TCAR & PCAR
TARGET AUDIENCES

Unlike resuscitation-focused trauma verification courses, TCAR (Trauma Care After Resuscitation) and PCAR (Paediatric Care After Resuscitation) are designed for nurses and AHPs who practise anywhere along the trauma care continuum, from prehospital to rehabilitation. TCAR and PCAR present trauma nursing as a process that spans all hospital units and speciality areas, while emphasising physiological principles, patient assessment, nursing interventions, outcome evaluation, and cross-disciplinary collaboration.

FOR MORE INFO, VISIT OUR WEBSITE
tcarprograms-uk.visionem.org/

BUT I DON’T DO JUST TRAUMA!
Although trauma patients are the focus population, so much of the TCAR/PCAR content is universal: basic assessment, learning to anticipate care, identifying patient deterioration, understanding physiology, and evaluating interventions. These courses have much to offer that is pertinent to ANY patient population. Some of our most enthusiastic learners have included cardiac, oncology, obstetric, women’s health, and even neonatal nurses. Participants learn to think about their patients from a physiological point of view while participating in an engaging, professional development program.

BUT I’M NOT A NURSE!
The TCAR and PCAR courses are specifically designed to meet the learning needs of trauma nurses and do not attempt to address all areas or issues specific to other disciplines. Nevertheless, so much of trauma care is multidisciplinary, and core principles cross MANY patient care professions. Paramedics, speech and language therapists, dietitians, and physiotherapists have all taken the courses and value the information and insights gained.

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OFFICE HOURS:
Monday – Friday: 3:00 pm – 1:00 am GMT
EDUCATION FOR NURSES AND AHPs ACROSS THE TRAUMA CARE CONTINUUM

CRITICAL CARE NURSES
20-25% of hospitalised trauma patients will spend time in a critical care unit. This is where the resuscitation process continues and where a host of new problems develop. What is it that makes trauma patients unique from those with pulmonary, cardiac, or surgical diseases? What complications can be anticipated and avoided? How can understanding the tissue oxygenation cascade empower bedside care providers to identify and intervene on behalf of injured patients to interrupt the downward spiral of shock, sepsis, and multisystem organ dysfunction?

HDU & WARD CARE NURSES
Whether it’s an HDU or a ward, most injured patients will be admitted or transferred to a non-critical care inpatient unit. It’s during this phase that patients prepare to resume their lives outside the hospital. Identifying missed injuries, mobilising patients, supporting nutrition, treating wounds, preventing infection, managing complications, controlling pain, and helping patients return to baseline are all key functions of HDU and ward trauma nurses.

EMERGENCY NURSES
Are trauma patients often held in your ED for hours prior to hospital admission? Do patients ever attend days following injury? How do early interventions impact patient outcomes? Do admitted trauma patients ever return to the ED after discharge? Is your staff tired of repeating the same resuscitation-focused class? The TCAR and PCAR courses build on knowledge gained in skills-oriented programmes by providing a larger picture of trauma patient care.

THEATRE NURSES
Many trauma patients will require surgery at some point during their stay. Whether rushed to theatre from the ED, or attending on a more scheduled basis, trauma is a surgical disease and theatre and recovery personnel play a major role in patient care. Yet few have a background that includes education specific to injury mechanisms, trauma patient assessment, delayed and subtle findings, shock detection and management, massive transfusion, or damage control resuscitation. These challenges make trauma patients very different from standard surgical cases.

REHABILITATION NURSES
Nurses in rehabilitation units or designated centres work with patients who have experienced major brain trauma, spinal cord injuries, and amputations, and all of their debilitating sequela. Understanding what trauma patients have been through—both physically and mentally—is essential for optimising long-term outcomes.