TRAUMA TRIAGE

I. AUTHORITY:

Health & Safety Code, Division 2.5, Sections 1797.258, 1798, 1798.160-1798.169, and 1798.2; California Code of Regulations, Title 22, Division 9, Chapter 7.

II. POLICY:

This policy identifies the types of injuries and situations that require transport of trauma victims to an Orange County EMS (OCEMS) designated Trauma Center (TC).

III. DEFINITION OF A TRAUMA VICTIM ("MEETS TRAUMA CRITERIA"): 

A trauma victim is someone who has a blunt or penetrating injury with the presence of any of the following:

A. Abnormal Vital Signs:
   - Glasgow Coma Score (GCS) less than 14 (in the presence of head injury)
   - RESPIRATION:
     Adult/Adolescent/Children¹: less than 12 per minute OR greater than 30 per minute
   - SYSTOLIC BLOOD PRESSURE:
     Adult/Adolescent: less than 90
     Children¹: less than 80

Note #1: A child is defined as those ages 14 years-old and younger.

B. Injuries:

   - Penetrating or open injury of the head
   - Depressed skull fracture
   - Blunt head injury with loss of consciousness greater than 5 minutes
   - Penetrating injury to the neck, chest, abdomen, back, or groin
   - Penetrating injury to extremity above elbow or knee
   - Extremity with poor circulation or without a pulse
   - Paralysis or numbness of arm or leg
   - Suspicion of spinal cord injury
   - Flail chest
   - Seat belt bruising or abrasion of neck, chest or abdomen
   - Abdominal injury, blunt, with tenderness of 2 or more quadrants
   - Fracture of two or more long-bones (femur, humerus)
   - Pelvic pain or deformity on palpation
   - Amputation above the wrist or ankle
   - Crushed, degloved, or mangled extremity (excluding only fingers or toes)

C. Mechanism of Injury

   - Falls
     o Adult/Adolescent: greater than 15 feet (one story is equal to 10 feet)²
     o Children¹: greater than 10 feet or 2-3 times the height of the child²
     o Falls from a galloping horse
TRAUMA TRIAGE

Mechanism of Injury (continued)

- High-Risk Auto Crash
  - Passenger space intrusion greater than 12 inches where an occupant (who would be defined as a trauma victim) is sitting or any occupant in a passenger seat when there is greater than 18 inches intrusion at any site within the passenger space.\(^2\)
  - Ejection (partial or complete) from automobile.
  - Person who is in same passenger compartment in which a trauma death has occurred.
- Dive and shore break injuries with suspected spinal cord injury
- Auto vs. Pedestrian / Bicyclist who is thrown any distance, run-over, or with significant (greater than 20 mph\(^2\)) impact
- Motorcycle Crash greater than 20 mph\(^2\), including “laying bike down”

Note # 2. Heights, speeds and distances are best estimates

IV. SPECIAL CONSIDERATIONS:

Patients with significant injury and any of the following may benefit from specialized trauma services; contact Base Hospital for destination decision regarding those with injury and:

- Age 75 years-old or greater
- Anticoagulation\(^3\) and bleeding disorders
- End-stage renal disease on dialysis
- Pregnancy greater than 20 weeks
- EMS provider judgment that transport to a TC will benefit the injury victim

Note # 3. Patient is on or states is taking a "blood thinner" or "anticoagulant" excluding aspirin

V. DESTINATION DECISIONS:

Base hospital contact is required for all patients described in this policy. Trauma victim destination is determined by the base hospital.

VI. TRAUMATIC RESPIRATORY AND CARDIOPULMONARY ARREST:

At the discretion of the BH physician, trauma patients presenting with any of the following and for who resuscitation and transport is pursued should be triaged as follows:

- Unmanageable airway Triage to PTRC
- Traumatic cardiopulmonary arrest Triage to PTRC
TRAUMA TRIAGE

Approved:

Sam J. Stratton, MD, MPH
OCEMS Medical Director

Tammi McConnell, MSN, RN
OCEMS Administrator

Original Date: 1/1988
Reviewed Date(s): 3/2015
Revised Date(s): 3/28/2011; 4/01/2015; 4/29/2015; 5/01/2016; 11/15/16
Effective Date: 12/01/2016