

COMMITTEE ON TRAUMA 2024

Annual Meeting

ATLS Global Symposium

March 6-9 | Chicago, IL



Committee on Trauma Annual Meeting | March 6-8, 2024

Wednesday, March 6, 2024

TIME	SESSION TITLE	ROOM	LEVEL
7:00 am-5:00 pm	Badge Pickup and Onsite Registration	Continental Foyer	Lobby Level
8:00-9:20 am	Advocacy Pillar	Continental Ballroom	Lobby Level
9:20-9:35 am	Break	Continental Foyer	Lobby Level
9:35-11:00 am	Quality Pillar	Continental Ballroom	Lobby Level
11:00 am-12:00 pm	Spotlight Discussion		
	Creating the Future: Defining Pathways for Sustainable Funding of Our Trauma Centers <i>Moderator: Peter Pappas, MD, FACS</i>	Marquette	3rd Floor
	Who Is the Leader and Where Are My Followers? Team Dynamics in Trauma Resuscitation <i>Moderator: Julie Dunn, MD, FACS</i>	Williford C	3rd Floor
	Don't Just Save a Life: How Pediatric and Adult-Trained Trauma Surgeons Can Best Partner to Save Lifetimes <i>Moderator: Robert W. Letton Jr., MD, FACS</i>	Williford A	3rd Floor
	Moving on Up: Advances in Upstream Approaches to Firearm Injury Prevention <i>Moderators: Ashley Williams, MD, FACS, and Thomas Duncan, DO, FACS</i>	Williford B	3rd Floor
	Continuing Evolution of Trauma: Are We Our Own Specialty Now? <i>Moderator: Stephanie Savage, MD, MS, FACS</i>	Joliet	3rd Floor
12:00-1:30 pm	Lunch on Own		
1:30-2:50 pm	Injury Prevention Pillar	Continental Ballroom	Lobby Level
2:50-3:05 pm	Break	Continental Foyer	Lobby Level
3:05-4:30 pm	Systems Pillar	Continental Ballroom	Lobby Level
4:30-5:30 pm	Town Hall: Can We Talk? Your Thoughts About Trauma Activation Fees	Continental Ballroom	Lobby Level
5:30-6:30 pm	New COT Member and New FTL Reception (By Invitation Only)	Waldorf	3rd Floor

Thursday, March 7, 2024

TIME	SESSION TITLE	ROOM	LEVEL
7:00 am–6:00 pm	Badge Pickup and Onsite Registration	Continental Foyer	Lobby Level
7:00–8:15 am	Regional Committee Breakfast Meetings		
	Region 1	Private Dining Room #2	3rd Floor
	Region 2	Private Dining Room #1	3rd Floor
	Region 3	Williford B	3rd Floor
	Region 4	Williford C	3rd Floor
	Region 5	Williford A	3rd Floor
	Region 6	Joliet	3rd Floor
	Region 7	Private Dining Room #4	3rd Floor
	Region 8	Astoria	3rd Floor
9:00–10:20 am	Education Pillar Meeting	Continental Ballroom	Lobby Level
10:30–11:30 am	Spotlight Discussion		
	Energizing States for Regional Medical Operations Coordinating Center (RMOCC) Development <i>Moderators: John Armstrong, MD, FACS, Lillian Liao, MD, MPH, FACS, and S. Rob Todd, MD, FACS, FCCM</i>	Marquette	3rd Floor
	Back to the Future: Teletrauma Is Here to Stay, So How Do We Actually Get It Done? <i>Moderators: Caroline Park, MD, FACS, and Zain Hashmi, MD, FACS</i>	Williford C	3rd Floor
	COT: The Global Frontier—Where Are the Opportunities for Global Engagement? <i>Moderator: Nirav Patel, MD, FACS</i>	Williford A	3rd Floor
	See One, Do One, Teach One Belongs to the Ages: Surgical Simulation Is the Future <i>Moderator: Michael Cripps, MD, FACS</i>	Williford B	3rd Floor
	A Health System Approach to Firearm Injury and Mortality Prevention (FIMP) <i>Moderator: Chethan Sathya, MD, MSc, FRCSC, FACS</i>	Joliet	3rd Floor
11:30 am–1:00 pm	Lunch on Own		
12:00–1:00 pm	International Region Chiefs (By Invitation Only)	Private Dining Room #1	3rd Floor
1:00–6:00 pm	Resident and Fellow Trauma Paper Competition	Continental Ballroom	Lobby Level
3:00–3:30 pm	Break	Continental Foyer	Lobby Level
6:00–7:00 pm	Networking Reception	Continental Foyer	Lobby Level
8:00–10:00 pm	Reception for PAC Contributors (By Invitation Only)	Joliet	3rd Floor

