



THE NTI NEWS

VOL. 2 NO. 2 SPRING / SUMMER 2010

GRANT ANNOUNCEMENTS ►

SEVEN TRAUMA STUDIES RECEIVE \$1.4 MILLION IN FUNDING FROM NTI

We are excited to announce the awardees of our first round of grant funding. The studies, to be conducted at various institutions across the country and all trauma-related, will receive grant funding ranging from \$125,000 to \$225,000.



From initial submissions of 85 research proposals, NTI's Science Committee accepted 30 through a rigorous peer-review process before selecting the final seven promising studies.

Peggy Knudson, MD, FACS, professor of surgery at UCSF and Chair of the NTI Science Committee, said she was pleased with the response to NTI's inaugural Request for Proposals. "The high number of fundable proposals we reviewed is strong evidence of the demand for trauma research funding," she said. "While trauma is the number one killer of Americans aged 1 to 44, it remains the most underfunded medical research category. We're excited to be able to make these awards and already looking forward to our next funding round."

Sharon Smith, NTI's executive director, added, "NTI is committed to

-Continued on page 2

ABOUT THE NATIONAL TRAUMA INSTITUTE ►

The National Trauma Institute (NTI) is a national non-profit organization that:

- assembles funds from a variety of public and private sources to support trauma research across the country
- supports military and civilian innovation and collaboration in trauma care and research, and
- sets a national trauma research agenda.

NTI's goal is to reduce death and disability resulting from traumatic injury.

RESEARCH GRANTS AVAILABLE ►

REQUEST FOR PROPOSALS OPEN THROUGH JULY 23

In its second national request for proposals, NTI will grant \$2.8 million to rigorous trauma studies, especially those that address hemorrhage, intensive care, trauma systems or pre-hospital care.

Pre-proposals must be submitted by July 23, 2010 and may outline clinical or translational research involving either single or multiple centers. For complete submission guidelines, visit: www.nationaltraumainstitute.org/research/funding_opportunities.html.

Half of the available funding is designated specifically for studies related to hemorrhage. Bleeding from extremity wounds stops with applied pressure, but 15 percent of battle injuries in the Iraq and Afghanistan theaters are to the torso, where applying pressure is not an option. We must develop simple, field-expedient techniques for non-surgeons to use in emergency situations.

Other priorities include effective resuscitation strategies, new treatments for shock, better understanding of the coagulopathy of trauma, the elimination of hospital acquired infections, airway and ventilation management strategies for the injured, and battlefield and pre-hospital care and communication.

facilitating translational research—that is, research whose results may affect the practice of medicine and patient outcomes in the near-term.

These studies will get under way this year, may be completed in as little as one year, and we'll hear preliminary results from the principal investigators at our Annual Trauma Symposium as early as 2011."

Details about the studies will be posted on the NTI website once they get under way: To follow their progress, visit www.nationaltraumainstitute.org and click on the Research tab and then Current Projects.

Awardees, institutions and study topics are as follows:

PRINCIPAL INVESTIGATOR	INSTITUTION	STUDY TOPIC
Joel B. Baseman, PhD	Univ. of Texas Health Science Center at San Antonio	Mycoplasma Pneumoniae in the ICU
Mitchell J. Cohen, MD	Univ. of California, San Francisco	Timing and Mechanism of Traumatic Coagulopathy
Martin A. Croce, MD	Univ. of Tennessee Health Science Center	Multicenter Prospective Evaluation of the Ventilator Bundle in Injured Patients
Fredric M. Pieracci, MD, MPH	Univ. of Colorado, Denver	A Multicenter, Randomized, Double-Blind Comparison of Intravenous Iron Supplementation to both Enteral Iron Supplementation and Placebo for the Treatment of Anemia of Traumatic Critical Illness
Shahid Shafi, MPH, MD, FACS	Baylor Research Institute	Comparative Effectiveness of Clinical Care Processes in Resuscitation and Management of Moderate to Severe Traumatic Injuries
Carrie A. Sims, MD, MS	Univ. of Pennsylvania	Vasopressin Supplementation during the Resuscitation of Hemorrhagic Shock
Jason L. Sperry, MD, MPH	Univ. of Pittsburgh	Characterization of the Effects of Early Sex-Hormone Environment Following Injury

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MESSAGE FROM THE CHAIRMAN ►



I'm happy to be able to announce NTI's first research grant awards, our next round of funding and NTI's first major campaign: "Stop the Bleeding", all in this issue our newsletter

We're very proud to be able to fund seven studies in our first round of grants. With this accomplishment, we truly begin to fulfill our mission; and we expect it to be just the first in an annual disbursement of funds directed toward promising trauma research. You can find information on NTI's next Request for Proposals on our website at www.nationaltraumainstitute.org.

