

TRAUMA ACTIVATION CRITERIA

TRAUMA ALERT: LEVEL 1 ACTIVATION				
Full trauma team activation. Call operator. Operator pages overhead and intitates mass communication. Unit clerk calls surgeon on call. Trauma Surgeon (TRS) arrival 30min from activation				
HIGH RISK FOR SEVERE INJURY: Altered Mental Status & Vital signs / Injury Pattern				
	Adult	Pediatric ≤ 15yo	• Penetrating injuries to head, neck, torso,and proximal extremeties (GSW/Stab wounds) • Skull deformity, suspected skull fracture, • Suspected spinal injury w/ new motor or sensory loss • Chest wall instability, deformity, or suspected flail chest • Suspected UNSTABLE pelvic fractures • Suspected fracture of two or more proximal long bones • Crushed, degloved, mangled, or pulseless extremity • Amputation proximal to wrist or ankle • Active bleeding requiring a tourniquet or wound packing w/ continuous pressure • Transfer-in requiring blood transfusion • > 20 weeks pregnant • Emergency Physician discretion	
Airway	• Unable to adequately ventilate • Resp compromise or obstruction • Intubated or assisted ventilation	• Unable to adequately ventilate • Resp compromise or obstruction • Intubated or assisted ventilation		
Breathing	• RR <10 or >29/min • SPO2 ≤ 90% on RA	Signs of respiratory insufficiency • Hypoxia • Accessory muscle use or grunting		
Circulation	• SBP <90 mmgh Age 10-64 • SBP <110 mmgh (MAP <u><65</u>) • HR > SBP	BP low for age • <1yr SBP <60 • 1-9yr SBP <2 x age + 70 • ≥ 10yr SBP <90, HR > SBP		
Disability/ Neuro	• GCS motor score ≤ 5 • GCS ≤ 12 • Unable to follow commands	• AVPU: responsive to pain or unresponsive . GCS ≤ 12 • Unable to follow commands		
TRAUMA ALERT: LEVEL 2 ACTIVATION				
Partial trauma team activation. Call operator. The operator initiates mass communication with demographics. The trauma surgeon, surgical resident, or ACP arrives within 60 min of activation.				
MODERATE RISK FOR SEVERE INJURY: Mechanism of Injury and Provider Judgment				
• Falls: ◦ Adult: ≥ 10ft ◦ Pediatric: <u>>10ft</u> or 2-3x heaight of child ◦ Elderly: fall from height, with significant head injury after ERMD assessment for Neuro Alert • High-energy dissipation or rapid deceleration: ◦ Ejection from motorcycle, ATV, animals, etc. ◦ Striking fixed object w/ momentum ◦ Blast or explosion • High-energy electrical injury, suspicion of hypothermia, drowning, hanging			• High-risk motor vehicle crash (MVC) with ◦ Partial or complete ejection ◦ Significant intrusion (Including roof): > 12 inches occupant site OR >18 inches any site OR need for extrication d/t entrapment ◦ Death in passanger compartment ◦ Child (age 0-9) unrestrained or in unsecured child safety seat • Pedestrian struck/cyclist thrown/ Micro-mobility (E-bike, scooter) injury, run over, or w/ significant (>20mph) impact • Motorcycle (MCC) or Micro-mobility (E-bike, scooter) crash >20mph • Blunt abdominal trauma: abdomen firm/distended/+seatbelt sign	
SPECIAL CONSIDERATION				
• Age ≤ 15yo/ ≥ 65yo *Cardiac and/or Resp disease Pregnancy *Morbid Obesity *Bleeding disorders / anti-coagulation *Prehospital MD judgment				
TRAUMA ALERT: LEVEL 3 ACTIVATION / TRAUMA CONSULT:				
To be completed within 12hrs of pt arrival				
Place an order for a trauma/surgical sub-specialty consult. Document: time of the call, discussion time, and arrival time.				
• Any patient that falls outside level I and Level 2 criteria: activate Level 3 Consult • Ground level fall (GLF) w/ the following: ◦ >65 years old ◦ Anticoagulated ◦ No other indications for a level 1 or level 2 activation • Patients who have had a previous workup at another facility and are transferring in • Patients who may have met trauma alert criteria but have been triaged >24 hours from injury and/or prior inpatient hospitalization				

RESPONSE REQUIREMENT FOR PATIENTS WITH A TRAUMATIC MECHANISM OF INJURY

TRAUMA ALERT: Level 1	Emergency Department Attending - immediate Emergency Department Nurse - Immediate Surgical Attending on call - <u><30</u> minutes Surgical ACP - immediate Anesthesia Attending on call at the discretion of the surgical resident and surgical attending Respiratory Therapist - immediate Radiologist Technologist - immediate OR and Blood Bank - notified Logistics - immediate Security - immediate Pharmacy - immediate
TRAUMA ALERT: Level 2	Emergency Department Attending - immediate Emergency Department Nurse - Immediate Surgical Attending on call - <u>≤ 8</u> hours Surgical ACP - <u>≤ 60</u> minutes Anesthesia Attending on call at the discretion of the surgical resident and surgical attending Respiratory Therapist - immediate Radiologist Technologist - immediate OR and Blood Bank - notified Logistics - immediate Security - immediate Pharmacy - immediate
TRAUMA ALERT: Level 3 / Trauma Consult	Surgical ACP - present within 60 minutes