Several members were asking about the dissemination of PI information and military-civilian models. A total of 152 centers participated in the survey.

1. Level of Trauma Center. (select all that apply)

2. How do you disseminate information from peer review meetings to your peer review committee members? (Select all that apply)

- NA- do not provide information outside of meeting
- Email summary
- Email minutes
- Email minutes and record a “Read Receipt”
- Members visit the trauma office to read and sign minutes
- Members review and sign the minutes at the next peer review committee meeting
- Shared Drive or SharePoint Site
- Posting minutes on Health System Trauma Program Dashboard (homepage) for review
- Other

Adult N=120  Pediatric N=14  Combo N=20

Other responses include: Quarterly reports are presented and discussed at Peer Review committee meetings; It’s an attestation they must sign that they have acknowledged they have reviewed and will share with their respective departments; PI Newsletter (2); Signatures for those who were absent from the meeting only; Mail documents to provider excluding patient identifiers; Letter to individual Provider(s) with pertinent information regarding discussion & suggestions/follow-up for his/her case(s) that were reviewed if/when he/she was not present; The liaisons are expected to disseminate all appropriate information to other committee members; Those that miss the meeting must visit the office to read and sign minutes; Distributed and recollected at peer review meeting, Medical director reviews with those not in attendance; Liaisons are responsible for disseminating pertinent information to their groups; We email to all, but if you didn’t attend you must sign minutes at next meeting; Only provide follow-up to provider in question; Inter Office mail of minutes for surgeons who couldn’t attend; Review in committee in a platform called BoardEffects; section meetings via the designated liaisons; For trauma surgeons at internal division meetings and/or individually as needed. Information also shared at Multidisciplinary Trauma Operations when appropriate. Those unable to attend the meeting are responsible for reviewing and signing the minutes. All members are responsible for disseminating the discussion highlights to their peers; Summarize at meeting and Medical Director signs off on each case. Summary of OFI/issues/actions are then shared at the monthly trauma committee; Minutes are presented in MEC and summary presented as old business in next committee meeting. Specific dissemination is done through TMD and liaisons, with follow-up to provide loop closure; A hard copy of the minutes along with the new agenda and other items for discussion is delivered to each attendee 2-3 days prior to the meeting and turned in with the meeting; Highlights of teaching points are described in trauma newsletter.