In 2018, UofL Hospital — Trauma Center experienced another year of exciting growth and validation for both our community work and our clinical care.

In July 2018, the American College of Surgeons sent two surveyors to UofL Hospital as part of the triennial Level I Trauma Center verification. After a two-day survey of patient charts, interviews with Trauma Center personnel, and a final report out, UofL Hospital was granted re-verification as a Level I Trauma Center.

A few months later in October, we were pleased to announce the opening of our expanded Burn Center—the only adult Burn Center in Kentucky. The new unit has nearly tripled our capacity, with 16 beds specifically designed for patients with burn injuries. Considering the complexity of patients with these injuries and the relatively long hospital stays, it was important to provide the best environment for these patients and their families and ensure they would be as comfortable as possible.

The Trauma Institute, the office dedicated to data management, performance improvement, and outreach for the Trauma Center, also saw growth. We hired an additional Trauma Resource Nurse, as well as created positions for three more Community Health Workers and an Injury Prevention Registrar. The Community Health Workers and Injury Prevention Registrar were hired with funding from Louisville Metro Government to help reduce gun violence in Louisville, demonstrating the city’s understanding of the Trauma Center as an integral part of improving community health and reducing violence.

As we continue to grow and receive recognition for our work, we remain indebted to our emergency medical services’ providers and referring hospitals for their trust in our commitment to excellent and compassionate care. We also remain thankful to our patients and their families for allowing us the opportunity to care for them. You are why we do what we do.

Brian G. Harbrecht, M.D., FACS
Medical Director, Trauma Services
UofL Hospital

Kim Denzik, MSN, RN
Director, Trauma Institute
UofL Hospital
UofL Hospital

UofL Hospital, an academic teaching and research hospital, is in the heart of the Louisville Metro area in downtown Louisville. We are the primary adult hospital for the University of Louisville School of Medicine, providing clinical training for residents, medical students, nurses and other professional medical providers.

ACS-Verified Level I Trauma Center

Our distinction as the region’s only American College of Surgeons (ACS) Verified Level 1 Trauma Center for adults means we have achieved the highest level of verification to deliver care to adult patients with the most severe injuries. We received re-verification in July 2018. We are one of only two Level I adult trauma centers in Kentucky.

Emergency Department (ED)

Our Emergency Department sees more than 60,000 patients per year. The ED is comprised of a rapid assessment triage area, 31 treatment rooms, four trauma bays, and a triage area for Emergency Medical Services. We offer many levels of care which include, but are not limited to, Stroke, Burn, High-Risk Obstetrics, and Emergency Psychiatric Services. We are also the only facility in the region that houses a decontamination area for chemical and biological decontamination.

Also housed within the Emergency Department is First Care, an area for treating minor illness and injuries. This area is staffed by Advanced Practice Registered Nurses and is open 24 hours a day, seven days a week. The goal is for our patients to have a medical screening exam within 30 minutes of arrival and be seen, treated, and released within 120 minutes.

Our Emergency Department also provides forensic nursing care to victims of sexual assault and intimate partner violence by trained sexual assault nurse examiners (SANEs). We are the largest provider of these services in the state and the only hospital in the region to offer intimate partner violence forensic exams. In 2018, 811 victims received forensic exam services from UofL Hospital SANEs.

Trauma Intensive Care Unit (ICU)

We have two trauma surgical intensive care units specializing in the care of the most critically-ill and injured patients. Each trauma ICU has been recognized by the American Association of Critical Care Nurses (AACN) with the Silver Beacon Award for Nursing Excellence.

Operating Rooms

We are equipped with 14 inpatient and eight outpatient operating room suites. Because we are continually staffed around the clock with all the necessary personnel to perform the most complex surgeries, our operating rooms are ready for use within minutes of a trauma patient’s arrival.

Burn Center

We provide comprehensive burn care through our newly-expanded adult burn intensive care unit—the only such dedicated unit in Kentucky. In 2018, the burn unit nearly tripled its capacity, increasing from five to 16 beds. The Burn Center has 36 critical care nurses and technicians, all of whom have specialized education and training in the care of burn patients and the most up-to-date methods for their care. Its dedicated physical therapist is the only wound specialist in Kentucky dedicated to burns.
In 2018, UofL Hospital cared for 3,604 trauma patients; 51% of those patients resided outside Louisville. The number of patients coming from across Kentucky and Indiana indicates what a vital resource UofL Hospital — Trauma Center is to communities in the region.

### Coverage

**A Regional Resource**

<table>
<thead>
<tr>
<th>Patient Area of Residence</th>
<th>Number of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residing in Louisville</td>
<td>1,760</td>
</tr>
<tr>
<td>Residing outside of Louisville</td>
<td>1,844</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3,604</strong></td>
</tr>
</tbody>
</table>

**Data**

- **3,604 Patients Treated in 2018**
- **51% of Patients Treated Resided Outside Louisville**

