

# *Performing at the Top: The Advanced Practice Provider's Role in Trauma Resuscitation*

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***No disclosures***

# Objectives



Review the Advanced Practice Providers (APP) education requirements and certifications required



Define the role and clinical responsibilities of APPs in trauma resuscitation



Highlight the impact of APPs on patient outcomes and efficiency within the trauma system



Identify challenges and opportunities for expanding APP roles within your organization

# Nurse Practitioner

## Education:

- Takes anywhere from 6-8 years
- Must first be a licensed RN then complete a graduate-level program (typically a Master of Science in Nursing or Doctor of Nursing Practice)
- Obtain national certification in chosen focus area (Ex. family, pediatrics, acute care, etc.)

## Renewal:

- Nebraska APRN and RN licenses every 2 years
- Must maintain national NP certification and state RN license requirements and complete continuing education requirements (75-100 hours every 5 years).

## Misc:

- Nebraska is a 'Full Practice Authority' state but structured practice agreements are defined by hospital or practice environment
- Supervising physician agreements

# Physician Assistant

## Education:

- Takes anywhere from 6-7 years
- Require bachelor's degree with some previous clinical experience (varies program to program)
- Graduate from a PA program approved by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA)
- Pass the Physician Assistant National Certifying Examination by the National Commission on Certification of Physician Assistants (NCCPA)

## Renewal:

- Must maintain NCCPA certification (recertification exam every 10 years)
- Required to complete 50 hours of continuing education every 2 years

## Misc:

- Supervisory physicians retain legal responsibility for medical services provided by PAs
  - Must create an agreement that includes the PAs scope of practice
- A physician can supervise a maximum of 4 PAs at any given time

# Certifications and Training

## PALS

Pediatric Advanced Life  
Support



# *APP Role Expansion*

- Role began in 1960s due to lack of primary care providers (PCPs) in rural areas
- In 2003, Accreditation Council for Graduate Medical Education (ACGME) changed standards for all residency programs limiting hours worked to no more than 80 per week averaged over 4 weeks
- Increased staffing shortages leading to utilization of APPs
- NPs and PAs combined now outnumber PCPs in the U.S.
- From 2022-2032, PAs are projected to increase by 27% and NPs 45% compared to 3% growth expected by physicians

# APP Role in Trauma Bay

Perform

- Perform primary and secondary trauma survey

Perform

- Perform procedures (FAST, chest tube and central line placement, laceration repair, etc.)