Friday, March 8, 2024			
TIME	SESSION TITLE	ROOM	LEVEL
7:00 am–4:30 pm	Badge Pickup and Onsite Registration	Continental Foyer	Lobby Level
7:00–8:30 am	Member Breakfast	Grand Ballroom	2nd Floor
7:00–8:15 am	Regional Committee Breakfast Meetings		
	Region 9	Williford B	3rd Floor
	Region 10	Private Dining Room #1	3rd Floor
	Regions 11 & 12	Joliet	3rd Floor
	Region 13	Williford C	3rd Floor
	Region 14	Williford A	3rd Floor
	Region 15	Astoria	3rd Floor
	Region 16	Private Dining Room #4	3rd Floor
	Region 17	Private Dining Room #2	3rd Floor
8:30–10:30 am	Regional/Central COT Business Meeting	Continental Ballroom	Lobby Level
10:30–11:00 am	PHOTOS: Regions 14–17	Grand Ballroom	2nd Floor
11:00 am–12:00 pm	Special Session: STOP THE BLEED®: Past, Present, and Future	Continental Ballroom	Lobby Level
12:00–12:30 pm	PHOTOS: Central COT Members, Regional COT Members, Region Chiefs	Grand Ballroom	2nd Floor
12:30–2:00 pm	Attendee Lunch	Grand Ballroom	2nd Floor
12:30–2:00 pm	Region Chiefs (By Invitation Only)	Private Dining Room #2	3rd Floor
2:00–3:00 pm	Spotlight Discussion		
	Prehospital Blood—Easier Said than Done <i>Moderator: Peter Fischer, MD, MS, NRP, FACS</i>	Williford C	3rd Floor
	Incorporating APPs into Trauma Workflow <i>Moderator: Stephanie Bonne, MD, FACS</i>	Williford A	3rd Floor
	The Mission Zero Act and Military Civilian Partnerships—Challenges and Opportunities in Establishing MCPs <i>Moderator: Brian Gavitt, MD, MPH, FACS</i>	Williford B	3rd Floor
	DEI in COT—Should We Consider Standards that Might Ensure Equitable Care? <i>Moderator: Lillian Kao, MD, FACS</i>	Joliet	3rd Floor
	Conversational Burn Knowledge—A Future Criterion for ACS Trauma Center Verification? <i>Moderator: James Jeng, MD, FACS</i>	Astoria	3rd Floor
6:00–6:15 pm	PHOTOS: FTLs, Paper Competition Presenters	Grand Ballroom	2nd Floor
6:15–6:30 pm	PHOTOS: COT Executive Committee	Grand Ballroom	2nd Floor
6:30–7:00 pm	COT Member Reception	Normandie Lounge	2nd Floor
7:00–9:00 pm	COT Member Banquet	Grand Ballroom	2nd Floor
9:00–10:00 pm	COT Member Dessert Reception (Registration Required)	Normandie Lounge	2nd Floor

ATLS Global Symposium | March 8-9, 2024

Friday, March 8, 2024

TIME	SESSION TITLE	ROOM	LEVEL
7:00 am-4:30 pm	Badge Pickup and Onsite Registration	Continental Foyer	Lobby Level
12:30-2:00 pm	Attendee Lunch	Grand Ballroom	2nd Floor
2:00-5:00 pm	All There Is to Know about the ATLS 11th Edition Revision	Waldorf	3rd Floor

