



2018 TRAUMA ANNUAL REPORT

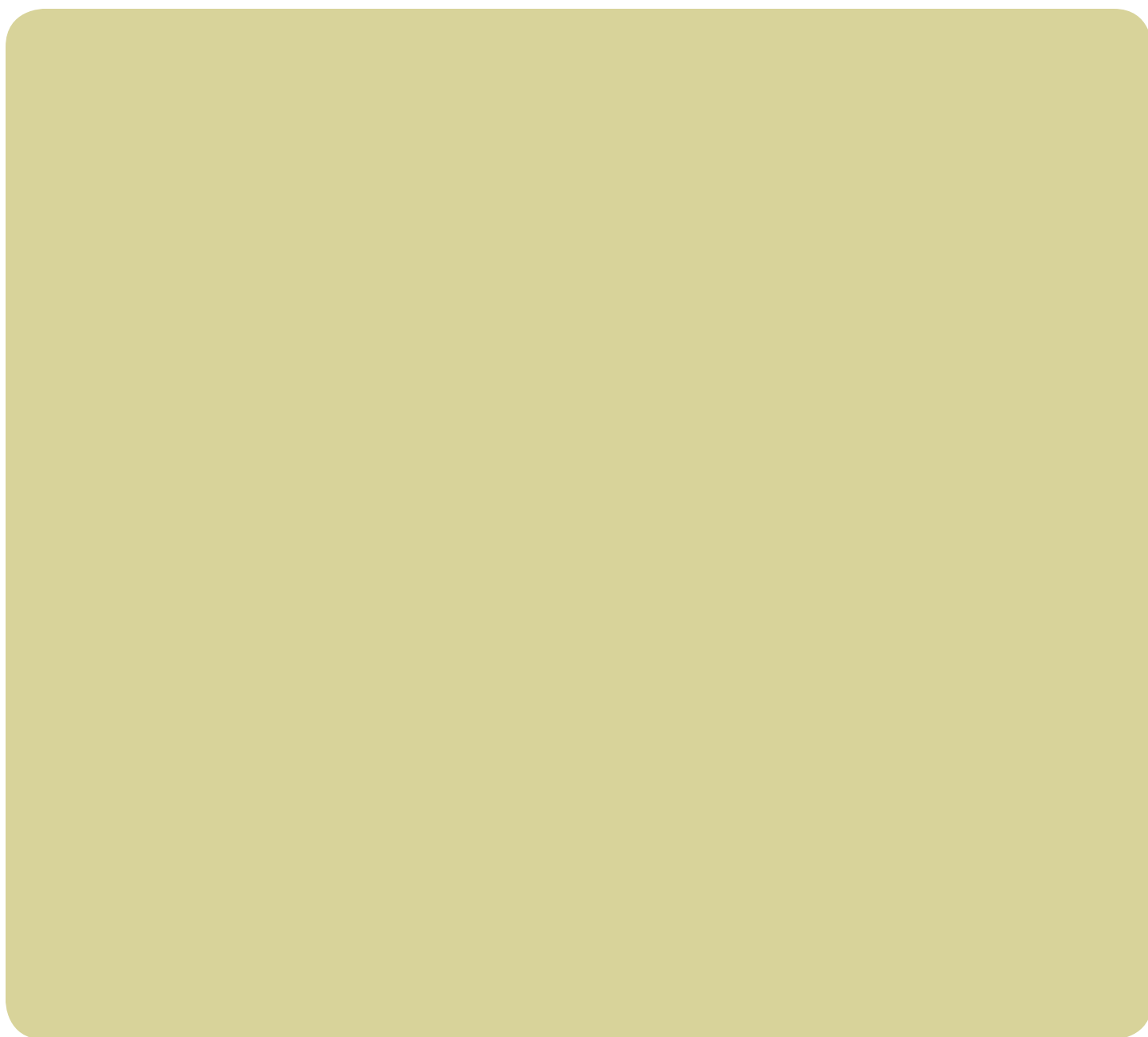


Table of Contents

Letter from CEO	3
What is a Level II Trauma Center?	4
NGMC Trauma Service Area	5
Distribution of Patients by Home County	6
Trauma & Acute Care Surgeons	7
Trauma & Acute Care Surgery Advanced Practice Providers	8
Multidisciplinary Trauma Liaison Team	9
Trauma & Acute Care Surgery Operations Staff	10
Trauma Survivor Story	11-12
Volume and Statistics	13-21
Injury Prevention and Outreach	22

This report contains volume and statistical data from October 1, 2017 through September 30, 2018.

Letter from CEO

According to the Centers for Disease Control and Prevention, injury is the leading cause of death for Americans 44 years of age and younger. In fact, injury is the second leading cause of death across all age groups. The good news is that receiving care at a trauma center can decrease the chance that an injury might cause death by as much as 25 percent.

As the only designated Level II trauma center in northeast Georgia, Northeast Georgia Medical Center (NGMC) Gainesville is ready to rise to any occasion and proud to serve our community in this capacity. I rest easy knowing that we have a top caliber trauma center right here at home.

From our double-boarded trauma surgeons to a host of specialty physicians and emergency services staff, our multidisciplinary team is ready to care for severely injured patients at a moment's notice. In 2018, NGMC evaluated and treated over 1,800 traumatically injured patients, many of whom survived as a result of the collaborative efforts of our trauma team.

Although our top concern is injury prevention, we know that accidents happen and injuries occur. That's why NGMC's trauma program focuses heavily on community education – using data to target our efforts and reaching thousands per year. We know that our work has meaning if we can help prevent even one fall or motor vehicle crash.

This 2018 annual trauma report allows us to highlight NGMC's trauma program. Enjoy, stay safe and thank you for supporting us on our journey to improve the health of our community in all we do.

