



# Let's Talk Triage

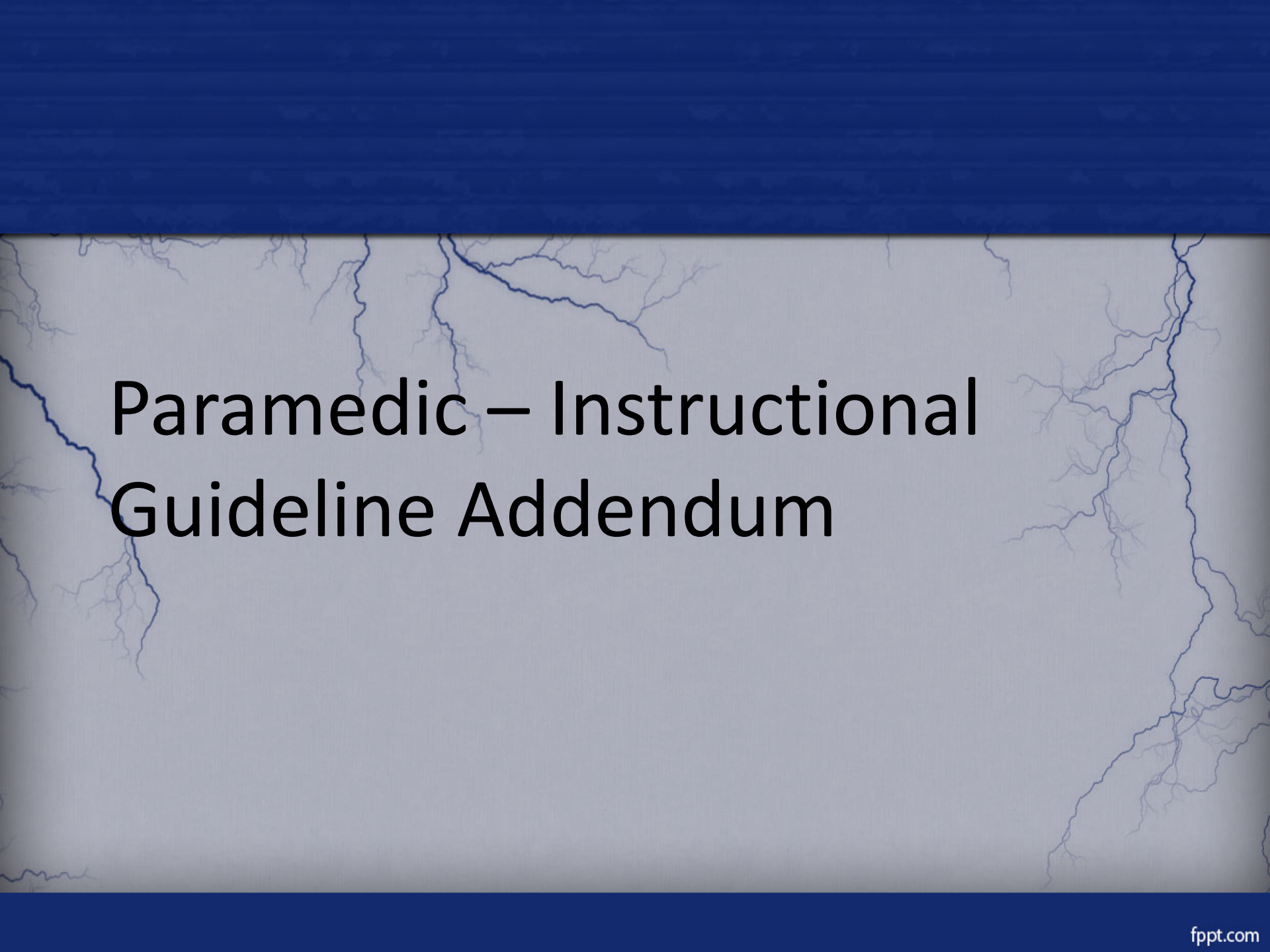
Guy Peifer

The background of the slide features a dark blue horizontal bar at the top and bottom. The central area is a light blue-grey gradient with a pattern of thin, branching lines resembling lightning bolts or a network diagram. The text is centered in this area.

