

# Attachment C:

Comments Regarding the Trauma/Burn Center  
Operating Room Exclusion

---

**Comments Regarding the Trauma Burn Center Exclusion in the Operating Room  
Need Projection Methodology**

Jennifer Houlihan

North Carolina Baptist Hospital:

NCBH does not currently hold a dedicated OR open for our burn or Level I trauma cases. Once we are notified of a trauma or burn case we determine when the next OR becomes available and reserve it thereby bumping all elective surgery procedures. I wanted to point out we will often have to use more than the 2 ORs at one time for burn and/or trauma cases depending on the number coming in at one time. Also, our trauma and burn cases typically exceed the 3 hours threshold currently allocated in the OR performance measures, in fact some burn cases can take up to 12 hours. It should be noted that the case loads and complexity of surgery for Level I trauma center will be vastly different than what a Level III trauma center can perform and I am not sure how this would be accounted for.

D.J. Zerman

University of North Carolina Hospitals

I've spoken with our VP of Surgical Services. She says only Level 1 Trauma centers are required to be staffed 24/7 and required to have an operating room immediately available at all times for Trauma. She does not think that the lower level of trauma centers have this requirement. The way UNC Hospitals provides this availability is by holding 2 operating rooms at all times that cannot be scheduled except for trauma cases and day-of add-ons (urgent cases). These 2 rooms are also staffed 24/7. She explained that in our instance, if we did not hold these 2 rooms, we'd be continually bumping the scheduled elective case, which also presents patient care issues and problems.

For Burn Operating Room Cases, we have 1 operating room that is specifically set aside for Burn patients. It is designed specially for burn, including special heating required by burn patients. 90% of the time this room is used for burn patients; occasionally (about 10% of the time) other patients (burn-related and other wound type patients) can be accommodated in this room. This room is adjacent to a special elevator that shuttles the burn patients directly from the Burn ICU to this Burn OR, and is only used by these patients.

State Health Coordinating Council Meeting  
May 28, 2008

Brian Moore  
Memorial Mission Hospitals  
I think we need to continue to handle the exclusion as  
we have in the past and not change.

Duncan Yaggy  
Duke University Hospital  
At Duke Hospital we have an orthopedics OR with no cases posted in advance. Trauma cases are put on the schedule each morning in order of their acuity. Once the room is filled, a second Level 1 case would bump the next available room. Once that room was filled, a third Level 1 would bump the next available room. Given that, the number of ORs in the Duke North suite (31 going on 35), and the frequency with which rooms turn over, it is accurate to say that "Essentially we, at any given time, should have an OR available for emergencies."

<b><u>NC TRAUMA CENTERS</u></b>	<b><u>LOCATION</u></b>	<b><u>DESIGNATION</u></b>
<b>UNC Health Care System</b>	<b>Chapel Hill</b>	<b>I</b>
<b>Duke University Medical Center</b>	<b>Durham</b>	<b>I</b>
<b>Wake Forest University Baptist Medical Center</b>	<b>Winston-Salem</b>	<b>I</b>
<b>University Health Systems of Eastern North Carolina</b>	<b>Greenville</b>	<b>I</b>
<b>Carolina's Medical Center</b>	<b>Charlotte</b>	<b>I</b>
<b>Wake Med</b>	<b>Raleigh</b>	<b>I</b>
<b>New Hanover Health System</b>	<b>Wilmington</b>	<b>II</b>
<b>Mission St. Joseph's Health System</b>	<b>Asheville</b>	<b>II</b>
<b>Moses Cone Health System</b>	<b>Greensboro</b>	<b>II</b>
<b>North East Medical Center</b>	<b>Concord</b>	<b>III</b>
<b>Cleveland Regional Medical Center</b>	<b>Shelby</b>	<b>III</b>
<b>High Point Regional Health System</b>	<b>High Point</b>	<b>III</b>