

Vandy Trauma Unit

by Andy Corban
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The doors to Vanderbilt's Trauma Unit swing open. Doctors in pastel colored scrubs and surgical masks are hovering over patients in beds all across the floor.

As I scan the unit, I am struck by the sound of heart monitors beeping, a dozen patients fighting for life, each and every pulse generating an electronic chirp like a thousand sick crickets hiding in the high grass of summer.

I am amazed that so much medicine is being practiced all around me. In one bed, Doctors are working on a senior citizen hit by a drunk driver.

"That guy is an elderly fella in a car wreck," Doctor Rick Miller says, his arms folded across his white shirt.

"He has broken ribs, multiple fractures. He has Emphasema. Older folks don't do well in trauma's like this." The Trauma Unit Director tells me that the doctors hovering around the senior are doing a procedure to help him breathe more easily.

Just then, a dozen doctors and nurses leave one bed side and head for the next. Just like a scene from Grey's Anatomy, these skilled medical technicians continue their rounds. Afterall Vanderbilt is a teaching hospital.

Doctor Miller is a friendly man who wears glasses on the bridge of his nose. His eyes are clear and a smile is quick to appear on his face. He is surprisingly friendly for a man in charge of so much life, so many doctors, so many pieces of equipment that remind me of the bridge on Battle Star Gallactica.

I am here today doing a story on the price of a gun shot, specifically how an uninsured patient, ends up costing all of us.

I ask Doctor Miller about the traumas he's seen.

"75-80% of what we get up here are car wrecks," he says sagaciously. "About 15% are penetrating trauma. Gun Shot Wounds. Stab wounds. Domestic violence and gang wars."

Doctor Miller is calm, standing completely still. His eyes scan the room, carefully watching his subordinates at work.

I watch as doctors stand over the shoulder of other doctors as the young students insert tubes in throats, and stomachs and places under the sheets I dare not look.

I gaze at the doctors working on the crash victim. He is hooked up to some kind of fiber optic scope. I watch as one Doctor pushes his stomach while another doctor slowly manuevers the camera deeper inside the man. On the screen I can see fleshy, pinkish tissue parting and undulating and globbing around the camera.

The doctors studied the screen and appeared to be smiling under their surgical masks. Apparently whatever procedure they were doing, was working to perfection.

"Tell me about Gun shots and the uninsured, doctor," I say amidst the controlled medical chaos.

Miller pauses for a moment. The silence is filled with distant whispers of medical terminology and the constant chirp of heart monitors.

"We had almost 300 gun shot victims last year," Miller says. "That's almost one a day, and i'd say about 2/3 of them have some sort of insurance. But most of these folks are under insured and it goes through a tremendous amount of litigation. If we're lucky, we'll get a 1/2 to a 1/4 of that from their insurance. The rest of them are totally uninsured. That adds up to somewhere between 5-8 million dollars, that vandy eats."

It's an amazing stat if you really think about it. 5 to 8 million dollars of state of the art medical procedures that no one pays for.

Vanderbilt supplies me with hard numbers from 2005 when they saw 4140 Trauma cases. of those cases, there were 279 gun shot victims, 138 Stabbings, 115 Assaults.

Back to the gun shots. of the 279, the cost of treatment (hospital charges) = \$15,501,513.00
Patients with some type of insurance coverage = 175
Cost of treatment for insured patients = \$10,215,212.00
Patients without insurance coverage = 104
Cost of treatment without insurance coverage = \$5,286,301.00

I did the math: that's more than 50-thousand dollars per patient. Just for Gun Shot Victims!!

So how does that affect you? Why should you care?

Doctor Miller waves to a couple of Trauma Nurses who like my Messed Up segment and will make sure I hear what they think is messed up about this topic and many others in their lives.

"It is very expensive to run a trauma unit," Miller says. "We have to make up those costs in other ways to keep us running and let us take care of the really sick people you saw over there." Miller motions to the ward of chirping hearts struggling to get better.

I take a moment and look at the wall of monitors behind the nurse station. The monolithic screens are multi colored with lines zig zagging across the black glass. Each screen has a name and corresponding numbers. The nurse in charge can tell a lot about the life force of each patient simply by monitoring these looking glasses into the medical soul.

Miller continues. "In order To keep our trauma unit going, We Have to do some sort of cost shifting to take care of the amount of the uninsured patients and amount of free medicine we do for these people badly injured from Gun shot wounds."

"Vandy is a hospital. You save lives," I say, focusing on the issue at heart. " But Vandy is also a business. You get paid. They get paid," I say referencing the group making rounds. " Look at all those people over there. working. You can't just turn off the lights, cause people are uninsured. Some body has to pay the piper, and I'm guessing that somebody is me and my family and you and your family the next time you come to Vandy for any procedure, however elaborate, however minor."

I sense that I have summed up the Messed Up part of this story. The doctor nods his head.

"Unfortunately, this is a business, We're in the Business of taking care of people. And to be able to afford it without shutting down. I think that Many trauma centers in the country are shutting down cause they can't

afford to pay for these patients, who are badly injured. So there Has to be some cost shifting. and unfortunately You and I pay that bill."

later in the day, I will talk to a 30 year old woman at the Rivergate Mall. She is neither sick nor injured. I tell her about my experience in the trauma unit. She is pretty and bright and quick to pick up on the social dilemma this presents.

"They can't say sorry gun shot guy, we're kicking you to the curb because you don't have money. Vandy fixes people who are broke. Then they figure out the fiscal arrangements later," I say to Misty Perry.

She seems well versed.

"That is so messed up and right now I have no insurance," she says with a startled chuckle.

"That is why we need change in Health care, we need reform. We should have universal health care."

An interesting thought, that Doctor Miller approaches on his own.

"Insurance in this country so variable," he states, his glasses filling with the myriad of reflections from neon colored heart beats. "Many decide they are healthy and Won't get sick. they Get no insurance, and unfortunately, Those who do get insurance have to pay for those who make those bad decisions. I think that is MESSED UP. In a country this size. It's hard to have socialized medicine. They are trying to do that in California. They do it in Canada, but you know in Canada, if you have a hernia or cardiac bypass, you may have to wait a year. Before you get that cause you go on a list I think that is messed up about insurance in the USA."

Because Vanderbilt is a Level One Trauma Center, it takes all patients: NO QUESTIONS ASKED. And it takes them from all over. Doctor Miller tells me that Vandy is not a Rehab Hospital, but all too often, because patients at Vandy don't have insurance, other hospitals refuse to take them, or do so reluctantly.

"We're the only level one trauma center for about a 65,000 square mile radius. Because we are level one center, we give carte blanche to any hospital, air medical service, etc. What is frustrating to us, We take people from Kentucky and Alabama, no matter what their insurance status is, and keep them alive. And When we finish with them, they have no where to go. No one will take them back. There are no rehab places. Kentuck says sorry you're the level one trauma center, so we're stuck with those patients for a prolonged period of time. And We're not a rehab hospital. We know how to stop bleeding and take care of patients acutely, but probably not the best place to have someone long term. It's frustrating for us. It's messed up."

To be clear; Vanderbilt Hospital is a non profit hospital. There are no stock holders or shareholders. But it is also a business, in the business of saving lives. Unlike EXXON, Vandy takes any profit, and immediately reinvests it in their medical center, buying new equipment and facilities, to upgrade or expand services. This way the money stays within the community and can benefit everyone who needs their services.

According to the Vandy PIO "Even though we are a private non-profit hospital we are Middle Tennessee's largest (far and away) provider of care for the uninsured and also TennCare (underinsured) patient populations."

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