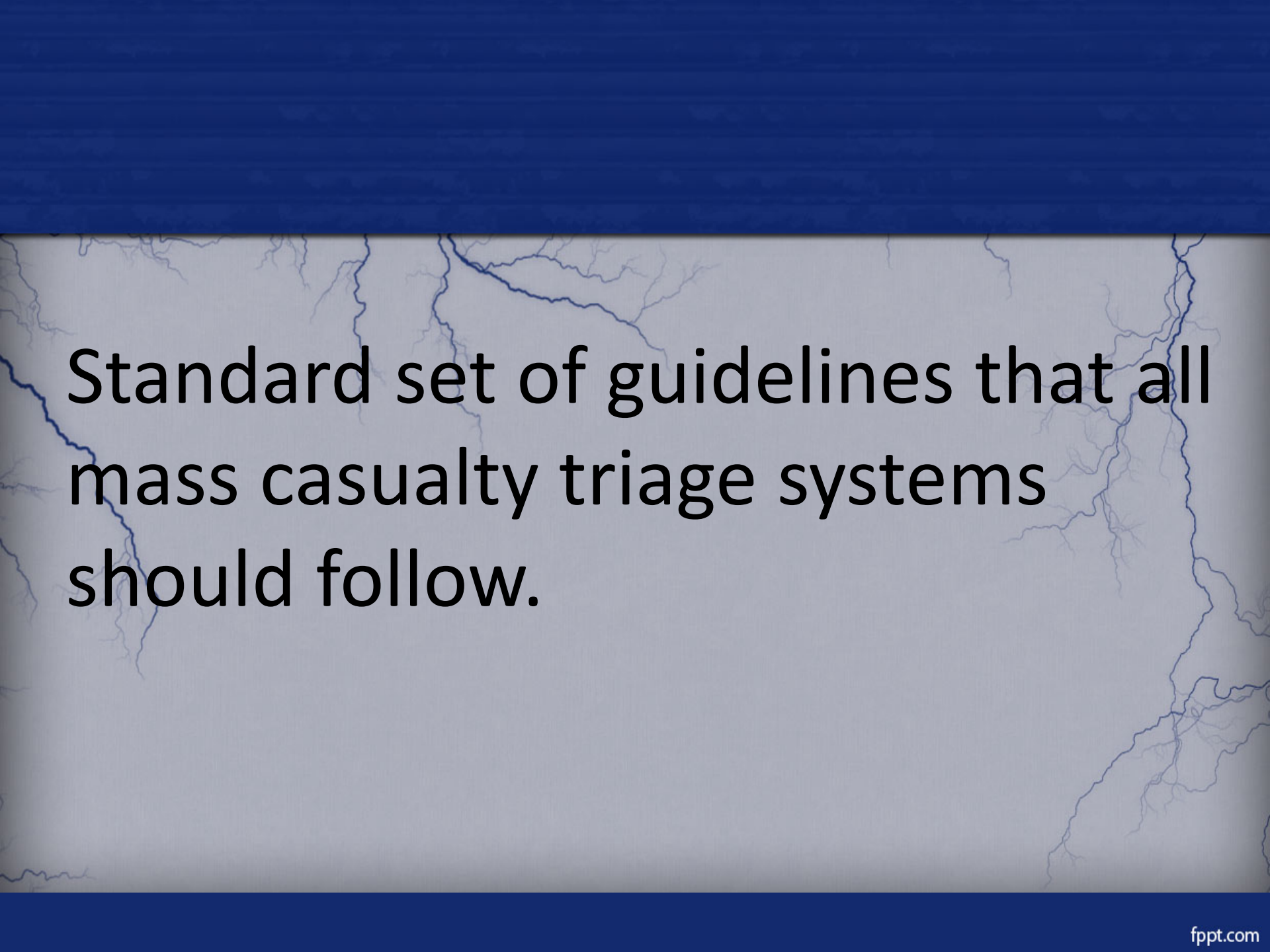
# Model Uniform Core Criteria for Mass Casualty Incident Triage

A map of the United States with a blue river network overlay. The text "MUCC" is centered on the map.