Saturday, March 9, 2024

TIME	SESSION TITLE	ROOM	LEVEL
7:00 am-3:00 pm	Badge Pickup and Onsite Registration	Continental Foyer	Lobby Level
7:00-9:00 am	Attendee Breakfast	Grand Ballroom	2nd Floor
7:45-8:45 am	STOP THE BLEED® Instructor Training (<i>Registration Required</i>)	Williford A	3rd Floor
7:45-8:45 am	ATLS Operational and Administrative Updates for Coordinators	Waldorf	3rd Floor
8:00 am-5:00 pm	"Pop-up" ACS Trauma Education Customer Service (Throughout the Day)	Continental Foyer	Lobby Level
9:00 am-12:00 pm	Trauma Education Around the World	Continental Ballroom	Lobby Level
10:30-10:45 am	Break	Continental Foyer	Lobby Level
12:00-1:15 pm	Networking Lunch, Awards, and Recognitions	Grand Ballroom	2nd Floor
1:15-2:00 pm	Breakout Sessions		
	Leadership Skills for ATLS Faculty	Continental Ballroom	Lobby Level
	Coordinator Town Hall	Waldorf	3rd Floor
	Issues in Management of Penetrating Trauma	Marquette	3rd Floor
2:15-3:00 pm	Breakout Sessions		
	Quick Shot Sessions: STORM, Trauma Exposure, and STOP THE BLEED® Pediatrics	Continental Ballroom	Lobby Level
	Who Is the Leader and Where Are My Followers? Team Dynamics in Trauma Resuscitation	Waldorf	3rd Floor
	Looking Ahead: Enhancing the COT Trauma Education Portfolio	Marquette	3rd Floor
3:00-3:15 pm	Break	Continental Foyer	Lobby Level
3:15-5:00 pm	ATLS Hot Topics Panel Discussion	Continental Ballroom	Lobby Level
5:00-6:00 pm	Closing Reception	Continental Foyer	Lobby Level

CME INFORMATION

Successful completion of this Continuing Medical Education (CME) activity, which includes participation in the evaluation component, enables the learner to earn credit toward the CME and Self-Assessment requirements of the American Board of Surgery's Continuous Certification program.

Resident and Fellow Trauma Paper Competition

The deadline to claim CME credits is May 9, 2024

CONTINUING MEDICAL EDUCATION CREDIT INFORMATION

Accreditation

The American College of Surgeons is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

AMA PRA Category 1 Credit™

The American College of Surgeons designates this live activity for a maximum of **4.50 AMA PRA Category 1 Credits™**. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Of the *AMA PRA Category 1 Credits™* listed above, a maximum of **4.50** hours meets the requirements for Trauma.*



Program Objectives

- Discuss current research in patient care for trauma injuries.
- Evaluate new methods for treatment of trauma patients.

ATLS Global Symposium

The deadline to claim CME credits is May 9, 2024.

CONTINUING MEDICAL EDUCATION CREDIT INFORMATION

Accreditation

The American College of Surgeons is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

AMA PRA Category 1 Credit™

The American College of Surgeons designates this live activity for a maximum of **10.00 AMA PRA Category 1 Credits™**. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Of the *AMA PRA Category 1 Credits™* listed above, a maximum of **10.00** hours meets the requirements for Trauma.*



