

# PTN Conferencing Guidelines

## OVERVIEW

Out of hospital referrals to VGH via Patient Transfer Network (PTN) frequently involve poly-traumatized patients requiring 2 or more specialty services to be involved in their care. Appropriate involvement of other affected specialties in the initial PTN conference in order to provide them the opportunity to weigh in on the requirement for VGH-specific care and/or offer guidance pre- and during transfer is often unclear.

## GOALS

1. Provide clear guidance on when to include other services on a PTN conference call;
2. Provide clear guidance on when communication with other services can be delayed until working hours; and
3. Provide examples of conditions that do NOT require VGH-specific care

## SPECIFICATIONS

Each service will provide specific guidance that will serve as a reference for their involvement in patient care stratified in the following fashion:

- Requires VGH-specific care and service should be involved in initial PTN call
- Requires VGH-specific care and service does not need to be involved in initial PTN call
- Does not require VGH-specific care

## MAINTENANCE AND DISTRIBUTION

### Maintenance

Guidelines will be reviewed yearly during VGH Trauma Advisory Committee (TAC) meeting.

### Distribution

Specialty TAC representatives will be responsible to distribute these guidelines to their respective services.

Specialty	Type of Patient				
	Requires VGH-specific care and service should be involved in initial PTN call	Requires VGH-specific care and service does not need to be involved in initial PTN call	Does not require VGH-specific care	If coming to VGH for other service and has this injury, this service should be involved in initial PTN call	If coming to VGH for other service, this injury does NOT require this service be involved in initial PTN call
Ortho Trauma					
Burns	Any burn over 10%. Deep burns over 5%. Deep facial and hand burns. Inhalation injury. Electrical injury. excluding arc burns. Chemical burns.		Burns under 30% from Vancouver Island. Burns under 10% from Kelowna and Prince George. Superficial burns under 5%. First degree burns.		
Spine Surgery	Spinal cord injury	Spine fractures without neurological deficits from Vancouver Coastal Health or any	From a trauma perspective, any spine trauma without neurological deficit from	Spinal cord injury	Everything else

		ankylosing fracture from BC	outside our health region should be managed locally		
<b>Neurosurgery</b>	Intracranial Vascular (arterial) trauma (e.g. carotid-cavernous fistula)  Complex head injury requiring Neuro-ICU	None	Any neurosurgery service can manage surgical TBI, consider VGH for complex head injury requiring neuro-ICU	Surgical lesion (SDH or epidural) for OR planning purposes  When in doubt, call	Everything else
<b>Cardiac Surgery</b>	Traumatic injury to the thoracic aorta. Penetrating injury to the heart with hemodynamic instability.				
<b>Plastic Surgery</b>	Major Amputations for replantation, Multi-digit replantation, Complex Facial Trauma (GSW, ...),		Simple facial fractures, simple bone and soft-tissue injuries of the hands or extremities, Chronic		

	Necrotizing soft-tissue infections, Mangled Extremities for attempted salvage		wounds (not resulting in secondary life-threatening infections)		
<b>Vascular Surgery</b>	Traumatic injury to the descending thoracic or abdominal aorta. All major traumatic arterial and venous injuries that are life, limb threatening.				Isolated, mangled extremity.
<b>Trauma Surgery</b>	Hemodynamically unstable polytrauma patient from VCH Hemodynamically unstable polytrauma patient that requires VGH-specific care for another specialty Mangled extremity	Hemodynamically stable single system patient with polytrauma mechanism At the discretion of specialty surgeon accepting patient	<b>Only at discretion of accepting surgeon:</b> Hemodynamically stable single system patient with low risk of other injury based on mechanism	Hemodynamically stable polytrauma patient that requires VGH-specific care for another specialty	<b>Only at discretion of accepting surgeon:</b> Hemodynamically stable single system patient with low risk of other injury based on mechanism