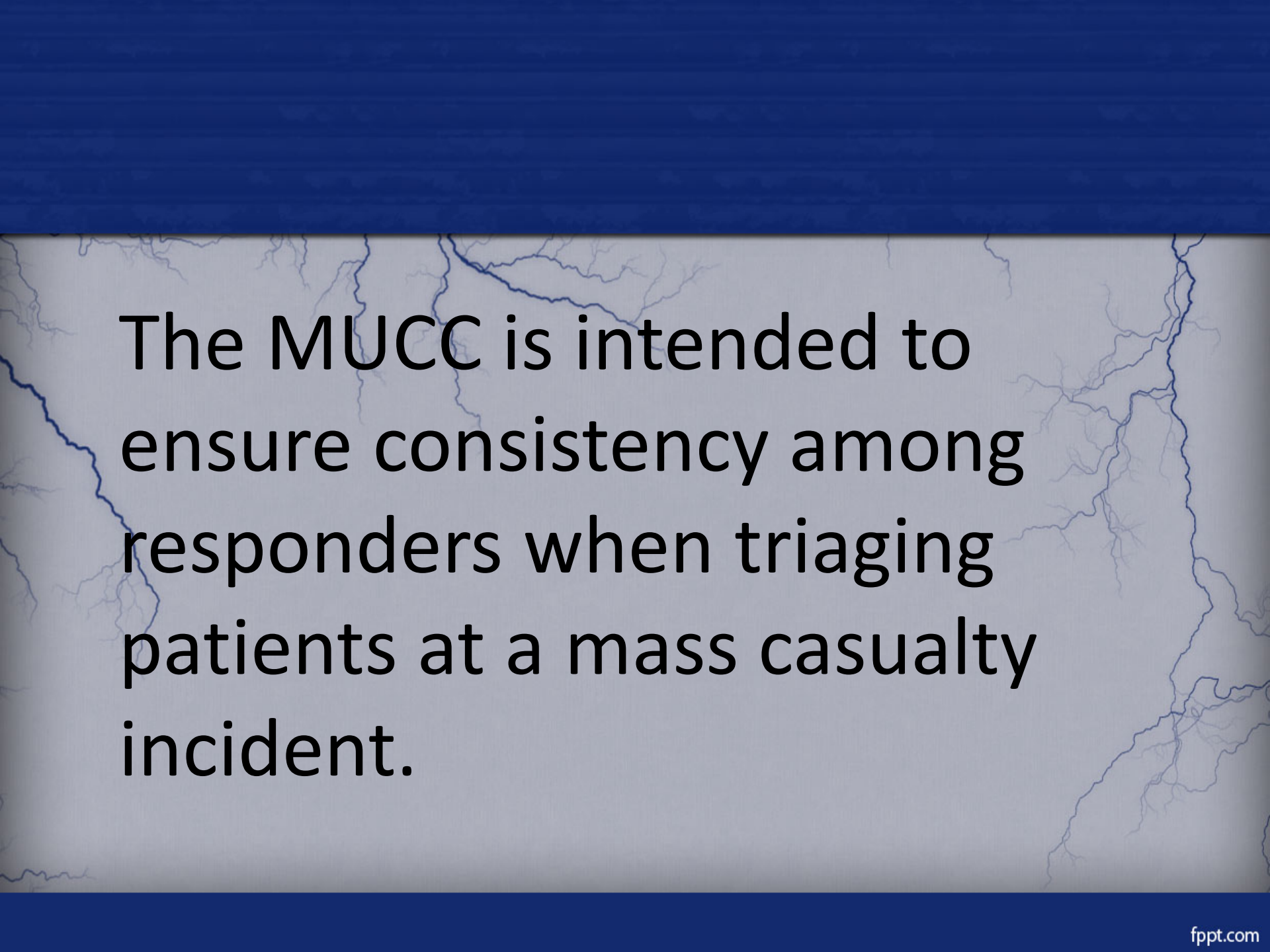
**MUCC**

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# Paramedic – Instructional Guideline Addendum

A background image featuring a dark blue horizontal bar at the top and bottom. The central area is a light blue-grey gradient with a pattern of thin, branching lines resembling lightning bolts or a map's river network.

Standard set of guidelines that all mass casualty triage systems should follow.

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The MUCC is intended to ensure consistency among responders when triaging patients at a mass casualty incident.

# SALT Triage

Sort, Assess, Lifesaving  
Interventions, Treatment /  
Transport

# Objectives

- Understand the SALT mass casualty triage method



Special

# FOCUS

## SALT Mass Casualty Triage

*Concept Endorsed by the American College of Emergency Physicians, American College of Surgeons Committee on Trauma, American Trauma Society, National Association of EMS Physicians, National Disaster Life Support Education Consortium, and State and Territorial Injury Prevention Directors Association*

**I**t is recognized that there is a need for a national standard for mass casualty triage, because disasters frequently cross jurisdictional lines involving responders from multiple agencies. After reviewing all of the existing triage systems, a consensus review panel found that there was insufficient evidence to support 1 system over the others. Using aspects of the existing systems and based on best evidence, SALT

be asked to walk to a designated area and should be assigned last priority for individual assessment. Those who remain should be asked to wave (ie, follow a command) or be observed for purposeful movement. Those who do not wave (ie, are still) and those with obvious life-threatening conditions should be assessed first because they are the most likely to need lifesaving interventions (Fig. 1).

# What is Triage?

- French verb “trier” meaning “to sort”
- Assign priority when resources limited
  - Someone has to go last
- Greatest good for greatest number

