

China Trauma System & National Emergency Medical Rescue Bases

--- Emergency Medicine in China

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National Trauma Medicine Center

National Emergency Medical Rescue Base

Peking University Peoples Hospital





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- China Trauma Treatment System
- National Emergency Medical Rescue Bases





PART 01

China Trauma Treatment System





Problems in China Trauma Treatment

1

Too long time in prehospital response

2

Lack standard training for on-site rescue personnel

3

No communication between prehospital & ED

4

No professional trauma team

5

Lack SOP for on-site and in-hospital treatment

Result:

High mortality

High disability



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“One, Two, Three Project”

1 Region

- ❑ Local government
- ❑ Region trauma system
- ❑ SOP

2 Communication

- ❑ Communication between prehospital & in-hospital
- ❑ Communication between ED & specialties

3 Team

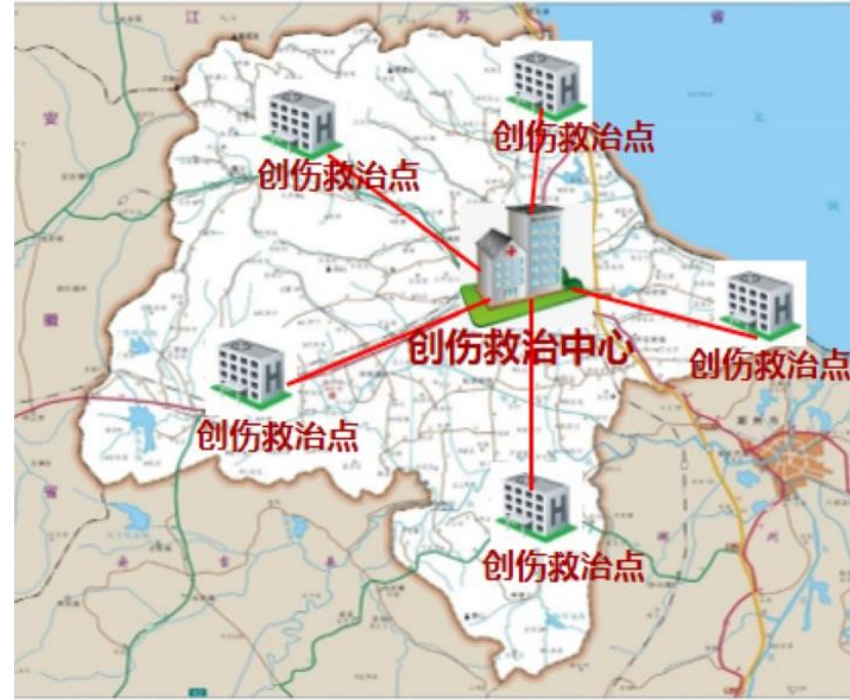
- ❑ Prehospital Team
- ❑ ED Team
- ❑ Specialties Team



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- One administrative region
- 15 minutes Prehospital emergency response time
- 1 Million population
- “1+X trauma center” Emergency model
- Trauma team in general hospital
- Trauma warning system





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《 “National 13th Five Year Plan” : National Medicine Center & National Regional Medical Center》

Construct: China 4-level medical service system

Leader: National medicine center;

Objectives: Leverage the roles of the national medical center and regional medical centers in clinical research, talent cultivation, technology transfer, technology dissemination, and management demonstration, promote the national medical technology level to be parallel with international standards, and enhance the overall medical service level in our country.



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1. "Notice on Accelerating the Establishment of National Medical Centers and National Regional Medical Centers" (National Health Commission Letter [2020] No. 357)
2. "Opinions on Promoting the High-Quality Development of Public Hospitals" [State Council Document No. 18 of 2021]
3. "Key Tasks for Deepening the Reform of the Medical and Health Care System in 2021" [State Council Document No. 20 of 2021]
4. "Notice on Issuing the Action Plan for Promoting the High-Quality Development of Public Hospitals (2021-2025)" [National Health Commission Medical Letter [2021] No. 27]

Promote the construction of China 4-level medical service system



Establish a 4-level trauma system

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National Trauma Medical Center
National Trauma Regional
Medical Center

Provincial Trauma
Medical Center

Advanced Trauma
Treatment Center

Primary Trauma
Treatment Center

Country

Province

City

County

Establish a 4-level trauma treatment system
at the **national, provincial, municipal, and
county** levels.



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On **September 4, 2019**, the National Health Commission issued the **"Notice on Establishing National Trauma Medical Centers"**, appointing **Peking University People's Hospital** as the main body to establish the **National Trauma Medical Center**.



