report that demonstrates ETOH screening of at least 80% of the injured patients that were admitted with a stay of >24 hours and able to participate with the screening (dashboard acceptable)
- ☐ Over/under TTA analysis
- ☐ Current Ongoing Professional Practice Evaluation form used for trauma panelists, subspecialists, and APPs involved in trauma care

Neurosurgery (*Level III Only*)

- ☐ Neurosurgery guidelines/protocols
- ☐ Call and backup call schedules for the last month of the reporting year
- ☐ The neuro-trauma diversion and contingency plan
- ☐ Guideline for placement of ICP monitors in patients with severe TBI

Orthopedic Surgery (*Level III Only*)

- ☐ Orthopedic surgery guidelines/protocols

Radiology

- ☐ Policy on the process of radiologists notifying physician of critical readings/information and changes in interpretation of radiographs, misreads, and missed injuries

Trauma Registry

- ☐ Trauma registry policy which should include:
    - ☐ At a minimum, 80 percent of cases entered within 60 days of discharge
    - ☐ Use of current NTDB data elements
    - ☐ Quarterly data submission to the Michigan Department of Health and Human Services
- ☐ Chart audit process

Performance Improvement and Patient Safety (PIPS)

- ☐ PI Plan (i.e. levels of review, audit filters, etc.)
- ☐ Minutes of trauma PI meetings during the review period
- ☐ Attendance records for the peer review meetings during the review period
- ☐ Documentation of two or three PI initiatives during the review period

Community Outreach/Injury Prevention

- ☐ Two or three prevention activities (attaching flyers, event schedule, clips/picture from PPT presentation)