



## REFERENCE No. 506.1 Trauma Triage Decision Scheme

### Physiological Assessment

Systolic blood pressure (SBP): < 90 mmHg, or  
< 70 mm Hg in infant < 1 yr.  
Respiratory rate: > 29 breaths/minute (sustained),  
< 10 breaths/minute,  
< 20 breaths/minute in infant < 1 yr., or  
requiring ventilatory support  
Cardiopulmonary arrest with penetrating torso trauma

### Anatomical Injury Assessment

ALL penetrating injuries to head, neck, torso, and extremities above the elbow or knee  
Blunt head injury associated with: suspected skull fracture, GCS  $\leq$  14, seizures,  
unequal pupils, or focal neurological deficit Spinal injury associated with  
acute sensory or motor deficit  
Blunt chest injury with unstable chest wall (flail chest)  
Diffuse abdominal tenderness  
Suspected pelvic fracture (excluding isolated hip fracture from a ground level fall)  
Extremity with: neuro/vascular compromise and/or crushed, degloved or mangled;  
amputation proximal to the wrist or ankle; or  
fractures of  $\geq$  2 proximal (humerus/femur) long-bones  
bleeding requiring tourniquet or hemostatic agent  
Major/Critical Burns:  $\geq$ 15 years with 2<sup>nd</sup> or 3<sup>rd</sup> degree burns  $\geq$  20% TBSA  
 $\leq$  14 years with 2<sup>nd</sup> or 3<sup>rd</sup> degree burns  $\geq$  10% TBSA

### Mechanism of Injury Assessment

Falls: All patients > 10 feet  
Passenger Space Intrusion: > 12 inches into an occupied passenger space  
Ejected from vehicle (partial or complete)  
Auto v. pedestrian/bicyclist/motorcyclist thrown, run over, or impact > 20 mph  
Unenclosed transport crash with significant impact (> 20 mph)

### Trauma Guidelines Assessment

Passenger Space Intrusion > 18 inches into an unoccupied passenger space  
Auto versus pedestrian/bicyclist/motorcyclist (impact  $\leq$  20 mph)  
Injured victims of vehicle crashes with a fatality in the same vehicle  
Patients requiring extrication  
Vehicle telemetry data consistent with high risk of injury  
Injured patients (excluding isolated minor extremity injuries): on anticoagulation  
therapy other than aspirin-only; or with bleeding disorders

### Special Considerations Assessment

Blunt traumatic full arrest  
SBP < 110 mmHg may represent shock after age 65 years  
HR > SBP for age  $\geq$  14 years  
Child (0-9 Yrs.) unrestrained or in an unsecured child safety seat  
Pregnancy > 20 weeks  
Prehospital judgement

YES

YES

Contact  
Base/Trauma  
Center, Immediate  
transport to  
designated  
Trauma Center

YES

YES

Consult with  
Trauma  
Center/Base  
Hospital, transport  
to designated  
Trauma Center  
is advisable

YES

Consider  
transport to  
designated  
Trauma Center