Residing in Louisville

Residing outside of Louisville
Referring Facilities and EMS Agencies

Trauma Patients Referred by Facility

Baptist Health Floyd (32) Baptist Health La Grange (25) Baptist Health Louisville (23) Baptist Health Madisonville (1) Baptist Health Paducah (1) Beckley ARH Hospital (1) Breckinridge Memorial Hospital (5) Carroll County Memorial Hospital (12) Clark Memorial Hospital (36) Clark Regional Medical Center (1) Cumberland County Hospital (2) Daviess Community Hospital (1) Deaconess Midtown Hospital (15) Ephraim McDowell Regional Medical Center (1) Flaget Memorial Hospital (51) Frankfort Regional Medical Center (3) Gibson Area Hospital (1) Hardin Memorial Hospital (177) Harrison County Hospital (36) Harrison Memorial Hospital (1) IU Health Paoli Hospital (14) Jane Todd Crawford Hospital (4) Jennie Stuart Health (1) Jewish Hospital (19) Jewish Hospital Shelbyville (32) Kentuckiana Medical Center (4) King's Daughters' Health (49) King's Daughters Medical Center (4) Lake Cumberland Regional Hospital (1) Medical Center Jewish East (14) Medical Center Jewish South (44) Medical Center Jewish Southwest (22) Memorial Hospital and Health Care Center (12) Methodist Hospital Henderson County (2) Monroe County Medical Center (3) Norton Audubon Hospital (57) Norton Brownsboro Hospital (29) Norton Children's Hospital (3) Norton Hospital (21) Norton Women's & Children's Hospital (25) Ohio County Hospital (2) Owensboro Health Regional Hospital (20) Perry County Memorial Hospital (3) Pikeville Medical Center (1) Robley Rex VA Medical Center (22) Russell County Hospital (3) Schneck Medical Center (1) Scott Memorial Hospital (17) Spring View Hospital (27) St. Vincent Dunn (1) St. Vincent Evansville (17) St. Vincent Indianapolis (2) St. Vincent Salem (10) Sts. Mary and Elizabeth Hospital (53) T.J. Health Columbia (7) T.J. Samson Community Hospital (54) Taylor Regional Hospital (39) The Medical Center at Bowling Green (3) The Medical Center at Calverna (11) TriStar Greenview Regional Hospital (1) Twin Lakes Regional Medical Center (40) Wayne County Hospital (1)

Thank you to all our referring facilities and emergency medical services agencies who trust us with the care of their patients.

Trauma Patients by Emergency Medical Services (EMS)

Adair County EMS (18) Air Evac Lifeteam (124) Air Methods (335) American Medical Response (145) Anchorage Middletown Fire and EMS (68) Anderson County EMS (3) Ballard County Ambulance Services (1) Barren Metcalfe Ambulance Service (31) Boyle County EMS (1) Breckinridge Central EMS (12) Buechel Fire & EMS (11) Bullitt County EMS (142) Campbellsville Taylor County EMS (14) Carroll County EMS (13) Clinton County EMS (1) Crawford County EMS (3) Cumberland County EMS (3) Dubois County Fire Dept (5) Frankfort Fire and EMS (1) Garrard County EMS (1) Gibson County EMS (1) Grayson County EMS (25) Green County EMS (3) Hardin County EMS (155) Harrison County Hospital EMS (73) Harrods Creek Fire & Rescue (12) Hart County EMS (9) Henry County EMS (14) IU Health LifeLine (1) IU Health EMS (8) Jan Care Ambulance Service (1) Jeffersontown Fire Dept. (35) Kentucky State Reformatory (6) King's Daughters' Health EMS (42) LaRue County EMS (2) Lincoln County EMS (2) Louisville Metro EMS (1185) Madison County EMS (1) Marion County EMS (14) Meade County EMS (24) Medical Center EMS—Bowling Green (2) Memorial EMS (6) Monroe County Ambulance Service (3) Nelson County EMS (59) New Castle EMS (2) New Chapel EMS (69) Ohio County EMS (4) Oldham County EMS (67) Owensboro/Daviess County EMS (5) Perry County Ambulance Service (2) PHI Air Medical Indiana (1) PHI Air Medical Kentucky (3) Rural Metro Ambulance (11) Russell County EMS (1) Scott County EMS (26) Shelby County EMS (39) Spencer County EMS (14) Spirit EMS (1) St. Matthews Fire & Rescue EMS (62) St. Vincent StatFlight (20) St. Vincent Warrick EMS (4) STAT MedEvac (15) Trimble County EMS (6) Washington County Ambulance Service—Indiana (18) Washington County EMS—Kentucky (5) Woodford County EMS (1) Yellow Ambulance (352)
Patients were Transported by Ground Ambulance

- **Ground Ambulance**: 2871 Patients (79.7%)
- **Helicopter**: 489 Patients (13.6%)
- **Private Vehicle**: 222 Patients (6.2%)
- **Other**: 22 Patients (0.6%)

1,134 of Patients were Transferred from a Referring Facility

- **Patients from Referring Facility – Outside Louisville**: 847 Patients (23.5%)
- **Patients from Referring Facility – In Louisville**: 287 Patients (7.9%)
- **Patients from Scene – Outside Louisville**: 502 Patients (13.9%)
- **Patients from Scene – In Louisville**: 1330 Patients (36.9%)
Trauma Volume Data

Trauma Volume Per Year

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>2985</td>
</tr>
<tr>
<td>2011</td>
<td>2953</td>
</tr>
<tr>
<td>2012</td>
<td>2995</td>
</tr>
<tr>
<td>2013</td>
<td>2952</td>
</tr>
<tr>
<td>2014</td>
<td>3116</td>
</tr>
<tr>
<td>2015</td>
<td>3324</td>
</tr>
<tr>
<td>2016</td>
<td>3483</td>
</tr>
<tr>
<td>2017</td>
<td>3527</td>
</tr>
<tr>
<td>2018</td>
<td>3604</td>
</tr>
</tbody>
</table>

