

State Trauma and Emergency Medical System Summary of Levels of Designation

- Level I** A tertiary care facility central to the trauma care system. The center must provide leadership and total care for every aspect of injury, from prevention through rehabilitation. Because of the large personnel and facility resources required for patient care, education, and research, most Level I trauma centers are university-based teaching hospitals. Research and prevention programs are essential for a Level I trauma center.
- Level II** A facility that is also expected to provide initial definitive trauma care, regardless of the severity of injury. The Level II center can be an academic institution or a public or private community facility. In some areas where a Level I center does not exist, the Level II center should take on the responsibility for education and system leadership. A Level II center is not required to have the extensive research and injury prevention programs that are required of a Level I.
- Level III** A facility which serves communities that do not have immediate access to a Level I or II institution. A Level III facility can provide prompt assessment, resuscitation, emergency operations, and stabilization and also arrange for possible transfers to a facility that can provide definitive trauma care. General surgeons are required. Orthopedic coverage is also required. Planning for care of injured patients in these facilities requires standardized treatment protocols and transfer agreements in more specialized areas of care.
- Level IV** A facility which provides advanced trauma life support prior to patient transfer in remote areas where no higher level of care is available. It is the de facto primary care provider. Usually small rural hospital emergency departments will seek Level IV status. The Level IV facility should be an integral part of the inclusive trauma and emergency care system. Treatment protocols for resuscitation, transfer protocols, data reporting, and participation in system performance improvement (PI) are essential.
- Level V** A facility, usually a clinic or urgent care facility, which can serve as a “trauma receiving facility” to provide basic resuscitation for trauma patients while arrangements for further transport to a higher level of care is occurring. These facilities may not be open 24 hours a day, and may be staffed by physician assistants or nurse practitioners. The Level V facility should be an integral part of the inclusive trauma and emergency care system. Treatment protocols for resuscitation, transfer protocols, data reporting, and participation in system performance improvement (PI) are essential.