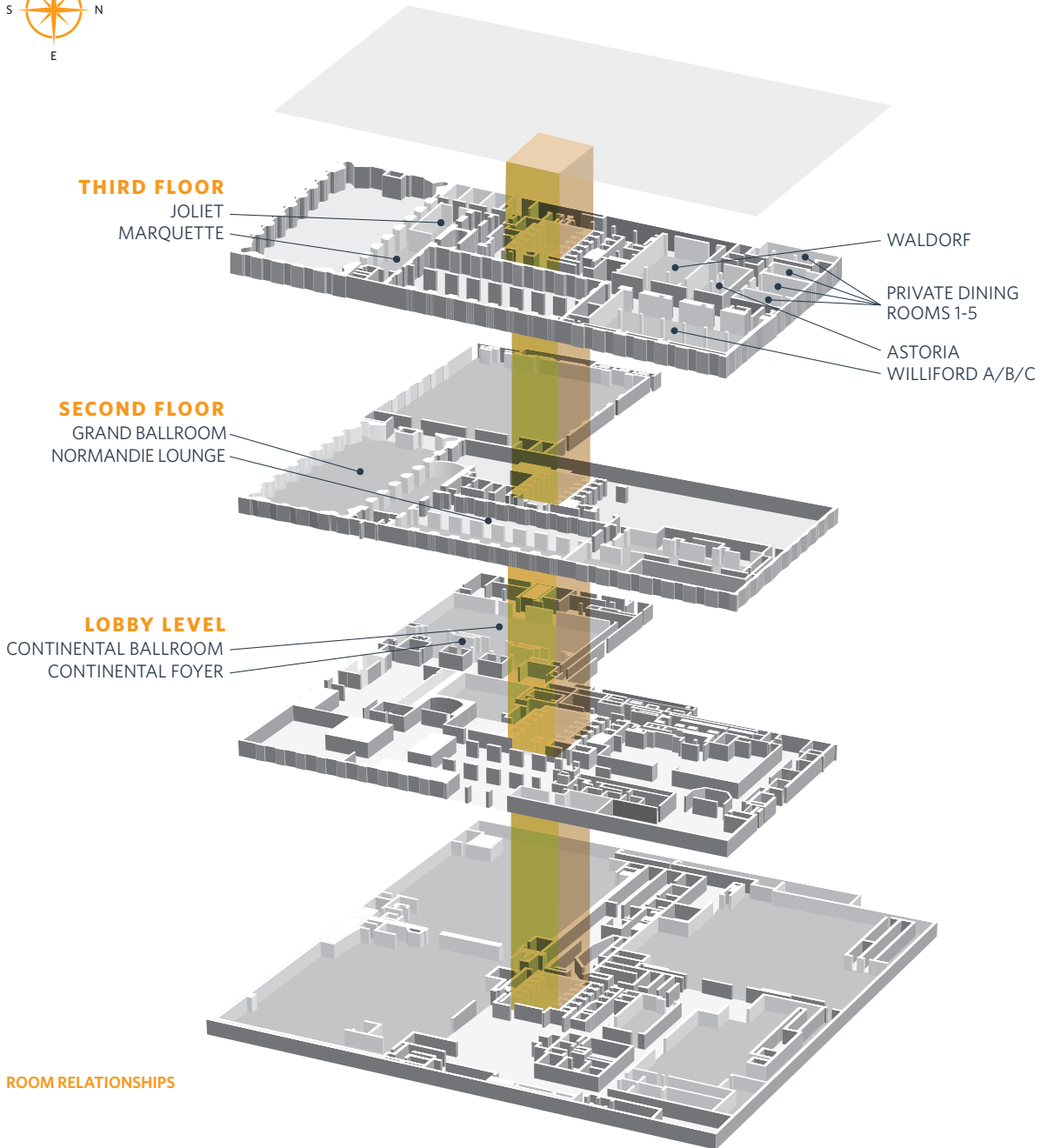
Program Objectives

- Inform surgeons of new science discovered in trauma medicine.
- Support Fellows in learning the most up-to-date procedures for how to care for patients at their respective medical facilities.
- Continue developing competencies in trauma medicine for continuous medical education.

Disclosure Information:

In accordance with the ACCME Accreditation Criteria, the American College of Surgeons must ensure that anyone in a position to control the content of the educational activity has disclosed all relevant financial relationships with any commercial interest. All reported conflicts are managed by a designated official to ensure a bias-free presentation. Please refer to the disclosure list online for our meetings.

