Purpose of the Support Guide
As a family member or friend of someone with a traumatic injury, you will have many questions about your loved one’s care. This guide tells you the best ways to work with the Baylor University Medical Center (BUMC) staff to stay informed during this difficult time. A glossary about trauma care is included in this guide to help you understand unfamiliar words and medical conditions. There also are blank pages for you to take notes. We encourage you to use this support guide throughout your loved one’s recovery.

Important Phone Numbers
If dialing from a hospital phone to a 214.820.XXXX number, simply dial 2 followed by the last four digits of the phone number (e.g., 2.XXXX).

Baylor University Medical Center (BUMC) Operator………………….. 214.820.0111
BUMC Department of Public Safety & Police……………………………… 214.820.4444
Housekeeping………………………………………………………………..214.820.6700
Chaplain…………………………………………………………………….214.820.2542
Social Work …………………………………………………………………214.820.3515
4 Roberts ICU ……………………………………………………………..214.820.3222
6 Truett Nurses’ Station………………………………………………….214.820.3815
16 Roberts Nurses’ Station……………………………………………..……214.820.3840
Rapid Response Team (RRT)……………………………………………..214.820.7782
Nutrition Services………………………………………………………….214.820.3663
Baylor Hotel………………………………………………………………….214.820.7000
Baylor Pharmacy……………………………………………………………214.820.3451

Guest Relations (to request a translator, sign language interpreter, notary or other guest service): 214.820.2833

Baylor University Medical Center Customer HelpLine (for assistance, compliments, or concerns): 214.818.7378
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What is “trauma?”

Trauma is defined as a disease process that occurs after the application of energy. Our body has a remarkable ability to deal with forces that are applied to us – our skin is amazingly tough and we have strong muscles and bones that pad us and protect us from the outside world.

But any type of armor can be overcome. If it’s minor, just enough to injure a few cells, then you have the bruises and scrapes that we’re all familiar with. But at some point, the amount of force we absorb is more than the body can take. When hit hard enough, serious and life-threatening injury can potentially result. That’s where we come in. Our Baylor team of specialists are here for patients and their families, when they need us most.

- Michael Foreman, MD, FACS
Trauma Medical Director
INTRODUCTION TO TRAUMA

BUMC Trauma Department

By definition, emergencies take you by surprise. But when they do, we’re ready 24 hours a day, seven days a week. From minor injuries to life-threatening conditions, it’s no surprise that you can trust Baylor University Medical Center at Dallas (BUMC) to deliver the treatment you need.

Baylor Dallas is one of only three adult Level I trauma centers in Dallas/Fort Worth, covering 21 counties (18,000 square miles) and 5 million lives.

A team of board-certified trauma surgeons, anesthesiologists and other specialists on the BUMC medical staff is available to provide rapid diagnosis and immediate treatment of life-threatening injuries seven days a week, 24 hours a day. A variety of specialists are on-call 24 hours a day to respond to the needs of trauma patients, including orthopedic-trauma surgeons, neurosurgeons, and other specialists.
TRAUMA ATTENDINGS

The trauma team may include:

Trauma Attendings and Surgery Residents are the primary group of doctors caring for patients. They wear light blue or seafoam green scrubs.

Trauma Nurses are specialized nurses providing care for the patient. They wear black scrubs in the Emergency Department (ED) and navy blue scrubs when working on patient floors.

Trauma Technicians assist nurses in patient care. They wear navy blue scrubs in the ED and maroon scrubs on the floor.

Specialty Physicians are doctors trained for specific injuries (e.g., radiologists, neurosurgeons, orthopedists, plastic surgeons, ear nose and throat (ENT), oral maxillofacial (OMFS), cardiology and many others).

Psychologists/Psychiatrists care for the psychological well-being of both patient and family through all phases of care.

Social Workers and Care Coordinators assist the trauma team with discharge planning, financial resources, and resources for community assistance.

Trauma Nurse Clinicians follow the patient throughout the course of their stay to monitor their progress and treatment.

Registered Dieticians (RD) provide the patient with appropriate nutrition.

Chaplains provide spiritual support and assistance for patient and family.

Child Life Specialists work with children of injured patients to help them understand their parent’s injury, and give support to help them cope. They wear purple scrubs.
TRAUMA TEAM

The trauma team may include: continued

Trauma Researchers work with the trauma team to look at how the patient and family does after the injury.