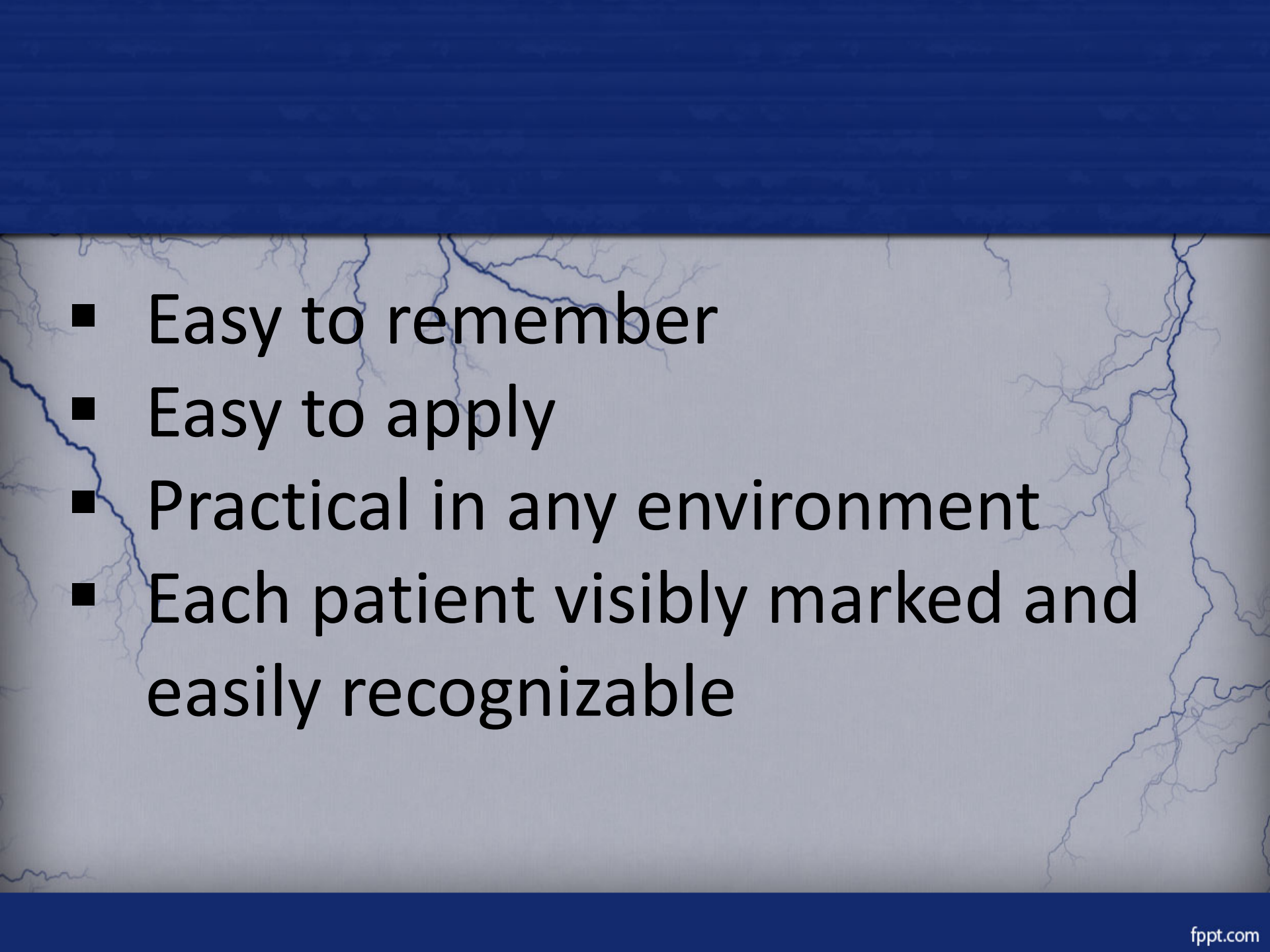


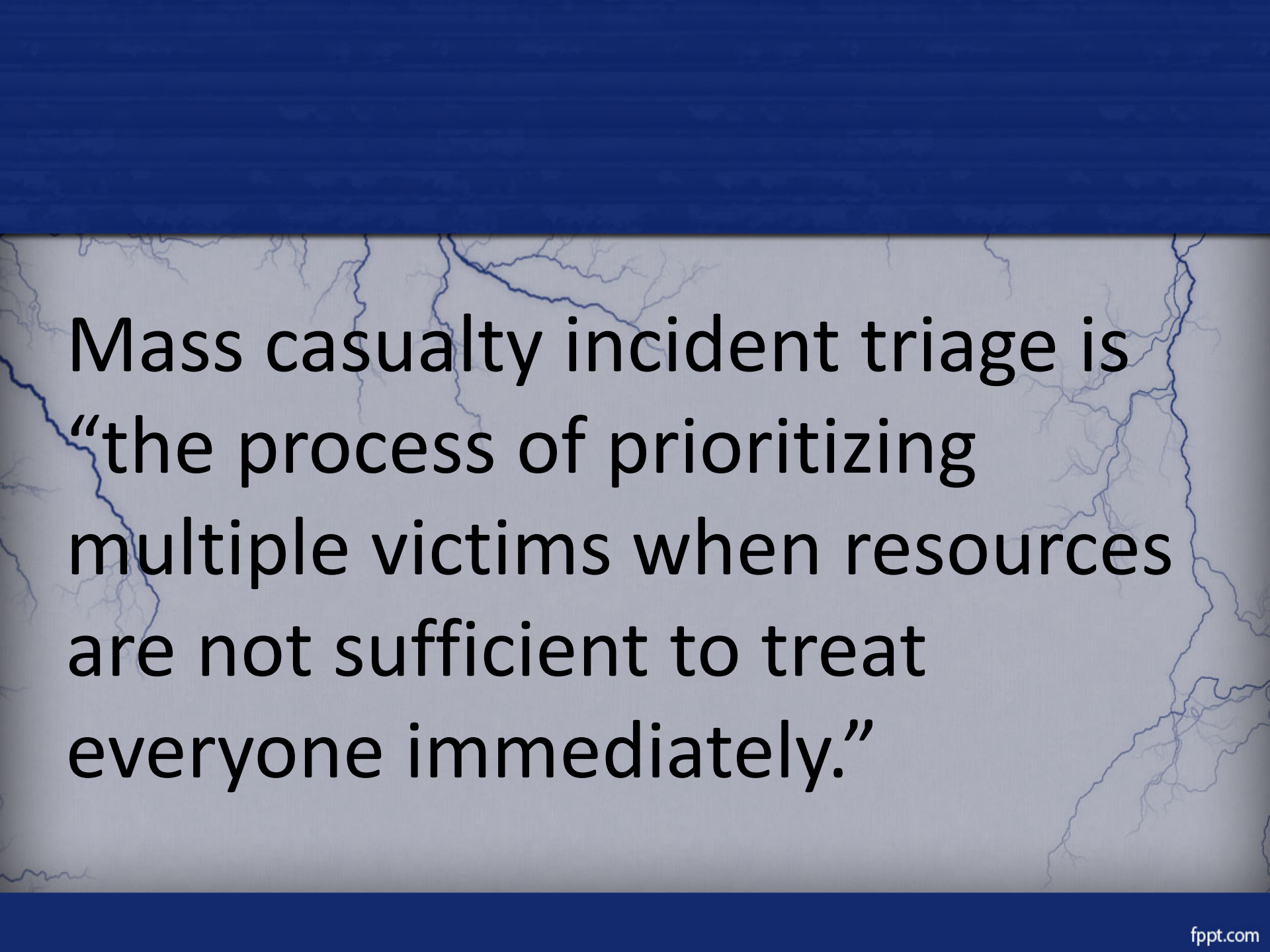
Source: DoD Photo Library, Public Domain



