TRAUMA PATIENT TRIAGE AND TRANSPORT

I. Region 11 EMS uses a four step trauma field triage decision scheme (reference attachment 1) to identify injured persons requiring transportation directly to a trauma center. The four steps are:

   Step 1: Physiologic Criteria
   Step 2: Anatomic Criteria
   Step 3: Mechanism of Injury Criteria
   Step 4: Special Consideration Criteria

A. Adult Trauma Transports

1. Region 11 EMS defines the adult trauma patient as an injured person aged 16 years and older. Adult patients meeting trauma criteria using the decision scheme should be transported to the closest Level I trauma center. Scene time should be kept to a minimum.

B. Pediatric Trauma Transports

1. Region 11 EMS defines the pediatric trauma patient as an injured person aged 15 years or less. Pediatric patients meeting trauma criteria using the decision scheme should be preferentially transported to the closest Pediatric Level I trauma center.

2. If the transport time to the closest Pediatric Level I trauma center is anticipated to be greater than 25 minutes, the patient should be transported to the closest Level I trauma center. Scene time should be kept to a minimum.

Attachments:
1. Region 11 Trauma Field Triage Criteria
2. Region 11 Trauma Transport - Adult and Pediatrics
REGION 11 TRAUMA FIELD TRIAGE CRITERIA

Measure vital signs and level of consciousness

Glasgow Coma Scale ≤ 13

Systolic Blood Pressure ≤ 100 mm Hg for Adults
≤ 80 for children ≥ 1 year old
≤ 70 for children < 1 year old

Respiratory Rate <10 or >29 breaths/minute in adults and children ≥ 1 year old
≤ 20 breaths/minute in infant aged <1 year
Need for ventilatory support

YES ➔ Transport to the closest appropriate Trauma Center

NO ➔ Assess anatomy of injury

All penetrating injuries to head, neck, torso and extremities proximal to elbow or knee
Chest wall instability or deformity (e.g., flail chest)
Two or more proximal long-bone fractures
Crushed, degloved, mangled, or pulseless extremity
Amputation or partial amputation proximal to wrist or ankle
Any traumatic injury requiring tourniquet application
Pelvic fractures
Open or depressed skull fracture
Motor or sensory deficits compatible with cord damage

YES ➔ Transport to the closest appropriate Trauma Center

NO ➔ Assess mechanism of injury & evidence of high-energy impact

 Falls
Adults: >20 feet (one story is equal to 10 feet)
Children: >10 feet or two or three times the height of the child

High-risk auto crash
Intrusion, including roof: >12 inches occupant site; >18 inches any site
Ejection (partial or complete) from automobile
Death in same passenger compartment
Vehicle telemetry data consistent with a high risk of injury

Auto vs. pedestrian/bicyclist thrown, run over, or with significant impact
Motorcycle crash

YES ➔ Transport to the closest appropriate Trauma Center

NO ➔ Assess special patient considerations

Older adults
Risk of injury/death increases after age 55 years
SBP <110 might represent shock after age 65 years
Low impact mechanism (e.g. ground level falls) might result in severe injury

Children
Should be preferentially triaged to a Level I Pediatric Trauma Center
If transport time exceeds 25 minutes transport to the closest Trauma Center

Anticoagulants and bleeding disorders
Patients with head injury are at high risk for rapid deterioration

Burns
Without other traumatic mechanism: triage to closest comprehensive ED
With traumatic mechanism: triage to trauma center

Pregnancy > 20 weeks should be preferentially transported to a Level 1 Trauma Center with obstetric capabilities
EMS provider or base station judgment

YES ➔ Transport to the closest appropriate hospital OR Trauma Center AFTER consultation with Medical Control

NO ➔ Transport to closest comprehensive Emergency Department and contact Medical Control
REGION 11 TRAUMA TRIAGE
ADULT AND PEDIATRICS
(Peds = less than 16 years old)

I. Level I Trauma Centers:

Advocate Christ Medical Center
Advocate Illinois Masonic Medical Center
Advocate Lutheran General Hospital
Ascension Saint Francis Hospital
John H. Stroger Hospital of Cook County
Loyola University Medical Center
Mount Sinai Hospital
Northwestern Memorial Hospital
UChicago Medicine

II. Pediatric Level I Trauma Centers:

Ann & Robert H. Lurie Children’s Hospital of Chicago
John H. Stroger Hospital of Cook County
UChicago Medicine - Comer Children’s Hospital

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