

HOTRAC Regional Trauma PI Summary Report

Admits, Transfers, & Deaths

(circle reporting month/quarter)

1st Quarter
Jan-Feb-Mar

2nd Quarter
Apr-May-June

3rd Quarter
Jul-Aug-Sept

4th Quarter
Oct-Nov Dec

Facility Name: _____

Person Submitting Report: _____

- Total # of Patients (admits/observations, transfers, deaths) entered into Registry: _____
- Total # of Patients Admitted to a Level IV or Non-designated facility _____
- Total # of cases with a transfer greater than 1 hours (Category A): _____
- Total # of cases with a transfer greater than 2 hours (Category B): _____
- Total # of cases in which a tourniquet _____ and/or hemostatic gauze _____ was used.

Bystander _____ Prehospital _____ EMS _____ Hospital _____

- Total # of cases with > 64 yrs. of age taken to Level IV or non-designated facility by EMS: _____
- Total # of Double Transfers: _____
- Total # of Trauma Re-admissions: _____
- Total # of Trauma Deaths: _____
- Total # of trauma patient where the patient disposition was affected by EMS: _____
- Total # of transfers **outside** of TSA M and the reason why:

Total: _____ Over 18: _____ Under 18: _____

Burn: _____ ENT/OMF/Plastics/etc.: _____ Hand: _____

Not documented: _____ Patient Choice: _____ Pediatric Subspecialty: _____

PICU: _____ Provider Choice (why): _____ Other (specify): _____