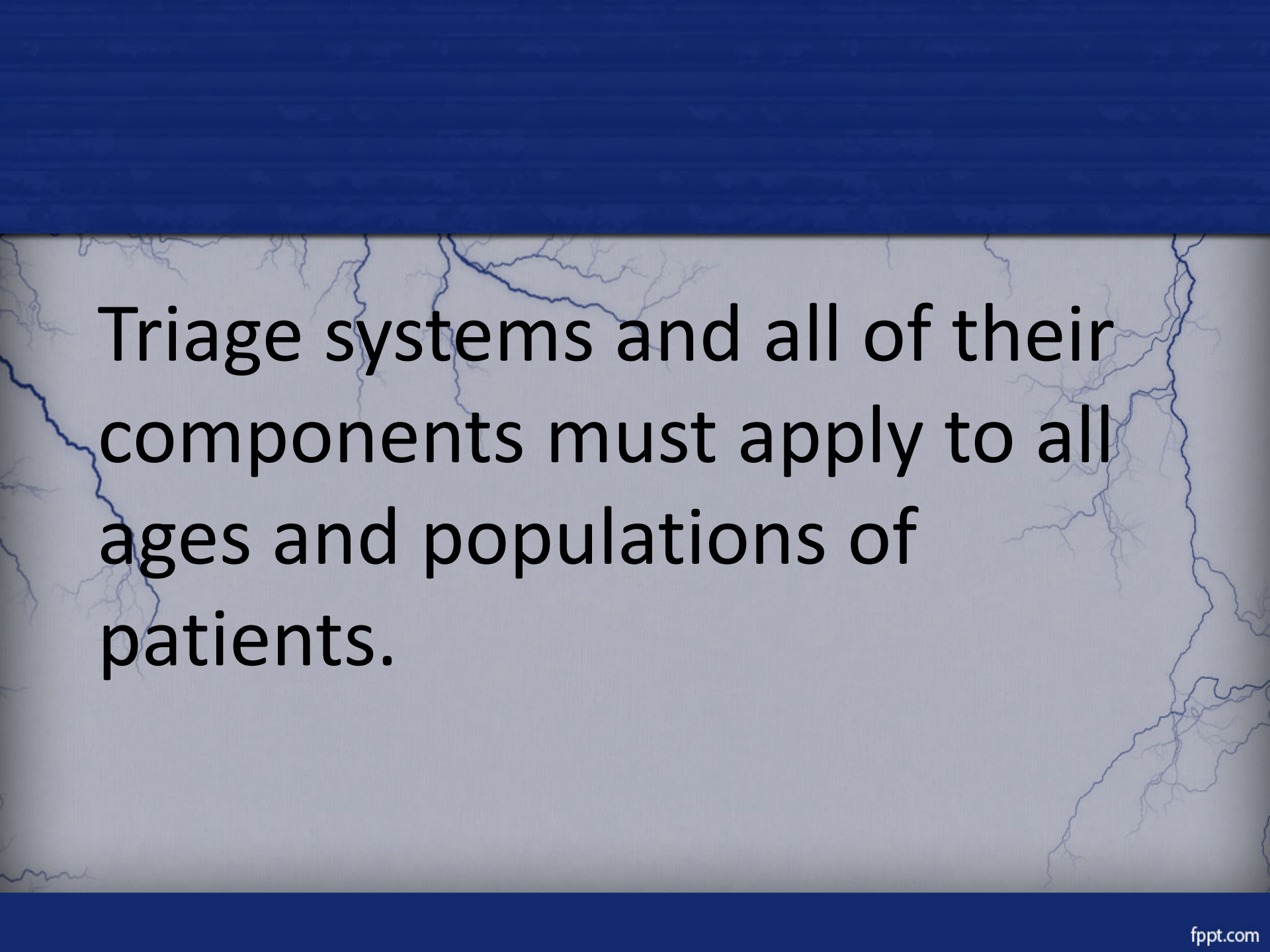




- 
- Easy to remember
  - Easy to apply
  - Practical in any environment
  - Each patient visibly marked and easily recognizable