Physical Therapists (PT) help patients move with as much independence as possible. At first, the PT will start a daily exercise program for strengthening and stretching to prevent muscle tightness and weakness. As the patient gets better, the PT will help the patient sit up in bed, stand, move to a chair, walk, or use a wheelchair. They wear black scrubs.

Occupational Therapists (OT) help patients relearn how to perform daily activities. At first, the OT may help with proper body positioning and monitor the patient until they are able to do simple self-care. As the patient gets better, the OT will help the patient be as independent as possible with grooming, eating, dressing, going to the bathroom, bathing, and other daily activities. They wear black scrubs.

Speech Therapists (ST) help patients be as independent as possible with speaking and the ability to swallow. Doctors may order a swallow test if there is concern the patient is having difficulty swallowing. The ST will find out if it is safe for the patient to swallow. The patient may need an exercise program to strengthen the muscles used to swallow or changes in diet may be needed. The ST also will help the patient with memory, attention span, concentration, processing, and problem solving. They wear black scrubs.

Respiratory Therapists use techniques and equipment to help patients’ breathing. They wear brown scrubs.

In addition, because Baylor Dallas is a teaching hospital, medical students, as well as students from other health care occupations, may come into the patient’s room.

TRAUMA RESEARCH

During your stay, you and/or your loved one may be asked to be in a research study about trauma.

By taking part in a study, you can:

• Play a more active role in your own health care
• Help others by contributing to medical research

Our research focuses on how trauma patients and their families do after they leave the hospital.
TRAUMA PATIENTS ROAD TO RECOVERY

- Ambulance
  - Trauma Bay/ Emergency Department
    - Intensive Care Unit
    - General Trauma Floor
    - Operating Room
  - Discharged/Transferred
TRAUMA PATIENTS ROAD TO RECOVERY

3500 Gaston Ave., Dallas, TX 75246

Trauma Bay/Emergency Department

• The Baylor University Medical Center Trauma team stands ready and waiting for the patient’s arrival to the Trauma Resuscitation Bay.
• Many health care providers may ask questions, as well as provide updates on your loved one. It may be helpful to ask them who they are and what role they play in the patient’s care and write that information down (see notes section). All staff wear identification badges.
• A designated trauma team is responsible for overall care. The leader of the team is the attending trauma surgeon. Other members of the team include resident doctors, critical care nurses, a trauma coordinator, case managers, and social workers.
• Doctors and nurses will assess injuries and stabilize the patient’s condition.
After the Trauma Bay/Emergency Department, the patient may be taken to one of these areas:

- Intensive Care Unit (ICU)
- General Trauma Floor
- Operating Room

If the patient needs surgery, he or she may go directly to the operating room from the emergency department. Trauma patients may need to be monitored in the Intensive Care Unit (ICU). In the ICU, the patient will continue to be taken care of by the attending trauma surgeon and the trauma team. In other cases, when patients do not require intensive monitoring, they can be directly taken to a hospital room.

- During his or her stay, the patient may need more X-rays, lab tests, operations, and other procedures. They also may have physical and occupational therapy.
- Your loved one may look and act very differently. Swelling and bruises are common with traumatic injuries. Pain medication, head injuries, infection, and lack of sleep may make patients appear sleepy, restless, or confused.
- Various machines may be attached to patients. Some machines have alarms that go off without warning. These alarms tell the nurse to do different things, and are not always warnings of an unsafe situation. Do not push buttons on equipment.
- Sometimes, soft restraints may be used if your loved one is trying to remove the tubes, lines, or drains.

The patient will remain in the intensive care unit until he or she no longer needs 24-hour, intensive medical and nursing care.
Designating a Family Spokesperson

When your family member is admitted to BUMC, it will be necessary to appoint one designated person as the primary contact to receive and pass along new health status reports to others.

The trauma team is committed to providing accurate and timely information regarding the patient’s treatment plan and progress. In order to receive specific information on a regular basis, it is recommended that the contact person be the legal next of kin to the trauma patient. The trauma staff strives to update families and friends as often as possible, but it becomes difficult to repeat progress reports to several different family members. By appointing and recognizing a single contact person, the trauma team has the ability to provide important updates and information while continuing to care for the trauma patient.

