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| **RED** | **YELLOW** | **GREEN** |
| **Patients who sustain injuries and any physiological, anatomical, or mechanisms noted below.** | | |
| **Physiologic Primary Survey**  **Airway**   * Inability to adequately ventilate or Compromised airway, Intubated   **Breathing**   * Signs of Respiratory Insufficiency, Rate <10 or > 29 per minute (Hypoxia, accessory muscle use or grunting.   **Circulation**   * Traumatic arrest * SBP < 90 in adults * Shock in Pediatrics * Capillary Refill > 2 sec. or SBP low for the age * Shock Index >1 (HR/SBP)  |  |  | | --- | --- | | **Age** | **SBP (mm Hg)** | | <1 y | <60 | | 1–10 y | <70 + 2× age | | >10 y | <90 |   **Deficit**   * GCS motor score ≤5, GCS ≤13. * AVPU: responsive to pain or unresponsive   **Secondary Survey**   * Penetrating injury to head, neck, or torso or extremities proximal to elbow/knee * Open or Depressed Skull Fracture, Head injury & GCS   ≤13   * Neurologic deficit or paralysis * Penetrating injury to extremity   **without** pulse   * Major vascular injury * Amputation proximal to wrist or ankle * Burns/Inhalation injury and/or TBSA >20% * Transfer from another hospital & receiving or received blood to maintain vitals * Crushed, degloved, or mangled extremity proximal to wrist or ankle * Transfer from another facility that meets RED criteria * ED MD discretion | **Secondary Survey - Anatomic**   * Loss of consciousness with suspected head injury and a corresponding GREEN criterion. * Flail chest or multiple rib fractures. * Pregnancy > 20 weeks with suspected abdominal or pelvic injury. * Pelvic fractures. * 2 or more proximal long bone fractures. * Penetrating injury to extremity with pulse. * Age ≥ 65 with any other GREEN criteria. * Age ≥ 65 fall within 24hrs w/suspected head injury and altered GCS from baseline. * Age ≥ 65 with evidence of chest trauma (rib pain or concern for rib fractures) * Burns   Electrical burns Lightning burns  TBSA ≤20% & > 10%   * Transfer from another facility for specialized trauma care.   **“Mechanism-only”**   * Extrication > 20 minutes * Ejection from motorized mode of transport or equestrian * Death of another person in same passenger compartment. * Blast or Explosion. * Auto-pedestrian, motorcycle-pedestrian, auto-bicycle, thrown, run over, or with impact > 20 mph * Motorcycle crash > 20 mph * Falls from any height on anticoagulation therapy. * Adults falls > 10 feet * Peds falls > 10 feet or > 2x height * Blunt abdominal injury with firm or distended abdomen or + seatbelt signs. * Drowning or near-drowning, ***with known or suspected traumatic injuries*** * ED MD discretion. | **"Mechanism-only"**   * Patients with a normal level of consciousness, age appropriate normal vital signs, and without obvious serious injury. * Rollover * High-speed crash evidenced by:   + Speed > 35 mph   + Intrusion into occupant compartment > 12 inches   + Auto deformity > 18 inches * Hanging or near-hanging with GCS ≥14 * Burns with TBSA ≤ 10%   - **Patients requiring outpatient follow up at the burn clinic, or inpatient admission should receive a burn service consultation prior to the final ED disposition.**  **"Mechanism-only"**   * Considerations for upgrade to YELLOW in patients with pre- existing conditions. * Trauma "mechanisms" not currently defined in the pre- hospital trauma triage decision scheme; mechanisms like those defined may qualify as a GREEN. Including blunt assaults. * ED MD discretion |
| **RED** | **YELLOW** | **GREEN** |
| **Team Response** | **Team Response** | **Team Response** |
| * Trauma Attending. * Designated Trauma Chief or Senior Resident * Designated Trauma Junior Resident * Emergency Department physician * Anesthesia * Respiratory Therapist. * Radiology technician * Chaplain and / or Social Worker * OR charge nurse. * Including all required individuals   that respond to Yellow Trauma Pages. | * Trauma Attending (Not required for initial response but are available in-house). * Designated Trauma Chief or Senior Resident * Designated Trauma Junior Resident * Emergency Department physician * Respiratory Therapist * Radiology technician * Chaplain and / or Social Worker * Including all individuals that respond to Green Trauma Pages. | * Emergency Medicine Attending * Emergency Medicine resident ED. * Trauma/ ED Nurse. * ED paramedic or PCT. * Registration. |
| * Trauma Attending within   **15** minutes of patient arrival | * Designated Trauma Attending, Fellows, Senior/ Junior Resident, Trauma APP, ED Attending, or ED Resident within   **15** minutes of patient arrival | * Emergency Medicine Attending/Resident within **2** hours of patient arrival |

\*\*\*All Trauma Green activations requiring Trauma consult will remain consistent with facility consult standards:

* Emergency ED consult: <1 hour from notification
* Urgent ED consult: <2 hours from notification