

A Clinical Audit on The Implementation of The Trauma Activation Protocol in A Non-Lead Hospital, Hospital Bukit Mertajam



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INTRODUCTION

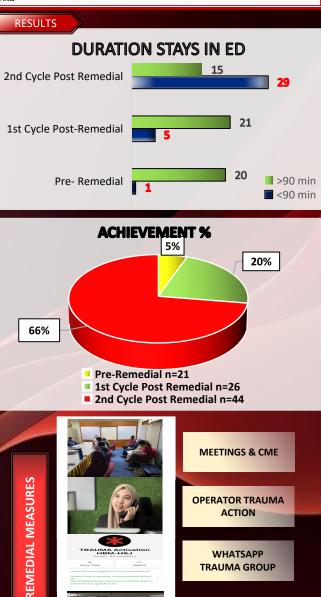
Trauma remains the leading cause of mortality and morbidity for younger generation in Malaysia. Activation of trauma team enables a horizontal task to be assigned to each team to facilitate management of polytrauma. Hospital Bukit Mertajam is a non-lead hospital and has implemented the trauma activation protocol for all the polytrauma patients. Our aim of this clinical audit is to evaluate the adherence to the target time of 90 minutes in trauma activation protocol for all the patients to be transferred out to the lead hospital.

OBJECTIVES

- Improve the quality care of trauma patient
- Provide an organized and systematic rapid resuscitation
- To reduce time to diagnostics and definitive treatment

METHODOLOGY

This is a prospective study using data from Trauma Activation KPI Time Tracker Data from July 2022 until October 2023. After observing the pre-remedial data, we came out with the strategies of trauma activation after multiple meetings with stakeholders from lead and non lead hospital. Regular trainings between staffs had been done to ensure the adherence to the protocol.Remedial measures were done in January 2023 onwards.Time based data collection from the registration of the polytrauma patient until the time of ambulance rolling to transfer out the patient to the lead hospital were analyzed using Microsoft Excel.



DISCUSSION

Polytrauma management is complex which requires multidisciplinary team effort to ensure the patient receives the treatment at the right time and at the right facilities and specialties are available. Implementation of trauma activation protocol in Hospital Bukit Mertajam has greatly improved the quality of trauma patients in district hospital.



REFERENCE:

 KPI CLUSTER SEBERANG PRAI_X0002_ -Polytrauma patient referred to lead hospital within 90 min of arrival to ED in non-lead hospital
Significantly reduce time to initiation of lifesaving intervention. (Bernhard M et al 2007)
Reduce morbidity and mortality (Kesinger MR et al 2014)
A.Decreased ED length of stay (Wurmb TE et al 2008)

IMPLEMENTING

LOCUM SYSTEM