The contact person is asked to leave all telephone numbers and other contact information with the nurse who is directly caring for your loved one. To assist the trauma team, the following guidelines are suggested for obtaining and sharing patient information.

The contact person should:

• Understand that while trauma team members may not always be immediately available, they will make the time to discuss patient care issues as soon as possible.
• Contact the trauma nurse clinicians with any questions about the physicians and specialists assigned to the trauma team, specific injuries, or overall plan of care and chance for recovery.
• Ask the nurse about the progress and plan. The contact person is invited to relay any other questions to the nurse so that he or she can help determine who can best respond appropriately to your questions.
• Contact the assigned case manager and/or social worker to obtain information regarding financial issues, insurance coverage, discharge planning, or other matters to help facilitate patient recovery.
TRAUMA PATIENTS ROAD TO RECOVERY

Operating Room

The operating room for trauma patients is located on the 2nd floor of the A. Webb Roberts Hospital of Baylor Dallas. There is also a waiting room on this floor for friends and family with coffee, snack machines, bathrooms, seating areas, and televisions.

A help desk can assist you with any needs you may have. A monitor mounted on the wall in the waiting room gives updates on the location and length of the surgery.

Every trauma surgery is different. Some surgeries may take 15 minutes. Others may last 10 hours or longer. Each patient brought into the operating room has unique medical needs and conditions.

After the OR, patients may be taken straight to the ICU. Or they may briefly be in the Post Anesthesia Care Unit (PACU) to wake up from anesthesia (the medicine that put them to sleep for the operation). Then they will be taken to a General Trauma Floor.
Intensive Care Unit

- The 4 Roberts Intensive Care Unit (ICU) is located on the 4th floor of the A. Webb Roberts Hospital of Baylor Dallas.
- The 4 Roberts ICU waiting room is located next to the elevators.
- 4 Roberts is the Trauma ICU that provides care for adult patients who need intensive nursing care.
- In the ICU, nurses are assigned to care for one or two patients each.
- There will be many machines, lines and tubes. Staff can answer any questions you have about your loved one’s care.
- There are often many doctors and team members involved in a patient’s care.

*A team of clinicians from various disciplines visit patients’ bedside on Tuesdays and Thursdays at 10 a.m. (also called multidisciplinary rounds). This may include doctors, nurses, people who work in nutrition, pharmacy, physical therapy, social work, and others, who will talk about the patient’s care and progress. Because family is an important part of the recovery process, we encourage you to attend these meetings as well!

4 Roberts ICU visitation guidelines:*

- Only two visitors at the bedside at a time.
- Waiting room visitors are limited to five or less per patient.
- No food or drink at the bedside.
- No more than two visitors (above the age of 16) may stay with the patient overnight in the waiting room; passes can be obtained after 8 p.m. from your patient’s nurse.
  - Sleeper chairs are provided for visitors in some areas. Air mattresses, portable beds, camping gear or sleeping on the floor are not allowed.
- Children under the age of 12 may visit patients with adult supervision.
- Flowers are not allowed in the ICU.
  *Subject to nurses’ discretion

Picture/Cell Phone Policy

- Communication with others during the patient’s hospital stay is extremely important.
- Baylor Dallas does allow the use of cell phones in the hospital. Please turn the ringer to vibrate.
- For privacy and confidentiality, taking pictures or videos of a patient is only allowed if the patient has said that it is okay. Please check with your nurse before taking any pictures or videos in the hospital.
Shown here are devices/equipment that may be needed to care for your loved one.

1. Cardiac Monitor
2. IV Pump
3. Oxygen Saturation Monitor
4. IV Site
5. Blood Pressure Cuff
6. Nasogastric (NG) Tube
7. Endotracheal (ET) Tube
8. Ventilator
9. Chest Tube Drainage System
10. Foley Catheter
11. Cervical Collar

Please see glossary for details and definitions (pg 22-24)
TRAUMA PATIENTS ROAD TO RECOVERY

General Trauma Floor

The trauma patient is taken to a general trauma floor once any life-threatening injuries have been treated. Sometimes, patients require multiple surgeries. They will be taken back to the general trauma floor or ICU after each surgery.

