Ralph Mitchell, PA-C went out into the community and personally handed out coats, hats, gloves and new socks along with a gift card for food to people that were being turned away from two local shelters due to overcrowding.

Trauma Trust staff also serve breakfast at Urban Grace church the 4th Sunday of every month.

Doing the right thing even though no one is looking is one of the core values of Trauma Trust.

Ralph Mitchell, PA-C leads by example. Ralph was rounding on a patient recently and noticed that his homeless patient was in serious need of personal hygiene help. Ralph, after being granted permission from the patient, contacted and paid a local barber who agreed to come into the hospital and give the patient a haircut and groomed his beard. We wanted to recognize Ralph for going above and beyond! We are lucky to have you.

In January Rico Cortez, PA-C saw a need and acted. Rico witnessed someone stealing a coat from a large department store and it got him thinking about the plethora of homeless people in our community. Pierce County had freezing weather with more forecasted, Rico coordinated a warm clothing drive. Items collected were brought to Tacoma general ED where EST Maggie Doty organized and sorted the items. Money was donated by Trauma Trust Staff and 30 McDonald's' gift cards were purchased to distribute. Some of the collected items were given to both hospitals to hand out to patients in need and the rest were personally delivered to the homeless. January 14th Rico and Heather Pounds,

Trauma Educator, went out into the community and personally handed out coats, hats, gloves and new socks along with a gift card for food to people that were being turned away from two local shelters due to overcrowding.

Trauma Trust staff also serve breakfast at Urban Grace church the 4th Sunday of every month.

Ralph, Krista, Staci, Betsy, Rico & Karen
Trauma Nurse Questions:

1.) What is the appropriate technique to palpate the pelvis for stability?
   A. Apply gentle pressure over the iliac wings downward and laterally
   B. Apply firm pressure over the iliac wings downward and laterally
   C. Apply gentle pressure over the iliac wings downward and medially
   D. Apply firm pressure over the iliac wings downward and medially

2.) What is the first step to stop a hemorrhage associated with an amputated extremity?
   A. Initiate direct pressure
   B. Elevate the extremity above the level of the heart
   C. Apply a tourniquet
   D. Splint the limb

3.) What is an early assessment finding of increased intracranial pressure in the patient with a brain injury?
   A. Dilated or blown pupils
   B. Vomiting
   C. Abnormal Posturing
   D. ICP greater than 68 mmHg

See answers on back page

New Faces to the Trauma Team

Welcome Back
Dawn Reynolds PA-C! Dawn has spent the last year with Franciscan Inpatient Team and is rejoining Trauma full time in April. We are happy to have her back.

Tiffany Crabb, PA-C joined the group in March, Tiffany comes to us from the Multicare Orthopedic surgical group.

Welcome Back

Trauma Pneumonic
Of the Quarter

A Alert ~ is the Patient alert
V Verbal ~ is the patient only responsive to verbal stimuli
P Pain ~ is the Patient only responsive to pain
U Unresponsive ~ no response

Save the date!
The 10th Annual Tacoma Trauma conference will be November 18th 2016.

Registration for the conference opens July 1st.
www.traumatrust.org
The U.S. Food and Drug Administration granted approval, as of October 2015, to use Praxbind (idarucizumab) for patients who are taking the anticoagulant Pradaxa (dabigatran) during emergency situations when there is a need to reverse Pradaxa’s blood-thinning effects. Praxbind is the first reversal agent approved specifically for Pradaxa and works by binding to the drug compound to neutralize its effect. Praxbind solution is for intravenous injection.

Preparation:
* Ensure aseptic handling when preparing and administering the infusion.
* Parenteral drug products should be inspected visually for particulate matter and discoloration prior to administration, whenever solution and container permit.
* Once solution has been removed from the vial, administration should begin promptly or within 1 hour.

Administration:
* Do not mix with other medicinal products.
* A pre-existing intravenous line may be used for administration of Praxbind. The line must be flushed with 0.9% Sodium Chloride Injection, USP solution prior to infusion. No other infusion should be administered in parallel via the same intravenous access.

Option 1: Infusion
Hang vials and administer as 2 consecutive infusions.

Option 2: Bolus Injection
Inject both vials consecutively via syringe.

St. Joseph Medical Center and Tacoma General now carry this. Please contact Pharmacy for questions. Follow manufacturer’s guidelines for indications and usage, dosing, administration, contraindications, precautions and adverse reactions.

St. Joseph Medical Center
and Tacoma General now carry this. Please contact Pharmacy for questions. Follow manufacturer’s guidelines for indications and usage, dosing, administration, contraindications, precautions and adverse reactions.

 Trauma News: FDA Approves Praxbind Use

For the 10th Annual Tacoma Trauma Conference we are having a contest to design the logo for the posters and the tee-shirts for this years conference. Submissions should be sent into the Trauma Trust office by April 29th, The Conference Planning committee will be voting in May. Good Luck!
Email questions and submissions to heatherpounds@traumatrust.org
We look forward to seeing all the creative artwork!

Did you know that Trauma trust is on Facebook?
Like us at Tacoma trauma trust!
“Keep your thoughts positive because your thoughts become your words.
Keep your words positive because your words become your behavior.
Keep your behavior positive because your behavior becomes your habits.
Keep your habits positive because your habits become your values.
Keep your values positive because your values become your destiny.”

Mahatma Gandhi

Answers to trauma nurse questions:

1.) C  This should be done only if there is not an obvious fracture and it is only done to limit possible damage.
2.) A  Initiate direct pressure  The first step to control any bleeding is direct pressure.  If that is not adequate, the application of a tourniquet may be needed.
3.) B  Vomiting  Early signs of increased intracranial pressure include vomiting, nausea, headache, amnesia, behavioral changes, and early changes in level of consciousness.

TRAUMA EDUCATION

TRAUMA NURSE CORE COURSE (TNCC)

Franciscan Health Education
April 25th & 26th 2016
June 13th & 14th 2016
August 22nd & 23rd 2016
Contact: markblaney@chifranciscan.org

Multicare/Newcastle Training
April 11th & 12th 2016
June 6th & 7th 2016
Contact: newcastletraining.com

Cascade Healthcare
April 11th & 12th 2016
May 11th & 12th 2016
Contact: CascadeTraining.com

For detailed information about
TNCC contact the Emergency nurses Association (ENA)
Contact: ena.org

ADVANCED TRAUMA CARE FOR NURSES (ATCN)

Harborview Medical Center Spokane
TBD
Contact: maglenn@uw.edu

Sacred Heart Medical Center, Spokane
May 13th & 14th
September 15th & 16th 2016
Contact: Coleen.connors@providence.org

Legacy Emanuel Medical Center – Portland
May 23rd & 24th 2016
September 19th & 20th 2016
October 24th & 25th 2016
Contact: Nora Shidner - nshidner@lhs.org

For detailed information about
ATCN contact the Society of Trauma Nurses (STN)
www.traumanurses.org

Coming Soon
Online Trauma Education Modules!