Regards,

Carol H. Burrell

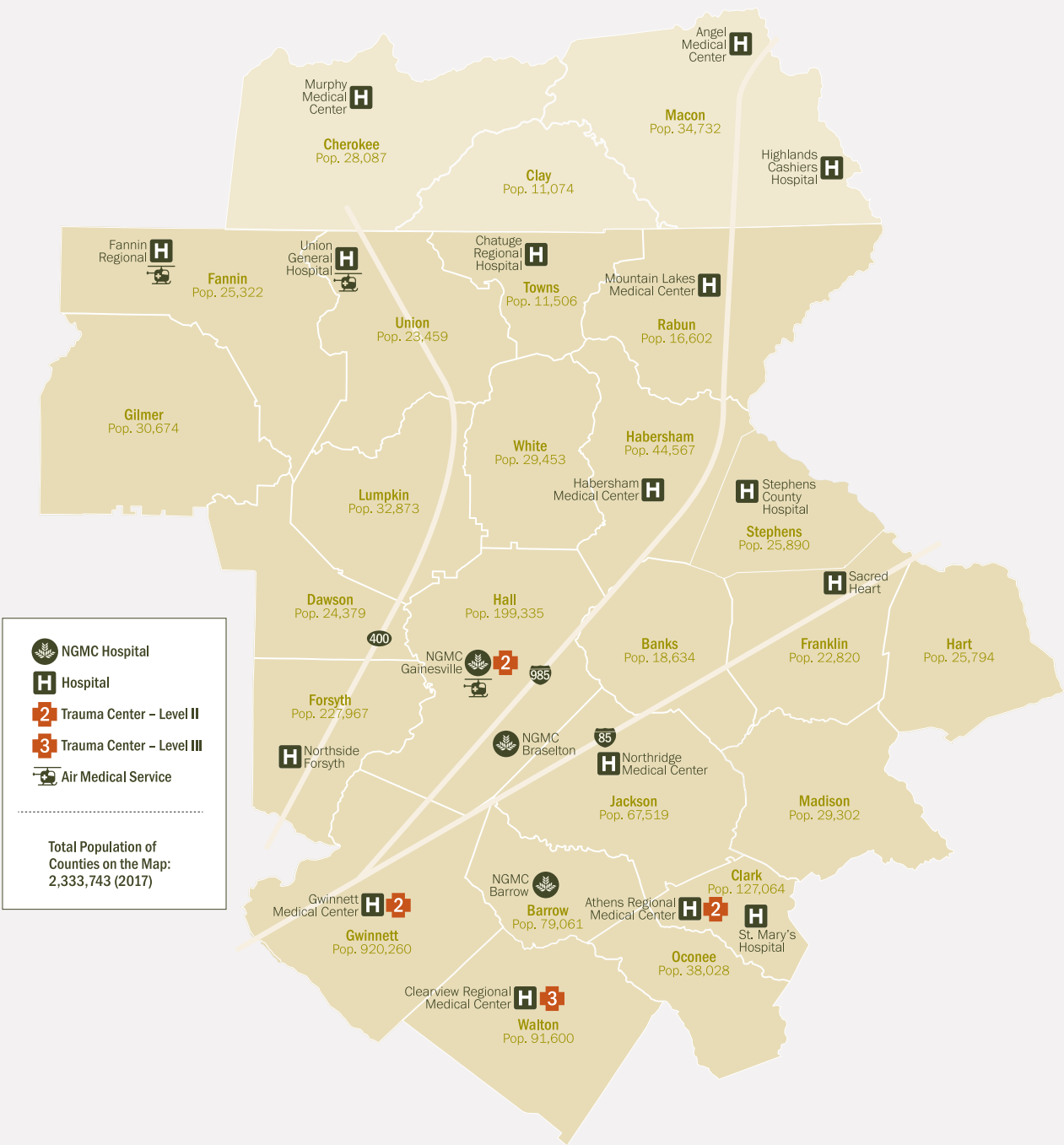
Carol H. Burrell
president and CEO Northeast Georgia Health System

What is a Level II Trauma Center?

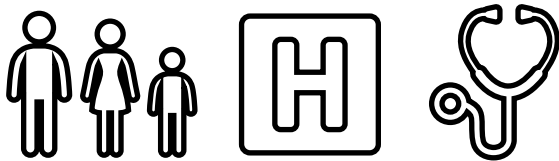
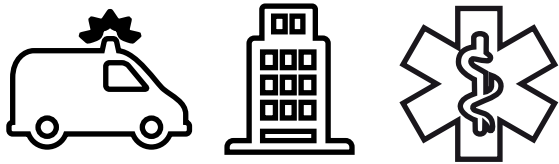
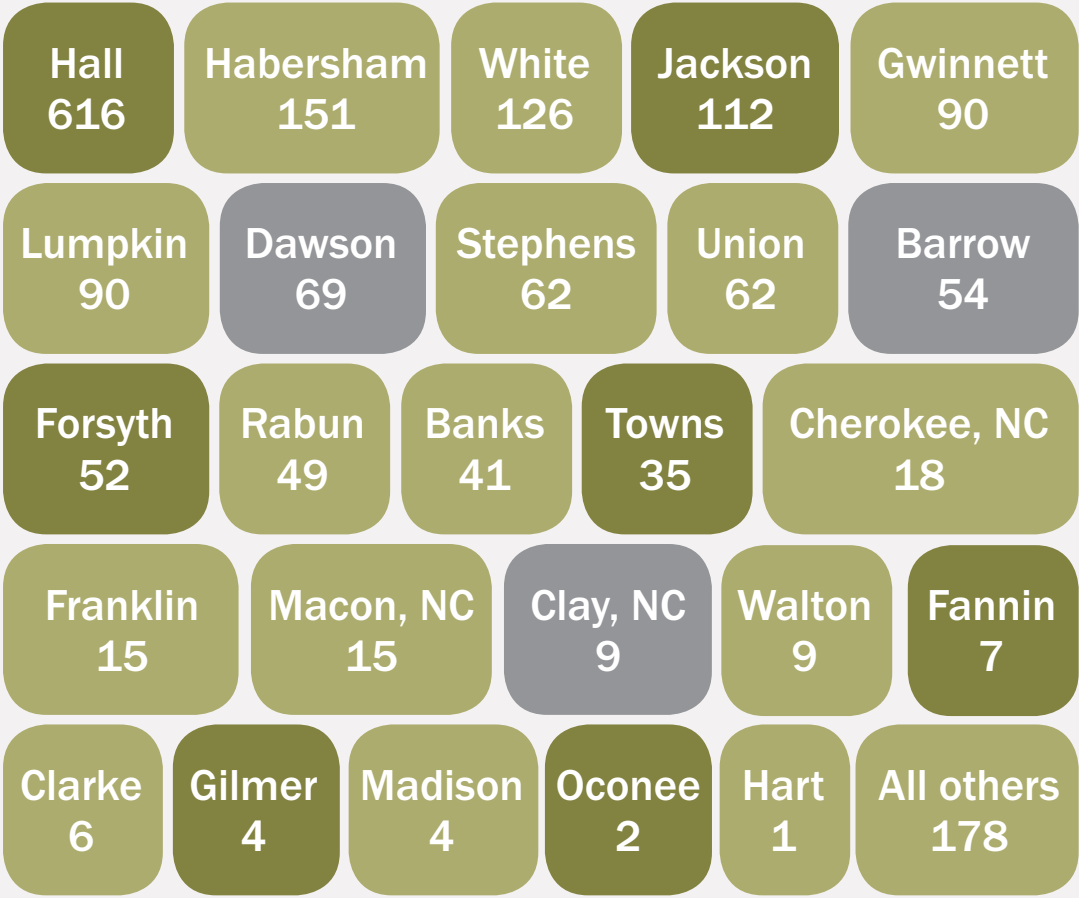
According to the ACS-COT, a Level II trauma center provides the same level of care as a Level I trauma center. The only differences are academics and research. Level I and II trauma centers are required to have 24/7 trauma surgical staff to care for severely injured patients. In addition to the trauma surgeon requirements, Level I and II centers must have all essential specialists and subspecialists to care for injured patients. Nursing and ancillary staff are specially trained for the trauma population. Level I and II trauma centers are required to have a Trauma Program Manager and Trauma Medical Director to oversee the program. In addition, the trauma center must have a robust performance improvement program to assure optimal trauma care is provided.



NGMC Trauma Service Area



Distribution of Patients by Home County



Trauma & Acute Care Surgeons

NGMC has six dedicated trauma surgeons who are dual boarded in general surgery and surgical critical care. These surgeons are located in-house and are available to provide emergent interventions whenever needed.