Trauma Volume Per Day in 2018

<table>
<thead>
<tr>
<th>Day of the Week</th>
<th>Number of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sunday</td>
<td>523</td>
</tr>
<tr>
<td>Monday</td>
<td>499</td>
</tr>
<tr>
<td>Tuesday</td>
<td>505</td>
</tr>
<tr>
<td>Wednesday</td>
<td>471</td>
</tr>
<tr>
<td>Thursday</td>
<td>477</td>
</tr>
<tr>
<td>Friday</td>
<td>525</td>
</tr>
<tr>
<td>Saturday</td>
<td>604</td>
</tr>
</tbody>
</table>

Trauma Volume Per Time Frame in 2018

<table>
<thead>
<tr>
<th>Time of Day</th>
<th>Patients Per Time Frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morning (06:00 - 11:59)</td>
<td>608</td>
</tr>
<tr>
<td>Afternoon (12:00 - 17:59)</td>
<td>1067</td>
</tr>
<tr>
<td>Evening (18:00 - 23:59)</td>
<td>1223</td>
</tr>
<tr>
<td>Late Night (00:01 - 05:59)</td>
<td>706</td>
</tr>
</tbody>
</table>
**Trauma Admissions Data**

**Top Ten Admitting Service Lines**

<table>
<thead>
<tr>
<th>Service Line</th>
<th>Number of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trauma</td>
<td>2095</td>
</tr>
<tr>
<td>Orthopedics</td>
<td>685</td>
</tr>
<tr>
<td>Neurosurgery</td>
<td>396</td>
</tr>
<tr>
<td>Medicine</td>
<td>218</td>
</tr>
<tr>
<td>Plastic Surgery</td>
<td>68</td>
</tr>
<tr>
<td>Hand</td>
<td>32</td>
</tr>
<tr>
<td>Ophthalmology</td>
<td>29</td>
</tr>
<tr>
<td>ENT</td>
<td>28</td>
</tr>
<tr>
<td>Oral/Maxillofacial Surgery</td>
<td>22</td>
</tr>
</tbody>
</table>

**Discharge Disposition**

<table>
<thead>
<tr>
<th>Disposition</th>
<th>Number of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home</td>
<td>2270</td>
</tr>
<tr>
<td>Rehab</td>
<td>467</td>
</tr>
<tr>
<td>Skilled Nursing Facility</td>
<td>295</td>
</tr>
<tr>
<td>DIED</td>
<td>252</td>
</tr>
<tr>
<td>Home–with Home Health</td>
<td>57</td>
</tr>
<tr>
<td>Jail</td>
<td>57</td>
</tr>
<tr>
<td>Left Against Medical Advice</td>
<td>53</td>
</tr>
<tr>
<td>Long Term Acute Care</td>
<td>39</td>
</tr>
<tr>
<td>Skilled Nursing Facility–Return</td>
<td>36</td>
</tr>
<tr>
<td>Inpatient Psychiatric Unit</td>
<td>29</td>
</tr>
<tr>
<td>Hospice</td>
<td>26</td>
</tr>
<tr>
<td>Temporary Housing</td>
<td>12</td>
</tr>
<tr>
<td>Transfer Out</td>
<td>10</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
</tr>
</tbody>
</table>

**Injury Severity Score**

*The Injury Severity Score (ISS) is an established trauma/injury score assessing trauma severity. The ISS range is 1-75, with 75 being a universally fatal injury. An ISS greater than 15 designates patients with major trauma or polytrauma.*
Trauma Patient Data

Admissions by Gender

- **Male**: 2392 Patients (66%)
- **Female**: 1212 Patients (34%)

Admissions by Age Range

<table>
<thead>
<tr>
<th>Patient Age (in years)</th>
<th>Number of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;20</td>
<td>223</td>
</tr>
<tr>
<td>20-29</td>
<td>599</td>
</tr>
<tr>
<td>30-39</td>
<td>556</td>
</tr>
<tr>
<td>40-49</td>
<td>549</td>
</tr>
<tr>
<td>50-59</td>
<td>539</td>
</tr>
<tr>
<td>60-69</td>
<td>489</td>
</tr>
<tr>
<td>70-79</td>
<td>348</td>
</tr>
<tr>
<td>&gt;80</td>
<td>300</td>
</tr>
</tbody>
</table>

**Trauma Patients with Co-Morbid Conditions**

- **1356 patients** had a cardiac condition
- **1262 patients** had a history of smoking
- **324 patients** had a bleeding disorder
- **707 patients** had a psychiatric diagnosis
- **476 patients** had diabetes
- **690 patients** had a history of drug use

In 2018, 2,907 of our 3,604 trauma patients had a medical condition in addition to their traumatic injury.

