## Trauma corner

## The Trauma Nursing Core Course: 21 years and six editions later!

By Carole Rush, RN, MEd, CEN, Member of NENA National Course Administration Committee (NCAC)

## Brief history of the Trauma Nursing Core Course1

The Trauma Nursing Core Course (TNCC) was conceptualized, designed and first disseminated by the Emergency Nurses Association (ENA) in the United States. The membership of ENA expressed a need to the board of directors for a special trauma course for nurses. A National Task Force was formed in 1983 and met for a full year of discussions regarding such a course. The task force did look at other existing trauma courses for nurses, but none were available across the U.S. The Advanced Trauma Life Support (ATLS) and Advanced Cardiac Life Support (ACLD) courses were also examined. The Basic Trauma Life Support (BTLS) course was not widely available at that time and was not examined. The decision was made to go ahead with the development of a new course. Throughout the year of discussions, the task force made some decisions:

- This course would be designed to meet the learning needs of nurses
- A broad-based educational philosophy would be used
- A similar educational model as ATLS with a combination of lectures and skill stations would be used
- ENA had the expertise within the organization to develop the course materials
- The course would be taught by nurses.

A new committee was then formed to write the manual and other materials for the course. A pilot course was conducted in San Antonio, Texas, in spring 1986; the pilot group included nurses who had not been part of either the original course task force or committee.

The first TNCC was held for 64 participants in the fall of 1986 in Hawaii as a combined provider-instructor course. Faculty for the course was the nurses who authored the manual, along with experienced emergency nurse educators who assisted with the skill stations. There were many barriers to course dissemination across the U.S. It took four years for the course to be offered in most states.

The TNCC has a large audience of military nurses and is used as one of the major trauma training programs for both reserve and active duty military nurses.

## International dissemination of TNCC to date

Negotiations between ENA and NENA regarding the Canadian dissemination of TNCC were held from 1990 to 1992. The first Canadian TNCC was held in Calgary in October of 1992. Each province was invited to send two nurses who would participate in a combined provider/instructor course, and then go on to disseminate the course to their respective provinces. Not all provinces immediately embraced TNCC but, gradually, the course has been offered in all provinces and territories. A team of TNCC instructors from Manitoba travelled to Nunavut earlier in 2007 to disseminate the TNCC provider course!

As of Fall 2007, TNCC is available in the following countries: United States, Canada, United Kingdom, Australia, Sweden, The Netherlands, Norway, Mexico, South Africa, United Arab Emirates and Portugal. Remember the TNCC provider and instructor status is recognized in these countries should you decide to do international nursing!

## Keeping the TNCC current

The Emergency Nurses Association is committed to keeping all their courses current. They try to maintain a schedule of updating each course every five years, although the time needed for content update, focus testing, publishing and course rollouts can alter this schedule. The TNCC fifth edition was published in 2000, so it will be seven years until the sixth edition is available.

## TNCC 6th edition changes

With each TNCC revision, the workgroup looks closely at past courses, the current course and receives solicited feedback from TNCC instructors. Course content for both lectures and skill stations is kept current through reviews of the literature and best practice evidence. New case studies are designed for the skill stations. All material has been focus-tested with TNCC instructors in the United States. Members of NENA's NCAC committee were given the opportunity to review revised chapters, provide feedback, and to contribute Canadian injury data where appropriate.

#### **Updated lectures from 5th edition:**

- Epidemiology, Biomechanics, and Mechanism of Injury (with new Canadian content)
- · Initial Assessment

- Shock
- · Brain and Cranial Trauma
- Thoracic Trauma
- · Abdominal Trauma
- · Musculoskeletal Trauma
- Spinal and Vertebral Column Trauma

#### New lectures (or new combinations of topics):

- · Airway and Ventilation
- · Ocular, Maxillofacial and Neck Trauma
- Surface Trauma (combination of wounds and burn care)
- Special Populations (combination of trauma in pregnancy, pediatric trauma and geriatric trauma)
- Transitional Care (combination of stabilization and transport content and new content on the critical care of the trauma patient in the emergency department)
- · Disaster Management with Triage Scenarios

#### Skill stations for the 6th edition:

Testable Skill Stations:

• Trauma Nursing Process (new cases)

Skill stations that are taught but not tested:

- Airway and Ventilation (new cases)
- · Spinal Protection, Helmet Removal and Splinting

## Rollout of 6th edition of TNCC in the United States

A total of three sessions were held at the ENA Office in Chicago from May through July 2007. Representative instructors from all states were invited to attend one of the sessions and are now in the process of updating all the TNCC instructors in their respective states. One of these sessions was videotaped and will be made available on DVD to other countries to assist with their instructor update process.

## Timeline of dissemination of 6th edition to Canada

As NENA has a contract with ENA to disseminate TNCC in Canada, the update process for Canadian TNCC instructors will be conducted through the NENA Course Administration Committee (NCAC). Plans are underway for NCAC to be updated at their biannual meeting November 2-5 in Toronto. NCAC members are to then arrange for update sessions and

order materials for the TNCC instructors in their respective provinces. These update sessions will likely be one day in length. Canadian TNCC instructors have until October 1, 2008, to complete an update session in order to teach the TNCC 6th edition provider course.

The members of NENA NCAC (Table One) will be responsible for facilitating TNCC instructor updates in their respective provinces and territories; these individuals may not necessarily conduct all of the updates, but can be contacted for details of the sessions. Current TNCC instructors may attend an update in any location across Canada.

