

Approved April 2018

## *Trauma Care Systems*

Revised April 2018 with  
current title and April 2012

Reaffirmed September 2005

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

Originally approved titled,  
“Trauma Care Systems  
Development and Evaluation”  
June 1998

Integrated, evidence-based trauma care systems reduce injury-related morbidity and mortality while simultaneously saving costs, both directly in healthcare dollars and indirectly in societal impact. 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 continuous quality improvement programs to gather clinically meaningful data in order to optimally improve future patient care and outcomes.

Injury related databanks are most useful to injury prevention and intervention when incorporating information across all phases of care, from point of injury through rehabilitation and recovery. Databanks allow researchers to define emerging injury types, identify and assess injury prevention strategies, elucidate optimal acute care interventions, and measure rehabilitation outcomes. These databank-derived answers further serve to promote effective allocation of system financing and resources.

ACEP and its members, in collaboration with other key stakeholders, must provide a leadership role in injury prevention, acute injury care, injury research, and trauma care systems advocacy.