

PURPOSE:

The purpose of this policy is to define criteria for identifying major trauma patients.

AUTHORITY:

Health and Safety Code, Division 2.5, Sections 1797.220, and 1798 et. seq. California Code of Regulations, Title 22, Division 9, Chapter 7.

DEFINITIONS:

- A. "Adult major trauma patient" means a patient 15 years of age or older that meets one or more of the major trauma triage criteria.
- B. "Pediatric major trauma patient" means a patient 14 years of age or younger that meets one or more of the major trauma triage criteria.

POLICY:

- I. Prehospital personnel shall assess all patients suffering acute injury or suspected acute injury using the trauma triage criteria established in this policy and shall document the findings of such an assessment on the patient care record.
- II. Major Trauma Triage Criteria:
 - A. Physiologic :
 - 1. Glasgow coma scale (GCS) **motor score** of less than 5 (patient withdraws from painful stimuli.)
 - 2. Systolic blood pressure of less than:
 - a. 90 for age 14 and older.
 - b. 80 for age 7 to 14 years.
 - c. 70 for age 1 to 6 years.
 - 3. Respiratory rate <10 or >29 (<20 in infant < one year).
 - B. Anatomic:
 - 1. Penetrating injuries to the head, neck, chest, abdomen, and proximal to the elbow or knee.
 - 2. Flail chest.
 - 3. Two or more long bone fractures (humerus or femur).
 - 4. Crushed, degloved, or mangled extremity.
 - 5. Amputation proximal to wrist or ankle.

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6. Pelvic fracture.
 7. Open or depressed skull fracture.
 8. Traumatic paralysis.
 9. Extremity injury with loss of distal circulation.
 10. Partial or full thickness thermal, chemical, or electrical burns greater than 9% total body surface.
 11. Inhalation burns.
- C. Mechanism of Injury:
1. Auto versus pedestrian or bicyclist with the patient being:
 - a. Run over.
 - b. Thrown a significant distance.
 2. Falls involving a pediatric patient from a height greater than 10 feet or twice the height of the child.
- D. Paramedic judgment: Paramedics may use their judgment to classify a patient as major trauma patient when the patient:
1. Has a significant complaint or obvious signs of injury, and;
 2. Has experienced a high risk mechanism of injury; and
 3. Has one or more of the following comorbid factors:
 - a. Age greater than 55 or less than 10.
 - b. Anticoagulation therapy.
 - c. Burns.
 - d. Time-sensitive extremity injury.
 - e. Pregnancy greater than 20 weeks.
 4. Examples of high risk mechanism of injury include:
 - a. High energy motor vehicle or motorcycle crash.
 - b. Blast injuries.
 - c. Falls involving an adult patient greater than 20 feet.
- E. Examples of the application of paramedic judgment include:
1. Motor vehicle crash, with a pregnant patient complaining of abdominal pain, with seatbelt marks across abdomen.
 2. Fall from the top of a bunk bed, with a child less than 5 years of age, with an obvious femur fracture.
 3. Fall from an extension ladder, adult greater than 60 years of age, on anticoagulation therapy, complaining of pain all over.

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III. Mutli-casualty Incidents (MCIs):

A. Initial triage:

1. Prehospital personnel shall use START triage methodology for the initial assessment of patients during a trauma MCI.
2. Patients classified as "Immediate" using START criteria are major trauma patients.

B. Secondary triage:

1. When resources and circumstances allow prehospital personnel shall re-triage patients using the criteria in this policy.
2. Patients meeting physiologic or anatomic criteria shall be classified as "Immediate" patients.
3. Patients meeting mechanism of injury or paramedic judgment criteria shall be classified as "Delayed" patients.

IV. This policy supersedes EMS Policy No. 5121, Neurological Triage Criteria and EMS Policy No. 5122, Pediatric Trauma Triage Criteria which are hereby rescinded.

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