Dear Patient and Family

One of the most frightening and stressful situations any person can go through is being hospitalized or having a loved one hospitalized after a car crash, fall or other major trauma.

Our trauma program’s staff of doctors, nurses, social workers, physical therapists and other professionals understands the challenges recovery can bring, and we will do our best to help you or your loved one return to your previous health. This booklet will answer many of the questions you might have about our service and will make your time here at UK HealthCare more comfortable. If you still have other questions, please ask one of our doctors, nurses or other staff members.

UK Chandler Hospital Trauma Surgeons

Paul Kearney, MD  
Bernard Boulanger, MD  
Andrew Bernard, MD  
Phillip Chang, MD  
Brian Sonka, MD
The Level I Trauma Center

UK HealthCare is the regional trauma center for central and southeastern Kentucky, serving 50 counties and 17,000 square miles – a population of almost 1.5 million. University of Kentucky Albert B. Chandler Hospital is an American College of Surgeons-verified Level I Trauma Center. This means that UK HealthCare meets a very strict national standard for the evaluation and treatment of critically ill and injured patients. We have the facilities, resources and specialists necessary for the treatment of multisystem trauma, surgical emergencies and critical illnesses. The professionals at UK HealthCare are committed to the highest quality patient care possible.

The Trauma/Emergency Service

You or a family member has been admitted to the trauma/emergency surgery service, also known as the Blue Surgery service. The service provides care for injured patients, critically ill patients, and patients requiring elective and emergency surgery. You are here because you have a complex illness or injuries. The doctors on this service provide direct care and coordinate the care of other specialists required to evaluate and treat your injury(ies) or illness.

Acute care areas

Patients are often moved to different areas in the hospital. Where you or your family member are located in the hospital depends on how serious the illness or injury(ies) are.

Emergency Department (ED)

Almost all Blue Surgery patients are first seen and evaluated in the Emergency Department (ED). Depending on the situation, some patients are moved directly to the operating room, intensive care unit or a regular hospital bed. ED doctors start care, which may include diagnostic studies and contacting appropriate specialists. Depending on the situation, the Trauma/ Emergency Surgery team can and will be involved in your initial care.

We understand how serious your illness and/or injury(ies) are. The UK ED treats some patients who are extremely ill, and the sickest patients are given priority. Many diagnostic tests and the involvement of physician specialists, nurses, paramedics and technicians are necessary to diagnose and treat an illness or injury(ies). Should you need help while in the ED, feel free to ask the bedside nurse, paramedic, nurse care technician, ED clerk or ED doctor for help. An ED charge nurse is also available on every shift to answer any questions.

Please understand that during times when the hospital is very crowded, it is possible that you or your family member may remain in the ED until a hospital bed is available. The ED staff is well-trained and will assist with your care needs.

---

**Top 10 Causes of Injury**

*Seen in 2007 by UK Trauma Teams*

<table>
<thead>
<tr>
<th>Cause</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Motor Vehicle Crash-Unrestrained</td>
<td>566</td>
</tr>
<tr>
<td>Fall</td>
<td>515</td>
</tr>
<tr>
<td>Motor Vehicle Crash-Restrained</td>
<td>582</td>
</tr>
<tr>
<td>ATV</td>
<td>207</td>
</tr>
<tr>
<td>Gunshot/Shotgun Wound</td>
<td>123</td>
</tr>
<tr>
<td>Other Vehicle</td>
<td>109</td>
</tr>
<tr>
<td>Motorcycle Crash Non-helmeted</td>
<td>85</td>
</tr>
<tr>
<td>Helmeted</td>
<td>84</td>
</tr>
<tr>
<td>Stabbing</td>
<td>107</td>
</tr>
<tr>
<td>Thermal Burn</td>
<td>83</td>
</tr>
<tr>
<td>Pedestrian</td>
<td>81</td>
</tr>
<tr>
<td>Assault</td>
<td>77</td>
</tr>
<tr>
<td>Combined Others</td>
<td>367</td>
</tr>
</tbody>
</table>
Operating Room (OR)
Many patients require emergency operations. Patient condition dictates the urgency and timing of the operation. The family will be directed to the waiting area, where operating room personnel and/or a surgeon can provide information.

Post-Anesthetic Care Unit (PACU)
Most patients come to this area to recover from anesthesia after surgery. The PACU also serves as a holding area for patients awaiting a bed assignment.

Intensive Care Units (ICU)
There are eight intensive care units with a total of 66 beds in UK Chandler Hospital. The very sickest patients are cared for in these areas. Patients are assigned to the ICU that best suits their injury(ies)/illness. Family will be directed to the appropriate waiting area so they can be contacted by the ICU nursing staff and/or physician providing care.

Intermediate Care Units
The sixth floor of the hospital is designated for intermediate care. Patients who need additional monitoring or care are admitted/transferred to this area from the ICU, PACU, ED and regular hospital units.

Acute Care Wards
Most trauma/emergency surgery patients are transferred to or admitted to the fifth floor. The nursing staff on this floor is well-trained to provide excellent care for injured and seriously ill patients.

Who will provide your care?

Trauma/Emergency Surgery Service Personnel
Many health care professionals are a part of the trauma/emergency surgery service, including:

• An attending general surgeon with special interest and training in trauma, emergency surgery and critical care.

• A surgical critical care fellow: A general surgeon completing additional training in trauma and surgical critical care.

• Three senior surgical residents each of whom has a medical degree (MD) and is in her or his fourth or fifth year of surgical training.

• Three midlevel surgery or emergency medicine residents, each of whom has an MD.

• Three interns (MDs) in their first year of training after medical school.

• Two case managers, nurses who provide coordination of care and discharge planning.
• Two social workers, who provide coordination of care and discharge planning.
• A substance abuse counselor.
• Pharmacists, who coordinate medication administration.

There also are third- and fourth-year medical students who spend part of their learning on the Blue Surgery service, but who are never responsible for the care of the patients.

The trauma/emergency surgery teams caring for you are directed by the attending physician. The attending physicians make all the final decisions regarding your care. The attending physicians take turns weekly directing your care.

Trauma service physicians provide in-house, 24/7 coverage for all hospitalized patients. This is done in teams of three, so you may not see the same resident physician every day. The case managers, social workers and pharmacist are in the hospital every weekday and some weekends.

**When to expect to see your physician?**

You will see members of your trauma/emergency service team twice a day – once around 6 a.m. and a second time generally in the afternoon or evening. The attending physician will see you sometime during the day.

**Other specialists who may provide care**

Depending on your injury(ies) or illness, other medical and surgical specialists may be consulted for your evaluation and treatment. These may include:

• Neurosurgeons: brain and spine injuries.
• Orthopaedic surgeons: bone fractures and spine injuries.
• Plastic surgeons: injuries to soft tissue and face.
• Ear, nose and throat (ENT) specialists: injuries to the face.
• Oral surgeons: injuries to the face.
• Vascular surgeons: complex injuries to blood vessels.
• Thoracic surgeons: complex injuries to the heart, large blood vessels and lungs.
• Radiologists: physicians who read X-rays, MRIs and CT scans.
• Psychiatrists: physicians who direct physical therapy and rehabilitation.
• Psychiatrists: physicians who deal with mental problems.
• Anesthesiologists: physicians who put you to sleep for operations.
• Medical specialists in such fields as neurology, internal
medicine and cardiology: may be necessary to evaluate and treat other problems that exist or arise during your treatment.

- Nursing: The UK HealthCare nursing staff has achieved Magnet status, the highest recognition possible for a nursing staff. The nursing professionals are trained in the care of surgical emergencies and critical illness and injury(ies).
- Physical and occupational therapists: professionals who start your rehabilitation.
- Respiratory therapists: professionals who assist with breathing exercises.
- Dietitians: professionals who assist with food plans.

What you need to know

Most patients remain on the trauma service for care. However, some patients are admitted or transferred to one of the medical or surgical specialty services listed above and on the previous page. For instance, some patients are transferred to orthopaedic surgery or neurosurgery if the trauma primarily requires the expertise of that service. You will be informed when and if this happens and will be told who your new attending physician is.

Our commitment to you

- We are committed to the highest quality patient care.
- We understand that your illness or injury is unexpected.
- We know that you may be overwhelmed and confused by the injury or illness itself or by the subsequent evaluation and treatment.
- We wish to keep you informed to the very best of our ability. Please feel free to ask questions.
- Remember that your illness or injury is very complicated. There are many UK HealthCare professionals who participate in your care. Unanticipated problems and complications can and do occur. In some cases, these will delay or alter your treatment plan.
- Planning your discharge can be very complex and may take days to complete. We have discharge planners to assist with this process. We will make every attempt to inform you of your discharge the day before. Our goal is to have you discharged by early afternoon.
- On the day of discharge, plan on leaving six to eight hours after being told. The discharge process is very comprehensive and requires many individuals, final tests, prescriptions, education about your medical problem and many other steps to help you leave prepared.
- We have discharge planners and financial counselors to help with insurance issues or assist with financial aid.
Admission paperwork

Almost all trauma/emergency surgery patients are admitted to UK Chandler Hospital from the Emergency Department. Because these admissions are emergencies, the admitting department personnel may not have all the necessary information from you or your family. As soon as possible, send a family member to the admitting office to complete the admission paperwork. The nursing staff can direct you to the office or you may call 859-323-5062.

Other hospital and community resources

Within UK Chandler Hospital there are other resources to assist you and your family, including chaplain service, social worker, customer service representative, financial counselor, nurse case facilitator and discharge planner. Any nursing staff member and/or trauma team member can assist you in contacting these available resources. The nurse case manager can be reached at 859-323-5800.

Customer Service Department

Our Customer Service Department is open Monday – Friday, 8 a.m. – 5 p.m. If you would like to compliment someone on our staff who has been especially helpful in your care, please feel free to contact us by phone or just stop by during normal business hours. The office is located in the front lobby next to the revolving doors.

If you have a concern or a complaint that your doctor or nurse is not able to resolve, a customer service representative will be happy to assist you. You may contact us by asking your nurse to contact the customer service representative or by calling the number below. You may also stop by our office during normal business hours. If you need to speak to a customer service representative after hours, please ask your nurse to page the customer service representative on call.

Customer Service Department
Office hours 8 a.m. – 5 p.m.
859-257-2178

Please ask questions.
The nurse caring for you or your family member is the best place to start.

- The nurse may be able to answer your question(s).
- The nurse can contact the case manager.
- The nurse can contact the social workers.
- The nurse can contact the treating physician.
- Write your questions down and ask your doctor(s) when they visit the patient.
- If you don’t understand what is being done or why (i.e. tests, procedures), ask the doctors to explain.
- Family members are encouraged to learn more about their loved one’s injuries and/or procedures, by visiting the health education library on the first floor of the hospital.
Insuance
Most health insurance companies require notification within 24 hours of an emergency admission. If they are not notified, you may pay a financial penalty. In order to prevent this, it is very important that all insurance information is given to the social worker or a staff member of the financial counseling office (859-323-5806). The hospital can then notify insurers of your admission and answer any questions your insurance company may have.

If you have been in a motor vehicle collision, auto insurance companies need to be notified as soon as possible and your claim number must be given to the hospital’s financial counseling office.

Having your insurance information available as early as possible can also help the hospital better plan for services you may need after discharge, such as physical rehabilitation, home health care and medical equipment.

Patients who do not have insurance or who are not sure about their insurance coverage should ask to speak with the social worker, or a family member should make a visit to the financial counseling office as early as possible after admission. The social worker and/or financial counselor can find out whether you are qualified for Kentucky Medical Assistance, Medicaid or disability and can also help you apply.

If you have questions after you go home
Once discharged, if you have questions or need to speak with a physician during business hours, call the clinic at 859-257-5321. After normal business hours, please call 859-323-5321 and ask for the resident on call for Blue Surgery.

Even with the state-of-the-art medical care offered by UK HealthCare, it is possible that delayed complications may occur after you have been discharged. Before you are discharged you will be instructed by the nursing staff on the signs and symptoms of these possible complications. Even after a thorough examination, delayed problems from undetected injuries can also occur. Therefore, it is important for you to keep your clinic appointments and call us if you have any problems. If detected early, most complications or undetected injuries can be successfully treated.

We need to hear from you
We may also mail health surveys to you for you or your family member to complete during the first year after you are discharged from the hospital. We ask that you or a family member take the time to fill them out. They help tell us how well you are doing and help us make sure you are receiving the community services you need. They also give us ideas on how to improve our services. In addition, we regularly send our patients a satisfaction questionnaire so you can tell us where we are doing very well and where we can improve.
Important names to remember

Trauma/emergency service surgical attending

Address: University of Kentucky Albert B. Chandler Hospital
800 Rose Street – Room #C-224
Lexington KY 40536
Phone: 859-323-6346

Trauma case manager: ________________________________
Address: ________________________________________
__________________________________________________
Phone: __________________________________________

Orthopaedic surgery service attending:
______________________________________________ Phone: 859-323-5535

Neurosurgery service attending:
______________________________________________ Phone: 859-257-3534

Others:
______________________________________________ Phone: 859-_______________
______________________________________________ Phone: 859-_______________

Additional tips for a comfortable experience

(Courtesy of previous patients and their families)

- Be sure to tell your nurses if the family wants to talk to the doctor so they can let the doctors know; otherwise you have to catch them when they visit the patient. Ask the nurses when the physicians normally round if your family wants to be there to ask questions.

- Find out who is your main doctor and ask the other doctors who visit what their roles are.

- If the patient is on pain medications, have a family member available when physicians round as the patient is not likely to remember details.

- UK Customer Service has a brochure listing area motels that offer reduced rates to families. Also, ask the nurses to contact Patient and Family Relations if you are interested in staying in an inexpensive, dorm-like hospitality house (a minimal donation is required).
• The common bathroom on the hospital’s fifth floor has electrical outlets for electric shavers.
• A severe injury can test the faith of patients and loved ones. Chaplains are available to assist. Ask your nurse how to contact a chaplain if you would like to speak with one.

Trauma team leadership

Trauma/Critical Care Faculty and Staff
Paul A. Kearney, MD, FACS
Bernard R. Boulanger, MD, FRCSC, FACS
Andrew C. Bernard, MD
Phillip K. Chang, MD
Brian Sonka, MD
Lisa Fryman, RN
Jennifer Forman, RN
Jackie Peercy, RN

Emergency Room Administration
Roger Humphries, MD
Penne S. Allison, RN, BSN, MSOM

Nursing Management
Marty Blair, RN, PCM, TICU/SICU
Brenda Holmes, RN, PCM, 5 S/W
Patty Hughes, RN, PCM, 8th Floor
Gayle Plank, RN, PCM, 7th Floor

Division of Pediatric Surgery
Andrew R. Pulito, MD
Daniel A. Beals, MD
Joseph Iocono, MD

UK HealthCare is an equal opportunity employer.