

Date and Time: *Tuesday 7th January 2014 10:30 – 16:30*

Minutes: Confirmed

Guideline Development Group Meeting

Major Trauma GDG 3

Place: Boardroom, National Clinical Guideline Centre, 180 Great Portland

Street, London W1W 5QZ

Present: GDG Members

Karim Brohi (Chair)	KB
2. David Skinner	DS
3. Simon Hughes	SH
4. Heather Jarman	HJ
5. Nick Welch	NW
6. Paul Wallman	PW
7. Simon McPherson	SM
8. Chris Fitzsimmons	CF
9. James Piercy	JP

NCGC Technical team

Alexander Allen	AA
Amy Kelsey	AK
3. Kate Kelley	KK
Margaret Constanti	MC
5. Mark Perry	MP
6. Nina Balachander	NB
7. Sharon Swain	SS
8. Rhosyn Harris	RH
9. Suffiya Omarjee	SO
10. Vicki Pollit	VP
11. Peter Cain	PC
12. Frank O'Neill	FO
13. Caroline Farmer	CF

NICE:

14. Claire Ruiz CR

Apologies

Graham Stiff	GS
2. Richard Lee	RL
Mark Grumbridge	MG
4. Judith Foster (co-optee)	JF
Madeleine Sampson	MS
6. Kevin Morris	KM

Notes

Notes

- 1. The Chair welcomed the group to the third guideline development group meeting. The chair reviewed and requested updates of the declarations of interest register. No new declarations were received. Apologies were received from GS, RL, MG, JF, MS and KM.
- 2. The minutes of the last meeting of this group were agreed as a true and accurate account of the meeting.
- 3. An update was then given to the GDG on progress since the last meeting.
- The Chair introduced Margaret Constanti, NCGC Health Economist, who presented an update of the HE Model Considerations for Major Trauma. The GDG discussed the presentation. The Chair thanked MC for her presentation.
- The Chair introduced Nina Balachander, NCGC Senior Research Fellow and Project Manager, who gave a presentation updating the GDG on the progress of the protocols agreed at the last meeting. The Chair thanked NB for her presentation.
- NB then presented the following protocols that were discussed and signed off by the GDG:
 - Does monitoring of lactate levels to guide management of hypovolarmic shock improve outcomes?
 - Is the use of pneumatic or mechanical tourniquets clinically and cost effective in improving outcomes in patients with haemorrhage in major trauma?
 - What is the clinical and cost effectiveness of whole body CT imaging in major trauma?
 - Are haemostatic dressings clinically and cost effective in improving outcomes in patients with haemorrhage in major trauma compared to non-haemostatic dressings?
 - What type of major haemorrhage protocol is the most clinically and cost effective for improving outcomes in patients with major trauma?
 - What are the most clinically and cost effective techniques for circulatory access in patients with major trauma, including following a failed attempt at initial peripheral access?
 - Is the use of systemic haemostatic agents clinically and cost effective in improving outcomes in patients with confirmed or suspected haemorrhage in major trauma?
 - What is the most appropriate pain assessment tool (pre-hospital and hospital) in patients with major trauma?
- 7 There was no other business. The Chair closed the meeting and thanked the GDG for attending.

Date of next meeting: Wednesday 12 and Thursday 13 March 2014, Boardroom, NCGC, 180 Great Portland Street, London W1W 5QZ