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

Submission date
23/01/2004

Recruitment status
No longer recruiting

Registration date
23/01/2004

Overall study status
Completed

Last Edited
31/10/2019

Condition category
Injury, Occupational Diseases, Poisoning

[ ] Prospectively registered
[ ] Protocol
[ ] Statistical analysis plan
[ ] Results
[ ] Individual participant data
[ ] Record updated in last year

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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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

Primary study design
Interventional

Study design
Randomised controlled trial

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

14/10/1998

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
All

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