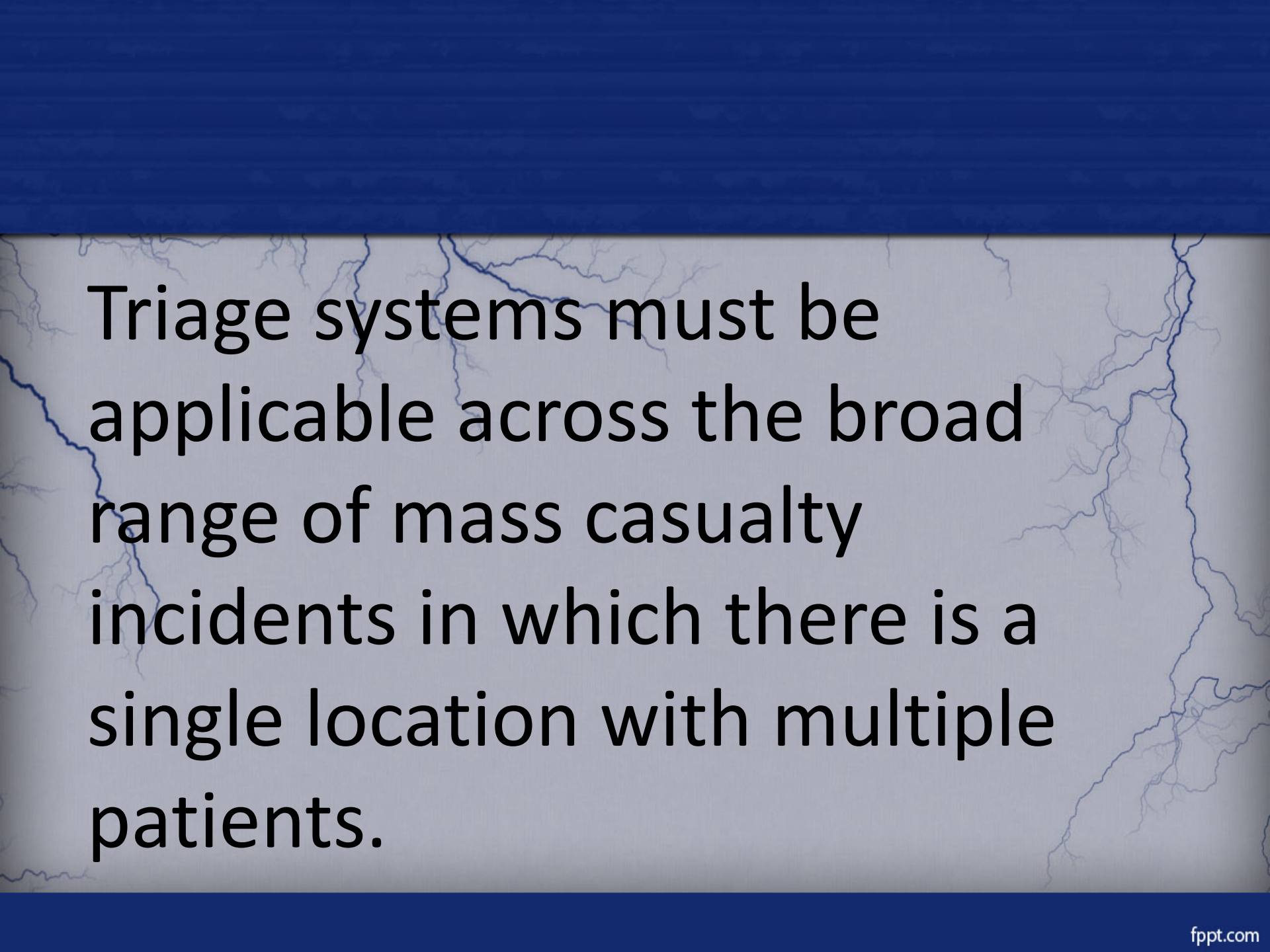
The background of the slide features a dark blue horizontal bar at the top and bottom. The central area is a light blue-grey gradient with a pattern of thin, branching white lines resembling lightning or a network. A large, prominent white lightning bolt strikes from the top right towards the bottom left, crossing behind the text.

Mass casualty incident triage is  
“the process of prioritizing  
multiple victims when resources  
are not sufficient to treat  
everyone immediately.”

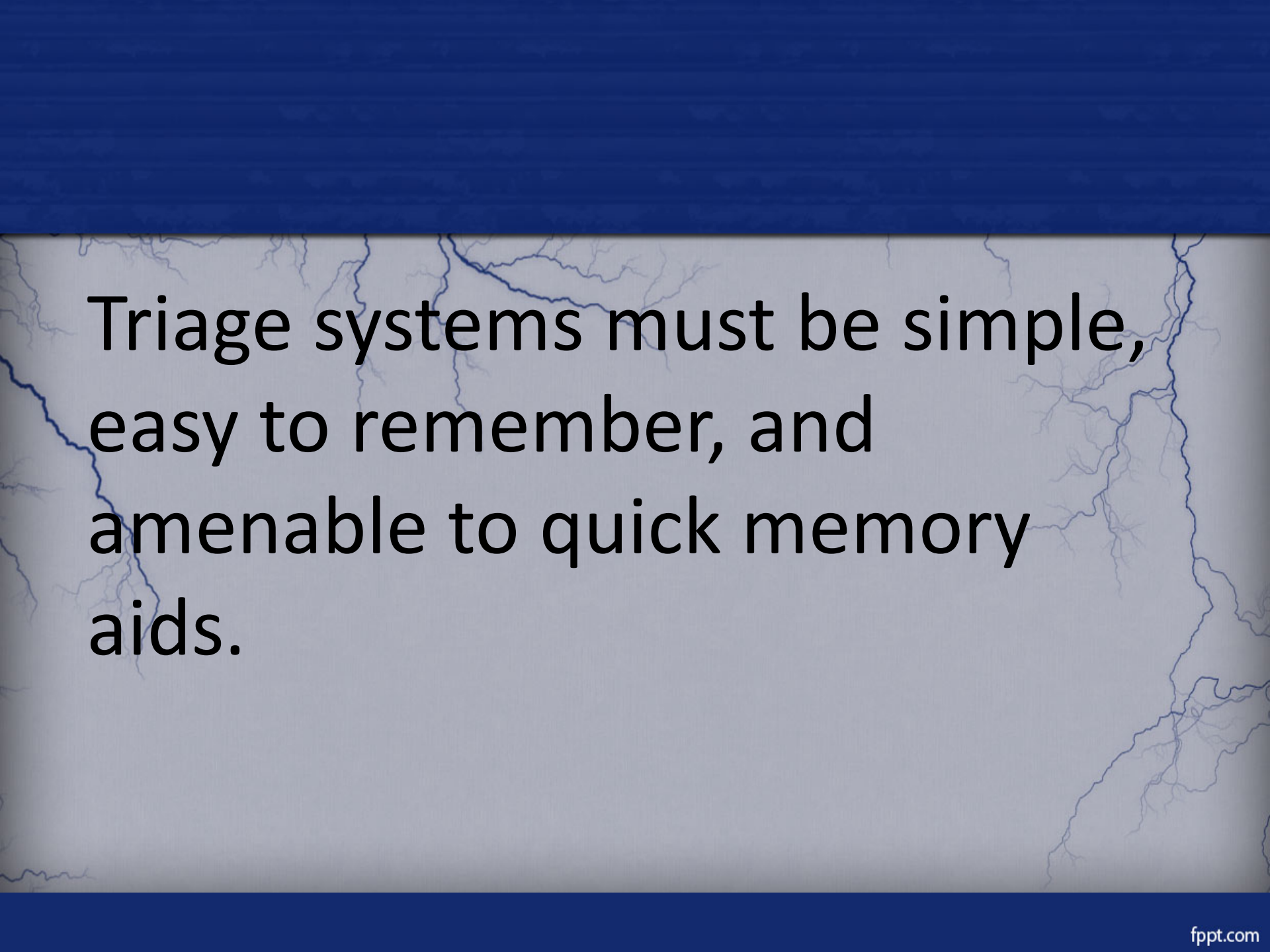
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Triage systems and all of their components must apply to all ages and populations of patients.