With the launch of our "Stop the Bleeding" campaign, we'll focus on raising funds specifically for hemorrhage, or massive bleeding. Almost half of all trauma-related deaths are caused by uncontrolled

hemorrhage, and while there is no active intervention for noncompressible hemorrhage (that which occurs to the trunk as opposed to the extremities), research may offer solutions that could save lives. Potential therapeutic approaches include pharmacologic, endovascular and other novel techniques.

Continued research on issues ranging from hemostasis to inflammation and organ dysfunction is required as well. With advances resulting from focused research programs, it seems likely that the rates of immediate death and late complications that lead to death will be decreased and outcomes improved for both soldiers with battlefield injuries and trauma victims in the civilian community.

Your support for our campaign is absolutely vital. Please read about how you can help on this page and together, we can stop the bleeding.

Timothy Fabian, MD, FACS
Chairman of the Board, National Trauma Institute

NATIONAL FUNDRAISING CAMPAIGN ►

NTI LAUNCHES CAMPAIGN TO STOP THE BLEEDING

In its first major effort to secure private and corporate dollars for trauma research, NTI this month launches its "Stop the Bleeding" campaign. With a focus on research related to hemorrhage, or massive bleeding, which is a factor in nearly half of all trauma-related deaths in the United States, the campaign seeks to make concrete the need for research that is sometimes hard to define and explain to lay audiences. The campaign directly links research to the ability for first-responders and doctors to stop trauma victims from bleeding and to save their lives.

Our hope is that this campaign will energize individuals and companies to help us fund translational studies with the potential for actionable results in a short amount of time. Without funds for clinical trials and further development, promising treatments will never make it into clinical practice.

Become a "Stop the Bleeding" Partner

To receive a supply of "Stop the Bleeding" campaign materials to distribute in your own work setting, please contact Stephanie Krueger at development@nationaltraumainstitute.org. You may also schedule NTI Executive Director Sharon Smith to make a presentation to your audience about the impact of trauma in American society and the need for research funding.

NTI OFFERS NEW WAYS TO HELP SAVE LIVES ►

In addition to securing federal funds, it is essential that NTI raise private dollars from individuals, foundations and corporations to effectively fulfill our mission.

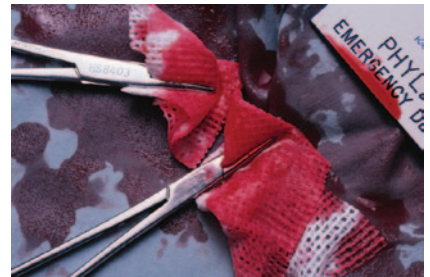
By making a donation you can help save lives. Please consider giving through one of the following opportunities—a contribution in any amount helps!

- Donate to our Stop the Bleeding Campaign for hemorrhage research
- Join our Research Society with a gift of \$1,000 or more, and directly support our research initiatives
- Make a Memorial or Honor gift and express your remembrance or support of a loved one or caregiver
- Support our educational efforts by contributing to our Annual Trauma Symposium
- Name an NTI Fund by donating \$10,000 or more to a restricted project area
- Give at your workplace through the United Way Texas State Employee Contribution Campaign (SECC) or Combined Federal Campaign (CFC)

For more information on giving to NTI, please visit our website: www.nationaltraumainstitute.org and click on the Donate button.

STOP THE BLEEDING

This year, **170,000** Americans will die from a traumatic injury. Trauma is the **#1 cause of death for children and adults ages 1 to 44.**



Hemorrhage, or massive bleeding, is responsible for nearly **half of those deaths** and for the majority of **preventable deaths** of our soldiers in Iraq and Afghanistan.

Several medical solutions have the potential to control massive bleeding, but **without adequate funding** for further development and clinical trials, **life-saving treatments** are elusive dreams.

Help fund hemorrhage research today, and **stop the bleeding.**

www.NationalTraumaInstitute.org

NATIONAL TRAUMA INSTITUTE

CONGRESSIONAL UPDATE ▶

MEMBERS OF THE HOUSE AND SENATE REQUEST APPROPRIATIONS ON BEHALF OF NTI

Several members of the House of Representatives requested Fiscal Year 2011 (FY11) federal funds on our behalf to support important research related to hemorrhage. Texas Representatives Charles Gonzalez, Ciro Rodriguez and Solomon Ortiz all supported our request for \$4.5 million to generate research to develop life-saving interventions and devices that will reduce death and disability following traumatic injury that results in hemorrhage.