Ensure

- Ensure timely transfer to CT scan or operating room

Ensure

- Ensure timely transfer to tertiary care facility

Facilitate

- Facilitate hospital admission

Collaborate

- Collaborate with multidisciplinary teams



# *APP Role Across Transitions of Care*

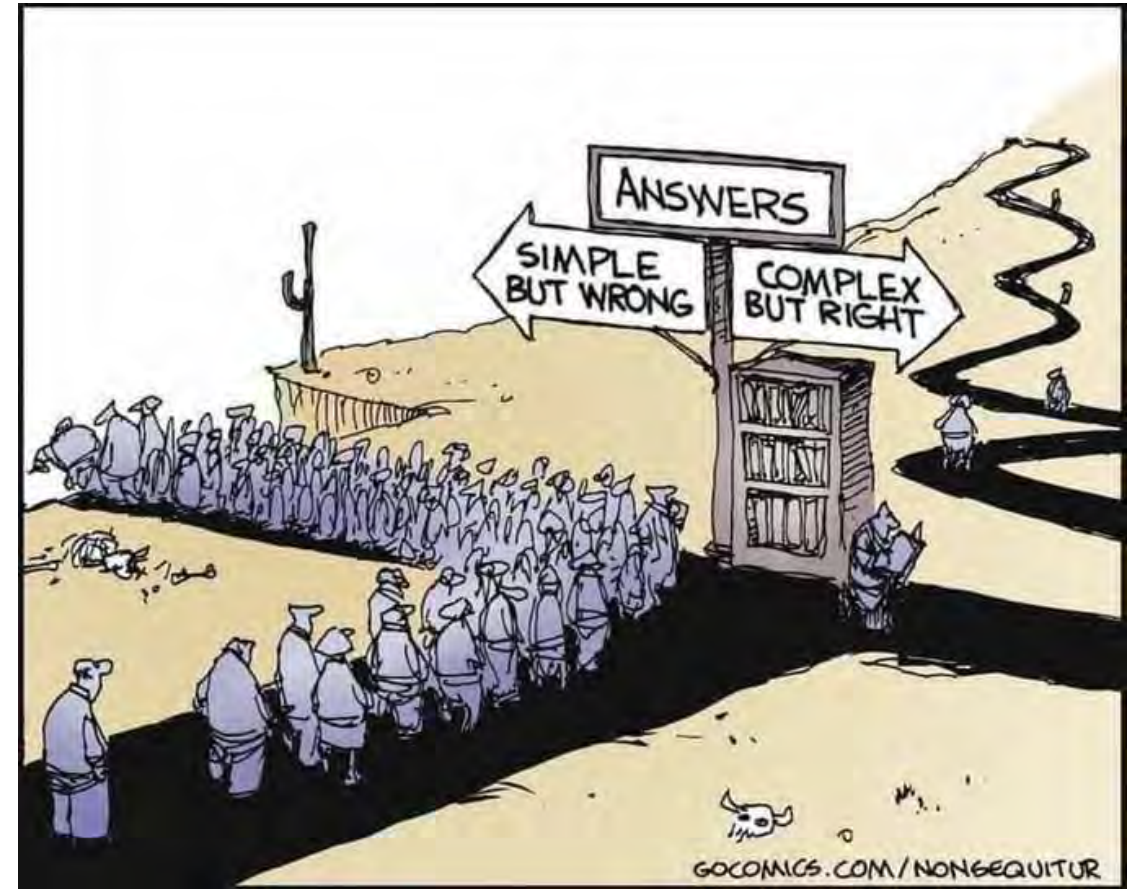
## *Inpatient*

- Daily rounds
- Medication adjustments
- Multidisciplinary collaboration
- Performs procedures/assists in surgery
- Ordering and interpreting diagnostic studies
- Discharge planning
- Patient and family education/conversations

## *Outpatient*

- Monitor post-hospitalization progress
- Evaluate new consults
- Prepare patients for outpatient surgery
- PTSD screening, etc.
- Patient and family education
- Wound care or other needed procedures
- Make referrals as needed

*Sounds Easy, Right?!*



# Developing an APP Program

- Hospital Leadership and Trauma Medical Director Commitment
- Recruiting
- Privileging and Credentialing
- Structured Education
  - Skills and Continued Competencies
  - Lectures
  - Case Reviews
- Orientation Manual with additional resources
- Mentoring program
- Continued evaluation and feedback

Procedure / Task	Return Demonstration	Direct Observation	Written/Verbal
<b>3. Clinical</b>			
Primary/Secondary Assessment			
Tertiary Assessment			
Chest Tube (insertion/removal/management)			
Intubation (assisting, equipment)			
Suturing/Stapling			
Ventilator Management (ABG interpretation, vent modes, etc.)			
Central line (insertion/removal/management)			