国家卫生健康委员会

国卫医函〔2019〕204号

国家卫生健康委关于 设置国家创伤医学中心的通知

北京大学人民医院：

为进一步完善创伤医疗卫生服务体系，优化优质创伤医疗资源区域布局，有效提高创伤卫生服务能力，我委印发了《“十三五”国家医学中心及国家区域医疗中心设置规划》（国卫医发〔2017〕3号，以下简称《设置规划》）、《国家医学中心和国家区域医疗中心设置实施方案》（国卫办医函〔2019〕45号，以下简称《实施方案》）和《国家卫生健康委办公厅关于印发国家创伤医学中心及国家创伤区域医疗中心设置标准的通知》（国卫办医函〔2019〕700号），决定设置国家创伤医学中心。

你院报送了《关于申请设置成为国家创伤医学中心的请示》（院字〔2019〕117号），经研究，符合国家创伤医学中心设置标准。综合考虑你院创伤中心建设、医院发展实际以及既往在创伤医疗服务体系建设等工作中的重要作用，根据《设置规划》和《实施方案》，我委决定以北京大学人民医院为主体设置国家创伤医学中心（以下简称医学中心），落实相关职责任务，在全国发挥辐射带动作用。

各主体医院，负责医学中心的日常运行和管理，确保医学中心按照任务开展相关工作，进行业务指导，确定工作目标和配套经费，并根据《设置规划》和《实施方案》情况进行监督管理。



抄送：北京市人民政府，北京市卫生健康委，北京大学医院管理处，
国家卫生健康委办公厅

2019年9月5日印发

校对：王 曼



Government

University

**Medical
institution**

**Research
institution**

Enterprises

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- **Clinical Diagnosis and Treatment Center**
- **Talent Development Center**
- **Research and Development Center**
- **Achievement Transformation Center**
- **Public Health Center**
- **Traditional Chinese and Western Medicine Integration Center**
- **International Cooperation Center**



4 major surgical procedures for trauma management.

- (1) Hemostasis:** ligation, compression, tamponade, balloon occlusion, embolization, suturing, excision
- (2) Decompression:** intracranial hypertension, tension pneumothorax, abdominal compartment syndrome, compartment syndrome, cardiac tamponade
- (3) Stabilization:** joint dislocation, long bone displaced fractures, unstable pelvic fractures, spinal fractures dislocation
- (4) Contamination:** wound protection, wound debridement, drainage, VSD technique, wound coverage



Trauma ICU related technology

- (1) Respiratory support: endotracheal intubation, tracheostomy, ventilator, fiberoptic bronchoscopy, ECOM
- (2) Fluid management and hemodynamic stability
- (3) Inflammatory response and infection control
- (4) Acid-base balance and electrolyte disturbances
- (5) Protection of vital organs: cardiac, pulmonary function, liver, renal function, brain function
- (6) Pressure control: blood pressure, intracranial pressure, intra-abdominal pressure, etc.
- (7) Hemostasis and coagulopathy: PT, APTT
- (8) Temperature control: hyperthermia, hypothermia, room temperature control, warmed intravenous fluids, warming blankets, etc.
- (9) Pain and anesthesia
- (10) Nutrition and metabolism



Academic Discipline Construction

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北京大学医学部学位评定委员会

北京大学医学部学位评定委员会七届二次会议纪要

会议时间：2021年10月18日（星期一）下午13:30

会议地点：医学部逸夫教学楼209报告厅

会议主持：北京大学常务副校长，医学部主任、学位评定委员会主席 乔杰院士

参会人员(19人)：乔杰 段丽萍 徐明 万有 王嘉东 叶敏

郝卫东 王志锋 尚少梅 周程 刘新民 潘义生

姜保国 付卫 沈宁 季加孚 沈琳 陆林

韩晶岩

请假委员(6人)：刘玉村 张宁 周德敏 王建六 郭传瑛 李铁军

列席人员(7人)：王青 崔爽 张小凯 郭玲玲 王凤清 彭耕

张和龙

一、审议2021年10月学位授予名单

各学位评定分委员会汇报本次博士和硕士学位授予情况，拟授予博士学位48人，硕士学位34人。

各学位评定分委员会重点汇报了学位论文评阅中出现差评、不同意答辩或在学位审核过程中存在异议的申请人情况，与会委员就学位审核中出现的问题进行了充分讨论。经无记名投票表决，同意授予2021年10月批次48人博士学位、34人硕士学位。

二、审议在二级学科“外科学”下设置“创伤医学”方向

第二临床医学院学位分会提请审议在二级学科“外科学”下设置“创伤医学”方向，经无记名投票表决，审议通过在二级学科“外科学”下设置“创伤医学”方向。

三、审议《北京大学医学部高等学历继续教育（网络教育）学士学位授予工作实施细则》

医学继续教育学院提请审议《北京大学医学部高等学历继续教育（网络教育）学

2021: Peking University established a Level III discipline of "Traumatology".

2023: Peking University initiated the "Standardized Training for Traumatology Specialists".



Professional training

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National standardized trauma training, advanced trauma care training.