Visiting guidelines on the floor:
• Are you ill? If yes, please wait until you are well to visit.
• Is the visitor a child? If yes, have an adult accompany the child and tell him or her about what to expect while visiting.
• One visitor (age 16 or older) per patient may stay overnight in the patient’s room.
• Sleeper chairs are provided for visitors in some areas. Air mattresses, portable beds, camping gear, or sleeping on the floor are not allowed.
• Waiting room visitors should be limited to 5 people or less.

We have a Rapid Response Team (RRT) to help you if you think the patient is getting worse. They can check the patient and take action if needed.

Reasons to call the Rapid Response Team:
• There is a clear change in the patient’s condition, and a health care team member has already been told about the change or the patient or family does not believe the change is being addressed.
• There seems to be confusion about what needs to be done to take care of the patient in an emergency.

To reach the Rapid Response Team, call 2-7782 from the hospital room phone.
**Discharge Planning**

Planning for discharge (when the patient will leave the hospital) begins shortly after the patient arrives at the Emergency Department. To coordinate the best discharge plan for the patient, a planning representative may become involved in the early stages of treatment. Whatever the outcome, the team, the case manager, and social worker are here to assist families and friends.

**Discharge options can include:**

- Discharge directly home with or without additional health care services required. The case manager or social worker can provide specific information about home health services.
- A rehabilitation hospital may be an option for anyone who has had a severe head injury, spinal cord injury, or multiple traumatic injuries that require many hours of therapy.
- If the patient is unable to participate in hours of rehabilitation and requires around-the-clock nursing care, discharge to a skilled nursing facility (SNF) or long-term acute care (LTAC) facility may be another option.
- A trauma clinic is held each week in the surgical clinic area for patients who require follow-up visits. Appointment information and contact details will be provided in the discharge paperwork for those who need to schedule follow-up visits with other medical specialists such as orthopedics, plastic surgery, neurosurgery, etc.
Self-Care for Family Caregivers

An injury or illness is a source of stress for the patient. However, it can also be stressful for family, friends, and others who are caring for the patient.

For short-term injuries or illnesses, it may be just an inconvenience or temporary source of worry.

But for extremely sick patients or those battling a long-term condition, caregivers may feel overwhelmed or unable to cope. Knowing how to deal with caregiver stress is very important to your mental and physical health.

Signs of Caregiver Stress

Stress is a normal response during any medical crisis. People commonly feel emotional, physical, and spiritual stress when they are going through a horrible event.

Some common signs of stress include:

Emotional
• Denial about the situation/acting as if the injury didn’t happen
• Anxiety
• Constantly feeling distracted
• Anger/irritability
• Sadness
• Guilt
• Lack of concentration/memory problems

Behavioral
• Excessive or inappropriate alcohol or drug use
• Impulsiveness/acting without thinking
• Withdrawing from others
• Inability to keep a job

Physical
• Stomach/digestive problems
• Stress headaches
• Problems sleeping
• Weight gain or dramatic weight loss
• Chronic or constant fatigue, back or neck pain
Family Caregiver Support

Managing Caregiver Stress
Though you may feel overwhelmed, there are ways to cope:
• Keep a positive attitude
• Get enough sleep and eat nutritious meals
• Avoid alcohol, drugs, and nicotine
• Set realistic goals for yourself
• Seek support from trusted family and friends
• Realize that you can’t control certain things
• Use relaxation techniques (breathing exercises, meditation)
• Stay hopeful
• Exercise regularly

Trauma and Children
What can you do to help a child?
• Listen
• Stick to routines
• Spend time together
• Be open and honest
• Help them start a journal
• Encourage them to tell the trauma story through drawing
• Baylor has Child Life Specialists who can assist you during your loved one’s stay. If you are interested, please get in touch with your patient’s social worker.
FAMILY CAREGIVER SUPPORT

Support for Families
Support groups for the families of trauma patients are held every Tuesday on the 4th Floor of Roberts Hospital at Baylor Dallas at 11:30 a.m. Look for signs in the hallways for help in finding the room.

Members of the Trauma team will be available to answer questions and provide support. We strongly encourage all family members and friends of trauma patients to attend.

Therapy Dogs
Therapy dogs from Baylor Health Care System’s Animal Assisted Therapy Program visit patients, family and staff in the Trauma Department weekly. Therapy animals provide people with emotional support through the dog’s social instincts and skills.
**FAMILY CAREGIVER SUPPORT**

**Spiritual Care**

We believe quality patient care demands attention to a person’s spiritual, physical, and emotional needs. Chaplains are available 24 hours a day. They can be reached through your nurse or by calling the BUMC Operator. Your priest, minister, rabbi, or other spiritual official is always welcome to visit. George W. Truett, one of our founders, called for Baylor to be a place “where people of all faiths and those of none can come with equal confidence.”