These co-morbid conditions can create additional challenges in caring for these patients.
Causes of Injury

81% of Patient Injuries were Categorized as Blunt Trauma

1,264 Patients had Injuries due to a Motor Vehicle / Motorcycle Crash

Causes of Injury - Detail

Causes of Fall Injuries
- Slips Due to Ice / Snow: 32 Patients (4%)
- From Furniture: 45 Patients (6%)
- From Roof / Ladder: 111 Patients (14%)
- Stairs / Steps: 170 Patients (21%)
- Ground Level: 235 Patients (30%)

Causes of Gunshot Injuries
- Not Specified: 15 Patients (5%)
- Accidental: 34 Patients (10%)
- Intentional Self-Inflicted: 38 Patients (12%)
- Interpersonal Violence: 228 Patients (71%)

Leading Causes of Injury

- Motor Vehicle / Motorcycle Crash: 1264 Patients (81%)
- Falls: 1028 Patients (42%)
- Gunshots / Stabbings: 424 Patients (17%)
- Burn: 167 Patients (7%)
- Assault (blunt): 145 Patients (6%)
- Pedestrian Struck: 145 Patients (6%)
- Asphyxial: 32 Patients (1%)
- Blunt: 2920 Patients (81%)
- Penetrating: 483 Patients (13%)

Blunt 2920 Patients (81%)
Asphyxial 32 Patients (1%)
Penetrating 483 Patients (13%)
Burn 169 Patients (5%)

Injury Types

Motor Vehicle / Motorcycle Crash
Falls
Gunshots / Stabbings
Burn
Assault (blunt)
Pedestrian Struck
Asphyxial
Blunt
Penetrating
Burn

Number of Patients
0 300 600 900 1200 1500
0 300 900 1500

U of L Hospital Trauma Center
Of patients screened for drugs, **29%** were positive.

Only **62%** of trauma patients involved in a motor vehicle accident were wearing a seatbelt.

Only **38%** of trauma patients involved in a motorcycle crash were wearing a helmet and/or protective clothing.
UofL Hospital is proud to announce the opening of the newly-expanded adult Burn Center—the only unit of its kind in the state of Kentucky. The new Burn Center holds 16 beds, almost triple the size of the previous burn unit.

“What makes this space so unique is that from start to finish, it was specifically designed just for burn patients,” said Glen Franklin, M.D., a trauma surgeon and a professor in the Department of Surgery at the UofL School of Medicine. “It offers them things other areas of the hospital don’t have, as it was made just for them, by the people who take care of them. It’s special.”

Lori Sipes, clinical nurse manager for the Burn Center, said the renovation marks 35 years of UofL Hospital having a dedicated burn unit. She said the expansion and renovation will help provide even better service to the community and state. “We are expanding all of our services, from beds to staff to therapy, to offer even better care for patients and their families,” she said. “Everything has been improved and updated, and they have a new state-of-the-art area to be treated in.”

Romaine Knight, a former patient and firefighter assigned to Engine 5 in downtown Louisville, attended the opening of the Burn Center. On September 20, 2017, he suffered serious burns to his left hand and was admitted to the Burn Center. He was in the center’s intensive care unit for eight days, where he underwent skin grafts to his hand.

“They really have a good team there,” he said. “Everyone was exceptional. They were all so nice, from the nurses, to the technicians, to the plastic surgeons. And they have so much experience, which really helped alleviate my worries. They did everything they could to ensure I didn’t lose function of my hand, which was vital for me. They told me that they would do whatever it took to have the best outcome.” Today, he said he has virtually normal function of his hand.

---

All Burn Center patient rooms are equipped with heating components to maintain proper thermoregulation:

- Heating lamps
- Humidity control
- Individualized thermostats

“Everything has been improved and updated, and they have a new state-of-the-art area to be treated in.”
In 2018, 167 of patients were treated with burn as the primary cause of injury. This was an increase over the 149 patients treated in 2017.

7.6 days was the average length of stay for patients with burn injuries.

Patient Location When Transported

Leading Causes of Burn Injuries

- Explosive / Hot Gases: 50 patients
- Hot Liquids / Food: 31 patients
- Uncontrolled Fire within a Structure: 18 patients
- Burning Furniture: 12 patients
- Controlled Outside Fire: 12 patients

Transported to UofL Hospital from Referring Facility: 82 Patients (49%)
Transported to UofL Hospital from Scene: 85 Patients (51%)
**Trauma Team**

**Administration**

**Executive Director, Surgical Services**

*Lisa Jackson, RN,* is the Executive Director of Surgical Services, the Trauma Institute, and our Center for Women and Infants. Lisa provides a wealth of experience and oversight to the trauma program.

**Director, Trauma Institute**

*Kim Denzik, MSN, RN,* oversees the daily operations and growth of the trauma program. She works closely with the emergency department, surgical services, the access center, and other hospital departments to ensure a multi-disciplinary approach to everything from patient care to community outreach and continuing clinical education.

**Department Support Assistant, Trauma Institute and Advanced Practice Nursing Group**

*Stefanie Upton* coordinates the activities of the Trauma Institute, provides payroll and HR guidance, and assists with the organization of clinical education and outreach activities.

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**Registrars**

Our trauma registry team collects over 250 data points on each admitted trauma patient. This data is used to study patterns, improve care, and guide education and prevention initiatives.

*Samantha Baker*

Registry Manager

*Wanda Bowen*

*Donna Collins*

*Kelly Lantrip*

*Lerita Ford*

*Mandi Talai*

*Sarina Mudd*

*Patrick Torpey*

*Jennifer Farah*
Trauma Team

Education, Support, and Prevention

Outreach and Education Coordinator

Theresa Baker, RN, educates fellow health care workers, emergency medical services staff, and the general public about trauma prevention and education. Her class offerings include multiple trauma education courses for health professions, such as Advanced Trauma Life Support (ATLS) and Trauma Nursing Core Course (TNCC). Theresa also serves as our point of contact for our referring facilities and pre-hospital providers.

