

# Complete Electronic Pre Survey Questionnaire (ePSQ)







Your computer system will need Adobe Reader<sup>®</sup>, Microsoft Excel<sup>®</sup>, and a ZIP file utility

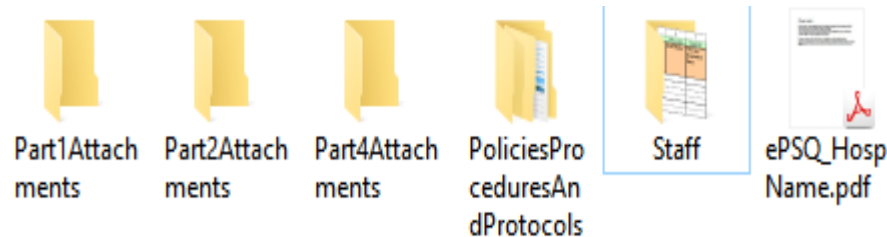
Most systems already have Adobe Reader and some type of ZIP file utility already installed. If you are not sure if your system can open zip files, try double-clicking on the [ePSQ\\_HospName.zip](#) file you retrieved in the previous step; if it opens, you have a zip utility. If not, check with your IT department. If you do not have Adobe Reader (version 10 or newer), you can download the latest copy from <http://get.adobe.com/reader>. And feel free to contact the DOH Office of Trauma if you have any questions about these instructions 10

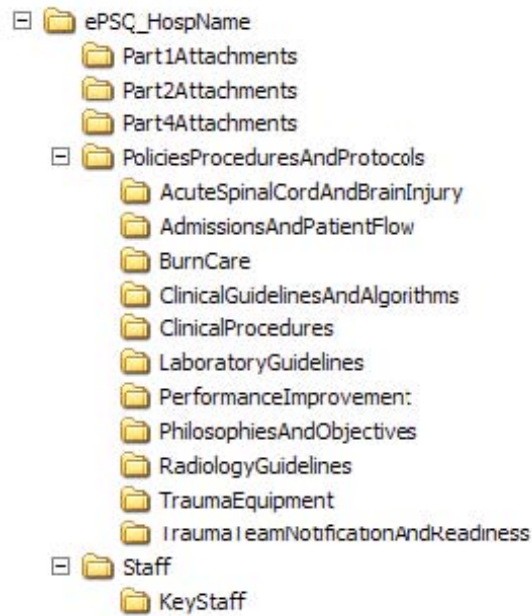


## Unzip the ePSQ file

The unzip process will create the following directory structure shown below with 17 sub-folders and 2 included files (the **Survey Questionnaire** and the **Staff Spreadsheet**). Note that except for these two files, the **sub-folders are empty**; they are meant to contain the various attachments, as outlined in the ePSQ sections, provided by your trauma center (such as administrative procedures, organization charts, schedules, etc.)

Name	Size	type
 ePSQ_HospName.pdf	2,209 KB	Adobe Acrobat I
 Part1Attachments		File folder
 Part2Attachments		File folder
 Part4Attachments		File folder
 PoliciesProceduresAndProtocols		File folder
 Staff		File folder





The ePSQ file is the **Survey Questionnaire** (i.e. the **ePSQ\_HospName.pdf** file)

*You will find this file in the top-level directory created from the zip file (as shown in the screen shot below).  
Note that you will need Adobe Reader (v10 or newer) to correctly view all of the file contents*

### **Open the Survey Questionnaire in Adobe Reader**

*The reader window should look like the screen shot below showing the initial page of the survey*

### **Complete the initial fields and click the *Begin Questionnaire* button**

*This button will activate the rest of the survey form, which will increase the initial length of the document to approximately 14 pages.*

**Pre-Survey Questionnaire**  
 Florida Department of Health / Office of Trauma  
 4052 Bald Cypress Way, Bin C 18, Tallahassee, FL 32399-1738 / (850) 245 4440