To reach a chaplain, call 214.820.2542 or 214.820.1600 after hours.

**Penland Chapel**

Located on the first floor of Truett Hospital at Baylor Dallas and open for prayer or meditation 24 hours a day. Protestant and Catholic services are held on Sundays.

**Interfaith Garden**

A peaceful setting located on Junius Street, between Roberts Hospital and T. Boone Pickens Cancer Hospital.

**Horner Chapel**

Located on the first floor of Baylor Charles A. Sammons Cancer Center, offering a quiet, tranquil space to worship, pray, or meditate.

**Meditation Room**

Located on the second floor of Baylor Charles A. Sammons Cancer Center near the skybridge.

**Lovie’s Healing Garden**

Located outside the front of Baylor Charles A. Sammons Cancer Center, offering a quiet place for prayer, contemplation and a moment’s rest.
SUPPORT THROUGH SOCIAL MEDIA

The hospital has free wireless access (Wi-Fi) for your convenience.

Website
Baylor Health Care System Trauma Website: BaylorHealth.com/DallasTrauma

Facebook
Baylor Health Care System Trauma Group, “TraumaSTAT” facebook/groups/traumastat
Dedicated to the prevention of injury and the treatment of trauma, TraumaSTAT shares medical news and health information, and connects patients and families that have experienced a traumatic injury. This group is supported by team members of the Level I Trauma Center at Baylor University Medical Center at Dallas, including trauma surgeons, nurses, therapists, psychologists, clinical researchers, and injury prevention educators.

Blogs
Baylor Health Care System Blog Site, “Scrubbing In” http://scrubbing.in/
Scrubbing In is a place where hands-on health care discussions are happening every day from the people whose own hands are on the front lines of patient care: the doctors, nurses and medical staff who are saving lives and advancing medicine. Our goal is to provide health education, dispense practical advice and share inspirational stories of the people we serve every day.

Instagram
See what’s happening around the Baylor Health Care System and Baylor University Medical Center by following @BaylorHealth and using #BaylorDallas.

CaringBridge
www.caringbridge.org
Create your own free website that works as a secure, personal online space where you can post health updates to keep friends and family informed.

Trauma Survivor’s Network
www.traumasurvivorsnetwork.org
Learn more about injuries from experts and connect with other survivors. Share your experiences, learn how to better manage your life after a serious injury and gain support and help from others.
COMMUNITY REFERENCES

Courtsey of Baylor University Medical Center
Department of Social Work 214.820.3515

C.D. Treatment Centers
1st Step Counseling .......................... 972.239.4440
ABC Behavioral Health .......................... 214.275.8500
BCAD (BUMC) .......................... 214.820.4660
Green Oaks* .......................... 972.991.9504
Help is Possible (Gateway)* .......................... 214.827.2870
Homeward Bound* .......................... 214.941.3500
Lifenet Community .......................... 214.221.5433
New Beginnings .......................... 817.478.5949
Nexus (women)* .......................... 214.321.0156
Salvation Army .......................... 214.631.8345
Solace Counseling Associates* .......................... 214.522.4640
The Cedars .......................... 972.298.7323
Timberlawn .......................... 214.381.7181
Turtle Creek Manor .......................... 214.871.2484
Veteran's Hospital .......................... 214.857.0835
Welcome House* .......................... 214.887.0696

Adolescent Units
Green Oaks* .......................... 972.991.9504
Nexus Outreach Center .......................... 214.321.0156
Phoenix Project .......................... 214.942.5166
The Cedars Hospital .......................... 972.298.7323

C.D. Phone Referrals
Dallas Challenge - 10 - 17 y/o .......................... 214.566.4680
Greater Dallas Council .......................... 214.522.4999

Domestic Violence
Family Violence Legal Line .......................... 800.374.4673
Genesis Outreach .......................... 214.559.2050
Genesis Shelter .......................... 214.942.2998
Genesis Thrift Store .......................... 214.520.6644
Hopes Door Shelter & Outreach .......................... 972.422.2911
The Family Place .......................... 214.559.2170
Women's Shelter in Arlington .......................... 817.460.5566