Charles Richart, MD, FACS, FCCM
Trauma Medical Director



Daniel R. Anderson, MD, FACS



Cecil Brown, MD, FACS



Nathan J. Creel, MD



Brian Gibson, MD



Gregory R. Strauther, MD, FACS

Trauma & Acute Care Surgery Advanced Practice Providers

NGMC is fortunate to have seven advanced practice providers to support our trauma surgeons. Each of these providers has been specially trained to care for the critical needs of our trauma patients.



Kelsey Bradford, AGACNP-BC



Kris Hook, PA



Kyle Gibson, AGACNP-BC



Nicole Moulder, ACNP-BC



Chance Perry, AGACNP-BC



Tonya Scott, AGACNP-BC



Adam Smith, AGACNP-BC



Multidisciplinary Trauma Liaison Team

According to the American College of Surgeons Committee on Trauma (ACS-COT), a trauma center is required to have a multidisciplinary trauma peer review committee made up of liaisons from all of the subspecialty groups that are involved in trauma care. The Multidisciplinary Trauma Peer Review Committee (MTPRC) meets monthly to review trauma cases to assure optimal care was provided. Each liaison provides the expertise needed to fully explore all potential opportunities for improvement. These liaisons also participate on the Multidisciplinary Trauma Systems/Operations Committee (MTSOC), with the goal of improving the systems and processes utilized across the trauma continuum of care, from outlying hospitals to EMS to the trauma center here at NGMC.



Brandon Bruce, MD
Orthopedic Surgery Liaison



Richard Trent, MD
Anesthesia Liaison



Kristin Halligan, MD
Emergency Medicine Liaison



Trevor Hooper, MD
Radiology Liaison



Karl Schultz, MD, FACS, FAANS
Neurosurgery Liaison



Trauma & Acute Care Surgery Operations Staff

NGMC’s trauma program is equipped with essential staff to manage daily operations. Each of these staff members are committed to continuous improvement in trauma care at NGMC.



Angela Gary, MSN, MHA, RN
Executive Director, Trauma & Emergency Services



Jesse Gibson, MBA, BSN, RN
Trauma Program Manager



Lisa Farmer, BA
TACS Administrative Coordinator



Erin Green, MS, BEd
Safe Kids Coordinator



Linda Greene, CSTR
Trauma Registry Coordinator



Denise Hughes, BS, CAISS
Trauma Registrar



Donna Lee, MSN, RN
Trauma Nurse Navigator



Jessica Mantooth, BSN, RN
Trauma Educator



Kathy McDanel, CPC
Trauma Registrar



Maria Silva HIMT
Trauma Registrar



Susan Stone, MSN, RN
Trauma Performance Improvement



Brandon Sullins, BS, NR-PMDC
Trauma Injury Prevention & Outreach Coordinator



Laura Wolf, MA, BSN, RN
Trauma PI Coordinator



Trauma Survivor Story

A traumatic car accident changed Hailey Purdy’s life in an instant. Now 18 years old, she dreams of becoming a speech therapist.

“I know the accident has made me a better person,” said Hailey. “I’m more compassionate and want to help others. The person I am today wouldn’t like the person I was before the accident.”

On June 2, 2018, Hailey Purdy and two friends were driving in Habersham County when a large truck struck the vehicle on the passenger’s side – where Hailey was sitting.

When Habersham EMS arrived to the scene, Hailey was found to be unresponsive. Georgia Air Life 2 was called to fly Hailey to Northeast Georgia Medical Center (NGMC) Gainesville for specialized trauma care as Hailey’s injuries were immediately known to be critical.

Upon arrival to the Emergency Department (ED), Hailey was met by an entire team of trauma professionals. The ED and trauma team carried out a thorough workup and found Hailey to have multiple injuries– including a tibia fracture, multiple open pelvic fractures, two fractured ribs, bilateral pulmonary contusions and a closed head injury.

Hailey was admitted to the Surgical Trauma Intensive Care Unit for close observation, ventilator management and further assessment of her injuries. Her mental status and traumatic brain injury remained the greatest concern, and an MRI of her brain indicated she had a diffuse axonal injury. Her future was uncertain at this time.

Hailey’s mom, Trina Purdy, works for Northeast Georgia Physicians Group in their Orthopedic Trauma and Reconstructive Surgery clinic

as a technician and knows many of the physicians and staff who were caring for Hailey.

“It’s surreal when it happens to you,” said Trina. “I have always loved my job and our patients, but when a traumatic event happens to your daughter, it makes you look at what you do every day differently.”

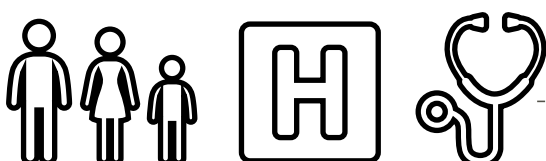
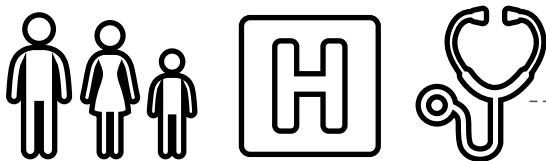
Hailey’s injuries were severe and doctors weren’t sure if Hailey would fully recover. Thankfully, Hailey’s age was a large factor in her ability to heal quickly. After spending twelve days at NGMC Gainesville, Hailey was transferred to the Shepherd Center’s Intensive Care Unit for continued rehabilitation.

Months have passed since the accident, and Hailey continues to heal. She does not remember the accident or much of her rehabilitation and her leg injury still causes her some pain and difficulty functioning. Things that were easy before don’t come as easily now while she is relearning basic skills.

“Honestly, most days are difficult,” said Hailey. “My mom tells me how much I’m improving every day, but it’s still hard for me to see the progress. I’m lucky to be on the road to recovery.”