FLOOR PLAN



**Access
WiFi**

SSID: COTATLS24
PW: COTATLS24



SPOTLIGHT DISCUSSIONS

Spotlight Discussions

The Spotlight Discussion sessions are intended to provide opportunities for members to step up and lead a discussion on a topic of interest to them. They also can be used by an existing program or work group to elicit feedback on a topic of interest, which would then be brought back to the original work group for further consideration and action. These one-time discussion opportunities will enhance fellowship and networking as well as serving as an important feedback mechanism for targeted topics.

Wednesday, March 6, 11:00 am–12:00 pm

Spotlight Discussion 1

Who Is the Leader and Where Are My Followers? Team Dynamics in Trauma Resuscitation

Moderator: Julie Dunn, MD, FACS

To improve patient safety, it is imperative that we create environments in which it is easy to do the right thing (Braithwaite et al., 2015). This begins with educating and embracing ALL resuscitation team members on essential teamwork skills and train these skills as core principles across disciplines (i.e., physicians, nurses, medical assistants, respiratory therapists, radiology technicians, laboratory, and blood bank participants, etc.). The goal of this discussion is to highlight and discuss skills proven to boost effective communication, promote situational awareness, and foster shared mental models to create enduring exceptional trauma resuscitation teams.

1. What are the soft skills needed during trauma resuscitation to promote the best patient outcomes?
2. Define psychological safety in teamwork.
3. What makes a great team?

Audience Interest: Education

Spotlight Discussion 2

Don't Just Save a Life: How Pediatric and Adult-Trained Trauma Surgeons Can Best Partner to Save Lifetimes

Moderator: Robert W. Letton Jr., MD, FACS

Not enough pediatric trauma centers are staffed by pediatric trauma surgeons to meet the needs of pediatric trauma patients. This session will examine the provision of care by adult and pediatric-trained providers, as well as discuss the role of each in combined adult and pediatric trauma centers. Through this discussion we hope to develop two to three real life objectives for the ACS COT to help adult and pediatric trauma centers better partner to save more lifetimes.

1. In combined ATC/PTC with pediatric surgeons available, how much participation from the pediatric surgeons is appropriate and how can we improve communication?

2. In combined ATC/PTC with pediatric surgeons available, how can Level 1 PTCs better partner and what can we do to increase the pediatric trauma workforce?
3. How do pediatric trauma centers support adult trauma centers (Levels 1–4) that don't have pediatric providers yet perform initial resuscitation of pediatric trauma patients?

Audience Interest: Specialty, Pediatrics

Spotlight Discussion 3

Creating the Future: Defining Pathways for Sustainable Funding of our Trauma Centers

Moderator: Peter Pappas, MD, FACS

Trauma center sustainability is crucial to the future of trauma care. Our common goals, from optimal care of every trauma patient to injury prevention and disaster management, are contingent upon skilled, resourced, and organized trauma centers. The opportunity presents itself for clinician leaders to advocate for sustainable and equitable means of funding for trauma care for now and the future.

1. How are trauma centers funded in 2024?
2. What is the role, along with the promise and peril, of activation fees?
3. How do we as clinical leaders guide the creation of sustainable and equitable pathways for trauma center funding?

Audience Interest: Systems, Advocacy

Spotlight Discussion 4

Continuing Evolution of Trauma: Are We Our Own Specialty Now?

Moderator: Stephanie Savage, MD, MS, FACS

With the continued growth and change in the practice of trauma and now the evolving specialty of acute care surgery, many trauma surgeons wonder if a separate board should be created akin to surgical critical care. However, a large proportion of trauma care occurs outside of tertiary centers by general surgeons. The purpose of this session is to discuss the pros and cons of board specialization or focused practice designation for trauma surgery.

1. Has trauma care evolved significantly to engender a separate board designation from general surgery?
2. What purpose would a board designation or focused practice designation serve? Would this result in improved care for patients?
3. Would this concept disenfranchise community general surgeons who provide trauma care?