Healthy Community and Injury Prevention Manager

Annabelle Pike, MBA, oversees the Injury Prevention Program, including Stop the Bleed, a program teaching bystanders how to stop life-threatening bleeding, and Pivot to Peace Intervention Network, our hospital-based violence intervention program.

Trauma Social Worker

Lindsey Journey, LCSW, MSW, provides patients with bedside therapeutic counseling and interventions. She also links patients with hospital and community resources to improve their recovery and integration back into the community.

Injury Prevention Registrar

Jennifer Burden works with multiple data sources on gun violence to fill the information gaps among different sources of shooting and violence data.

Community Health Workers

The Trauma Community Health Workers (CHWs) are part of the Pivot to Peace Intervention Network. They round on and provide support to patients with gunshot or stabbing injuries due to interpersonal violence. The CHWs work with local agencies to route patients into supportive services for a safe and healthy transition back into the community. The CHWs also provide post-discharge follow-up support to reduce likelihood of re-injury.

KJ Fields
Geoffrey Ntama
Kiara James
Trauma Team

Nurse Practitioners

Our trauma nurse practitioners work collaboratively with attending physicians and surgical residents to provide optimal care to our trauma patients. In addition to performing medical procedures, monitoring patient progress, assisting in wound care, and providing staff education, they work closely with case managers and social workers to coordinate care outside the hospital to ensure ongoing rehabilitation.

Performance Improvement Coordinator

Jil Georgel, BSN, RN, TCRN, oversees the Trauma Institute performance improvement program for rapid problem identification, data-driven analysis, and resolution of issues to ensure a high quality of care.

Karina Pentecost, APRN

Diana Blevins, APRN

Trauma Resource Nurses

Our Trauma Resource Nurses work in collaboration with our Emergency Department and Intensive Care Unit nurses to provide ongoing care for our most critically ill trauma patients. In the ED, they assist with trauma evaluation and help transition the patient through the emergency department to the trauma unit.

Ashley Wheeler, BSN, RN, TCRN

Danelle Jones, RN, TCRN

Jamie Peters, BSN, RN, TCRN
Trauma Team

Department of Surgery Leadership

**Kelly M. McMasters, M.D., Ph.D.**
Chair and Professor,
University of Louisville
Department of Surgery

**J. David Richardson, M.D.**
Vice Chair and Professor,
University of Louisville
Department of Surgery

**Brian G. Harbrecht, M.D.**
Trauma Medical Director
Professor,
University of Louisville
Department of Surgery

**Glen Franklin, M.D.**
Burn Center Medical Director
Professor,
University of Louisville
Department of Surgery

**Jason W. Smith, M.D., Ph.D.**
Chief Medical Officer
Associate Professor,
University of Louisville
Department of Surgery

**Keith R. Miller, M.D.**
Assistant Trauma Medical Director
Associate Professor,
University of Louisville
Department of Surgery

**Matthew Benns, M.D.**
Surgical Residency Program Director
Associate Professor,
University of Louisville
Department of Surgery

**Nicholas Nash, M.D.**
SICU Medical Director
Assistant Professor,
University of Louisville
Department of Surgery

**Matthew Bozeman, M.D.**
Burn Center Assistant Medical Director
Assistant Professor,
University of Louisville
Department of Surgery

Trauma Attending Physicians

Our Trauma Faculty
UofL Hospital trauma surgeons are also professors and researchers at the University of Louisville School of Medicine.
Trauma Liaisons

In order to provide the complex care needed by trauma patients, we work closely with many specialists throughout UofL Hospital. In particular, we want to thank our trauma specialty liaisons who provide multidisciplinary input into the care of trauma patients and in the peer review of trauma care.

**Anesthesiology**
- Michael F. Heine, M.D.

**Emergency Medicine**
- Adam Ross, M.D.

**Critical Care**
- Nicolas Nash, M.D.

**Neurosurgery**
- Emily Sieg, M.D.

**Orthopaedics**
- Brandi R. Hartley, M.D.

**Radiology**
- Jonathan K. Joshi, M.D.
Staff Highlight

Kimberly Broughton-Miller
Fellow of the American Association of Nurse Practitioners

In 2018, trauma nurse practitioner Kimberly Broughton-Miller, MSN, APRN, FNP-C, FAANP was inducted into the Fellows of the American Association of Nurse Practitioners (FAANP). The FAANP impacts national and global health by engaging recognized nurse practitioner leaders who make outstanding contributions to clinical practice, research, education, or policy to enhance the AANP mission. Induction is by invitation only and selection is based on recognition of the nurse practitioners’ accomplishments and contributions to advancing the nurse practitioner role.

Kimberly has been a member of the nursing team at UofL Hospital for 20 years. She was a charge nurse in the Emergency Department for a number of years and then graduated with a Masters of Science in Nursing with a Family Nurse Practitioner focus. She then became a member of the Trauma Surgery service.

She has lent her expertise to the care of the most critically injured patients in the hospital for over 10 years. She has also participated in many research studies and educational roles within and outside of our organization. Congratulations to Kimberly on this well-deserved recognition.

Lindsey Journey
Certified Clinical Trauma Professional

Lindsey Journey, LCSW, a social worker with the trauma service, completed her training as a Certified Clinical Trauma Professional. Lindsey achieved this designation, awarded by the International Association of Trauma Professionals, in 2018. This trauma competency training, designed for mental health professionals, provides guidance in helping patients process traumatic stress.
Physician Highlight

Dr. Brian Harbrecht and Dr. Matt Bozeman
Featured on “UofL Today”

Brian Harbrecht, M.D. and Matt Bozeman, M.D. spoke with Mark Hebert on “UofL Today” about new research conducted by UofL Hospital trauma surgeons. During this particular appearance on the radio show, Drs. Harbrecht and Bozeman discussed a study they conducted on injuries due to moped crashes.