Celebration of the 200th China Trauma Care Training

中国创伤救治培训 (CTCT®) 200期庆典





Scientific Research

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Key Laboratory of Trauma Treatment and Neuroregeneration, Ministry of Education

教育部司局函件

教技司〔2018〕359号

教育部科技司关于同意中国农业大学等高校 立项建设教育部重点实验室的函

北京市教育委员会：

你委《关于申请支持北京高校申报建设一批教育部重点实验室的函》收悉。为进一步深化部市合作，推动落实《教育部北京市人民政府关于加强北京全国科技创新中心建设合作协议》相关任务，根据你委推荐情况，经研究，我部同意中国农业大学等高校申请建设的9个教育部重点实验室（以下简称实验室，具体名单见附件）予以立项建设。请你委指导和组织相关高校进一步开展论证，明确具体建设目标和内容，加快实验室建设发展，建设完成后，相关高校应通过你委向我司提出申请，我可组织验收，通过验收的实验室正式纳入序列管理。

附件：2018年支持培育建设的教育部重点实验室名单



北京市教育委员会

京教函〔2018〕635号

北京市教育委员会关于 北京大学创伤救治与神经再生 教育部重点实验室立项建设的通知

北京大学：

根据教育部科技司《关于同意中国农业大学等高校立项建设教育部重点实验室的函》（教技司〔2018〕359号），你校申请的创伤救治与神经再生教育部重点实验室予以立项建设。建设任务完成后，科技司将组织验收，通过验收的实验室正式纳入序列管理。

请你校按照教育部重点实验室建设要求做好相关工作。



（联系人：高飞；联系电话：51994792）
（此件公开发布）



September 27, 2018
The project was approved
and initiated by the Ministry
of Education on.

November 13, 2018
Beijing Municipal Education
Commission notified Peking University
of the project construction.

June 28, 2022
Construction completed and
passed inspection.



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No.	Organization	No.	Organization
1	Shaanxi Provincial People's Hospital	7	Zhejiang University School of Medicine Affiliated Second Hospital
2	Shandong Provincial Hospital	8	Jilin University China-Japan Friendship Hospital
3	The first affiliated hospital of soochow university	9	Fujian Medical University First Hospital
4	Chongqing Emergency Medical Center	10	Southern Medical University Nanfang Hospital
5	West China Hospital, Sichuan University	11	Tongji Medical College, Huazhong University of Science and Technology Affiliated Union Hospital
6	The second Xiangya hospital of central south university		

The National Health Commission and **Shandong, Guangdong, Zhejiang, Jilin, Jiangsu, Fujian, Hubei, Hunan, Chongqing, Sichuan, and Shaanxi** provinces (cities) jointly establish National Trauma Regional Medical Centers.



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National Reginal Trauma Medical Center Functional Positioning and Responsibilities

1. Basic Requirements:

- (1) The trauma center should be established as a physical entity, with independent trauma resuscitation unit, trauma ward, and trauma intensive care unit, as well as a well-structured organization and dedicated medical staff.
- (2) Establish a comprehensive trauma care team composed of core departments (specialties) and supporting departments (specialties) with fixed personnel.



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National Trauma Area Medical Center Functional Positioning and Responsibilities

2. Trauma Treatment:

- (1) Possess the comprehensive diagnostic and therapeutic capabilities for common trauma, severe trauma, and trauma complications, and master the key technologies involved in treating severe trauma.
- (2) Have the ability and conditions to carry out emergency surgeries and trauma rehabilitation treatments.
- (3) Responsible for diagnosing and treating difficult and critical cases in the region, demonstrating, promoting new diagnostic and therapeutic technologies, and radiating and leading the improvement of medical development and medical service capabilities in the region.

3. Trauma Training:

- (1) Undertake medical education in universities, postgraduate medical education, and continuing medical education, cultivating key talents and academic leaders.



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National Trauma Area Medical Center Functional Positioning and Responsibilities

4. Research Transformation

- (1) Independently and collaboratively conduct multicenter clinical studies with national trauma medical centers
- (2) Lead the application and transformation of clinical research and research outcomes within the region

5. Treatment System Construction

- (1) Assist national trauma medical centers in the region to carry out standardized treatment for severe trauma and construct trauma treatment systems
- (2) Take the lead in building medical service and disease prevention and control networks within the region
- (3) Promote the standardization and standardization of trauma medical treatment within the region



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National Trauma Area Medical Center Functional Positioning and Responsibilities

6. Social Responsibility

- (1) Undertake the medical and health emergency rescue and treatment tasks of major sudden public health incidents
 - (2) Coordinate and guide trauma centers at all levels within the region in treating large-scale trauma patients
- Implement medical reform tasks, promote the construction of a tiered diagnosis and treatment system, informationization tasks, telemedicine tasks, and popular science propaganda.



