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Area Trauma Surgical
Critical Care

Applicability Erlanger Health -
Baroness

Trauma Transfer to Ortho Service

1. Policy Statement:

To develop and provide a systematic and safe approach to the care of the adult trauma patient who requires transferring from the general trauma service to the orthopedic trauma service.

2. Who Should Read this Policy:

Trauma Surgeons, Orthopedic Surgeons, surgery residents, and orthopedic residents and the associated midlevel providers.

3. Purpose

The need for a systematic and safe approach to the care of the adult trauma patient who requires transferring from the general trauma service to the orthopedic trauma service.

4. Definitions

5. The Policy:

It is often difficult to reliably determine the patient's injuries prior to transfer to Erlanger Health (EH). Therefore, patients can be transferred from the general trauma service to the orthopedic trauma service when all of the following are met:

1. General trauma issues are resolved.
2. Isolated orthopedic injuries require continued hospitalization.
3. Trauma attending deems patient cleared and ready for transfer to orthopedic service.

4. Orthopedic team writes order to transfer patient to their service.

NOTE: Admission of patients with orthopedic injuries should adhere to the following recommendations:

- Trauma patients who have been evaluated by an Erlanger Emergency Department physician and found to have orthopedic injuries without significant additional injuries do not require further evaluation or admission by the Trauma Surgery Service. These patients should be admitted by the appropriate service.
- Trauma patients who have been evaluated by the Trauma Surgery Service and found to have orthopedic injuries without significant additional traumatic injuries should be admitted by the appropriate service.
- If significant non-orthopedic related injuries or problems are identified during the course of evaluation and treatment by the Orthopedic Service, consultation by the Trauma Surgery Service should be requested if appropriate.
- Pelvic fractures and acetabular fractures resulting from high-energy blunt trauma that require admission for at least 24 hours will be admitted to the Trauma Surgery Service. If the patient's condition remains stable but they require ongoing hospitalization for pain control or rehab evaluation, then transfer to the Orthopedic Service is appropriate per above parameters.
- Service transfers will be approved by attending or chief resident to chief resident direct communication before any change of admission is made in the medical record.
- It's the recipient service's responsibility to update EPIC with the treatment team change.
- The Orthopedic service will continue to co-manage the patient until discharge disposition has been finalized.

Approval Signatures

Step Description	Approver	Date
COO	John Winks: Executive Vice President-COO	12/2024
Medical Executive Committee	Alisa Bolt: Medical Staff Svcs Manager	11/2024
Trauma Services Committee Approval	Stephanie Spain: Trauma Prgm Mgr Adult	09/2024
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Applicability

Erlanger Health - Baroness

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