

FIELD TRIAGE DECISION SCHEME

Measure vital signs and level of consciousness

Step One	Glasgow Coma Scale	<14 or
	Systolic blood pressure	<90 or
	Respiratory rate	<10 or >29 (<20 in infant < one year)

Yes

No

Take to a trauma center. Steps 1 and 2 attempt to identify the most seriously injured patients. These patients would be transported preferentially to the highest level of care within the trauma system.

Assess anatomy of injury

- All penetrating injuries to head, neck, torso, and extremities proximal to elbow and knee
- Flail chest
- Two or more proximal long-bone fractures
- Crush, degloved or mangled extremity
- Amputation proximal to wrist and ankle
- Pelvic fractures
- Open or depressed skull fracture
- Paralysis

Yes

No

Take to a trauma center. Steps 1 and 2 attempt to identify the most seriously injured patients. These patients would be transported preferentially to the highest level of care within the trauma system.

Assess mechanism of injury and evidence of high-energy impact

- Falls
 - Adults: > 20 ft. (one story is equal to 10 ft.)
 - Children: > 10 ft. or 2-3 times the height of the child
- High-risk auto crash
 - Intrusion: > 12 in. occupant site; > 18 in. any site
 - Ejection (partial or complete) from automobile
 - Death in same passenger compartment
 - Vehicle telemetry data consistent with high risk of injury
- Auto v. pedestrian/ bicyclist thrown, run over, or with significant (>20 mph) impact
- Motorcycle crash > 20 mph

Yes

No

Transport to closest appropriate trauma center which, depending on the trauma system, need not be the highest level trauma center.

Assess special patient or system considerations

- Age
 - Older Adults: Risk of injury death increases after age 55
 - Children: Should be triaged preferentially to pediatric-capable trauma centers
- Anticoagulation and bleeding disorders
- Burns
 - Without other trauma mechanism: Triage to burn facility
 - With trauma mechanism: Triage to trauma center
- Time sensitive extremity injury
- End-stage renal disease requiring dialysis
- Pregnancy > 20 weeks
- EMS provider judgment

Yes

No

Contact medical control and consider transport to trauma center or a specific resource hospital.

Transport according to protocol

WHEN IN DOUBT, TRANSPORT TO A TRAUMA CENTER.