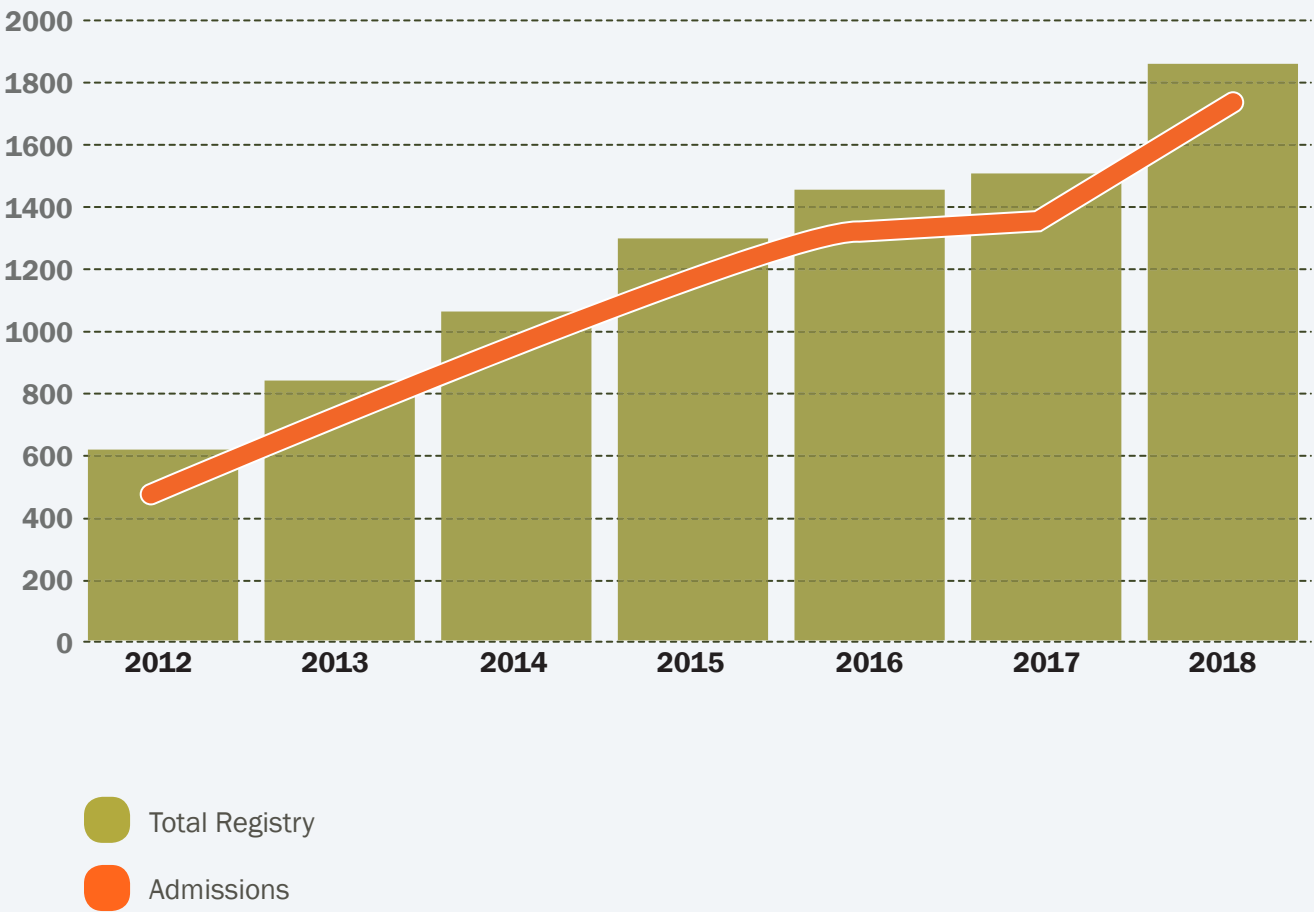
Hailey hopes to attend Lanier Technical College in summer 2019 and plans to transfer to UGA in hopes of becoming a speech therapist one day. She wants to help others who have gone through similar hardships.

“I’m more determined now than I’ve ever been before to attend college,” said Hailey. “I want to make a difference in other people’s lives the way my doctors, nurses and therapists have made a difference in mine.”



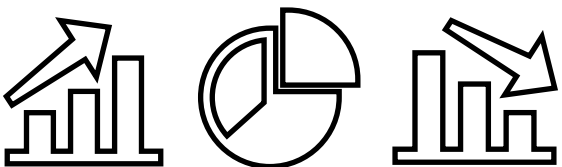
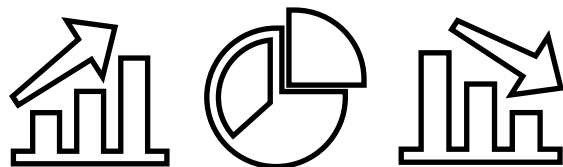
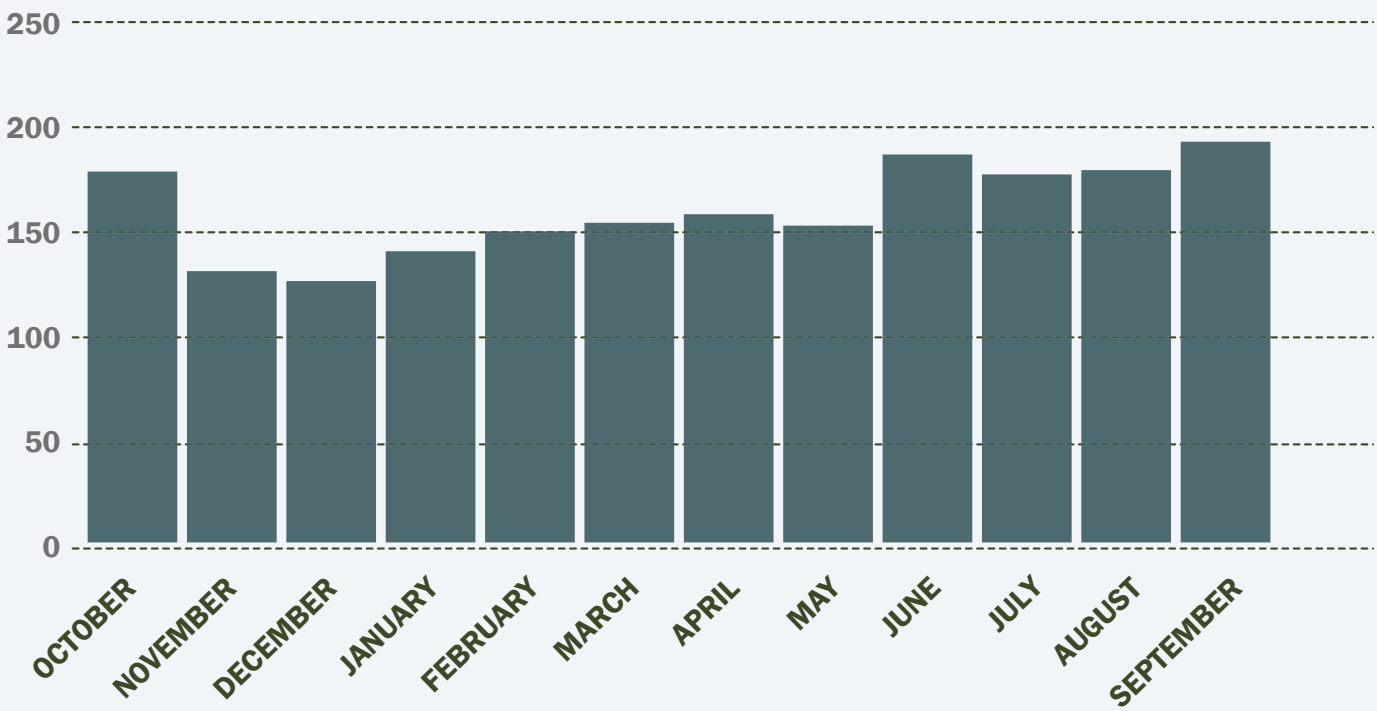
Volume and Statistics

