

**Trauma Activation Criteria**

**Level I**

**Trauma Surgeon responds within 30 minutes from patient arrival**

1. Airway/Breathing
  - o RR <10 RR >29
  - o Intubated patients transferred from the scene
  - o Unstable/Unsecure airway
  - o Severe maxillofacial injuries with airway compromise
2. Circulatory
  - o SBP < 90mmHg
  - o Trauma related transfer receiving blood to maintain vital signs
3. CNS
  - o GCS ≤ 8 with a traumatic mechanism of injury
  - o Neurological deficits with suspected spinal cord injury
4. Chest/Abdomen/Pelvis
  - o Flail chest/sucking chest wounds
  - o Major pelvic injury with unstable vital signs
5. Extremities
  - o Amputation proximal to the ankle/wrist
  - o Two or more long bone fractures
  - o Pulseless extremity with a traumatic mechanism of injury
6. Mechanism of Injury
  - o GSW to the head, neck, chest, abdomen
  - o Burns > 20% or burns combined with any other injury
  - o Any hemodynamically unstable patient with a penetrating injury (see above SBP, RR, GCS)
7. At the discretion of the ED physician
  - o \_\_\_\_\_

**Level II**

**Trauma Surgeon responds within 60 minutes from trauma activation**

1. CNS:
  - o GCS 9-13 with a traumatic mechanism of injury
2. Extremities
  - o Crush, degloved, or mangled extremity with a significant mechanism of injury
  - o Open femur/humerus fracture without evidence of neurovascular compromise
3. Mechanism of Injury
  - o Stab wound or other penetrating injury of head, neck, chest, or abdomen excluding GSW
  - o Falls ≥ 20 feet (adults) and ≥ 10 feet or 3x height for children (≤ 18 years of age)
  - o High risk motor vehicle crash with:
    - Intrusion of vehicle > 12” in occupant compartment; or 18” in any other site
    - Ejection (partial or complete) from an automobile
    - Death in same passenger compartment
  - o Auto vs. pedestrian/cyclist thrown, run over, or with significant (>20 mph) impact
  - o Motorcycle, ATV, snowmobile or watercraft crash >20 mph
  - o High voltage electrical injury
4. At the discretion of the ED Physician
  - o \_\_\_\_\_

**Level III**

**Trauma Consult**

1. Any patient that does not meet activation criteria and has sustained a traumatic injury requiring admission to the hospital require a trauma consult, with the exception of same level trip and fall with isolated orthopedic injuries.
2. Incoming hospital transfers with trauma related injuries that do not meet activation criteria require a trauma consult.

**ED Trauma Flow Sheet**



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Place Sticker Here

<b>INJURY:</b> Date _____	Time _____
<b>DATE OF ARRIVAL</b> _____	<b>TIME OF ARRIVAL</b> _____
<b>Time of Trauma Activation:</b> _____	
*Level 1 *Level 2	
<b>Change To:</b> _____	<b>Time:</b> _____

TITLE	NAME	ARRIVAL TIME
Trauma Surgeon		
ED Attending		
Primary Nurse		
Secondary Nurse		
Scribe		
ER Technician		
Respiratory		
Lab		
Radiology		
*Anesthesia		
Neurosurgery		
Orthopedics		
Senior Surgical Resident		
Physician Assistant		
Other		

**ARRIVAL MODE:**  EMS  Car  Police  \_\_\_\_\_  
**Historian**  Patient  EMS  Family: \_\_\_\_\_

**MECHANISM OF INJURY**

**MOTOR VEHICLE VS.** \_\_\_\_\_ **SPEED** \_\_\_\_\_ **MPH**  
Impact:  front  driver side  passenger side  rear  
 Intrusion \_\_\_\_\_  Extrication Time: \_\_\_\_\_ min  
 Driver  Passenger  Front  Back  
 Seatbelt  Air Bag  Child Seat  Unknown  
 Rollover  Ejected found \_\_\_\_\_ ft from vehicle

**MOTORCYCLE**  **BICYCLE**  \_\_\_\_\_  
 **VS** \_\_\_\_\_ **SPEED** \_\_\_\_\_ **MPH**  
 Driver  Passenger  Helmet  Yes  No

**PEDESTRIAN**  **THROWN** \_\_\_\_\_ **FT**  
 Type of vehicle \_\_\_\_\_  
**SPEED** \_\_\_\_\_ **MPH**

**FALL** Stairs # \_\_\_\_\_ Height \_\_\_\_\_  Blood thinners  
Landed on: \_\_\_\_\_

**ASSAULT**  Gunshot  Stabbing  Physical  
 Police Notified  
Weapon: \_\_\_\_\_

**OPEN FRACTURE**  Yes  No

**OTHER** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PRE-HOSPITAL**

BP \_\_\_\_\_ / \_\_\_\_\_  AUSC  PALP HR \_\_\_\_\_ Rhythm \_\_\_\_\_  
RR \_\_\_\_\_ O2 Sat \_\_\_\_\_ GCS \_\_\_\_\_ AccuCheck \_\_\_\_\_  
 CPR  on scene  enroute  length of time: \_\_\_\_\_  
 LOC  on scene  enroute  length of time: \_\_\_\_\_  
Oxygen:  NC \_\_\_\_\_ L/min  NRB  Peds Mask  BVM  
Airway:  OET  NET Size: \_\_\_\_\_ FR Lip Line: \_\_\_\_\_ cm  
 LMA  Combitube  Cricothrotomy  
 C-Spine:  collar  backboard  immobilized in car seat  
 IV gauge/site #1 \_\_\_\_\_ Total IV infused \_\_\_\_\_  
 IV gauge/site #2 \_\_\_\_\_ Total IV infused \_\_\_\_\_  
 Splint: \_\_\_\_\_  
 Medications given: \_\_\_\_\_

**MEDICAL BACKGROUND**

Adult: Height \_\_\_\_\_ ft \_\_\_\_\_ in Weight \_\_\_\_\_ kg  
Peds: Weight \_\_\_\_\_ kg \_\_\_\_\_ lbs \_\_\_\_\_ kg. Broselow  
**ALLERGIES:**  Denies  Unknown  
\_\_\_\_\_  
**MEDS:**  see EMR  none  unknown  thinners  
\_\_\_\_\_  
**PAST MEDICAL/SURGICAL HX:**  denies  unknown  EMR  
\_\_\_\_\_  
 LMP \_\_\_\_\_  pregnant \_\_\_\_\_ wks  N/A

**INJURIES/COMPLAINTS**

**Abbreviation Code:**

AB..... Abrasion	
AMP..... Amputee	
AV..... Avulsion	
B..... Burn	
BR..... Bruise	
C..... Contusion	
D..... Deformity	
FB..... Foreign Body	
G..... Gunshot Wound	
L..... Laceration	
P..... Pain	
PU..... Puncture	
R..... Rash	
RD..... Redness	