Trauma Center

DOH Specified Audit Period Start Date

DOH Specified Audit Period End Date

Scheduled Survey Date

**Set Selections & Begin Questionnaire**

**Note that you may wait to complete the first four fields on the survey form**

*The first four fields (Trauma Center Name, DOH Specified Audit Period Start / End Dates, and Scheduled Survey Date) populate the footer on each page of the survey document (as shown in the blue boxes below). You may wait to complete these fields, but you will need to click on the “Set Selections & Begin Questionnaire” button a second time once the fields have values to propagate these values into the page footers.*

ePSQ v2.35 - Page 1 of 1 Survey Date: Jun 1, 2000	Hospital Name DOH Audit Period: 2011-04-01 to 2012-04-01
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**Note that Part 5 of the survey specifies how to organize your additional documentation**

*This section of the Survey Questionnaire is on the final page (pictured below) of the document*

Pre-Survey Questionnaire  
Florida Department of Health / Office of Trauma  
4052 Bald Cypress Way, Bin C 18, Tallahassee, FL 32399-1738 / (850) 245 4440

**Part 5: Policies, Procedures & Protocols**

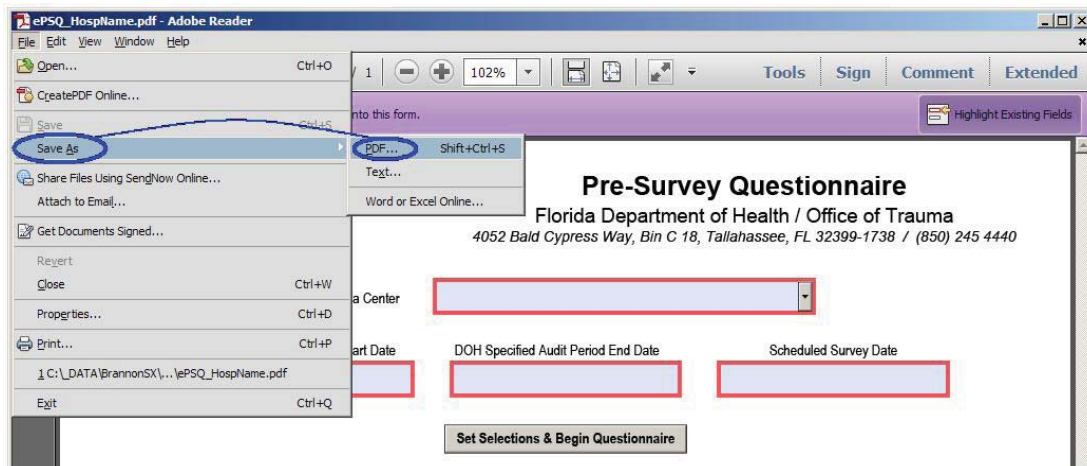
Instructions for Additional Required Documentation  
Copy the files containing the policies listed below to the appropriate sub-folder in the folder ePSQ\PoliciesProceduresAndProtocols. Copy, for instance, the "Chest trauma" procedure to the folder ePSQ\PoliciesProceduresAndProtocols\ClinicalGuidelinesAndAlgorithms.

<b>Philosophies &amp; Objectives</b> Philosophy, objective and signature page Authority of trauma program medical director	<b>Admissions &amp; Patient Flow</b> Acceptance of trauma patients Priority status of trauma alert patients Rehabilitation services for the adult and pediatric trauma patient
<b>Clinical Guidelines &amp; Algorithms</b> Primary and secondary assessment Standing orders for initial trauma resuscitation Standing orders for temperature regulation Primary survey of the trauma center patient Airway management of the trauma patient Head injury Electrical injury Thermal injury Fluid resuscitation for the burn patient Chest trauma Spinal cord injury Abdominal trauma Pelvic trauma Urology guideline Orthopedic injury Hand injuries and revascularization Resuscitation of the morbidly obese trauma patient Pediatric injury guideline Suspected non-accidental injury to children Guideline for pediatric trauma patients having "up belt" sign Management guidelines for the pregnant trauma patient Burn abdominal trauma with persistent abdominal pain Burn head trauma patients on coumadin Cervical spine x-rays and spine clearance Recommended cervical spine imaging guideline in trauma patients Removal of backboards (adult and pediatric)	<b>Laboratory Guidelines</b> Blood bank guidelines Laboratory guidelines for a trauma alert Documentation of lab times and results
<b>Clinical Procedures</b> Bedside percutaneous tracheostomy Central line placement Chest tube removal Closure of deep scalp lacerations Cricothyrotomy Culdoxams Percutaneous Tube thoracostomy Thoracostomy (open)	<b>Radiology Guidelines</b> Radiology, CAT scan/trauma services
<b>Trauma Team Notification &amp; Readiness</b> Emergency Department facility requirements Designation of roles for trauma team members Trauma flow sheet Trauma alert patient Trauma surgeon notification of adult trauma alert Notification of adult backup trauma surgeon Trauma room designation Notification of trauma surgeon during trauma patient "code" Trauma team response Notification of subspecialty physicians Trauma consults Availability of trauma surgeon for outside physician consultation Operating room availability Operating room staffing/coverage PACU call Medical direction for trauma patient in the ICU and PICU	<b>Performance Improvement</b> Trauma performance improvement Trauma education requirements Performance improvement plan
	<b>Trauma Equipment</b> Trauma resuscitation area Operating room Post-anesthesia recovery Intensive care unit and pediatric intensive care unit Medical surgical unit
	<b>Burn Care</b> Burn care policy and procedure Triage Assessment Stabilization Emergency treatment Transfer ABA designated burn care facility letter
	<b>Acute Spinal Cord &amp; Brain Injury Management Capabilities</b> Acute spinal cord Triage Assessment Stabilization Emergency treatment Transfer Acute brain injury Triage Assessment Stabilization Emergency treatment Transfer State designated Brain & Spinal Cord Injury Program letter