Trauma Registry Volume and Admissions per Year



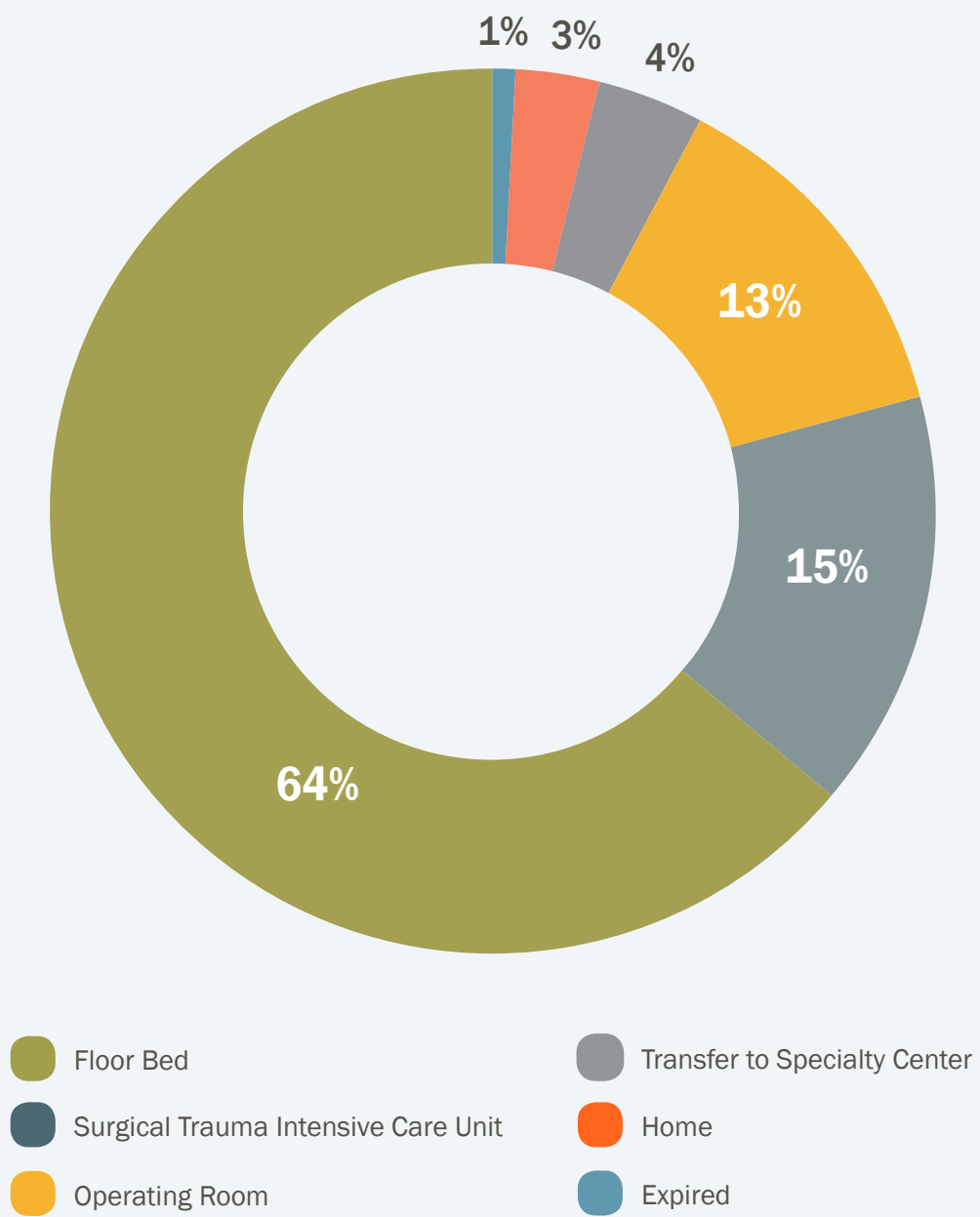
Volume and Statistics

Trauma Admissions per Month (FY 2018)