Function orientation and responsibility of provincial trauma medical center

- **Establish provincial trauma medicine expert committee and establish trauma medical quality control system**
 - **Undertake some management responsibilities of provincial health administrative departments**
1. Certify advanced trauma treatment centers and primary trauma treatment centers within the province
 2. Formulate provincial standards for severe trauma treatment
 3. Establish trauma treatment information entry process management and database
 4. Establish medical quality control system: quality control experts, quality control system, quality control indicators



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Function orientation and responsibility of provincial trauma medical center

- **Trauma Care Capability**
 1. Possess the capability to handle all major trauma incidents in the region
 2. Treatment of severe trauma patients with complications and comorbidities
 3. Post-acute functional reconstruction and rehabilitation treatment for severe trauma patients
- **Undertake emergency medical rescue missions for large-scale sudden events and catastrophic incidents in the region**
- **Responsible for the development of the trauma care service system in the region; training**
- **Assist the national trauma regional medical center in developing trauma care systems**
- **Promote the application of cutting-edge and core technologies related to trauma care.**



PROVINCIAL TRAUMA MEDICAL QUALITY CONTROL CENTERS (14)

No.	Province	Leading Unit
1	Ningxia	Ningxia Medical University General Hospital
2	Gansu	Gansu Provincial People's Hospital
3	Jiangsu	The First Affiliated Hospital of Soochow University
4	Henan	The First Affiliated Hospital of Zhengzhou University
5	Yunnan	The First Affiliated Hospital of Kunming Medical University
6	Shandong	Shandong Provincial Hospital
7	Jiangxi	The First Affiliated Hospital of Nanchang University
8	Hunan	Xiangya Second Hospital of Central South University
9	Shaanxi	Shaanxi Provincial People's Hospital
10	Zhejiang	The Second Affiliated Hospital of Zhejiang University School of Medicine
11	Chongqing	Chongqing Emergency Medical Center
12	Anhui	The First Affiliated Hospital of Anhui Medical University
13	Fujian	Fujian Provincial Hospital
14	Shanxi	The First Hospital of Shanxi Medical University

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19 QUALITY CONTROL INDICATORS

序号	指标	序号	指标
1	院前急救转运时间 (分钟)	10	严重创伤病人病死率
2	信息预警比例	11	严重创伤病人平均住院时间 (天)
3	急诊准备时间 (分钟)	12	严重创伤病人ICU平均住院时间 (天)
4	全身快速CT、胸部X片、骨盆X片、FAST完成时间 (分钟)	13	创伤病人总数
		14	创伤病人病死率
5	急诊输血准备时间 (分钟)	15	接受外院转诊病人比例
6	人工气道建立时间 (分钟)	16	转诊治疗的创伤病人比例
7	急诊手术前准备时间 (分钟)	17	创伤评分 (GCS、TI、ISS) 完成比例
8	急诊科停滞时间 (分钟)	18	医院创伤数据上报系统填报完整度
9	严重创伤病人数量	19	创伤中心质控会议召开情况

(National Health Commission Medical Administration and Medical Administration Bureau Backup)



Function positioning and responsibilities of municipal trauma centers

- Treatment Requirements: Treatment of Acute Trauma Patients
- The number of inpatient trauma patients should not be less than 2000 per year; the number of severely injured patients is between 200 and 500.
- Trauma doctors must treat no less than 40 cases of severely injured patients each year.
- Have a trauma treatment Multidisciplinary Team (MDT) with members regularly receiving specialized training and drills.
- Maintain good cooperation and collaboration with pre-hospital emergency teams and primary trauma care centers.
- Have information technology support.



Function positioning and responsibilities of municipal trauma centers

- **Setting up advanced trauma centers in county and city comprehensive hospitals based on population service standards:**
 - (1) Establish one advanced trauma center for regions with a population of 1-2 million.
 - (2) In densely populated areas such as Shanghai, Zhejiang, Jiangsu, etc., there are more advanced trauma centers and fewer primary trauma centers.
 - (3) In sparsely populated areas like Xinjiang, Tibet, etc., there are fewer advanced trauma centers and more primary trauma centers.



"Core Technologies Related to Trauma Care" (216 Items)

序号	名称
1	脑池穿刺
2	脑室穿刺术
3	颅内压监测
4	颅压监护探极置入术
5	颅内脓肿引流术
6	开颅探查术
7	硬脑膜外血肿清除术
8	硬脑膜切开术
9	颅后窝血肿清除术
10	颅骨去骨瓣减压术

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"Severe Trauma Categories" (86 categories)

序号	名称
1	失血性休克
2	血容量不足性休克
3	神经源性休克
4	顽固性或难治性休克
5	周围循环衰竭
6	呼吸心跳骤停
7	感染性心包炎
8	心包积液
9	心包积血
10	感染性心内膜炎



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County Trauma Center Function Positioning and Responsibilities

Relying on the national "Thousand County Project" to
complete the construction of trauma centers.