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Survey Date: DOH Audit Period: to

Use “Save As / PDF” to save the **Survey Questionnaire** file under a different name

*The original Survey Questionnaire file is read-only; you will need to save a separate copy.  
You can save multiple copies with some type of appended version number or date/time string.*



The second included file is the **Staff Spreadsheet** (the **ePSQ\_Staff\_HospName.xls** file)

*This is a Microsoft Excel (Version 2003) file; you will find it in the \Staff sub-folder as pictured below*

Name	Size	Date Modified	Type
KeyStaff		6/5/2012 4:54 PM	File Folder
ePSQ_Staff_HospName.xls	775 KB	6/5/2012 1:50 PM	Microsoft Excel Worksheet

## Read the **Spreadsheet Overview** and **Lookup Values** tabs for instructions

These tabs (shown in screen shots below-see the original document for a clearer view) provide instructions on completing the Staff Spreadsheet

Spreadsheet Overview													
This spreadsheet is designed to collect information on the doctors and nurse that comprise your trauma center staff. There are three tabs in this file for that purpose:													
<b>MDs</b>		Tab for entering information about the doctors at your trauma center (ten required columns)											
<b>MDs-CMI</b>		Tab for entering information about the continuing education taken by the doctors at your trauma center (seven required columns)											
<b>RNs</b>		Tab for entering information about the nurses at your trauma center (Nine required columns). After entering all of the trauma education courses and # of CEUs received for each course, add a total row to the column of the CEU's received (SEE EXAMPLE).											
Add Total CEU in this Column  ↓ TOTAL CEUs	Required	Required	Required	Required	Required	Required	Required	Required	Required	For Specialty	For Specialty	For Specialty	For Specialty
	Nurse Group / Section / Role	Last Name	First Name	License Expiration Date	Date Assigned to Trauma	# of CEUs Per Course	Title of Course	Designation Pediatric / Adult	Date Taken	CEN Expiration Date	CNOR	CCRN	CCRN
	ICU / Pediatric ICU	Smith	Joe	12/20/2020	10/05/01	4.00	how to	P	1/20 & 2/1/2017	11/15/20			
	ICU / Pediatric ICU	Smith	Joe	11/19/2021	10/05/01	2.00	howdy	A	1/5/2017				
	ICU / Pediatric ICU	Smith	Joe	6/15/2022	10/05/01	5.00	candy land	A	1/5/2017				
	ED / Trauma Resuscitation	Jane	Doc	4/15/2020	10/05/01	4.00	how to	P	3/19/2019	11/15/20			

The first row in each tab indicates whether the values in that column are required or not, as follows:

Required	Values in these columns are required
Optional	Values in these columns are optional
For Standard	Values in these columns are required when indicated by state standards
For Specialty	Values in these columns are required depending on the one or more specialties of the individual