Mark Hebert; Matt Bozeman, M.D.; Brian Harbrecht, M.D. (L-R)
Community Recognition

Ken Marshall and Dr. Keith Miller
Speak at the Rotary Club of Louisville

Ken Marshall, COO of UofL Hospital, and Keith Miller, M.D., UofL Hospital trauma surgeon, were invited to speak at the August 2018 convening of the Rotary Club of Louisville. Ken discussed the evolving belief that treatment for injuries from gun violence must reach beyond the hospital to care for the whole person and the community impacted. Dr. Miller also reviewed contributors to gun violence and the modifiable factors to combat it.

Trauma Surgeons Speak Out Against Violence

UofL Hospital physicians wrote about violence in Louisville in the August 2018 edition of Louisville Medicine, a publication of the Greater Louisville Medical Society. Trauma surgeons Matt Bozeman, M.D., Brian Harbrecht, M.D., and Keith Miller, M.D., as well as Emergency Medicine physician Martin Huecker, M.D., all had featured articles in the issue.
2018 Kentucky Statewide Trauma and Emergency Medicine Symposium

UofL Hospital was proud to partner with Norton Children’s Hospital to host the 2018 Kentucky Trauma and Emergency Medicine Symposium from Oct. 25-26, 2018. This educational event provided the latest information in innovative approaches to trauma and emergency care and was open to physicians, nurses, emergency responders, and other trauma professionals. Keynote speaker Paul Chestovich, M.D., FACS, a trauma surgeon at UNLV, addressed the response to the 2017 shootings at the Route 91 Harvest music festival in Las Vegas.

Paul Chestovich, M.D., gave the keynote speech at the 2018 Kentucky Trauma and Emergency Medicine Symposium.

Will Chambers and Al Farris of the Jefferson County Sheriff’s Office worked with Shannon Hogan of Norton Children’s Hospital on techniques for situational awareness as part of a pre-conference class.

A crowd gathered at the Galt House for the first day of the conference.
Air Methods and the Society of Trauma Nurses were among the vendors present at the symposium.

“This educational event provided the latest information in innovative approaches to trauma and emergency care and was open to physicians, nurses, emergency responders, and other trauma professionals.”

Representatives from the United States Army set up a mannikin in a triage tent at the symposium.
Injury Prevention

Stop the Bleed Demonstrations

For events where it is not feasible to teach the full Stop the Bleed class, the Trauma Institute offers brief education on how to hold direct pressure and apply tourniquet. In 2018, 550 people were educated in this manner at health fairs.

Medical student Kalen Wright talks about holding pressure at the Annual Park DuValle Community Health Fair.

Community Stop the Bleed Class

The Trauma Institute was proud to host UofL Hospital’s first community Stop the Bleed class in March 2018 to honor National Stop the Bleed Day. Four news stations covered the training, which provided training on bleeding control techniques to 74 community members who attended the free class.

Trauma Resource Nurse Ashley Wheeler gave instructions for wound packing at the community training.
Injury Prevention

Onsite Stop the Bleed Classes

In 2018, we taught the full Stop the Bleed class to 980 people, nearly doubling the number of people taught in 2017. The class includes a lecture and hands-on skill stations. We make a point to train people at locations most convenient for them—including school, work, and places of worship. We also engage our first responders when this class can supplement their training.

Trauma Surgeon Jason Smith, M.D., discusses tourniquet placement with members of the Louisville Metro Council.

Bri Sheahan trained deputies with the Jefferson County Sheriff’s Office on wound packing.

Trauma Surgeon Glen Franklin, M.D., gives feedback to Lafayette Township firefighters on wound packing.

Trauma Surgeon Nick Nash, M.D., lectures to employees at the Backside at Churchill Downs.
Legacy of Life Walk

The Legacy of Life 5k run/walk is an event that represents an incredible celebration of life and hope by raising community awareness of the importance of organ donation. UofL Hospital is committed to fostering an environment of quality end-of-life support for patients and families. Because of this commitment, UofL Hospital was heavily engaged in the 2018 Legacy of Life event.
Organ Donor Statistics

Donating the Gift of Life

UofL Hospital is proud to support Kentucky Organ Donor Affiliates (KODA) in its mission to provide organs and tissues to those in need and to maintain a profound respect for those who gave. KODA is an independent, non-profit organ and tissue procurement agency dedicated to saving lives through organ and tissue donation and transplantation.

Despite high authorization rates, there are still eligible donor families that do not consent to donation, which could have been more lives saved. To register as a donor, visit registerme.org.

In 2018, KODA worked with organ donors in Kentucky, Indiana, and West Virginia to achieve these amazing results...

- Every 10 Minutes someone is added to the national waiting list.
- 22 People die everyday waiting on a lifesaving transplant.
- More Than 1,000 people in Kentucky are waiting on a lifesaving transplant.