## Continued offering of TNCC 5th edition courses in Canada

Canadian TNCC course directors may decide to continue to offer the TNCC 5th edition provider course if there is the demand for TNCC training before the TNCC 6th edition course is available in their area. ENA will have TNCC 5th edition course materials only until April 30, 2008. There will be no reimbursement for TNCC 5th edition materials; course directors are recommended to call others in their area to use up stock of 5th edition materials before ordering more from the ENA office.

#### Info for TNCC instructors

For current TNCC instructors in Canada, you will be required to attend an update session, which will likely be one day in length. At this update session, the TNCC 6th edition changes will be reviewed and discussed. All instructors must complete the examination criteria for the TNCC provider 6th edition:

- Achieve 80% or greater on written examination
- Successfully complete the Trauma Nursing Process skill station
- Demonstrate teaching the following stations: Airway and Ventilation, Spinal Immobilization and Helmet Removal

## Prices for TNCC 6th edition materials: Available after October 1, 2007

TNCC Provider manual (6th edition): \$45 U.S. funds plus shipping.

TNCC Instructor's Supplement (4th edition): \$47.50 U.S. funds plus shipping.

TNCC CD of slides and paperwork and new Trauma Nursing Process DVD: First copy complimentary for Course Directors.

Table One. Members of NENA's National Course Administration Committee		
Province/Territory	Name of NCAC member	E-mail Address
British Columbia and Yukon	Landon James	lndon.james@shaw.ca
Alberta, N.W.T. and Saskatchewan	Karen Latoszek and Carole Rush	karen.latoszek@capitalhealth.ca carole.rush@calgaryhealthregion.ca
Manitoba and Ontario	Kathy Woloshyn and Louise LeBlanc	kwoloshyn@exchange.hsc.mb.ca lleblanc@tsh.to
Quebec, Nova Scotia, New Brunswick, P.E.I., Newfoundland and Labrador	Debbie Cotton and Pat Walsh	cotton@ns.sympatico.ca PWalsh@cwhc.nl.ca

It has yet to be decided who will pay for the new course materials for current TNCC instructors. Options include the instructor, their employer or the provincial affiliations of NENA. Provinces may decide to bulk-order materials for all their instructors.

#### Info for instructor trainers

If you run a TNCC 5th edition instructor course, the instructor candidates must be monitored in a 5th edition provider course. So, unless your area has an immediate need for TNCC instructors, it is recommended that you wait to hold a TNCC instructor course until after you have completed your TNCC 6th edition update. You may want to further familiarize yourself with the 6th edition by teaching one provider course before scheduling an instructor course. Participants of your TNCC 6th edition instructor course must first recertify their TNCC provider status to the 6th edition requirements.

Documents available to download from ENA website: www.ena.org, click on TNCC from left-hand side menu:

- TNCC and ENPC Administrative Procedures October 2007 Revision (U.S. document but can be referenced until Canadian equivalent is available)
- TNCC and ENPC Administrative Procedures October 2007 Revision: Explanation of Changes and Clarifications

- Corrections for the TNCC 6th Edition Provider Manual
- List of Equipment for TNCC 6th Edition Provider course skill stations

### Info for TNCC providers

If you hold a current TNCC provider card, it will still be valid for four years after your last course. If you need to renew your provider status, you may wish to wait until the TNCC 6th edition course is available in your area.

Canada has enjoyed 15 years of TNCC and looks forward to many more years of this unique course for nurses!

## References

Rush, C. (1993). The Trauma Nursing Core Course in the United States, The United Kingdom, Australia and Canada: A Qualitative Case Study. Unpublished Master's project, University of Calgary.

## Websites for more information

Emergency Nurses Association at www.ena.org

National Emergency Nurses Affiliation at **www.nena.ca** (information on TNCC 6th edition should be available in December 2007).

**outlook** 

**Rural Realities** 

# An unforgettable experience in Iqaluit

By Erica Battran, RN, BA, ENC(C), Rhose Q. Galia, RN, BScN, Sean Mattingly, RN, CEN, EMCA, and Kevin Peters, RN, The Ottawa Hospital

As we flew over Nunavut descending into Iqaluit our first vision was the vast frozen tundra with small communities dotted randomly. Nunavut has 26 communities spread across nearly two million square kilometres of undeveloped space. Iqaluit is the largest community in Nunavut as well as the capital city. We arrived on an early December afternoon. In December, you can expect five hours of daylight between 1030-1530h. By July, daylight hours will average about 18 or 19 hours/day. The average temperature in December is -25°C during the daytime but, by evening, you can expect it to drop down to -43°C! Despite the extreme temperatures, we were warmly welcomed and Rhose Ghalia, our host, gave us a quick walking tour of the capital city. Although the Arctic capital is home to a diverse mix of people, Inuit make up 60% of Iqaluit's population. Iqaluit is located in the

southeast part of Baffin Island, and was formerly known as Frobisher Bay. Even though it's located on the remote Arctic tundra, Igaluit aims to be every inch a capital city, with the amenities and quality of life to rival any in Canada. The city has five schools, four hotels, three gas stations, two arenas and a swimming pool. The Iqaluit airport runway is 2,621 metres long and an alternative landing site for the U.S. Space Shuttle! The economy, based mainly on government, has expanded rapidly since the city became the territorial capital in 1999. The city's infrastructure is developing at a steady clip, trying to catch up with population growth, despite the harsh climate and challenges that many of us would consider near impossible. As well as being Canada's newest and most northerly capital, Iqaluit is also Canada's fastest growing community with a population of approximately 7,000 people.

Almost every Nunavut community has a health facility. Iqaluit has a hospital, while other communities have a health centre. The Baffin Regional Hospital in Iqaluit has 34 beds. It has an