FACT SHEET R Adams Cowley Shock Trauma Center Fiscal Year 1993

During FY 1993, an average of 396 patients per month were admitted to Shock Trauma through the trauma resuscitation unit, a 33% increase over the previous year.

Operating rooms are staffed around the clock. The number of OR minutes during FY 1993 totaled 937,306.

In FY 1993, the number of admissions to the Shock Trauma Center totaled 5,602 (3,776 patients were transported directly from the scene of injury [primary admissions], 685 were transferred from other hospitals, 323 had medical conditions such as smoke inhalation or gas gangrene, and 818 were readmitted for reconstructive or other follow-up procedures).

The clinical STAT laboratory analyzes blood and serum samples, supplying physicians with quantitative and qualitative information needed for assessment of patients' injuries. In FY 1993, the STAT lab ran more than 1,130,000 tests.

Approximately 10% of Shock Trauma patients require reconstructive surgery or consultation by the plastic surgery service. Plastic surgeons are involved in the acute management as well as the reconstructive phases of care for patients with craniomaxillofacial injuries, soft tissue injuries, hand injuries, lower extremity injuries, and burns.

In calendar year 1992, more than 460 patients were treated in the hyperbaric oxygen chamber for conditions such as carbon monoxide poisoning and smoke inhalation and for enhancement of wound healing.

The physical therapy staff provided services to 2,040 patients in Shock Trauma in FY 1993.

During FY 1993, more than 125 journal articles and book chapters written by Shock Trauma staff were published in the medical literature.



The Maryland Institute for Emergency Medical Services Systems (MIEMSS) is mandated by state law to be the lead EMS organization responsible for coordinating Maryland's statewide EMS system.

As of July 1, 1993, MIEMSS reports to a gubernatorially appointed EMS Board of 11 members, chaired by Donald L. DeVries, Jr., Esq. The EMS Board reports directly to the Governor and has rule and regulatory authority. The legislation also calls for a 27-member EMS Advisory Council.

The Maryland EMS System is a network comprising

- · 49 hospitals with 24-hour emergency departments;
- specially designated hospitals, including the R Adams Cowley Shock Trauma Center (primary adult trauma clinical resource center for Maryland); 9 university and areawide trauma centers; and 20 specialty referral centers (for pediatric, hand, and eye trauma; burns; neurotrauma; neonatal and perinatal emergencies; and hyperbaric medicine);
- more than 480 public service ambulances; more than 300 commercial ambulances;
- more than 33,000 trained and certified prehospital care providers;
- a state-of-the-art communications center linking ambulances, helicopters, hospitals, and central alarms;
- and a med-evac helicopter program operated by the Maryland State Police and coordinated with MIEMSS.

These components work together in a continuum of care from treatment at the emergency scene to hospital care to rehabilitation therapy. Their common goal is to help people return to society as productive citizens.

The networking of emergency medical resources ensures that patients in Maryland are seen at the right time, at the right place, by the right people. It is a system saving lives.