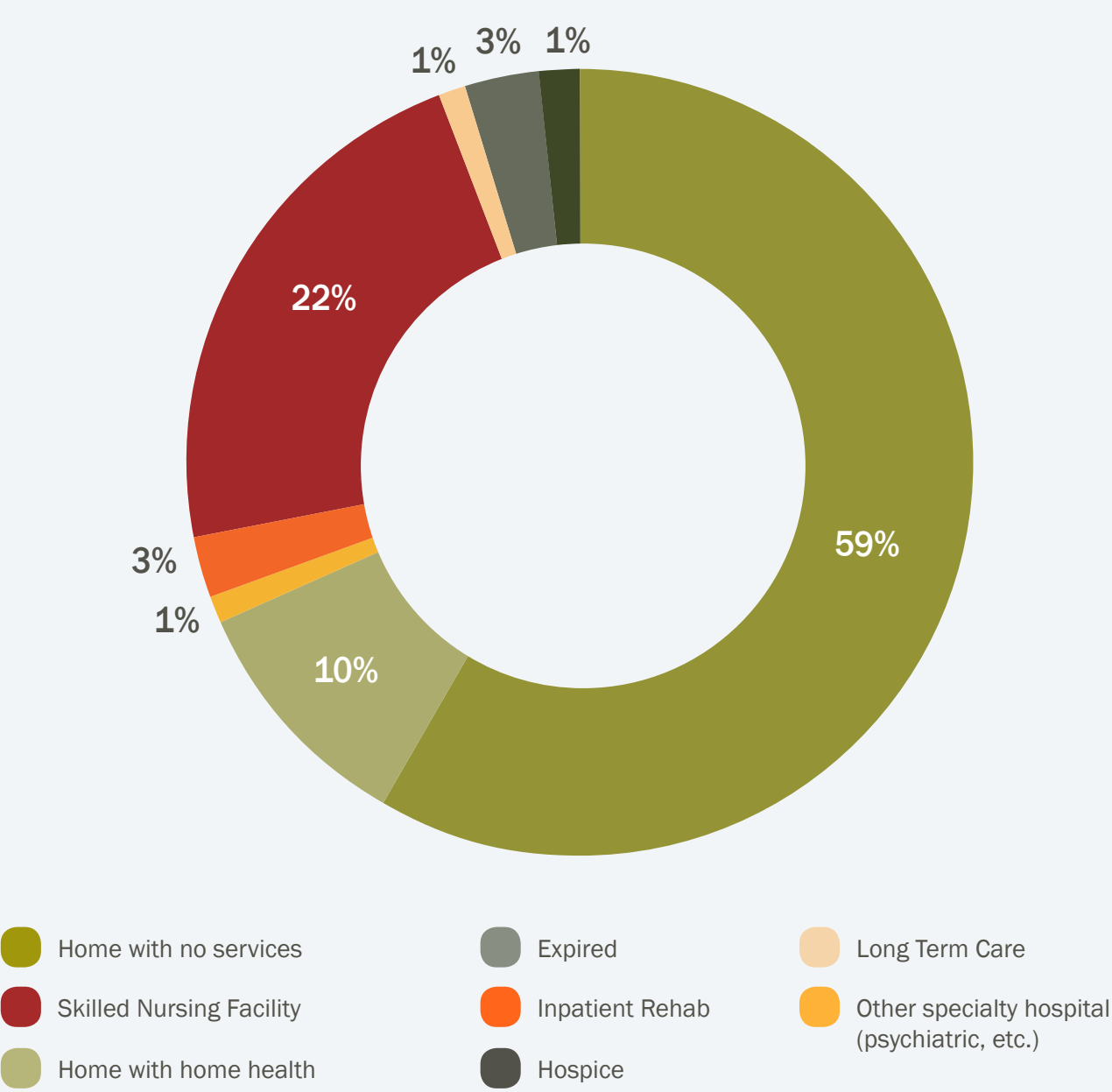
Volume and Statistics

Emergency Department Disposition



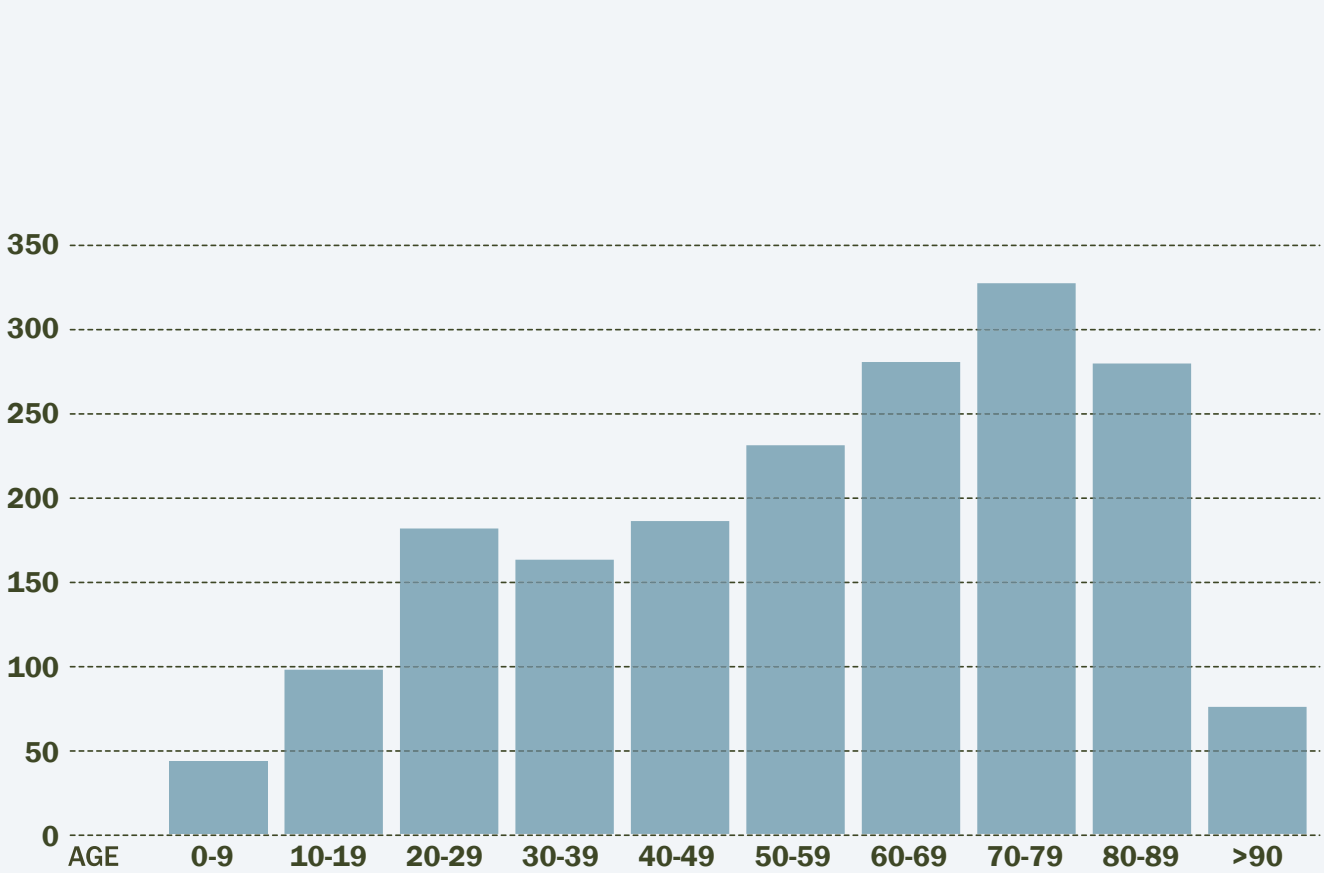
Volume and Statistics

Hospital Disposition



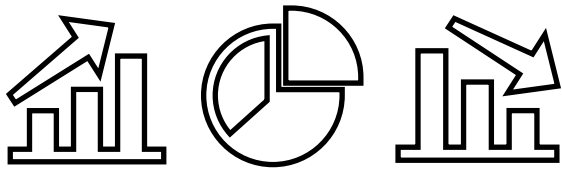
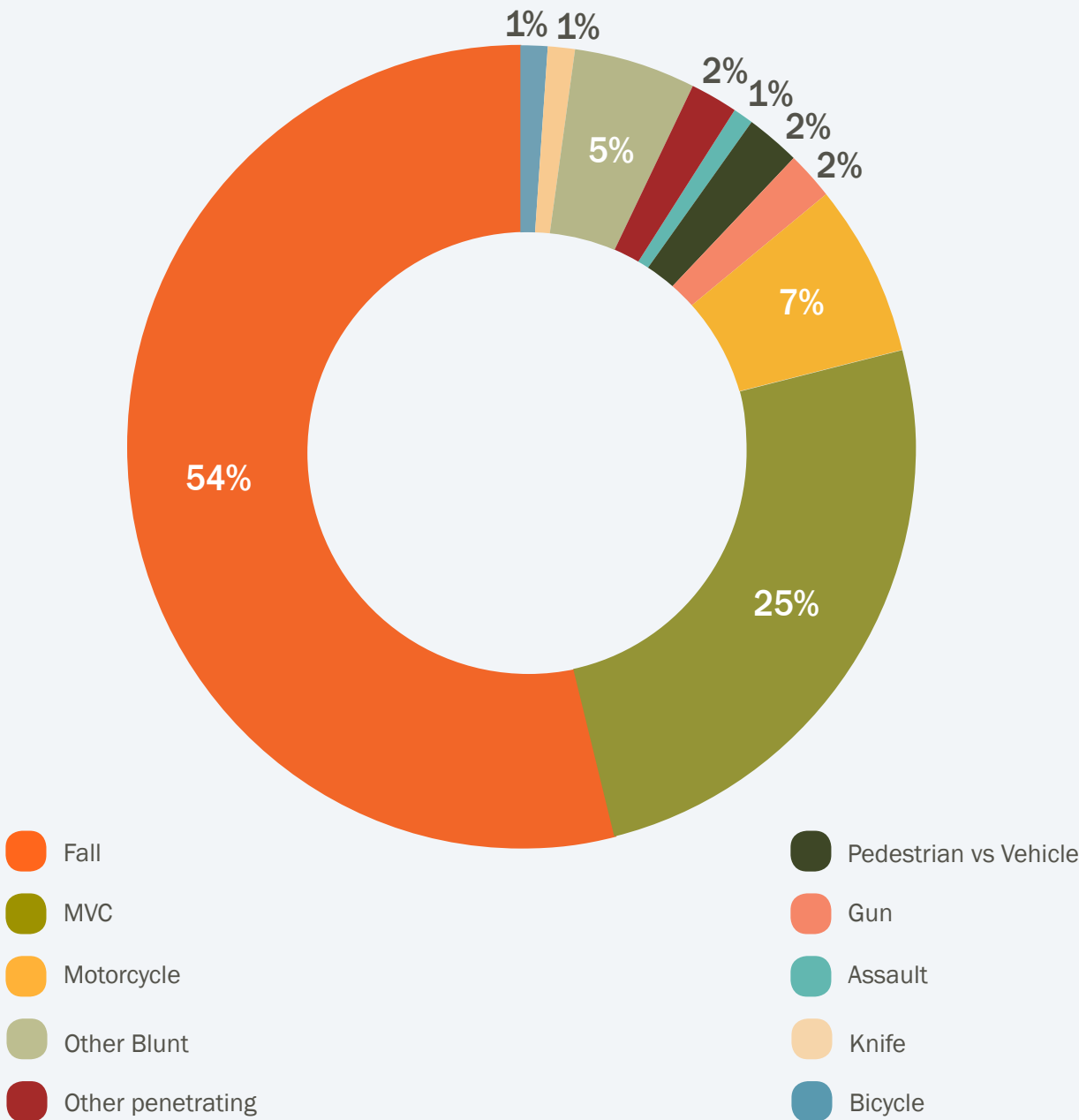
Volume and Statistics

