EVMS staffs the only Level 1 trauma center in the region.

Your first line of defense

Pink ripples of skin draw lines along Steve Joyner’s face from his sparkling blue eyes down cheek bones and to his chin. His hands, too, have soft ridges of puckered skin, the telling signs of a fiery blaze that nearly took his life.
round Christmas in 2011, Mr. Joyner attempted to restart a fire using gasoline, something he admits knowing could be dangerous. A sudden reigniting engulfed him in flames. Mr. Joyner suffered third-degree burns on nearly 50 percent of his body. He fell in and out of consciousness as paramedics rushed him to the only place in Hampton Roads equipped to provide the care he needed — the Level 1 trauma center at Sentara Norfolk General Hospital (SNGH), which is staffed around the clock by EVMS surgeons.

This is high-pressure, rapid-fire medical care, and these men and women are your first line of defense. They take the hardest cases — the ones where life hangs in the balance, the ones other hospitals aren’t equipped to handle.

“You can take care of the majority of injuries in any emergency room, but the trauma center exists for the 15 percent of the worst injuries out there because you have a finite period of time to do something positive,” says Leonard J. Weireter, MD, Chief of the EVMS Division of Trauma, the Arthur and Marie Kirk Chair and Professor of Surgery. “To get the right patient to the right hospital in the right time frame, that’s why we are here.”

At its core, trauma care is different because it is not a single, specific condition or area of the body. Trauma is the result of serious or critical injuries caused by incidents, such as automobile crashes, falls or acts of violence.

Trauma is time sensitive. If you don’t get the right treatment in the right amount of time, your body will cross a line from which there is no turning back. When emergency responders arrive, no one knows where you are on that line or how long you may have. That initial timeframe is called the “golden hour” — the small window of opportunity to perform the necessary, life-saving interventions that give patients the chance to survive and thrive after traumatic injuries.

The SNGH/EVMS team is one of only five Level I trauma centers in the state and the only one serving the greater Hampton Roads region. That recognition is awarded to hospitals that demonstrate their ability to provide the highest quality of care for all injured patients. As a verified trauma center, SNGH is staffed 24 hours a day, 365 days a year by EVMS surgeons. They handle cases from Williamsburg to the Outer Banks, provide trauma care for the Navy and take all pediatric trauma cases for children of all ages.

The numbers tell the story.

According to the Virginia Department of Health, one in every 350 people in Virginia will be affected by trauma each year. Plus, trauma is the leading cause of death for people ages 1 to 44.

In 2011, Dr. Weireter’s team saw 2,668 trauma patients. About 240 were burn victims like Mr. Joyner. The great majority, however, were victims of motor-vehicle crashes.

Patients like 15-year-old Meaghan Gerety.

A slight girl with a pixie hair cut and a wide, toothy smile, Meaghan is a teenager on the mend. Bickering with her dad over typical girl-likes-boy-that-parents-don’t-scenarios is a welcome occurrence and a reminder of how far she has come in just one year.

On June 16, 2011, Sean and Tracey Gerety received the 4 a.m. phone call every parent dreads. Meaghan was involved in a car accident less than a mile from their home. She suffered major head trauma, and paramedics weren’t certain she would survive the transport to the hospital.

“The Gerety’s were told to prepare for the worst,” Tracey Gerety says. “We were trying to make sense of it all, but they told us that she would have the best chance of making it if they took her to Norfolk General,” Tracey Gerety says. “We prayed the EVMS surgeons would be able to help her.”

At the trauma center, doctors and nurses waited in a cleared trauma A

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bay. Snapping into action when Meaghan arrived, the team assessed vital signs and checked the extent of her skull fracture. Within three minutes, she was swept into surgery where a portion of her skull was removed to ease swelling on the right side of her brain. Her injuries left Meaghan in a coma for 14 days in the ICU.

The only thing that made Meaghan’s coma bearable, her mother says, was the trauma team’s commitment to involving the family in their loved one’s care. They invite family members to participate in ICU rounds, to listen to the discussion and to ask questions after doctors and residents are finished talking shop.

“Words cannot describe what a parent goes through to see your child there hooked up to machines, everything just drains out of you,” Mrs. Gerety says. “The trauma team was so understanding and patient and always answered our questions. There was just this sense that we are working together as a team to help my daughter.”

After less than a year, Meaghan returned to school and started regaining a sense of normalcy in her life. It’s been a long road to recovery, but her family has remained focused on her future.

Before his daughter’s accident, Sean Gerety didn’t know about EVMS or the trauma center. Today, he considers himself one of their biggest fans. “If it weren’t for EVMS, my daughter wouldn’t be here, it’s that simple,” he says.

In many ways, the trauma team is made up of unsung heroes. Most people in the community don’t know what it means to have a Level 1 trauma center in their community until they or loved ones need its services, says L.D. Britt, MD, Brickhouse Chair of Surgery, Henry Ford Professor and a long-time member of the trauma team. Even fewer understand the intricate role EVMS plays in making that center a reality in Hampton Roads.

“There are places around the country where people who are critically ill or injured don’t have access to this level of care, but fortunately, we have it here in Hampton Roads,” Dr. Britt says. “People take it for granted. Get injured, though, and you won’t take it for granted.”

When Dr. Britt came to EVMS in 1986, the trauma program was not fully developed. He and other EVMS surgeons were on call every other night until the department built up a full-time faculty to serve as the surgical resource at the hospital, says Dr. Britt, who was Chief of the Trauma Service prior to his appointment as Department Chair.

Today, five core surgeons make up the trauma team, but the entire surgery department handles trauma calls and works with residents and fellows. They also provide acute-care surgery services and have developed an accredited critical-care fellowship with a 100-percent exam pass rate.

Having a medical school affiliated with the trauma center means patients are provided access to the newest treatments and the brightest minds, Dr. Britt says. “You don’t have one person; you have a team of all these minds determining what is the best management for your care, and that makes all the difference in the world,” he says. It certainly made all the difference to Mr. Joyner. He’s back at work and beginning to do many of the things he enjoyed before his accident. “The skills of the surgeons, their encouragement and the support they gave me, it all helped me get through this,” Mr. Joyner says. “I walked out of that hospital three months after my accident — that’s a testament to just how phenomenal they are.”