In their requests, the representatives acknowledged that promising technologies have been identified but require additional research and testing before they can be used successfully in the field—whether to mitigate battlefield or civilian injuries.

In addition, Texas Senators Kay Bailey Hutchison and John Cornyn requested up to \$3.5 million to support NTI's work to improve trauma clinical care and education, as well as research in such areas as acute lung injury, shock and hemorrhage.

We're extremely grateful for the support of these senators and representatives, without which NTI wouldn't be able to do its work. FY11 funding requests will be considered later in the year as Congress works through the budget process.

STAFF NEWS ▶



NTI HIRES NEW DIRECTOR OF DEVELOPMENT

Stephanie Krueger joined the National Trauma Institute as director of development in January. She has more than 12 years of experience providing the vision, leadership, strategic direction and management for the fundraising efforts of several organizations. Most recently, she served as a development officer for a major art museum, implementing annual giving and membership programs in support of the venue. She has

also directed membership and programs for other organizations and companies.

The addition of Ms. Krueger to our staff has enabled us to launch our first strategic national campaign to raise funds from individuals and private organizations that will supplement federal research dollars. Read about our Stop the Bleeding Campaign in this issue of the newsletter, and please consider becoming a donor. No one knows better than the readers of this newsletter of the great need for trauma research dollars.

"We are looking to connect with people who have been touched by trauma – and who understand that their gift and involvement will save lives and stop unnecessary suffering," said Ms. Krueger of the campaign. "It's not just about raising money – it's about matching the values of donors to our mission to reduce injury, death and disability through trauma research. We want to build long-term relationships and create partnerships with our donors."

We're excited to embark on this next phase in the organization's growth as we work toward our vision to be the premiere grant-making institution for translational trauma research.

ON THE BLOG ▶

NTI's Blog found at www.NationalTraumaInstitute.org on the News & Information page—covers everything from Trauma Symposium lectures to media coverage of traumatic events to announcements of available grant funding. Visit often, give your input and suggest other topics. Here's a selection of some recent posts:

May 3: Oprah Works to Eliminate Texting & Talking While Driving—NTI Signs on to Initiative

On Friday, the highly influential Oprah Winfrey launched an initiative to reduce traffic fatalities caused by distracted drivers...

April 21: NTI Joins List of Non-Profits Approved for Texas State Employee Campaign

The National Trauma Institute is now listed among the hundreds of organizations included in the 2010 Texas State Employee Charitable Campaign (SECC) Application...

March 23: NTI Board Members Quoted in USA Today Story on New Military Policy

The military's Joint Theater Trauma System instituted a new policy to return brain-dead soldiers to their families before removing life support...

March 16: Hospital-Acquired Infections Controlled with Medicated Cloths

An article in the March issue of the Archives of Surgery reports that trauma patients bathed with antiseptic cloths contracted significantly fewer infections...

March 11: Dept. of Transportation Reports Drop in Traffic Fatalities

Good Morning America reported this morning that, according to a DOT study, traffic fatalities are down 8.9% from 2008 and 22% from 2005...

March 9: Eye Trauma is Focus of DOD Grant to USC, But Funding Process Needs an Overhaul

The Keck School of Medicine at the University of Southern California (USC) received \$800,000 in funding from the Department of Defense to conduct research that will lead to restored sight for combat troops...

DON'T MISS THE 16TH ANNUAL TRAUMA SYMPOSIUM ▶



At the 2009 Trauma Symposium, LtCol Todd Rasmussen, Director of Wartime Vascular Research at Wilford Hall Medical Center, discussed the use of innovative vascular shunts in limb repair operations conducted in field hospitals.

the Division of Behavioral Medicine at the University of Texas Health Science Center and Director of the STRONG STAR Multidisciplinary PTSD Research Consortium; Dr. Charles Hoge, MD, Neuropsychiatry Research Consultant for OTSG and Senior Scientist at the Walter Reed Army Institute for Research; and Dr. Harvey Levin, PhD, Professor and Director of Research in the Department of Physical Medicine & Rehabilitation, Baylor College of Medicine.

Our concurrent breakout lectures focus on the latest research in trauma, neurosurgery, emergency medicine, burn surgery, orthopedics, anesthesiology, craniofacial surgery, trauma nursing and trauma mental health. A plenary panel on traumatic brain injury will discuss the latest research related to mannitol, HTS, vasopressors and progesterone treatments. Our resuscitation panel will explore the use of crystalloids, vasopressors and whole blood vs. blood products.