**2018**
- 134 heroic organ donors
- 367 heroic tissue donors

1 out of 4 of our donors have been over the age of 50

380% increase in heroic donors who donated after cardiac death

144% increase from 9 in 2014

1,500 Donor Families have been supported over the last 3 years after they said “yes” to saving & healing lives through transplantation and research
New Education and Prevention Initiatives in 2018

Expansion of Hospital Violence Intervention Network

Through a generous grant from Louisville Metro Government in June 2018, UofL Hospital was able to expand its hospital violence intervention network, the Pivot to Peace Intervention Network. Three new Community Health Workers were hired, along with an Injury Prevention Registrar.

This infusion of resources allows UofL Hospital to staff nearly 24/7 with a Community Health Worker who can respond to patients with gunshot or stabbing injuries due to interpersonal violence and provide post-discharge support. The Community Health Workers focus beyond just the patients who are admitted, but also work with patients who are treated and released from the Emergency Department.

The Injury Prevention Registrar works to fill the data gaps among different sources of shooting and violence data. The UofL Hospital Trauma Institute is grateful to the partnership with the Mayor’s Office for Safe and Healthy Neighborhoods for making this expansion possible.

New Education Offering—ASSET
(Advanced Surgical Skills for Exposure in Trauma)

UofL Hospital was proud to bring the American of Surgeons’ ASSET course to Kentucky! This course uses human cadavers to teach surgical exposure of anatomic structures that, when injured, may pose a threat to life or limb. “This course is the best form of simulation to help recreate difficult situations that trauma surgeons see infrequently,” said UofL Hospital trauma surgeon and ASSET course instructor Nick Nash, M.D.

For more information about attending an ASSET course, email Kim Denzik at kimberde@ulh.org.

Members of the first ASSET class, coordinated by Theresa Baker (center)
Patient Story

Logan Gilstrap

When Tracy Gilstrap of Orleans, Ind., got the call on the morning of Feb. 17, 2017, she was traumatized. Her son Logan, now 30, had been in a severe car accident in Mitchell, Ind. in the early morning hours on his way to work at GM in Bedford. He had been airlifted to UofL Hospital.

A call like that would be a horrible shock for any parents, but for Tracy and her husband, doubly so. “We had just lost our oldest son less than a year before that to suicide,” she explains. “When I got the phone call, my thought was, ‘Just take me now, Lord, if you’re going to take my other son; that’s how I felt. It’s been three years now since the suicide, and it’s hard to live with, but thankfully we still have Logan and I credit that to UofL Hospital, she says.

In the accident, Logan’s tire had blown and he lost control and went into a flagpole. “It was his right leg that saved him from having chest or head trauma, according to the doctors, but that’s why it had to be amputated above the knee,” says Tracy. Logan’s other injuries included two broken wrists and cracked ribs.

When she met her son’s trauma doctor, Tracy says she experienced an awkward moment. “He was Logan’s age, and I said you’re just a baby; there’s no way.” But Tracy says her confidence and trust grew as the doctor explained everything. “We were never in the dark about anything. When he said my son would probably lose his leg, I lost it but when we got to see Logan, it was amazing to see how many people there were taking care of him. They had a team of doctors and anything he needed or I needed, they were there for us,” she says.

Tracy says she was overwhelmed with the compassionate care her son – and her family – received. “I can’t tell you how caring they were. It wasn’t like you’re a patient, you’re just a number, you’re just his mother. Even the lady who put the port in his neck was very caring and said a prayer with me.” Those are the kind of things that Tracy says really made a difference to Tracy and her family. “I just can’t tell you how much that meant to me. I know God pulled my son through this – he believes it too but I just can’t tell you how much we appreciated them.”

Logan says he remembers waking in the ambulance and at first, feeling fine. But then he saw his wrist and the pain set in. “I realized this was pretty serious. I remember the helicopter ride and them carrying me in the cold wind on Friday morning,” he says. After that, Logan was semi-conscious until Sunday. All the while, his parents were by his side.

When he woke up, Logan says he checked his body and realized he was missing part of his leg. “I wasn’t that surprised,” he says. “From the pain in the ambulance, I knew something wasn’t going to be right on my body. It took me about two days to realize, ‘Okay, this is going to my life, and I moved on,” says Logan. “It wasn’t easy. It was the hardest thing I’ve done in my life, but UofL Hospital - they made a bad situation not as bad, which is the best thing a hospital can do.”

Educating Logan on his “new normal” helped him through the experience. “Everything is different now – every car I get in, every step. I have to stop and think how I’m going to do certain things now. They were knowledgeable about issues I would have moving forward. They told me stuff I didn’t even think to ask about losing my leg – how was it going to be in ten years, what about my leg strength, for example,” he says.

After the accident, Logan did physical therapy at Frazier Rehab, and was able to return to work after ten months in a different position and department at the same company. “They’ve been really good to me. My boss came to visit me after about three days, and he told me my job was waiting for me whenever I was ready. That gave me something to drive towards,” he says. Logan’s physical strength continues to increase, and he was recently fitted with one of the newest prosthetics available in the country.

“I am so thankful to whoever decided to send me to UofL Hospital instead of somewhere else,” says Logan. “My nurses hands down were amazing. It was a bad deal, but I was well taken care of. It was the best care I’ve ever seen in a hospital – you can’t beat it.” That’s why Logan had to share his story; he says. “I figure I owe them one.”
O.J. Mitchell

After O.J. Mitchell, 39, suffered a gunshot wound to the chest in May 2018 in an attempted robbery, the damage was severe: two surgeries to remove his appendix, part of his liver, part of his intestine. His diaphragm had to be reattached and he was in a coma. But he credits UofL Hospital nurses, clinicians, social workers and other staff with being his saviors that night and beyond. And the close relationships he developed there didn’t stop with his discharge papers from the hospital.