Audience Interest: Clinical Practice

Spotlight Discussion 5

Moving On Up: Advances in Upstream Approaches to Firearm Injury Prevention

Moderators: Ashley Williams, MD, FACS, and Thomas Duncan, DO, FACS

Firearm injury prevention strategies continue to evolve. Hospital-based Violence Intervention Programs (HVIPs) are the gold standard for reducing reinjury. What modalities can we use to move upstream in addressing the social determinants of health in the “pre-hospital” setting? The goal is to discuss strategies that are currently in place as well as potential gaps to address moving forward.

1. What are the various social determinants of health (SDOH) that are being addressed by violence intervention programs?
2. What are the current policies, federal or local, that are negatively or positively affecting firearm injury prevention?
3. What are mechanisms to address SDOH and what policies can we champion as the COT?

Audience Interest: Injury Prevention

Thursday, March 7, 10:30-11:30 am

Spotlight Discussion 1

See One, Do One, Teach One Belongs to the Ages: Surgical Simulation Is the Future

Moderator: Michael Cripps, MD, FACS

The purpose of this discussion is to engage the participants in debate regarding the use of simulation training in the care of injured patients. There are multiple avenues to investigate, including implementation, scope of simulation, and how to review effectiveness.

1. How frequently should trauma simulation training be included in trauma programs?
2. Can low fidelity simulation improve outcomes in trauma patients?
3. Are trauma simulation programs just more frequent ATLS moulages?

Audience Interest: Education

Spotlight Discussion 2

Back to the Future: Teletrauma Is Here to Stay, So How Do We Actually Get It Done?

Moderators: Caroline Park, MD, FACS, and Mohammad Zain Hashmi, MD, FACS

This is the second session following last year’s popular Spotlight Discussion. We will review key elements to implementation, challenges, and discuss next steps in taking teletrauma from an idea to a standard.

1. Some programs have encountered challenges with reimbursement post-pandemic. What strategies have you employed to continue or grow telehealth?
2. If you had to standardize a few elements in trauma care, what would they be?
3. How do we evaluate outcomes and quality after implementation of teletrauma?

Audience Interest: Systems, Rural

Spotlight Discussion 3

A Health System Approach to Firearm Injury and Mortality Prevention (FIMP)

Moderator: Chethan Sathya, MD, MSc, FRCS, FACS

This session aims to increase attendee knowledge and understanding of evidence-based firearm screening tools, as well as potential facilitators and barriers to their implementation, in order to meaningfully intervene and reduce risk associated with widespread access to firearms.

1. Why are healthcare team members crucial to advance efforts to reduce firearm injury and death?
2. How do evidence-based screening tools normalize the conversation for healthcare team members?
3. What barriers/facilitators would you anticipate when piloting a universal screening or evidence-based screening tool within your unique institution?

Audience Interest: Injury Prevention

Spotlight Discussion 4

Energizing States for Regional Medical Operations Coordinating Center (RMOCC) Development

Moderators: John Armstrong, MD, FACS, Lillian Liao, MD, FACS, and S. Rob Todd, MD, FACS, FCCM

A national network of Regional Medical Operations Coordinating Centers (RMOCCs) is the organizational construct for our ACS COT National Trauma & Emergency Preparedness proposal. Pending federal action, there are opportunities to move RMOCCs forward at the state level. The Alabama Trauma System, Southwest Texas Regional Advisory Council, and Washington Medical Coordination Center offer examples of better outcomes through regional coordination. RMOCCs can function daily in the distribution of patients with time sensitive conditions and scale in disaster to load balance casualties across hospitals and trauma centers.

1. What are barriers to state action for RMOCCs?
2. How can ACS trauma center verification and trauma system standards encourage RMOCC development?
3. How could RMOCCs support rural trauma care?

Audience Interest: Systems, Advocacy

Spotlight Discussion 5

COT: The Global Frontier—Where Are the Opportunities for Global Engagement?

Moderator: Nirav Patel, MD, FACS

As a result of focused efforts, strategies and stakeholder dedication, COT programs have experienced a prolific increase in global engagement and expansion. Understanding challenges and exploring new opportunities in a collaborative fashion requires a forum to help facilitate open communication and engagement. The primary objective of this session is to share and receive feedback on options of how this may be best accomplished in a sustainable manner.

