

**Rappahannock EMS Council  
Trauma Systems Committee Meeting  
October 25, 2006**

**MINUTES**

**Members Present:** Dr. Jordan Crovatin, Culpeper Regional Hospital  
Dr. David Garth, RMD – Mary Washington Hospital  
Dr. Nasser Sitta, Fauquier Hospital

**Members Absent:** Barbara Kane, Tom Williams

**Others Present:** Tina Skinner, REMS Council

**Call to Order:** The meeting was called to order at 12:00 p.m. by Chairman Jordan Crovatin.

Tina reported that the Council is responsible for establishing and maintaining a state approved Trauma Triage Plan for our service area. The council's current plan has been modified by our Systems Coordinator, Linda Harris, to meet the state provided template requirements and State Trauma Plan.

Dr. Crovatin asked the members to review the current document and provide feedback to him as we move forward with major revisions. Each of the three hospitals in our region were asked to also make a review and provide input. It is important as we have expanded our service area, that we include Planning District 9 in the plan.

Council staff was directed to place the draft plan on our website for review and input by our EMS agencies and others.

The next meeting of the committee was scheduled for January 15, 2007 at the Culpeper Office of Emergency Services. The meeting adjourned at 12:30 p.m.

**Rappahannock EMS Council  
Trauma Systems Committee Meeting  
January 15, 2007**

**MINUTES**

**Members Present:** Dr. Jordan Crovatin, Culpeper Regional Hospital  
Barbara Kane, Mary Washington Hospital

**Members Absent:** Dr. David Garth, Mary Washington Hospital  
Dr. Nasser Sitta, Fauquier Hospital  
Tom Williams, REMS Board

As the majority of the committee was unable to attend the scheduled meeting, no business or action items were conducted.

Dr. Crovatin continued to encourage the committee and hospitals to provide feedback on the draft Regional Trauma Triage Plan and revisions as posted on the council's website. The draft will be presented to the REMS Board of Directors in February, 2007 for comment and approval.

The Council's Quality Improvement Committee reviewed the Trauma Plan and indicated they had no recommendations or changes as it relates to the section or forms on QI.

**Rappahannock EMS Council  
Trauma Systems Committee Meeting  
March 28, 2007**

**MINUTES**

**Members Present:** Dr. David Garth, RMD – Mary Washington Hospital

**Others Present:** Tina Skinner, REMS Council  
Marianna Bedway, Mary Washington Hospital

The meeting was requested by Mary Washington Hospital to provide input on the draft Regional Trauma Triage Plan. The meeting was called to order at 9:15 a.m. at Mary Washington Hospital.

Marianna Bedway reported that they have reviewed the current draft plan as approved by the board and would like to provide the following input:

Page 4 - Expectations for the Care of a Trauma Patient: Consideration to ensure patients receive appropriate level of care and allow patients to return to the fullest functionality after a trauma event. Questioned whether our plan should define patient care action in this section.

Page 5 – Geography and Climate: In relation to disaster and mass casualty preparedness do not sell council short by just mentioning planning for the National Boy Scout Jamboree. There are many other events and drills for our region to also include drills at Quantico Marine Corp. Base and the North Anna Nuclear Plant. Consider inclusion.

Page 7 – Trauma Education: MediCorp can help to sponsor Advanced Trauma Life Support courses for our region. They are seeking to hire a new Trauma Coordinator who will facilitate such training as it relates to our trauma needs.

Page 8 – Hospital Facilities: Updated the figures on bed availability and anesthesia for Mary Washington Hospital. Need to consider listing ED bed count and Operating Room capabilities for other two hospitals in region as not listed.

Also recommended that the document clarify which listed Trauma Centers specialize in pediatrics, adults, burns, etc.

Page 11 – On Line Medical Control: Recommended that “prolonged extrication time” be defined in plan.

Marianna also questioned whether our plan should document or list the State Trauma Center criteria as it is mentioned several times in the document. Consider as an appendix or reference.

Meeting adjourned at 10:30 a.m.