# A prospective randomised controlled trial (RCT) to assess the effect of implementing a trauma nurse co-ordinator (TNC)

Submission date	Recruitment status	Prospectively registered
23/01/2004	No longer recruiting	Protocol
Registration date	Overall study status	Statistical analysis plan
23/01/2004	Completed	☐ Results
Last Edited	Condition category	Individual participant data
31/10/2019	Injury, Occupational Diseases, Poisoning	Record updated in last year

## Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

Mr Peter Driscoll

#### Contact details

Salford Royal Hospitals NHS Trust Department of Emergency Medicine Stott Lane Salford United Kingdom M6 8HD +44 (0)161 787 5372 abc@email.com

# Additional identifiers

Protocol serial number RHC21007

# Study information

Scientific Title

A prospective randomised controlled trial (RCT) to assess the effect of implementing a trauma nurse co-ordinator (TNC)

## **Study objectives**

What are the economic, human and social effects of implementing a trauma nurse co-ordinator?

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

Not provided at time of registration

## Study design

Randomised controlled trial

## Primary study design

Interventional

## Study type(s)

Other

## Health condition(s) or problem(s) studied

Musculoskeletal injury

#### **Interventions**

Eligible patients randomised to 1. TNC care or 2. No TNC care

## Intervention Type

Other

#### Phase

Not Applicable

## Primary outcome(s)

- 1. Length of stay measured in days from admission to discharge.
- 2. Mortality/Survival this will be assessed on discharge using the TRISS methodology. The latter is the probability of survival derived by an internationally recognised measure and will be based on the Major Trauma Outcome Study (MTOS) database.
- 3. Cost this will quantify the current costs and those incurred in introducing a TNC into a hospital and his/her direct involvement in patient care.
- 4. Quality of Life this will be measured using the validated SF36 questionnaire. This form measures health in eight multi-item dimensions, covering functional states, well being and overall evaluation of health. This form has been used, under license, by the Orthopaedic Department in the hospital sine 1992.
- 5. Satisfaction this will be measured in both patients and carers using a specially designed questionnaire and will be measured at specific time intervals after discharge.

# Key secondary outcome(s))

Not provided at time of registration

# Completion date

# **Eligibility**

## Key inclusion criteria

During a one month mapping exercise, 42% of surviving patients had a hospital stay 3 days or less. Therefore 1080 patients will be required to detect a difference of 10% between the study groups in the proportion of the patients discharged within 3 days of admission for a study power of 90% at the 5% two sided significance level. This is assuming a 5% death rate and a recruitment rate of 90%.

## Participant type(s)

**Patient** 

## Healthy volunteers allowed

No

## Age group

Other

### Sex

Αll

## Key exclusion criteria

- 1. Refusal to participate
- 2. Missed patients (information not collected by research assistant)
- 3. Fractured neck of femur
- 4. Died in A&E
- 5. Transfer out of hospital from A&E

#### Date of first enrolment

14/10/1996

## Date of final enrolment

14/10/1998

# Locations

## Countries of recruitment

United Kingdom

England

# Study participating centre Salford Royal Hospitals NHS Trust

Salford United Kingdom M6 8HD

# Sponsor information

# Organisation

NHS R&D Regional Programme Register - Department of Health (UK)

# Funder(s)

## Funder type

Government

## Funder Name

NHS Executive North West (UK)

# **Results and Publications**

Individual participant data (IPD) sharing plan

# IPD sharing plan summary

Not provided at time of registration