3. 建设临床服务“五大中心”。依托县医院构建肿瘤防治、慢病管理、微创介入、急救、康复五大中心，形成与县域内其他医疗卫生机构的有效联动，开展肿瘤、慢性病的预防、诊疗合作，开展肿瘤、外周血管、神经等领域的介入诊疗。依托麻醉疼痛诊疗中心，和康复中心，满足患者对疼痛治疗舒适性的新需求。依托重症监护中心，提高重症救治水平，提升重大疾病诊疗水平。

4. 建强急诊急救“五大中心”。进一步强化胸痛、卒中、创伤、危重孕产妇救治、危重儿童及新生儿救治五大中心建设，落实诊疗规范。完善急救网络，建设实时交互智能平台，实现患者信息院内共享，提升重大急性病医疗救治质量和效率。

5. 不断改善医疗服务。将健康教育、健康科普、健康管理、疾病预防等纳入到诊疗流程，为老年人、残疾人等群体就医提供绿色通道。推广多学科诊疗模式，开展个性化的诊疗服务。提升人文关怀，改善患者就医体验，提高患者满意度。

6. 持续改善硬件条件。根据县域居民诊疗需求，逐步改善硬件设施设备条件，改善病房条件，加快数字健康基础设施建设，改善医疗、信息化等设备和医用车辆配置，



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☆ 收藏

标 题：	国家卫生健康委办公厅关于印发“千县工程”县医院综合能力提升工作方案（2021-2025年）的通知	发机关：	卫生健康委办公厅
发文字号：	国卫办医函〔2021〕538号	来 源：	卫生健康委网站
主题分类：	卫生、体育\卫生	公文种类：	通知
成文日期：	2021年10月27日	发布日期：	2021年

国家卫生健康委办公厅关于印发“千县工程”县医院
综合能力提升工作方案（2021-2025年）的通知



Guiding Opinions on the Construction and Management of Trauma Centers for the "Thousand Counties Project".

“千县工程”急诊急救中心—创伤中心

建设与管理指导意见

（起草框架与要求）

为贯彻落实《国民经济和社会发展的第十四个五年规划和2035年远景目标纲要》《国务院办公厅关于推动公立医院高质量发展的意见》《公立医院高质量发展促进行动（2021-2025年）》等文件要求，进一步巩固县医院综合能力建设积极成果，持续提升县医院综合能力，国家卫生健康委开展了“千县工程”县医院综合能力提升工作。

建设急诊急救“五大中心”是“千县工程”的重点任务之一。进一步强化胸痛、卒中、创伤、危重孕产妇救治、危重儿童和新



城市创伤救治体系建设标准

←

一、建设目标

设区的城市,根据城市面积、人口急救需求和医疗资源分布等情况,在城市创伤中心,实现创伤救治全覆盖发挥重要作用并满足重大突发事件应

二、建设要求

1. 统一规划,分级负责。国家卫救治体系建设标准,城市所在地政府创伤中心设置规划。地方政府及创伤实施具体计划或方案,积极筹措建设措施,确保实现建设目标。

2. 合理布局,统筹规划。根据地理特点、道路交通状况、急救需求及具体的创伤中心主体医院,实现严重则上在设区的市,以区为单位,辖区综合救治能力较强的二级医院作为地

县域创伤救治体系建设标准

←

一、建设目标

以县域内救治能力较好的医院为平台建立创伤中心,发挥在县域医共体中的龙头作用,牵头构建辐射县域的创伤救治网络。在严重创伤救治方面发挥重要作用,满足县域内重大突发事件应对需求。

二、建设要求

1. 统一规划,分级负责。国家卫生健康委编制县域创伤救治体系建设标准,所在地政府主导县域内创伤救治体系、创伤中心规划及建设。地方政府及创伤中心主体单位,制定项目实施具体计划或方案,积极筹措建设资金,完善相关的政策措施,确保实现建设目标。

Establish China Trauma System

中华骨科杂志 2020 年 4 月第 40 卷第 7 期 Chin J Orthop, April 2020, Vol. 40, No. 7

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识·

中国城市创伤救治体系建设标准 专家共识(2024 年版)

中国城市创伤救治体系建设标准专家共识专家组
通信作者:姜保国,Email:jiangbaoguo@vip.sina.com

【摘要】 随着我国经济快速增长,道路交通中国创伤救治联盟的专家团队根据中国国情以医院为核心的闭环区域性创伤救治体系。尤其是在县域内,以县内最好的综合医院为救治市创伤体系建设更加复杂,因此目前尚未形成严重创伤救治的成功率,国家创伤医学中心组织进行研讨,制订了《中国城市创伤救治体系建设【关键词】 创伤和损伤;医院,市区;急救;DOI: 10.3760/cma.j.cn121113-20230922-001

