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LSU Trauma Center Receives Level 1 Verification

Baton Rouge (December 16, 2008) -- The trauma center at the Interim LSU Public Hospital has been verified as a Level 1 trauma center by the Committee on Trauma (COT) of the American College of Surgeons (ACS). This verification recognizes the trauma center's dedication to providing optimal care for injured patients with full trauma-center staff, facilities, and services available twenty-four hours a day.

Trauma-center staff includes physicians from LSU and Tulane University.

The return to New Orleans of Level 1 trauma care, the highest level attainable, gives LSU the only two Level 1 trauma centers in Louisiana. The other is at the LSU Health Sciences Center – Shreveport.

“The verification of Level 1 trauma services recognizes LSU as a premier provider of comprehensive health care services,” said Dr. Michael K. Butler, LSU Health Care Services Division acting CEO. “Level 1 also enhances our graduate medical education programs, giving rotations to surgical residents in a trauma center of national renown.”

Before Hurricane Katrina, the LSU Level 1 trauma center in New Orleans was one of the best and busiest in the nation. Shortly after the storm, the trauma center and emergency department relocated to Elmwood Medical Center until February 2007 when they resumed services in a newly renovated, state-of-the-art area on the first floor of the Interim LSU Public Hospital, bringing immediate accessibility of physicians, technicians, and services under the same roof.

“The dedication of the staff of the emergency department and trauma center to regaining Level 1 verification has been nothing short of tremendous,” said Dr. Cathi Fontenot, acting CEO of the Interim LSU Public Hospital. “Their dedication and high level of expertise are essential to anyone in need of trauma care.”

LSU emergency and trauma services are critical to Louisiana. The American College of Emergency Physicians indicates that Louisiana has inadequate access to emergency medical care.

The ACS COT requires an accumulation of data prior to verification, which LSU immediately began gathering after the February 2007 move to the hospital.

For Level 1 verification, a trauma center must also meet numerous and rigorous criteria including an annual minimum of 1200 trauma patients and available 24 hours a day the following: a trauma surgeon in the emergency department on patient arrival; a multidisciplinary infrastructure to support trauma services with participation from general surgery, orthopaedic surgery, neurosurgery, emergency medicine, and anesthesia; prompt and continuous neurotrauma care for severe and traumatic brain injury and spinal cord injury; musculoskeletal trauma care;

operating rooms for emergency procedures; plastic surgery and hand surgery; anesthesiology services for emergency operations; operating room immediately available with complete operating team dedicated to it and in the hospital at all times; an adequate staff for a second operating room when the first is occupied; prompt radiology services; the availability of cardiac, thoracic, microvascular, OB/GYN, ophthalmology, ENT, and urology surgeons; blood bank, respiratory and laboratory services; continuous rotation in trauma surgery for senior surgical residents; and many more criteria. Visit www.facs.org/trauma/vrcl.html for the complete list of requirements for Level I.

Established by the ACS in 1987, the COT's Verification/Consultation Program for Hospitals promotes the development of trauma centers where participants provide not only the hospital resources necessary for trauma care, but also the entire spectrum of care for the needs of all injured patients. This spectrum encompasses the prehospital phase through the rehabilitation process.

The COT has four separate verification categories. Each category has specific criteria that must be met by a facility seeking that level of verification. Each hospital has an on-site review by a team of experienced trauma surgeons, who use the current COT's *Resources for the Optimal Care of the Injured Patient* manual as a guideline in conducting the survey.

The ACS COT's verification program does *not* designate trauma centers. It provides a confirmation that a trauma center has demonstrated its commitment to the highest quality trauma care for all injured patients. The actual establishment and the *designation* of trauma centers is the function of local, regional, or state health care systems agencies.

The ACS is a scientific and educational association of surgeons that was founded in 1913 to raise the standards of surgical education and practice and to improve the care of the surgical patient. The ACS has 59,000 members and is the largest association of surgeons in the world. Longstanding achievements have placed the College in the forefront of American surgery and have made it an important advocate for all surgical patients.

The LSU Health System - Health Care Services Division is one of the largest public health care delivery systems in the country. It has over 31,000 admissions, 180,000 patient days, 981,000 outpatient visits, and over 270,000 emergency department visits. Each year 1100 residents and fellows from the LSU and Tulane Schools of Medicine and Ochsner Health System and 2,200 nurses and allied health students from many colleges and universities are trained in LSU facilities.

LSU is the largest single provider of uncompensated inpatient care in Louisiana. LSU HCSD hospitals have an economic impact of over \$1.4 billion in asset business activity, \$568 million in personal earnings, and generate over 12,000 jobs.

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