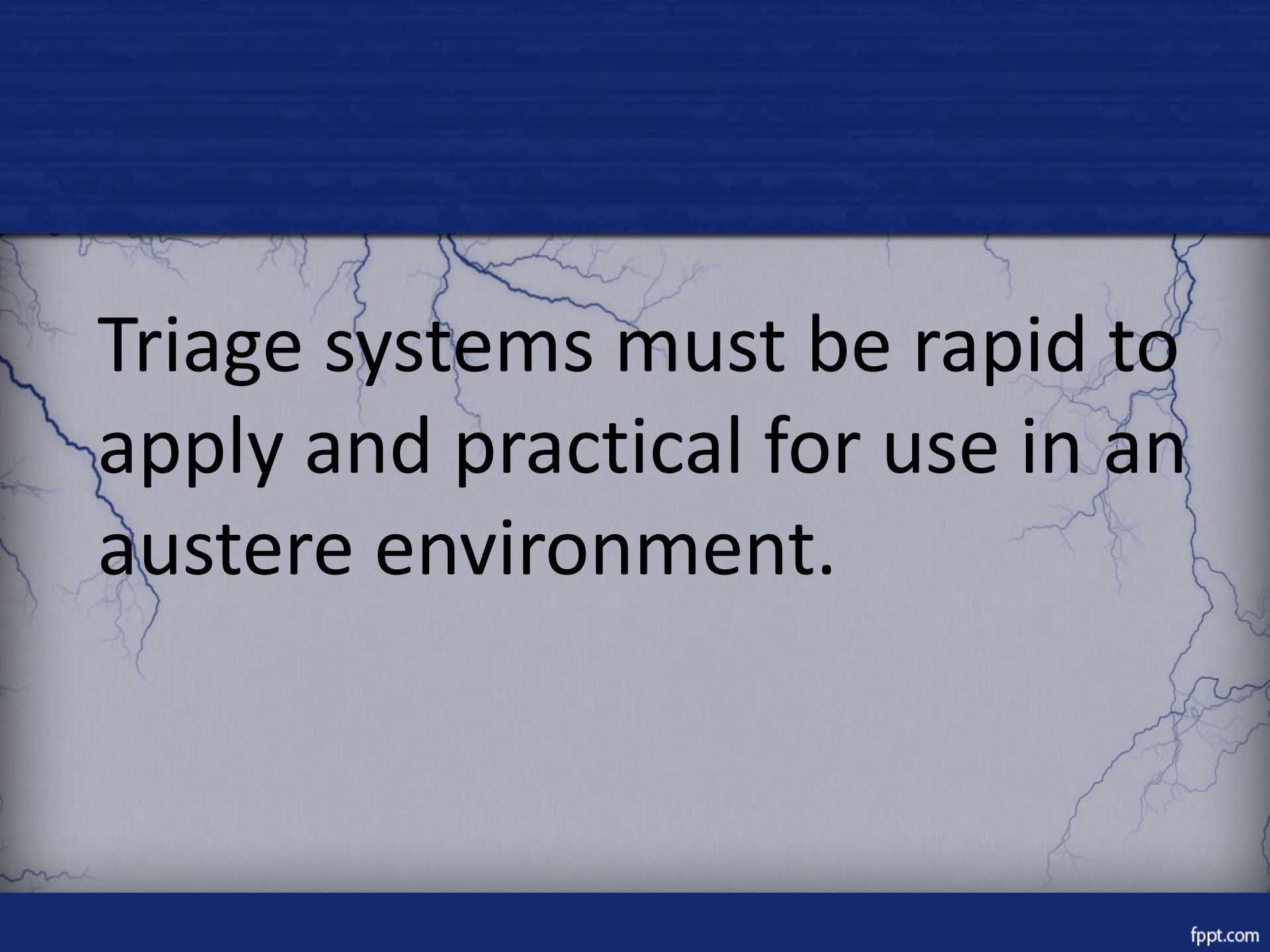


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Triage systems must be applicable across the broad range of mass casualty incidents in which there is a single location with multiple patients.

