KEY: NA = NOT APPLICABLE ND = NOT DOCUMENTED*

A = ACCEPTABLE-MEETS STANDARDS

 $U = UNACCEPTABLE\text{-}DOES\ NOT\ MEET\ STANDARDS*$

SURVEY CHART #____ C = ACCEPTABLE WITH CORRECTIONS*

MED REC #_____

Revised 01/10

TRAUN	MA NUI	RSE	NA	ND	A	C	U
A. E	MERGEN	NCY DEPARTMENT (E.D.)/RESUSCITATION AREA	•	•	•	_	
(I	F PEDIA	TRIC PATIENT, PLEASE COMPLETE SECTION G					
A	LONG W	/ITH SECTION A):					
1.	TRA	AUMA FLOWSHEET:					
	a.	TRAUMA ALERT					
VE2		1. APPROPRIATELY CALLED TRAUMA ALERT					
		CRITERIA					
VD2d		2. TIMELINESS OF TEAM RESPONSE					
	b.	QUALITY OF NURSING ASSESSMENT					
		1. ADMISSION AND DISCHARGE					
VD2e		2. SERIAL PARAMETERS					
		3. APPROPRIATE NURSING INTERVENTIONS					
IIIB4b (LI)		c. HEAD INJURY/C-SPINE MANAGEMENT					
IIIB3b (L2,L	P)	(PROTOCOLS)					
		1. QUALITY OF NURSING ASSESSMENT					
		2. APPROPRIATE NURSING INTERVENTIONS					
VD2i	e.	TOTAL HOURS IN E.D TO					
VD2 (a-l)	f.	DOCUMENTATION OF NURSING CARE IN THE E.D					
or (a-m)	NTC						
COMME	IN 13: *CO	MMENTS ARE REQUIRED FOR "C," "U," AND "ND."					
1							

January 2010 Surveyor's Initials _____ 1

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TRA	UMA	NURSE (continued)	NA	ND	A	C	U
3.		ERATING ROOM (O.R.):	- 11-	- 12			1
IC1c	1.	QUALITY OF PATIENT ASSESSMENT BY					
		ANESTHESIOLOGY (PROTOCOLS)					
VA1	2.	APPROPRIATENESS OF PATIENT MANAGEMENT BY					
		ANESTHESIOLOGY					
TA3	3.	DOCUMENTATION OF OPERATIVE EPISODE (1 SCRUB					
		NURSE OR TECHNICIAN, 1CIRCULATING RN, 1					
		ANESTHESIOLOGIST)					
TB2	4.	PAR-TIMELINESS OF NOTIFICATION AND RESPONSE					
		TS: *COMMENTS ARE REQUIRED FOR "C," "U," AND "ND."	<u> </u>				

January 2010 2 Surveyor's Initials __ **KEY**: NA = NOT APPLICABLE

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$$\label{eq:acceptable-meets} \begin{split} A &= ACCEPTABLE\text{-}MEETS\ STANDARDS\\ C &= ACCEPTABLE\ WITH\ CORRECTIONS* \end{split}$$

U = UNACCEPTABLE-DOES NOT MEET STANDARDS*

TRAUMA I	<u>NURSE</u>	C (continued)	NA	ND	A	C	U
C. POS	T ANES	STHESIA CARE UNIT (PAR):			•		
VIB1	1.	QUALITY OF CARE (NURSING ASSESSMENT/					
		INTERVENTION) AND STAFFING					
VIID (L1) VIIC (L2,LP)	2.	DOCUMENTATION OF NURSING CARE					
	S: *COM	MENTS ARE REQUIRED FOR "C," "U," AND "ND."	l				
	ENSIVE 1.	E CARE UNIT (ICU): QUALITY OF CARE/STAFFING				_	
VIIB2a (L1) VIIB1 (L2,LP) VIID (L1)							
VIIB2a (L1) VIIB1 (L2,LP) VIID (L1) VIIC (L2,LP)	1. 2.	QUALITY OF CARE/STAFFING					
VIIB2a (L1) VIIB1 (L2,LP) VIID (L1) VIIC (L2,LP)	1. 2.	QUALITY OF CARE/STAFFING DOCUMENTATION OF NURSING CARE					

January 2010 3 Surveyor's Initials _____

KEY: NA = NOT APPLICABLE

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A - ACCEPTABLE MEETS STANDARD

$$\label{eq:acceptable-meets} \begin{split} A &= ACCEPTABLE\text{-}MEETS \ STANDARDS \\ C &= ACCEPTABLE \ WITH \ CORRECTIONS* \end{split}$$

U = UNACCEPTABLE-DOES NOT MEET STANDARDS*

TRA	TRAUMA NURSE (continued)					C	U
E.		N UNIT/CENTER:				•	
XIIIA	1.	EARLY TRANSFER TO BURN UNIT/CENTER INITIATED					
XIIIA	2.	DOCUMENTATION OF BURN CENTER EPISODE					
COM	MENTS	S: *COMMENTS ARE REQUIRED FOR "C," "U," AND "ND."					

January 2010 4 Surveyor's Initials _____

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TRA	TRAUMA NURSE (continued)				A	C	U
F.	ACU	TE REHABILITATIVE SERVICES:					
XVB	1.	COMPREHENSIVE REHABILITATION PLAN DEVELOPED					
		AND DOCUMENTED WITHIN 7 DAYS OF ADMISSION					
XVC	2.	DOCUMENTATION OF REHABILITATION SHORT OR LONG					
		TERM REHABILITATION GOALS AND PLANS					
XVD	3.	DOCUMENTATION OF ASSESSMENT AND					
		RECOMMENDATIONS WITHIN 48 HOURS					
XVIC	4.	SOCIAL WORK AND DRUG & ALCOHOL ADDICTION					
		SERVICES AVAILABLE FROM ADMISSION THROUGH					
		DISCHARGE (PATIENTS AND FAMILIES).					
XVIB	4.	PASTORAL CARE, PATIENT ADVOCATES,					
		PSYCHOLOGISTS, SOCIAL WORKERS AVAILABLE TO					
		PATIENTS AND FAMILIES					

COMMENTS: *COMMENTS ARE REQUIRED FOR "C," "U," AND "ND."

January 2010 5 Surveyor's Initials _____

IDENTIFY AND SUPPORT WITH DOCUMENTATION ANY ITEMS NOT IN COMPLIANCE WITH THE STANDARDS.

INSTRUCTIONS TO SURVEYORS:

IF YOU MARKED ANY ITEMS ON PREVIOUS PAGES EITHER "C" OR "U," YOU MUST REFER TO YOUR COMMENTS ON THIS SUMMARY SHEET AND MAY NOT MARK "A" WITHOUT SIGNIFICANT JUSTIFICATION AND DOCUMENTATION.

OUALITY OF ASSESSMENT

C	
ACCEPTABLE	
ACCEPTABLE WITH CORRECTIONS	
UNACCEPTABLE	

APPROPRIATENESS OF CARE

ACCEPTABLE	
ACCEPTABLE WITH CORRECTIONS	
UNACCEPTABLE	

DOCUMENTATION OF CARE

January 2010

ACCEPTABLE	
ACCEPTABLE WITH CORRECTIONS	
UNACCEPTABLE	

STANDARD COMMENTS:

STANDARD COMMENTS:

STANDARD

COMMENTS: