POLICY STATEMENT

Approved April 2024

Trauma Care Systems

Revised April 2024, April 2018 with current title, April 2012

Reaffirmed September 2005

Revised January 1999 titled "Trauma Care Systems Development, Evaluation and Funding"

Originally approved June 1998 titled "Trauma Care Systems Development and Evaluation"

Coordinated, integrated, and evidence-based trauma care systems reduce injury-related morbidity and mortality, leading to improved outcomes, which could lower overall healthcare associated costs. The American College of Emergency Physicians (ACEP) supports the following principles related to the advancement of trauma care systems:

- Federal and state legislation must support unrestricted access of acutely injured patients to an integrated trauma care system.
- Trauma care systems must have robust and continuous quality improvement programs to gather clinically meaningful data to optimally improve future patient care and outcomes.
- Federal and state governments and public-private partnerships should be considered to expand governance, coordination among prehospital and hospital based care, financial sustainability, protocols and processes for at the scene, in transit, and on arrival to the facility, and disaster/emergency preparedness.
- Injury related data repositories are most useful when incorporating information across all phases of care, from the point of injury through rehabilitation and recovery. Data repositories allow researchers to define emerging injury patterns, identify and assess injury prevention strategies, elucidate optimal acute care interventions, and measure meaningful outcomes.
- ACEP and its members, in collaboration with other key stakeholders, must continue its leadership role in trauma care systems.