Trauma Patient Distribution by Age



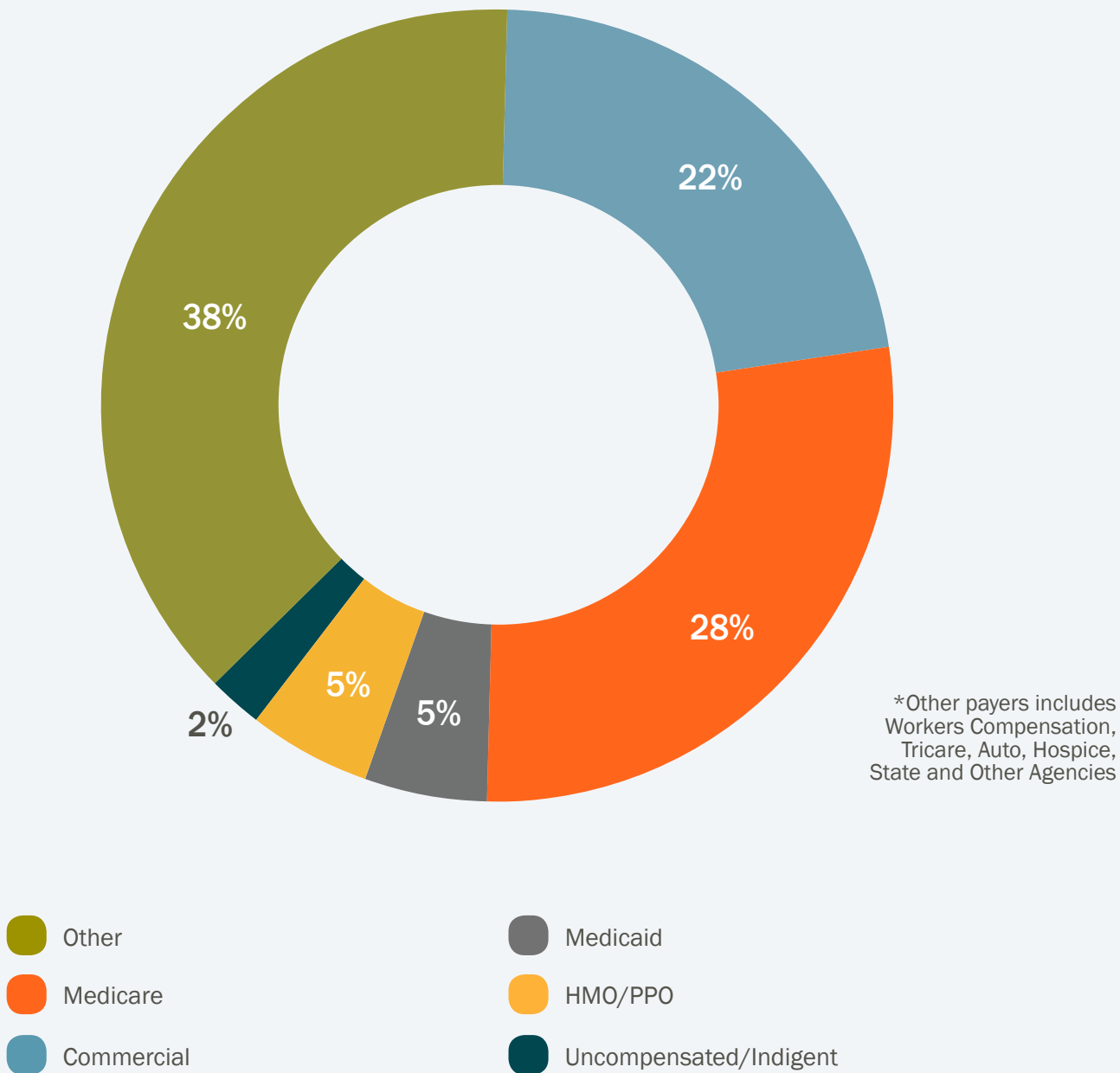
Volume and Statistics

Causes of Traumatic Injury



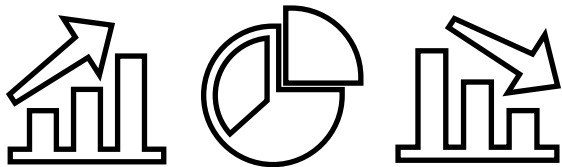
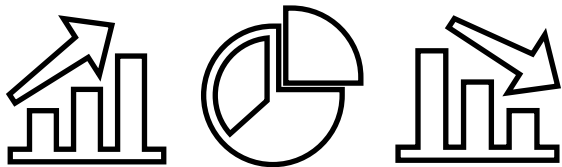
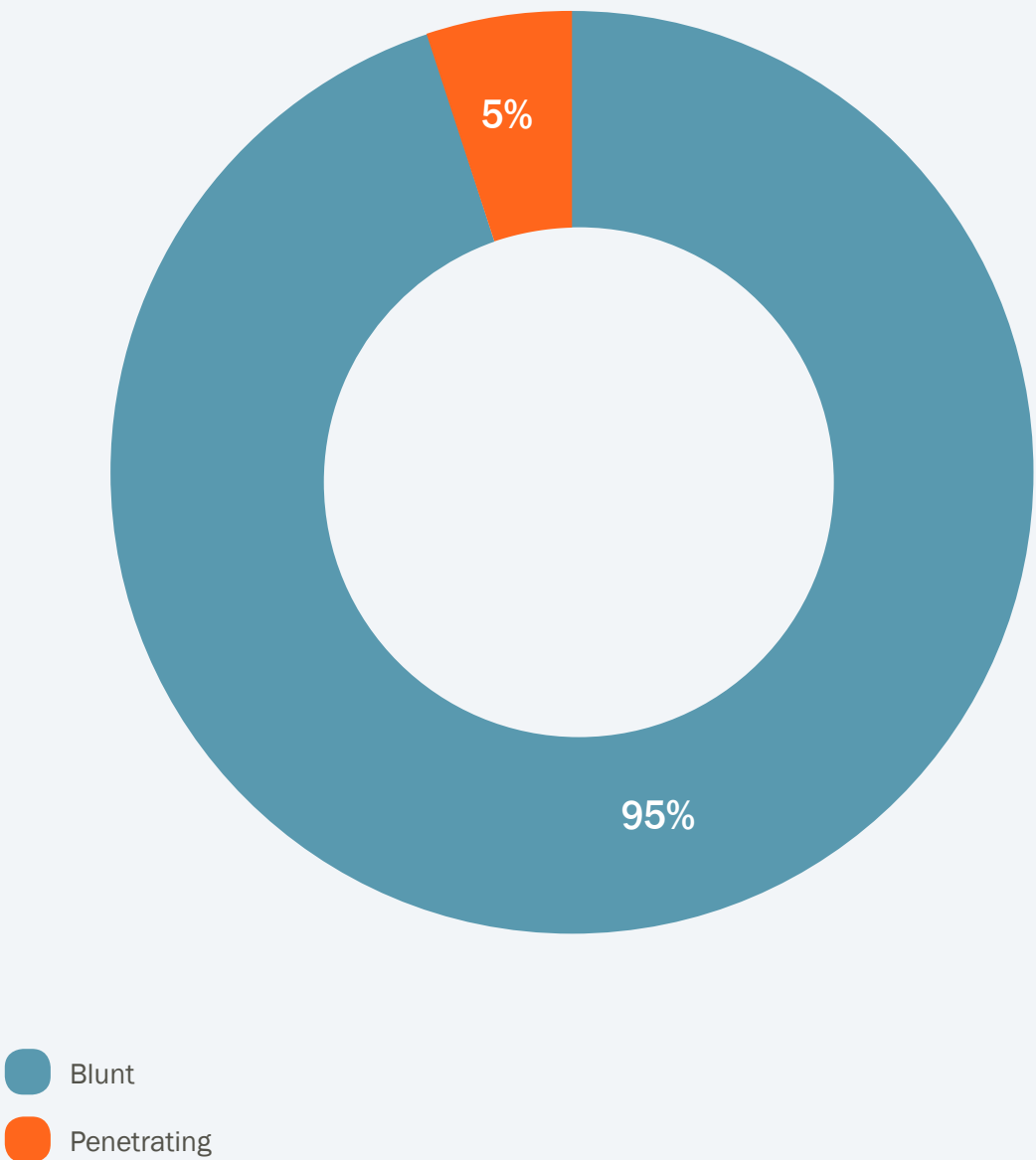
Volume and Statistics