The second row in each tab contains the label (or name) for the values in that column. The columns for each tab (and their associated required status) are

Tab 2: MDs		Tab 3: MDs-CMEs		Tab 4: RNs	
Required	Last Name	Required	Doctor Group / Section / Role	Required	Nurse Group / Section / Role
Required	First Name	Required	Last Name	Required	Last Name
Required	License Expiration Date	Required	First Name	Required	First Name
Required	Date Assigned to Trauma Care	Required	# of CEUs Per Course	Required	License Expiration Date
Required	Surgical Specialty	Required	Title of Course	Required	Date Assigned to Trauma Care
Required	Non-Surgical Specialty	Required	Designation Pediatric / Adult	Required	# of CEUs Per Course
Required	Primary Board Certification	Required	Date Taken	Required	Title of Course
Required	Primary Board Certification Expiration Date			Required	Designation Pediatric / Adult
Required	Secondary Board Certification			Required	Date Taken
Required	Secondary Board Certification Expiration Date			For Specialty	CEN Expiration Date
For Standard	ATLS Expiration Date			For Specialty	CNOR Expiration Date
For Standard	ATLS Instructor Expiration Date			For Specialty	CCRN Expiration Date
For Standard	Privileges General Surgical, Adult Expiration Date			For Specialty	ACLS Expiration Date
For Standard	Privileges General Surgical, Peds Expiration Date			For Specialty	PALS Expiration Date
For Standard	Privileges Trauma Care, Adult Expiration Date			For Specialty	ENPC Expiration Date
For Standard	Privileges Trauma Care, Peds Expiration Date			For Specialty	TNCC Expiration Date
For Standard	# of Adult Cases Per Last Two Calendar Years			Optional	Date Termed
For Standard	# of Peds Cases Per Last Two Calendar Years				

Please note that some of the column names are listed in blue text. These columns contain Lookup Values - a preset list of values from which you can choose when filling out the information in that column. These lookup values are described in the next tab in this spreadsheet.

## Lookup Values

There are four different type of columns in this spreadsheet that contain lookup values. The first two types are "Group / Section / Role" information for doctors and nurses.

For a given doctor, the individual might be best classified as part of a *Group* (e.g. Trauma Residents), as part of a *Section* (e.g. Emergency Department), or as fulfilling a particular *Role* (e.g. Trauma Medical Director).

And for a particular nurse, the individual might be best classified as part of a *Group* (e.g. Paramedics), as part of a *Section* (e.g. Burn Unit), or as fulfilling a particular *Role* (e.g. Trauma Program Manager).

The lookup values for these two types of fields are listed below:

Field	Doctor Group / Section / Role
	Neurotraumatology
	ED
	ED Chief Resident
	ED Director
	ED Residents
	Neurotrauma
	Neurotrauma Chief
	Neurotrauma Residents
	Neurotrauma Senior Resident
	<b>Non-Surgical Specialist &gt;</b>
	Orthopedics
	Orthopedics Chief
	<b>Surgical Specialist &gt;</b>
	Trauma Medical Director
	Trauma Residents
	Trauma Senior Resident
	Trauma Surgeons

Field	Nurse Group / Section / Role
	Burn Unit
	CRNA
	ED / Trauma Resuscitation
	ICU / Pediatric ICU
	Medical Surgical / Step Down
	OR & Post Anesthesia Recovery
	Paramedics
	Rehabilitation Unit
	Respiratory Care
	Trauma Program Manager

The other two types of columns that contain lookup values are related to two choices available in the *Doctor Group / Section / Role* field. Notice above the two entries listed in **bold red** - "Non-Surgical Specialist >" and "Surgical Specialist >". These entries end with a right-angle character ( > ) which indicates that additional information is requested concerning these values.