Northstar .......................... 800.535.0108
972.906.2500

(* above CD treatment Centers are Value Options providers)

• If you have insurance contact them directly for approved rehab locations
• If you are uninsured you might qualify for enrollment in the Value Options Program, call the above number to enroll
• If you are going to one of the Value Options providers to apply, then you must bring a picture ID with you

Shelters
24-hour club (Ross & Peak) .......................... 214.823.3200
Austin Street Shelter .......................... 214.428.4242
Dallas Life Foundation .......................... 214.421.1380
Day Resource Center .......................... 214.670.3043
Family Gateway - Families w/children .......................... 214.741.6515
Letor Center - Runways 10-16 yrs old .......................... 214.941.8578
Promise House - Runaways 10-17 yrs old .......................... 214.941.8578
Salvation Army .......................... 214.631.8345
Union Gospel Mission - Men .......................... 214.637.6117
Union Gospel Mission Center of Hope - Women & Children .......................... 214.638.2988

Counseling Centers
Child and Family Guidance Center .......................... 214.351.3490
Suicide/Crisis Line .......................... 214.828.1000
Counseling Institute of Texas .......................... 972.494.0160
Legace Counseling Center .......................... 214.520.6308
Pastoral Counseling Center .......................... 214.526.4525

Methadone Resources
Addiction Medicine Assoc .......................... 817.492.9383
CDHS - Arlington .......................... 817.652.1004
Garland Treatment .......................... 972.203.1141
Gonzales Association Inc .......................... 972.840.1431
North Dallas Rehab .......................... 972.446.0972
Tarrant Co. Medicine Ed .......................... 817.336.5454
West Texas Counseling - 9 locations* .......................... 866.286.9627
214.630.7146

Step-Med Counseling* .......................... 214.421.9100
Cross Roads Recovery .......................... 214.339.3181

Support Groups
24-hour club (Ross & Peak) .......................... 214.823.3200
Al-Anon .......................... 214.363.0461
Alcoholic Anonymous .......................... 214.887.6699
Depressive/Manic-Dep Group .......................... 817.654.7100
Fr. Worth AA .......................... 817.339.3181
Hispanic AA .......................... 214.905.0770
Narcotics Anonymous .......................... 972.699.9306
CODA .......................... 972.647.4568

Other Referrals
University of Texas Southwestern Medical Center Psychology 214.648.5277; Psychiatry 214.648.5555

Galaxy Counseling Center 972.272.4429

This list is provided to you for your convenience references. Baylor Health Care System has not reviewed the credentials of the providers that are not affiliated with Baylor nor does BHCS endorse or guarantee the fitness or suitability of those providers. 12/22/2006
RESOURCES FOR OVERNIGHT ACCOMMODATIONS & DINING

Baylor Plaza Hotel

For your convenience, we offer an on-site hotel with reasonable rates. The hotel is located in the Wadley and Barnett Towers of the Medical Plaza at 3600 Gaston Avenue, connected to the hospital. The cost is $85 per night plus tax for a room with one full bed or twin beds. We offer:

- Daily housekeeping services
- Guest laundry facilities on site
- Coffeemaker and hair dryer
- Fax/copier service available at the hotel desk
- Covered parking garage (underground)

Because this is a hospital and hotel guests don’t know how long they will stay, we cannot guarantee room types or reservations. Check-in time is 4 p.m. and check-out time is 11 a.m. For reservations or directions, please call us anytime at 214.820.7000.

A list of other nearby accommodations is available at the concierge desks in the hospital lobbies or through Patient and Family Services, 207 Barnett Tower, open from 9 a.m. - 5 p.m.

Baylor Dallas Dining

Offering four cafes, a cafeteria and three coffee bars, each with eat-in and take-out options.

**Truett Café:** Located in the basement of Truett Hospital, the cafeteria features a salad bar, pizza, grilled and cold sandwiches and wraps, home-style soups, hot entrees and side dishes, desserts, snacks, Chick-fil-A® food items, Starbucks® coffee and other beverages. Open 6:30 a.m. - 7:30 p.m. daily.

**Espresso Impressions:** Located in the basement of Truett Hospital, and offers Starbucks coffee, muffins, cakes and pastries. Open 6 a.m. - 5:30 p.m. weekdays.