# *APP Impact on Patient Outcomes*

Decreased hospital  
and ICU length of stay

Decreased time of  
rehab consultation

Increased rate of  
discharge orders  
placed before noon

Increased compliance  
to DVT ppx guidelines

Increased  
identification of  
missed injuries

Decreased inpatient  
complications

- Pneumonia, UTI, surgical site infections, ARF, DVT/PE, sepsis

Decrease in  
unnecessary ER visits  
following discharge

Decrease in 30-day  
readmission rates

# *APP Impact on Staff Satisfaction*



Timely and accurate documentation – interventions, response times, handoffs



Surgeon satisfaction



Multi-disciplinary approach



Continuity of care



Staff education

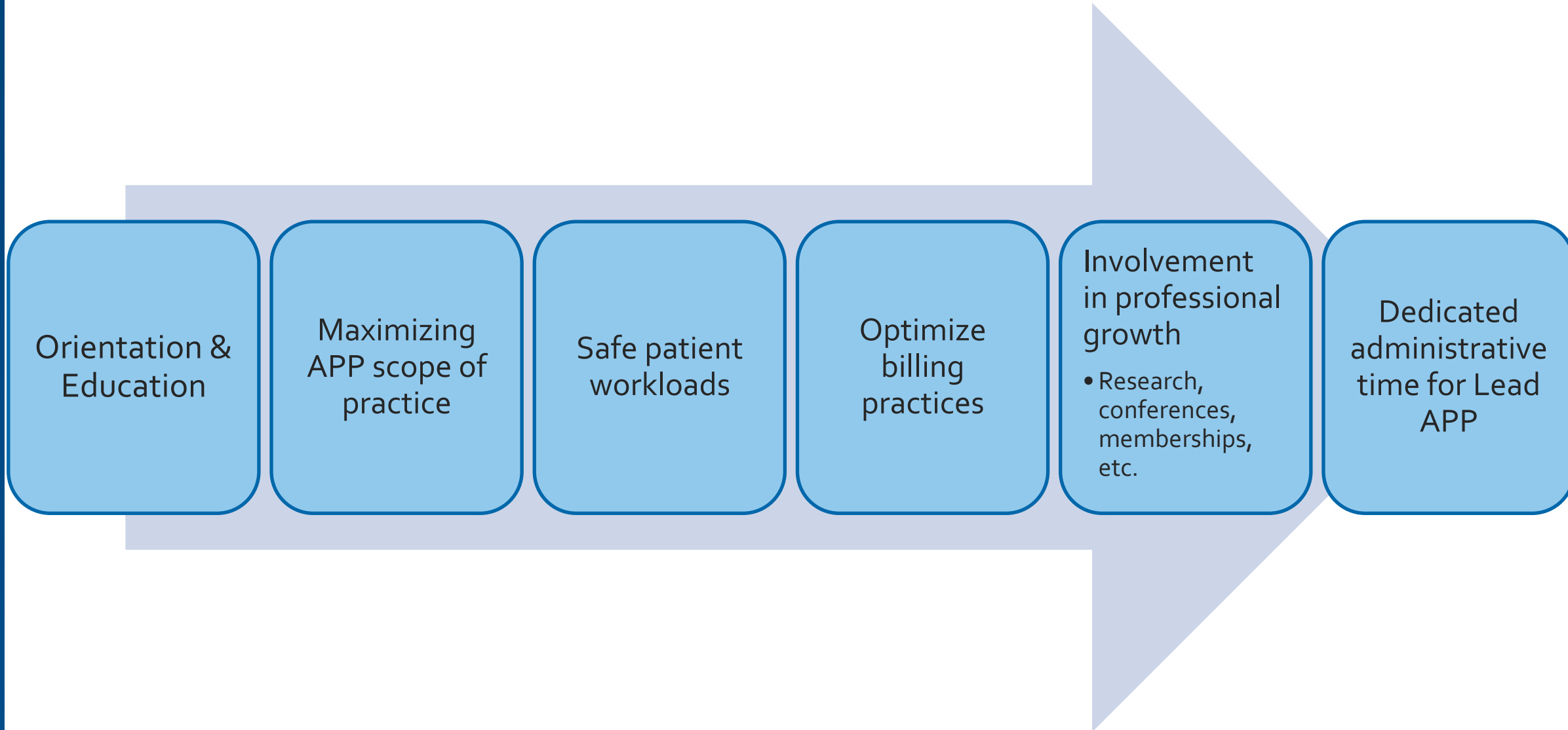


Ensure compliance with trauma registry requirements



Participate in performance improvement and trauma case reviews

# *Opportunities to Expand APP Role*





# Questions?

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# References

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