First, if the *Doctor Group / Section / Role* value chosen is "Surgical Specialist >", then the next column in order in the *ANDs* spreadsheet tab, *Surgical Specialty*, should be completed. The lookup values for this column are:

Field	Surgical Specialty
	Cardiac
	Hand
	Microsurgery
	Obstetric/Gynecologic
	Ophthalmic
	Oral/Maxillofacial
	Orthopedic
	Otorhinolaryngologic
	Plastic
	Thoracic
	Urologic
	Trauma Medical Director

On the other hand, if the *Doctor Group / Section / Role* value chosen is "Non-Surgical Specialist >", then the column after the next in the *ANDs* spreadsheet tab, *Non-Surgical Specialty*, should be completed. The lookup values for this column are:

Field	Non-Surgical Specialty
	Cardiology
	Gastroenterology
	Hematology
	Infectious Disease
	Internal Medicine
	Nephrology
	Pathology
	Pediatrics
	Psychiatry
	Pulmonary Medicine
	Radiology

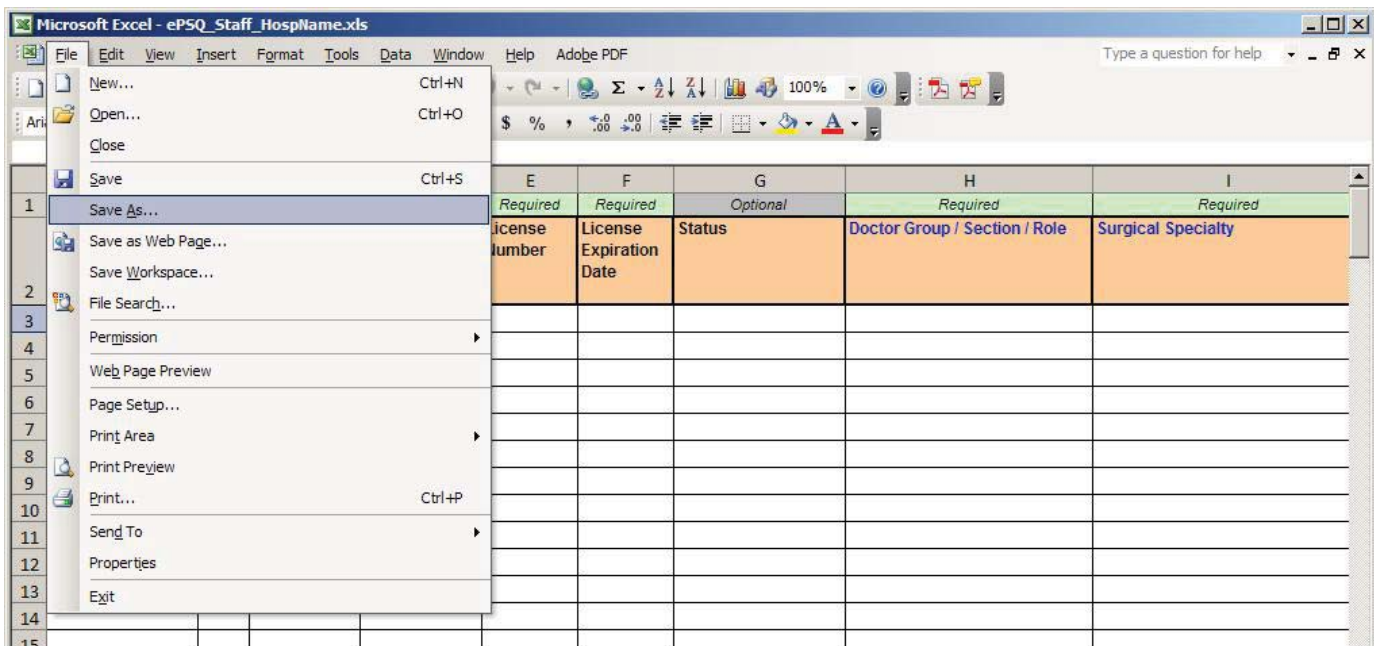
If neither "Surgical Specialist >" or "Non-Surgical Specialist >" is chosen for the *Doctor Group / Section / Role* column, then these next two columns in sequence in the *ANDs* tab (i.e. *Surgical Specialty* and *Non-Surgical Specialty*) can remain blank.



Use “Save As” to save the **Staff Spreadsheet** file under a different name

*The original Staff Spreadsheet file is read-only; you will need to save a separate copy.*

*You can save multiple copies with some type of appended version number or date/time string.*



## Upload Completed Survey

Create a zip file containing your completed survey and all attachments

*The exact steps for this will depend on the zip utility installed on your system. An example showing how to right-click on the folder and choose from a pop-up menu to create a zip file is shown below*