**The Atrium Market:** Located on the first floor of Roberts, near the Roberts Gift Shop, offering hot and cold meals, desserts, snacks, Starbucks coffee and other beverages. Open 6:30 a.m. - 1:30 a.m. weekdays and 7:30 p.m. - 1:30 a.m. weekends.

**Café Charles:** Located on the second floor of Baylor Sammons Cancer Center, and offers a menu of nourishing meals in a sunny and scenic setting that includes a balcony overlooking Landry Park. Open 7:30 a.m. - 3:30 p.m. weekdays; closed on weekends.

**Latte Hope:** Located near the skybridge on the second floor of the Cancer Center. The coffee bar offers gourmet coffees, teas and pastries in a pleasant and relaxing environment. Open 6:30 a.m. - 3:30 p.m. weekdays.

Meal trays for family members are also available for purchase. You may use a credit card to order a tray from the Diet Office by calling 214.820.3663.
GLOSSARY

Advance Directives
Legal paperwork that names a health care “proxy” or someone who will speak on the patient’s behalf regarding his/her health care decisions if he or she is unable to do so

Anoxia
Lack of oxygen to the brain

Anticoagulant
Medications used to help prevent blood clots

Anticonvulsants
Medications used to help prevent or control seizures

Attending Trauma Surgeon
The physician in charge of the trauma team overseeing care of the trauma patient

Blood Pressure Cuff
A device for measuring blood pressure

Brain Death
When all functions performed by the brain have stopped and will never function again

Cardiac Monitor
A machine that records the electrical activity of the heart and may also record blood pressure, intracranial brain pressure, oxygenation, and temperature

Computed Axial Tomography (Cat Scan or CT)
Computerized images that reveal more details than standard X-rays

Cervical Collar
A device used to keep the neck from moving

Cervical Spine (C-Spine)
The first seven vertebrae, located in the neck

Chest Tube
A tube placed in the chest cavity to remove air, fluid, or blood

Coma
A multi-level state of deep unconsciousness

Cultures
A sample of blood or other body fluids that are tested for bacteria or other organisms that may cause infection

Contusion
Bruising of tissue in the brain, lung, organs, skin, or muscle.

Cognition
The ability to think and understand

Deep Vein Thrombosis (DVT)
A blood clot

Designated Spokesperson
The assigned family member or friend who serves as the single source of contact with the medical and administrative staff, usually the trauma patient’s next of kin

Do Not Resuscitate (DNR)
An order written by your physician instructing health care providers not to attempt cardiopulmonary resuscitation (CPR) in case of cardiac arrest (heart stops beating) or respiratory arrest (breathing stops)

Endotracheal (ET) Tube
A tube passed through the nose or mouth and into the trachea (windpipe) to help with breathing and the delivery of oxygen to the lungs

Foley Catheter
A tube inserted into the bladder to collect urine

Fracture
A broken bone
**Glossary**

**Gastrointestinal Tube (G-tube)**
A tube inserted into the stomach to provide nutrition, i.e. “feeding tube”

**Glasgow Coma Scale (GCS)**
A measurement used to evaluate the level of consciousness

**Hematoma**
Rupturing of a blood vessel that leads to bleeding

**Halo**
A large circular device that attaches to the skull and surrounds the head to stabilize the upper spine and prevent movement

**Intravenous Line (IV)**
A small tube inserted into a vein that delivers fluids, nutrients, or medications

**IV Catheter**
A catheter inserted into a vein to supply medications directly into the blood stream

**IV Pump**
A machine that controls the rate of flow of fluids or medications being given through an IV catheter

**Intracranial Pressure Monitor (ICP)**
Measures the pressure in the brain by a small catheter (tube)

**Jejunostomy (J-tube)**
A tube surgically inserted into the jejunum (bowel), usually for feeding

**Life Support**
Treatment that includes mechanical ventilation (a machine that does the work of the lungs), administration of nutrition and hydration (fluids) to support the heart, and other actions to keep a patient alive

**Liver Laceration**
A cut to the liver that may be treated with or without surgery

**Long Term Acute Care (LTAC)**
Takes care of patients with serious and complex medical conditions requiring a longer length of stay

**Lumbar Spine**
Five vertebrae located at the end of the spine

**Magnetic Resonance Imaging (MRI)**
A procedure that uses magnetic fields to create a picture, which is more detailed than standard X-rays

**Multidisciplinary**
The coordinated efforts of several medical specialties to achieve a common goal

**Nasogastric (NG) Tube**
Temporary tube inserted into the nose down to the stomach that is used to remove fluids, feed, or administer medications. It may also be inserted through the mouth as an orogastric (OG) tube.