New this year, our anesthesiology faculty is offering an Advanced Airway workshop. This workshop has limited seating and an additional fee, so if you are interested in attending, you'll want to register as soon as possible.

To register for the Symposium, visit the NTI website at www.nationaltraumainstitute.org or contact program coordinator Rob Mazak at Robert.mazak@nationaltraumainstitute.org or 210-233-6162.

ICU REGISTRY PROJECT ▶

WITH ITS ICU REGISTRY, NTI LAUNCHES A NEW NATIONAL EFFORT FOR BETTER TRAUMA CARE

[Reprinted with permission from author Barb Rupert]

"What we're talking about here is going beyond technically saving a life to getting wounded warriors and civilians back to being a productive part of society and their families again."

What if a slight change in the way a wounded service member was first treated could lead to a better long-term recovery?

It is just this "what if" that the National Trauma Institute, based in San Antonio, Texas, seeks to discover.

ADVANCED AIRWAY WORKSHOP ▶

Tuesday, August 31, 2010
1:00 p.m. – 5:00 p.m.

The Advanced Airway Workshop is a three-hour course offered as part of the Annual Trauma Symposium, which will include live demonstrations on manikins and other adjunct materials that mimic the difficult airway.

In addition to faculty members Drs Steven Venticinque and Antonio Hernandez--board certified anesthesiologists with board certification in critical care Medicine--other advanced practice personnel with specialization in managing the challenging airway will assist with stations relevant to practitioners in pre-hospital, emergency room and critical care settings.

Workshop participants will rotate through 13 learning stations:

- Optical Stylet
- Fiberoptic Intubation
- Supraglottic Airway Devices
- Video Laryngoscope
- Percutaneous Airway
- Laryngeal Mask
- Fiberoptic ETT Guides
- Surgical Airway
- Intubating Bougie
- Jet Ventilation

[The fee for the Advanced Airway Workshop is \$50 in addition to Symposium registration. Space is limited to 150 participants, so register now!]

www.NationalTraumaInstitute.org

There has never been a national organization devoted exclusively to funding and conducting trauma injury research. Until now.

As the country's first military and civilian partnership in trauma care, the not-for-profit NTI is uniquely situated to mobilize a rapid nationwide research effort directly aimed at reducing the number of deaths and disabilities due to trauma.

Historically, trauma research has received relatively low funding—less than a tenth of what is devoted to cancer or HIV.

“Yet, when surveyed, Americans say that saving our warriors is a top military medicine funding priority,” says COL Lorne Blackbourne, commander of the U.S. Army Institute of Surgical Research (USAISR) and an NTI board member. “The NTI is one answer to this issue, bringing the country's top military and civilian trauma injury experts together to focus on improving outcomes after serious injury.”

New ICU Registry Links Data for Better Care



U.S. military personnel with the 332nd Expeditionary Medical Group treat trauma patients in the emergency room of the Air Force Theater Hospital on Balad Air Base, Iraq. (U.S. Air Force by Master Sgt. Scott Reed)

One of the first NTI projects to come online is an automated ICU registry, with a pilot system expected to go live this April.

The military already electronically compiles combat trauma data in the Joint Theater Trauma Registry, headquartered at the USAISR at Fort Sam Houston. Researchers use this medical data from combat support hospitals to identify ways to improve protective equipment and battlefield care to save more lives.

However, the military lacks a similar registry to gather ICU medical data such as lab studies, medications and daily vital signs in order to analyze trends and outcomes once Soldiers are transferred to Landstuhl regional medical center in Germany or back to the United States.

“NTI's efforts in this area are vital because we realize that improving combat casualty care is complex,” notes COL Kurt Grathwohl, critical care consultant to the Surgeon General. “These patients often receive treatment involving multiple interventions, spanning thousands of miles and days. Collecting ICU data helps close the loop with respect to understanding the effects of therapies and care throughout the continuum of care.”

In the pilot system, NTI will link its new ICU registry into the San Antonio area's regional trauma registry in April. It will first connect University Hospital and Brooke Army Medical Center, which includes the USAISR Burn Center (the nation's only military burn center).