Expert consensus on the construction standards for Expert Consensus on the Construction Standards for Corresponding author: Jiang Baoguo, Email: jiangbaoguo@vip.sina.com
【Abstract】 With the rapid growth of China's tion industries, the incidence of trauma continues i and the China Trauma Treatment Alliance have p place independent trauma treatment centers, and to hospital as the core according to China's national c few years under the auspices of the National Health county will be the main body of treatment, and the tegated to form an effective trauma treatment syst relatively unified construction standards have not y ment system and improve the success rate of train Center organized experts to discuss how to optimin ma treatment capabilities. The "Expert consensus (Edition)" was formulated, aiming to provide a refer
【Key words】 Wounds and injuries; Hospita DOI: 10.3760/cma.j.cn121113-20230922-001

中华骨科杂志 2020 年 4 月第 40 卷第 7 期 Chin J Orthop, April 2020, Vol. 40, No. 7

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识·

中国县域创伤救治体系建设标准 专家共识(2024 年版)

中国县域创伤救治体系建设标准专家共识专家组
通信作者:姜保国,Email:jiangbaoguo@vip.sina.com

【摘要】 创伤是导致我国 45 岁以下人群的第一死亡原因,是现阶段医疗体系面临的重大挑战,也是我国现存的重大公共卫生问题之一。在过去十余年中,国家创伤医学中心、中国创伤救治联盟在全国范围内不断推动区域性创伤体系建设及创伤中心建设,目前已基本建立了适合我国国情的创伤救治体系,但统一的县域创伤救治体系建设标准尚未建立。由国家创伤医学中心发起并组织国内从事创伤领域的相关专家组成专家组,对县域创伤救治体系建设目的、建设要求和建设内容进行充分讨论,并形成共识,以期为我国县域创伤救治体系的建设和评估提供参考。

【关键词】 创伤和损伤;医院,县;急救;共识;中国 DOI: 10.3760/cma.j.cn121113-20230908-00149

Expert consensus on standards for the construction of county trauma treatment system in China (2024 version)
Expert Consensus on the Construction Standards of China's County Level Trauma Treatment System Expert Group
Corresponding author: Jiang Baoguo, Email: jiangbaoguo@vip.sina.com
【Abstract】 Trauma is the leading cause of death in people under 45 years old in China, which is a major challenge to the

the "Standards for Trauma Care System and Trauma Center Construction in Urban and County Areas" "Expert Consensus on Standards for Trauma Care System Construction in Chinese Urban and County Areas."were released in 2024.



Establish China Trauma System



County Trauma Center Function Positioning and Responsibilities

- **Relying on county-level hospitals, establishing primary trauma care centers based on the time window requirements for trauma treatment:**
 - (1) Emergency response time within 15 minutes
 - (2) Pre-hospital treatment time within 40 minutes
- **Treatment capabilities:**
 - (1) Completing damage control for severe trauma within the region, ICU resuscitation, and providing safe transportation guarantee
- **Having a trauma care Multidisciplinary Team (MDT) with members regularly receiving specialized training and drills**
- **Maintaining good cooperation and collaboration with pre-hospital treatment teams and advanced trauma care centers**
- **Having a scoring, assessment, warning, and linkage mechanism for trauma patient treatment, and completing unified information technology support.**



PART 02

Establish National Emergency Medical Rescue Base





中华人民共和国国家发展和改革委员会

关于做好国家紧急医学救援基地项目遴选工作的通知

各省、自治区、直辖市及新疆生产建设兵团：

我国是自然灾害和生产安全事故多发国家，国家紧急医学救援在应对各类突发事件、维护人民群众生命财产安全方面具有重要作用。“十四五”时期，国家

国家发展改革委社会司联系人：吴辰江 01

国家卫生健康委规划司联系人：蔡晓琴 01

国家卫生健康委应急办联系人：陈雷 010

国家发展改革委社会司

社会发展司

国家卫生健康委应急办



国家卫生健康委

2021年1月



附件

国家紧急

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- (一) 指导思想
- (二) 建设目标
- (三) 建设原则

二、基地功能和布局

- (一) 基地功能
- (二) 基地布局

三、项目遴选标准与程序

- (一) 遴选标准
- (二) 遴选指标
- (三) 项目申报遴选程序

四、建设任务和和能力标准

- (一) 建设任务
- (二) 能力标准

五、保障措施

- (一) 加强组织领导
- (二) 严格项目管理
- (三) 强化监督考核



National Emergency Medical Rescue Base



NATIONAL HEALTH COMMISSION - NATIONAL EMERGENCY MEDICAL RESCUE BASE CONSTRUCTION GUIDANCE EXPERT DATABASE

The expert pool includes **consulting advisors**, divided into the Administrative Management Group, Trauma First Aid Group, Aerospace Medical Rescue Group, Maritime (Water) Medical Rescue Group, Poison Treatment Group, Nuclear Radiation Treatment Group, and Information Technology Group, with a **Secretary-General** designated to be responsible for daily work.