Trauma Payor Mix



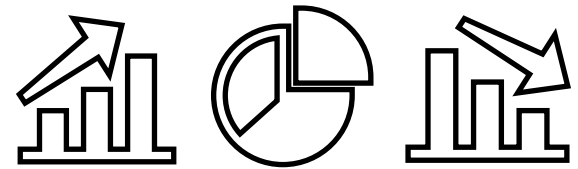
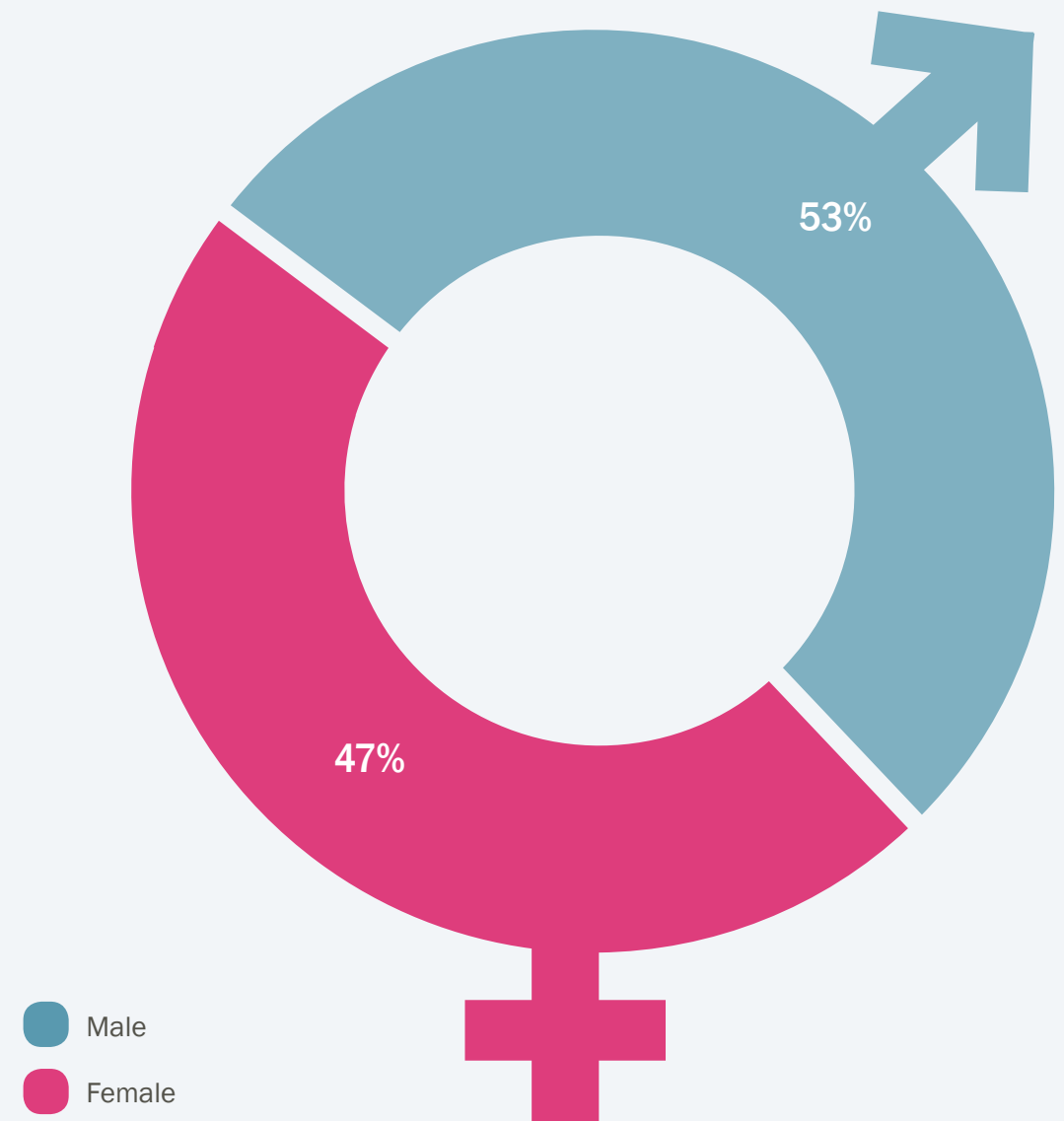
Volume and Statistics

Blunt vs. Penetrating Injury



Volume and Statistics

Trauma Patient Distribution by Gender



Injury Prevention and Outreach

Research supports that the best way to decrease traumatic injuries is through injury prevention. NGMC focuses much attention on injury prevention to decrease the incidence of trauma in our community. NGMC’s Trauma Injury Prevention and Outreach Coordinator utilizes trauma registry data to identify the most prevalent injury patterns in our service area. Injury prevention activities are based around the top mechanisms of injury and the age groups affected most by these injuries. The Trauma Injury Prevention and Outreach Coordinator works with community partners, such as Legacy Link Agency for Aging, to tackle the top cause of injury at NGMC, which is falls. These falls occur most often in the aging population. Programs such as “A Matter of Balance” and the “Fall Prevention Expo” have allowed NGMC to reach hundreds of aging community members in order to teach fall prevention techniques.

NGMC’s second leading cause of injury is motor vehicle crashes. The NGMC Trauma Program is fortunate to team up with NGMC’s Safe Kid’s Coordinator to help combat these injuries in our teen population.

The Trauma Program and Safe Kids program participated in over 120 injury prevention events during fiscal year 2018. Over 13,000 people attended these events and Safe Kids distributed almost 8,000 safety devices.





Northeast Georgia Medical Center