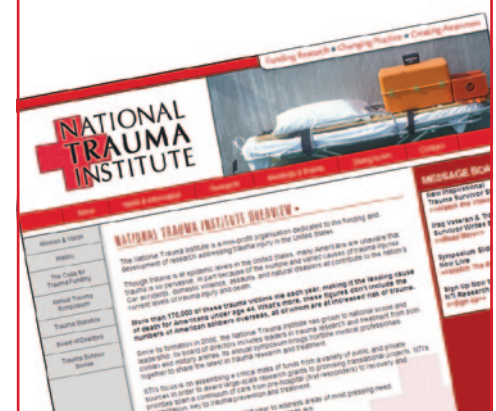
NTI Website is Your Resource

As the National Trauma Institute grows, so does our online presence and the resources we are able to share with you. Visit NTI's dynamic new website today to:

- Sign up to receive announcements of research funding opportunities
- Read about NTI's research priorities and the most likely avenues for clinical improvement
- View a comprehensive trauma calendar that puts the dates of all national and regional trauma-related meetings at your fingertips
- Monitor the progress of NTI's requests for federal funding of trauma research
- Learn the results of research funded by NTI
- Read NTI's newsletter archives
- Find out about NTI-hosted professional meetings and conferences and download presentations and follow-up materials
- Find the latest statistics related to trauma in the United States
- Follow NTI's blog and participate in discussions related to NTI's activities, trauma events and media coverage
- Give online to support NTI's mission

As NTI's research agenda progresses, look for more functionality! Add NTI's website to your bookmark bar today: We want to be your most trusted, timely and convenient source of information related to trauma research.

www.NationalTraumaInstitute.org



Says Dr. Ronald Stewart, immediate past chair of NTI, "Nearly all emergency medical services personnel in our area use the same electronic medical record. The first responders input data into their tablets. Through the ICU project, this data will be able to be linked centrally with data from receiving facilities, the transport team, the receiving trauma center and now the ICU. With this fuller picture of the care the patient is receiving and the outcome—in one easy-to-use system—we'll have a powerful depth of information without the time and errors involved in repeated manual data entry."

The ICU registry collects 300 data elements on each patient and, once proven, will be fully integrated into the Joint Theater Trauma Registry; in fact, it has been developed by the same software company. It is a web-based program designed to allow data sets from any system, so electronic medical records can load automatically, whether from a military, VA or civilian hospital. Each hospital can simply log in without having to purchase additional software.

NTI estimates the pilot registry will include data on 5,000 patients a year between the first two centers alone. Stewart says, "We can apply this wealth of information immediately to determine where we need to improve care, and toward robust research for the future."

Stewart explains that clearly seeing the outcomes will help improve pre-hospital care, which is crucial considering the number of transfers involved in a combat setting.

Joining Forces to Improve Trauma Awareness

NTI was formalized in 2006. The hope is that it will be to trauma what the National Cancer Institute is to cancer—a positive force that improves awareness, advocacy and care.

To translate battlefield innovations to civilians at home, and vice versa, NTI has built upon the existing collaborations in San Antonio among USAISR, the University of Texas Health Science Center and three Level I Trauma Centers. These include University Hospital and the military's only Level I Trauma Centers, BAMC and Lackland Air Force Base's Wilford Hall Medical Center.

NTI is one of several efforts supported by the U.S. Army Medical Research and Materiel Command's Telemedicine and Advanced Technology Research Center (TATRC) and Combat Casualty Care Research Area Directorate.

Says NTI Director of Operations Monica Phillips, "TATRC has been a great support and has provided national networking events so we can better connect our work with military needs."



TAKE THE NO PHONE ZONE PLEDGE ▶



The National Trauma Institute is proud to support Oprah Winfrey's national initiative to make our roads safer. All employees of NTI have signed the No Phone Zone pledge, vowing to avoid texting and talking while driving. Distracted

drivers kill 6,000 people a year and injure 500,000.

Sign the No Phone Zone pledge today and do your part to end distracted driving. Read more about The No Phone Zone initiative and sign the pledge at www.oprah.com/packages/no-phone-zone.html

The NTI News is published semi-annually by the National Trauma Institute

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LEARN AND SAVE LIVES ►

16th Annual Trauma Symposium

August 30 – September 1, 2010

Marriott Rivercenter – San Antonio, Texas

SAVE THE DATE

Register by July 1, 2010 to receive these Early Bird Rates:

Physician	\$300
PA/RN/CRNA/Nurse Practitioner	\$225
LVN/LPN/EMT/Paramedic/Tech.	\$150
Student/Resident	\$100

Advanced Airway Workshop (limit: 150) \$50

For More Information and to Register:

Visit www.NationalTraumaInstitute.org

Or call 210-233-6162

Symposium Hotel: Marriot Rivercenter

Call 210-223-1000 for reservations



www.NationalTraumaInstitute.org