Name	Unit	Position
Jiang Baoguo	Peking University People's Hospital	Expert Pool Consulting Advisor
Wang Tianbing	Peking University People's Hospital	Secretary-General of Expert Pool

Main responsibilities of the expert pool:

- (1) Research and draft the "Technical Guidance for the Construction of National Emergency Medical Rescue Bases."
- (2) Provide technical guidance, participate in the qualification review of the construction units of national emergency medical rescue bases, review construction plans, guide inspections and evaluations of project construction, and review feasibility reports of national emergency medical rescue base construction projects undertaken by designated hospitals.
- (3) Research and formulate management methods for the operation of national emergency medical rescue bases.
- (4) Provide guidance on the operation of completed national emergency medical rescue bases.



National Emergency Medical Rescue Base



List of national emergency medical rescue bases

1	Peking University People's Hospital	12	Shandong Provincial Hospital	23	People's Hospital of Inner Mongolia Autonomous Region
2	Beijing Jishuitan Hospital	13	The First Affiliated Hospital of Zhengzhou University	24	Shanghai Ruijin Hospital
3	Tianjin People's Hospital	14	Zhongnan Hospital of Wuhan University	25	Fujian Provincial Hospital
4	The Third Hospital of Hebei Medical University	15	Beihai City People's Hospital	26	The Second Xiangya Hospital, Central South University
5	The First Affiliated Hospital of China Medical University	16	The First Affiliated Hospital of Hainan Medical College	27	Nanfang Hospital, Southern Medical University
6	China-japan Friendship Hospital, Jilin University	17	West China Hospital of Sichuan University	28	Chongqing Emergency Medical Center
7	The Second Affiliated Hospital of Harbin Medical University	18	Guizhou Provincial People's Hospital	29	Tibet Autonomous Region People's Hospital
8	Jiangsu Provincial People's Hospital	19	The First Affiliated Hospital of Kunming Medical University	30	The Second Hospital of Lanzhou University
9	The Second Affiliated Hospital of Zhejiang University School of Medicine	20	Shaanxi Provincial People's Hospital	31	Ningxia Medical University General Hospital
10	Anhui Provincial Hospital	21	Qinghai Provincial People's Hospital	32	People's Hospital of Xinjiang Uygur Autonomous Region
11	The First Affiliated Hospital of Nanchang University	22	Shanxi Hospital, Tongji Hospital, Huazhong University of Science and Technology	33	The First Affiliated Hospital of Shihezi University



National Emergency Medical Rescue Base



Three Major Specializations

1. Large-scale wounded concentration rescue and treatment
2. Emergency nuclear radiation medical rescue
3. Emergency poisoning medical rescue

Two Major Abilities

Indoor: Capable of handling a large number of casualties in the event of an emergency.

Outdoor: Equipped with professional on-site emergency medical rescue capabilities.

- Information technology emergency command
- Cross-regional rapid response
- Multimodal transportation by land, sea, and air
- Large-scale centralized treatment
- Medical rescue for sudden poisoning incidents
- Medical rescue for sudden nuclear radiation incidents
- Professional training and education
- International scientific research exchange
- Integrated material reserves



National Emergency Medical Rescue Base



In May 2022, Peking University People's Hospital was selected as the first batch of national emergency medical rescue base reserve list.

国家发展和改革委员会 国家卫生健康委员会文件

发改办社会〔2022〕440号

国家发展改革委办公厅 国家卫生健康委办公厅 关于印发国家紧急医学救援基地 第一批项目储备库的通知

各省、自治区、直辖市、新疆生产建设兵团发展改革委、卫生健康委：

根据《“十四五”优质高效医疗卫生服务体系建设实施方案》（发改办社会〔2021〕893号）和《关于做好国家紧急医学救援基地项目遴选工作的通知》，国家发展改革委、国家卫生健康委组织开展了国家紧急医学救援基地项目申报、综合审查和评审工作，现确定21个单位纳入国家紧急医学救援基地项目第一批储备

- 1 -

国家紧急医学救援基地第一批项目储备库名单

1. 北京积水潭医院
2. 北京大学人民医院
3. 天津市人民医院
4. 河北医科大学第三医院
5. 中国医科大学附属第一医院
6. 吉林大学中日联谊医院
7. 哈尔滨医科大学附属第二医院
8. 江苏省人民医院
9. 浙江大学医学院附属第二医院
10. 安徽省立医院
11. 南昌大学第一附属医院
12. 山东省立医院
13. 郑州大学第一附属医院
14. 武汉大学中南医院
15. 上海市人民医院
16. 海南医学院第一附属医院
17. 四川大学华西医院
18. 贵州省人民医院
19. 昆明医科大学第一附属医院
20. 陕西省人民医院
21. 青海省人民医院

