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Area	Trauma Surgical Critical Care
Applicability	Erlanger Health - Baroness

Trauma Orthopedic Consult Required Response Times and Encumbered Contingency Plan Policy

1. Policy Statement:

To develop and provide a systematic and safe approach to the care of the adult trauma patient who requires consultation from the orthopedic surgical subspecialty

2. Who Should Read This Policy?

Orthopedic Residents, Orthopedic Attendings and Orthopedic Trauma Fellow

3. Purpose

To develop and provide a systematic and safe approach to the care of the adult trauma patient who requires orthopedic consultation or orthopedic intervention and to ensure ortho-trauma care is continuously available for all trauma patients with orthopedic injuries.

4. Definitions

5. The Policy

A. Response Policy/ Criteria for immediate response (in person 30 minutes or less from time of consult):

- Open fractures
- Fractures/Dislocations with risk of avascular necrosis (e.g. femoral head or talus)
- Hemodynamically unstable, secondary to pelvic fractures

- Vascular compromise related to a fracture or dislocation
- Suspected extremity compartment syndrome
- Trauma Surgeon discretion
    - The orthopedic surgeon must be involved in the clinical decision-making for care of these patients. Any non-urgent consult made by the trauma service will be seen by the orthopedic subspecialty in 24 hours or less.

B. Encumbered Contingency Policy/ Procedure

1. When the on-call orthopedist is encumbered and a patient requires urgent orthopedic intervention:

    - Orthopedic Call Schedule:
      A published orthopedic call schedule is distributed monthly to facilitate easy identification of orthopedist availability.
    - Ortho-trauma Contingency Plan:
      The Ortho-trauma Contingency Plan will be implemented when the orthopedist on call becomes encumbered and is not available to see the ortho-trauma patient in a timely manner.
        1. The back-up orthopedic surgeon(s) will be called.
        2. If the back-up orthopedic surgeon is encumbered an attempt will be made to contact the remaining orthopedic surgeons from the call panel to provide the urgent orthosurgical intervention. This process will not exceed 30 minutes.
        3. If unable to obtain appropriate orthopedic surgeon response the trauma attending will initiate transfer of the patient to the nearest level 1 trauma center with which there is a transfer agreement in place for such events (Vanderbilt)/ The trauma team will directly contact the accepting facility to assist with an expeditious transfer.
    - Credentialing Requirements of the Trauma Surgeon to Provide Initial Evaluation and Stabilization of the Ortho-trauma Patient:
        1. The Trauma Medical Director ensures the trauma surgeon meets the credentialing criteria to perform initial evaluation and stabilization of the orthopedic injured patient.
        2. Credentialing Criteria include:
            - Current ATLS certification
            - Actively participates in Trauma Call

References:

1. Gustilo RB, Anderson JT. Prevention of infection in the treatment of 1,025 open fractures of long bones: Retrospective and prospective analyses. J Bone Joint Surg Am. 1976;58:453-458.
2. Bratzler DW, Houck PM, Surgical Infection Prevention Guidelines Writers Workgroup, et al. Antimicrobial prophylaxis for surgery: An advisory statement from the National Surgical Infection Prevention Project. Clin Infect Dis. 2004;38:1706-1715.
3. Pollak AN, Jones AL, Castillo RC, et al. The relationship between time to surgical debridement and incidence of infection after open high-energy lower extremity trauma. J Bone Joint Surg Am. 2010;92:7-15.
4. Higgins TF; Klatt JB; Beals TC. Lower Extremity Assessment Project (LEAP): The best available evidence on limb-threatening lower extremity trauma. Orthop Clin North Am. 2010; 41(2):233-239.
5. Matsen FA III, Winquist RA, Krugmire RB Jr. Diagnosis and management of compartmental syndromes. J Bone Joint Surg Am. 1980;62:286-291.
6. American College of Surgeons, Committee on Trauma. (2022). Resources for optimal care of the injured patient.

Approval Signatures

Step Description	Approver	Date
VP Approval	Jessica Holladay: VP & ACNO Surg & Trauma Svcs	04/2025
Medical Executive Committee	Alisa Bolt: Medical Staff Svcs Manager	04/2025
Trauma Services Committee Approval	Stephanie Spain: Trauma Prgm Mgr Adult	03/2025
	Stephanie Spain: Trauma Prgm Mgr Adult	03/2025

Applicability

Erlanger Health - Baroness