1. Why should the COT continue to have a specific focus on global engagement and participation?
2. How should the COT approach global engagement moving forward?
3. In which areas should the focus be?

Audience Interest: Global

Friday, March 8, 2:00–3:00 pm

Spotlight Discussion 1

Incorporating APPs into Trauma Workflow

Moderator: Stephanie Bonne, MD, FACS

This session will explore the integration of Advanced Practice Providers (APPs) into trauma services and how to best maximize their effort, how to engage hospital leadership to invest in APP education, training, and FTEs, and how to retain APPs in a volatile and competitive job market.

1. In what areas of the hospitals do most centers deploy their APPs workforce? Is this different between community and academic hospitals?
2. What are the continuing education needs of APPs working in trauma or in ICU settings?
3. How can APPs become more engaged in trauma quality, administration, and oversight?

Audience Interest: Clinical Practice

Spotlight Discussion 2

Prehospital Blood—Easier Said than Done

Moderator: Peter Fischer, MD, MS, NRP, FACS

Prehospital blood administration has been shown to be very beneficial to the trauma patient. Implementation, however, has been challenging in some systems. The goal of this session is to share success and failures in the journey to have a successful blood program so others can learn and provide solutions.

1. Do your local EMS systems utilize prehospital blood?

2. What were the challenges of establishing the program and how did you overcome them?
3. How did you get your blood bankers engaged?

Audience Interest: Systems, EMS

Spotlight Discussion 3

Conversational Burn Knowledge—A Future Criterion for ACS Trauma Center Verification?

Moderator: James Jeng, MD, FACS

Follow up discussion to last COT Burn Focus Session where it was decided to pursue addition of “conversational Burn Care knowledge” as a Level 1/2 Trauma Verification requirement as a joint project of the COT and the Verification Committee.

1. Report on explorations with the Verification Committee on this concept/initiative.
2. Report on draft manuscript to the *Journal of the American College of Surgeons* explaining the civilian defense imperative of trauma surgeons stepping into the lurch in the face of a true national burn mass casualty situation.
3. Discussion of timelines/deliverables and any new issues/initiatives pertinent to the burn surgeon resident on the ACS COT.

Audience Interest: Specialty, Burns

Spotlight Discussion 4

DEI in COT—Should We Consider Standards that Might Ensure Equitable Care?

Moderator: Lillian Kao, MD, FACS

The Verification, Review, Consultation (VRC) Program standards for trauma care touch upon many of the quality domains: safe, effective, efficient, patient-centered, and timely care, but we have not considered standards that might assure equitable care. These Spotlight Discussions will present an opportunity to learn about a proposed framework for incorporating equity into our standards and get input on whether this is a direction that might have benefit to patients without overburdening trauma centers.

1. Equitable care is a domain of quality that has not been incorporated into VRC standards. Should the VRC consider doing so?
2. The ACS, working across the quality programs, has developed a framework that might guide standard development. Does this framework resonate and what other aspects of equitable care should we consider?
3. Are there equity standards derived from the framework or others that we should consider implementing on a short timeline? If so, are these readily implementable at your center?

Audience Interest: DEI, Quality

Spotlight Discussion 5

The Mission Zero Act and Military Civilian Partnerships— Challenges and Opportunities in Establishing MCPs

Moderator: Brian Gavitt, MD, MPH, FACS

Share experiences between centers with established military-civilian partnerships (MCPs) with those who are considering establishing an MCP. Group discussion on the challenges and opportunities associated with the Mission Zero Act.

1. What are the biggest challenges with managing a military-civilian partnership?
2. What are the challenges and opportunities applying for/ implementing Mission Zero Act grants?
3. How have civilian trauma centers successfully incorporated military general surgeons in taking independent trauma calls?

Audience Interest: Advocacy, Systems, MHSSPACS



SAVE THE DATES

COMMITTEE ON TRAUMA

Annual Meetings & ATLS Global Symposiums



March 12–16
Chicago, IL



March 11–15
Birmingham, AL

