Parent Policy: InsertLinkToParentPolicy Title:

Geriatric Trauma Patient Admitting
Service

Standard Operating Procedure

Effective Date: 05/15/2023

Geriatric Trauma Patient Admitting Service: WakeMed Raleigh Trauma Services vs Non-Surgical Service

Purpose:

The complex care of geriatric patients demands a multidisciplinary approach. Trauma Services uniquely cares for the multisystem injured patient utilizing extensive inpatient resources. While not all injured patients require the specialized care of the trauma system, those who do should be able to benefit from all available services. To prevent overloading the trauma system, established care guidelines are necessary, particularly when it comes to our injured geriatric patients who are amongst the most frail population.

Geriatric Admission to Trauma Team:

- 1) Multisystem trauma patients
 - a. Trauma Services
- 2) Head Injury- if require admission
 - a. Trauma with Neurosurgical consult
- 3) Vertebral fractures (compression fx or vertebral body fx- if require admission
 - a. Trauma with Spine consult
- 4) Rib fractures-if require admission
 - a. Trauma (re: Rib fracture Guidelines)
- 5) Facial injuries-if require admission
 - a. Trauma w ENT consult
- 6) Pelvic fx (includes pubic rami fractures)-if require admission
 - a. Trauma with Ortho consult

Geriatric Admissions to Non-Surgical Services:

It is appropriate to admit patients with certain isolated injuries to a non-surgical service as specified by collaborative agreements such as Hospitalist-Orthopaedics.

- 1) Isolated hip fractures (does not include pelvic fractures)
 - a. Admit to Hospitalist Service with Ortho consult
- 2) Isolated extremity fx- if require admission
 - a. Admit to Hospitalist Service with Ortho Consult
- 3) Isolated transverse spinous process fx- rarely require admission but may need pain control or assistance with ambulation
 - a. Admit to Hospitalist Service with Spine Consult

Does patient require admission?

Approved by: MED DIR, TRAUMA

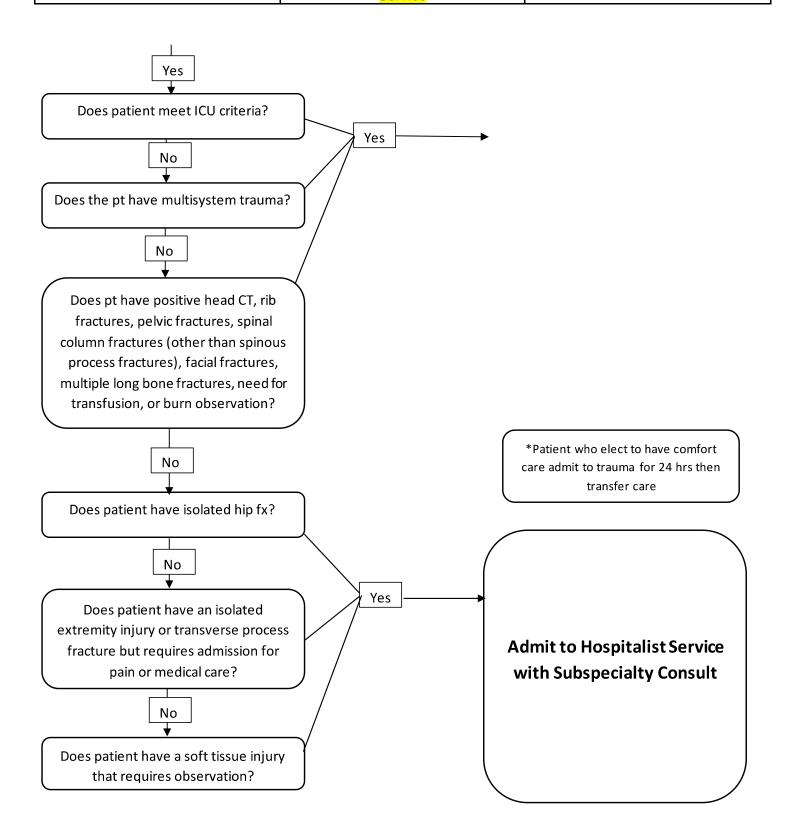
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Prepared by: *MGR, TRAUMA PROGRAM* **Approved by:** *MED DIR, TRAUMA*

