



# Trauma Fact Sheet

- **A traumatic injury** is a blunt force or penetrating physical injury that requires surgical and other medical specialists to consult, observe or perform surgery in order to optimize recovery.
- **A trauma system** involves the coordination of trauma care delivery among trauma centers, ambulances, helicopters, state and local governments and other healthcare resources. Currently, only 8 states have matured trauma systems.
- **A trauma center** is a specialized hospital distinguished by the *immediate* availability of *specialized* personnel, equipment and services to *treat* most severe and critical injuries. This includes ready-to-go teams that perform immediate surgery and other necessary procedures for people with serious or life-threatening injuries, for example, due to a car crash, bad fall, or gun shot wounds. The mission of a trauma center is to ensure continuity and quality of care for injured patients from the scene of injury through treatment at the trauma center and ultimately physical rehabilitation. Currently, less than 10% of hospitals have a trauma center.
- **How does trauma affect people?**
  - Leading cause of death among children and adults below the age of 45, and is the 4th leading cause of death for all ages
  - Accounts for approximately 170,000 deaths each year and over 400 deaths per day
  - Affects mostly the young and the old
  - Kills more Americans than stroke and AIDS combined
  - Leading cause of disability
- **Trauma centers are classified by levels dependant upon the amount of equipment, staff, and care provided:**
  - **Level I:** Has a full range of specialists and equipment available 24-hours a day • Admits a minimum required annual volume of severely injured patients • Has a research program • Is a leader in trauma education and injury prevention, and is a referral resource for communities in neighboring regions • Has a required program for substance abuse screening and provides brief intervention to patients
  - **Level II:** Works in collaboration with a Level I center usually but may be the only resource in a rural state • Provides comprehensive trauma care and supplements the clinical expertise of a Level I institution • Provides 24-hour availability of all essential specialties, personnel and equipment • No minimum volume requirements • Provides an injury prevention program, as well as conduct substance screening, but not required to have an ongoing program of research or a surgical residency program
  - **Level III:** Has resources for the emergency resuscitation, stabilization, emergent surgery, and intensive care of most trauma patients • Has transfer agreements with Level I and/or Level II trauma centers to assure back-up resources for the care of patients with severe injuries • Has an injury prevention program • Does not have the full availability of specialists except surgery and orthopedics in most states
  - **Level IV:** Provides initial evaluation, emergency resuscitation and stabilization of trauma patients, but most patients will require transfer to higher level trauma centers • Has 24-hour emergency coverage by a physician