**Neurosurgeon**
A surgeon that specializes in the treatment of brain and spinal cord injuries

**Oxygen Saturation Monitor**
Used to measure the amount of oxygen in the blood

**Organ Failure**
When an organ stops working; organ failure may or may not be permanent

**Organ Donation**
Once a person has been declared brain dead, organs can be given to another person through the act of donation
GLOSSARY

Orthopedic
Related to the bones

Percutaneous Endoscopic Gastrostomy (PEG) Tube
A tube inserted directly through the abdomen into the stomach for giving fluids, feeds, or medications

Plastic Surgery
Related to facial fractures, burns, and cosmetic surgery

Pneumonia
An infection in the lung

Post-Concussive Syndrome
After a concussion, the patient may experience a headache, nausea, forgetfulness, and fatigue for several weeks

Pulmonary
Related to the lungs

Rapid Response Team (RRT)
A multidisciplinary team consisting of trained personnel who are available 24 hours per day, 7 days per week and respond to patients who are having a rapid change in condition

Renal
Related to the kidneys

Resident
A doctor who is in training to provide a specialty service

Sepsis
Bacteria or other organisms in the body that can lead to problems with cells in the body and organ failure

Skilled Nursing Facility (SNF)
Provides a wide range of services, including nursing care, 24-hour supervision, assistance with activities of daily living, and rehabilitation

Spinal cord Injury (SCI)
Damage to the spine, which results in a loss or decrease of function such as the ability to move or feel

Splenic Laceration
A cut to the spleen, which may be treated without surgery if the patient remains stable

Thoracic Spine
12 vertebrae in the chest area, after the cervical spine and before the lumbar spine

Tracheostomy (trach)
A surgically placed tube that is put into the trachea (windpipe) to help breathing, remove fluids from the lungs, and to help wean the patient from the ventilator

Total Potential Nutrition (TPN)
A type of nutrition provided through the veins

Traumatic Brain Injury (TBI)
Term used for patients with moderate to severe injury to the brain

Ventilator
A breathing machine attached to the endotracheal tube or the tracheostomy tubes to deliver oxygen to the lungs

Ventriculostomy Tube
A tube that is placed into the brain to monitor intracranial pressure and can drain excess fluid

Vertebra
Any of the 33 bones that form the spine, or vertebral column
TEAM MEMBERS

My Primary Medical Team Members

Admitting Physician________________________________________________________
ICU Physician____________________________________________________________
Resident Physician________________________________________________________
Nurse__________________________________________
Trauma Nurse Clinician_____________________________________________________
Orthopedics______________________________________________________________
Neurosurgery______________________________________________________________
Other specialties___________________________________________________________
Other specialties___________________________________________________________
Other specialties___________________________________________________________
Other specialties___________________________________________________________

My Treatment Team

Physical Therapist_____________________Speech Therapist_________________________
Occupational Therapist_____________________Dietician___________________________
Social Work__________________________Care Coordinator________________________
Chaplain_________________________Family Support__________________________
Psychologist__________________________Psychiatrist_________________________
Trauma Researcher______________________Rehab Liaison________________________
Other staff_______________________________________________________________
Other staff_______________________________________________________________
Other staff_______________________________________________________________
**TIPS ON COMMUNICATING WITH THE MEDICAL TEAM**

**Prepare questions ahead of time**
Make a list of your most important concerns and problems. Some things you may want to ask about are injuries, medications, pain, progress, and plan of care.

**Ask the nurse for help**
The nurse can answer questions about tests and examinations, surgical procedures, personal care, and medications.

**Take someone with you**
A companion can ask questions you feel uncomfortable asking and can help you remember what was said.

**Write down information or questions using the notes section of this guide**

**Questions to Ask**
- How long will my patient be here?
- What should I do in the meantime? (household chores, activities of daily living that patient may have done before injury)
- Can I go home?
- When are follow-ups?
- Who do I call if I have questions?

**Notes**
Don’t forget to ask questions!

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