“The care was amazing, and continues to be amazing. I am so appreciative to the trauma team and the surgeries that saved my life, not to mention the nurses everyday taking care of me were the greatest,” says O.J. “From the first moment through today, they have gone well beyond what they needed to do. They spent time talking to me. I was even invited to Thanksgiving by one nurse I got close to. I see them as family,” he said.

Beyond compassionate care and top-notch expertise, O.J. said UofL Hospital stood out with a combination of being genuine and also being very encouraging at a time when he needed encouragement. “They were very engaged and do not let up. They pushed me in a good way,” he said. “It was way more than just healing my physical wounds.”

It was the supportive services of UofL Hospital that led O.J. to a potential new life path as well. Soon after his admission, O.J. was visited by Kevin Fields, known as “KJ,” who steered him toward Pivot to Peace, a program run by UofL Hospital. The program is an anti-violence initiative that supports violence prevention as well as helping victims of gun violence to “pivot” their lives in a new direction.

“K.J. visits all the gunshot victims,” said O.J. “We joke that when you come out of your coma, he’s sitting in the chair waiting for you. He became like a brother to me. We all have these testimonies. He helped me get access to disability services and medical supplies I needed,” he said.

O.J. has joined other trauma survivors across the city in speaking truth to youth about gun violence through speaking engagements. In fact, O.J. has been so involved in the anti-violence community, he plans to become a case manager with Pivot to Peace and go back to school in the fall to study social services.

These days, he is doing well physically with just a few minor “GI” issues and a new perspective on the medical profession. “These are amazing people and I see the work they do,” he said. I have a more profound respect for them.”
Patient Story

Terrell Williams

When Terrell Williams, 23, became a victim of gun violence that paralyzed him, it changed more than his physical world. It changed him. As the accomplished emergency room physicians and nurses at UofL Hospital rallied to save his life from two gunshot wounds, Williams had no idea the changes on the inside that would accompany the radical changes of his life in a wheelchair.

It all started with a confrontation with someone attempting to steal his car. It ended with him trying to stand, but his legs feeling like “bags of water” because a bullet had punctured his lung and pierced his spine. He asked the emergency personnel in the ambulance and then again at the hospital if he was going to die.

“They were evading the question,” says Terrell. “I thought I had about 30 seconds to live. I started praying repeatedly, God please take care of me,” says Terrell. God, helped along by UofL Hospital’s expert trauma care team, obliged and answered his fervent prayer to live. “They treated me like I was the only patient, with care and genuinely trying to get me back, keep me alive,” he says. “It’s a blessing I’m still here. I could’ve been, maybe should’ve been, dead.”

Throughout his healing and recovery injury, UofL Hospital became a reliable source of education, support, caring and compassion for Terrell. Just one week into his hospital stay, Terrell met the infamous “KJ,” also known as caseworker Kevin Fields, who works with UofL Hospital-sponsored Pivot to Peace program, an anti-violence initiative. He visits with gunshot trauma victims at the hospital to bring comfort and lend support to the patients and their families.

“He walked in and was instantly like family,” says Terrell. “He said he was with a program that had a mission of trying to stop the cycle of violence in the community and keep families from getting destroyed. He could help people after they get injured too, to get to a better place and a better life. He said they would do everything they could to help, and he meant that.”

He connected Terrell with other resources to continue his healing, like his Pivot to Peace mentor, who helped him with medical and non-medical concerns. For Terrell, that has meant reconnecting with his educational goals, and with a new purpose in life. “I wouldn’t even have thought about school, but he planted the seed,” says Terrell. It turns out to be a seed that’s blossoming, as Terrell currently has a 3.7 GPA in his accounting studies at Sullivan University.

“Without the program, I wouldn’t have been in school,” says Terrell. “I would have been lost. This program gives you a sense of direction on how to live your life better, so maybe the next person won’t have to go through what you went through. Support is so big; to have people constantly on you to make sure you’re doing what you’re supposed to do, trying to help you get better, and want better for you. It’s why I am where I am today.”

Since his injury, Terrell has been an authentic voice speaking to and mentoring at-risk youth about gun violence. What message does he try to impart to them?

“I ask the kids 3 questions: Who do they love the most? Most of the time they say their mom. Are you ready to go to jail? How do you think that person you love the most will feel if you went to jail? After that, most of the time this makes them pause and think. Then, I ask them, ‘Are you ready to be in a wheelchair or die? I tell them, ‘Everybody’s go-to is always ‘Everything happens for a reason.’ But what reason? It’s the choices you’re making.”

Terrell says his injury has made him re-evaluate his life on many levels. “The people at UofL Hospital – they cared about more than just keeping me alive. They wanted to see me excel after my injury. Before my injury, what was I really doing? Going to work, going home going to work, going home. What did I want-a nice car, nice house, American Dream? But I was selfish with it – not trying to give back or help people get to a better place.”

Terrell has applied for a job with Youth Violence Prevention Research Center, referred by Pivot to Peace. For two years, he would be learning more and bringing his voice to tackling community violence in a systemic way.

“What I’ve learned is that I have the ability to change the world – I can do my part to change the world,” he says. “I’ve been given a second chance. I can still live my American Dream, but there’s so much more to life beyond that. UofL Hospital wanted to see me reach my full potential. In fact, they showed me a new full potential I didn’t even know I had.”