北京市发展和改革委员会 北京市卫生健康委员会

京发改〔2021〕1120号

北京市发展和改革委员会 北京市卫生 健康委员会关于报送国家紧急医学救援基地 项目承建单位的函

国家发展改革委社会发展司、国家卫生健康委规划司、国家卫生健康委应急办：

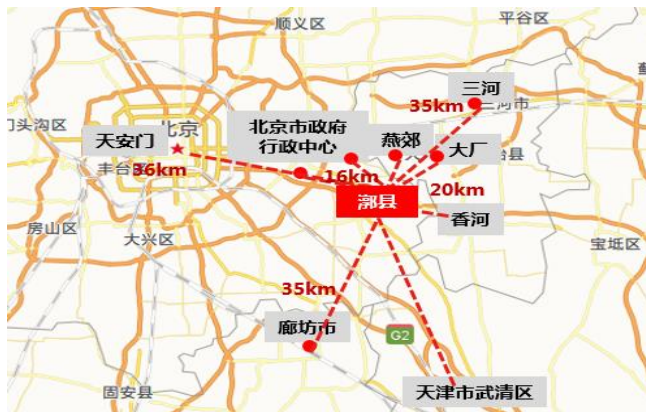
按照国家发展改革委和国家卫生健康委联合下发的《关于做好国家紧急医学救援基地项目遴选工作的通知》（以下简称《通知》）要求，我市组织开展了遴选工作。为推动落实国家关于紧急医学救援基地建设的总体布局，有效保障首都地区突发事件紧急医学救援的工作需求，结合专家组的评审结果及《通知》中的具体要求，经报请市政府同意，统筹考虑北京积水潭医院作为本市主要紧急医学救援机构，其紧急医学救援能力应确保覆盖首都地区，以及北京大学人民医院作为国家创伤医学中心，其紧急医学救援能力应能够辐射周边区域及全国，现报送北京积水潭医



National Emergency Medical Rescue Base



**Leveraging the National
Trauma Medical
Center.**



**National Emergency
Medical Rescue Base
Construction Entity**



**Based on the Tongzhou
campus.**



Chinese Trauma Care System
Member units - 2496 hospitals
Total number of trauma patients -
more than 6.62 million cases
Covering 31 provinces, serving a
population of 918 million

China Emergency Medical Rescue Base



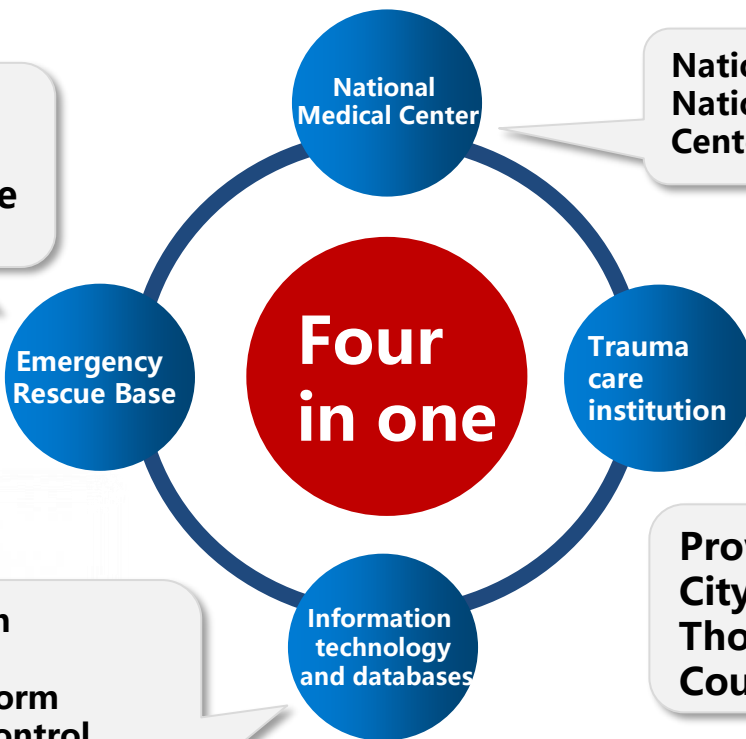
Data source: China Trauma Big Data Platform, March 31, 2024.



Establishing a national emergency medical management system



National Emergency Medical Rescue Base: 33 emergency medical rescue bases nationwide.



National Trauma Medical Center
National Trauma Regional Medical Center

National Trauma Information Interconnected System
China Trauma Big Data Platform
Trauma Treatment Quality Control System (14 provinces)

Provincial Trauma Care Center
City Trauma Care Center
Thousand County Project:
County Trauma Center



Thank You