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Triage systems must be simple,  
easy to remember, and  
amenable to quick memory  
aids.

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Triage systems must be rapid to apply and practical for use in an austere environment.

# History of Triage

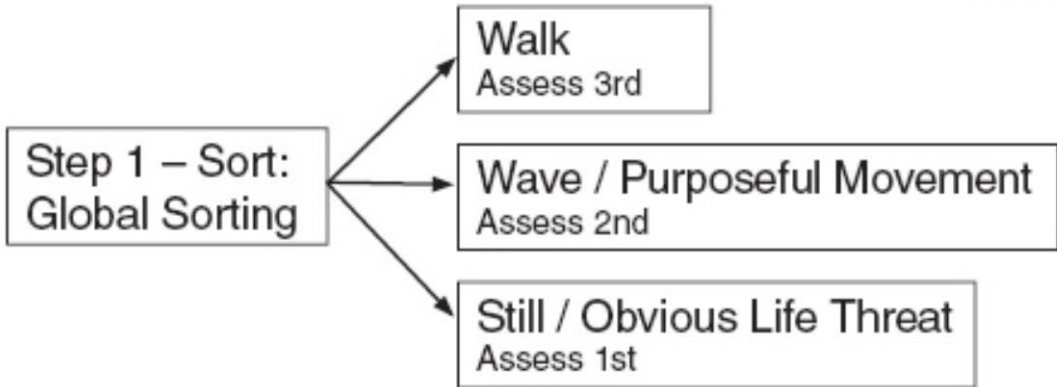
- Concept: Dominique Jean Larrey
  - Surgeon-in-chief Napoleon's Army
- 200 years later...
  - Dozens of systems
  - Many types of triage labels/tools
  - No standardization for mass casualty triage in United States



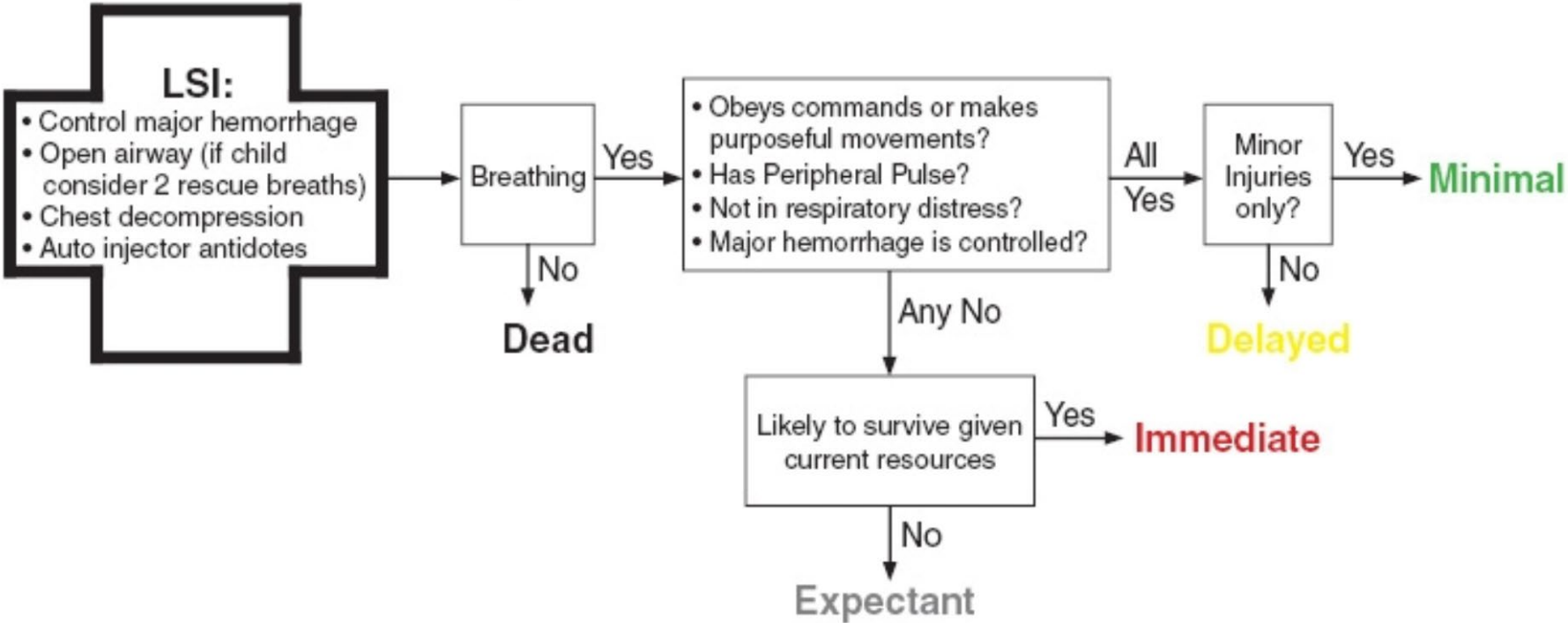
# Development of SALT

- Part of CDC sponsored project
- Develop national standard for mass casualty triage
- Based upon best evidence

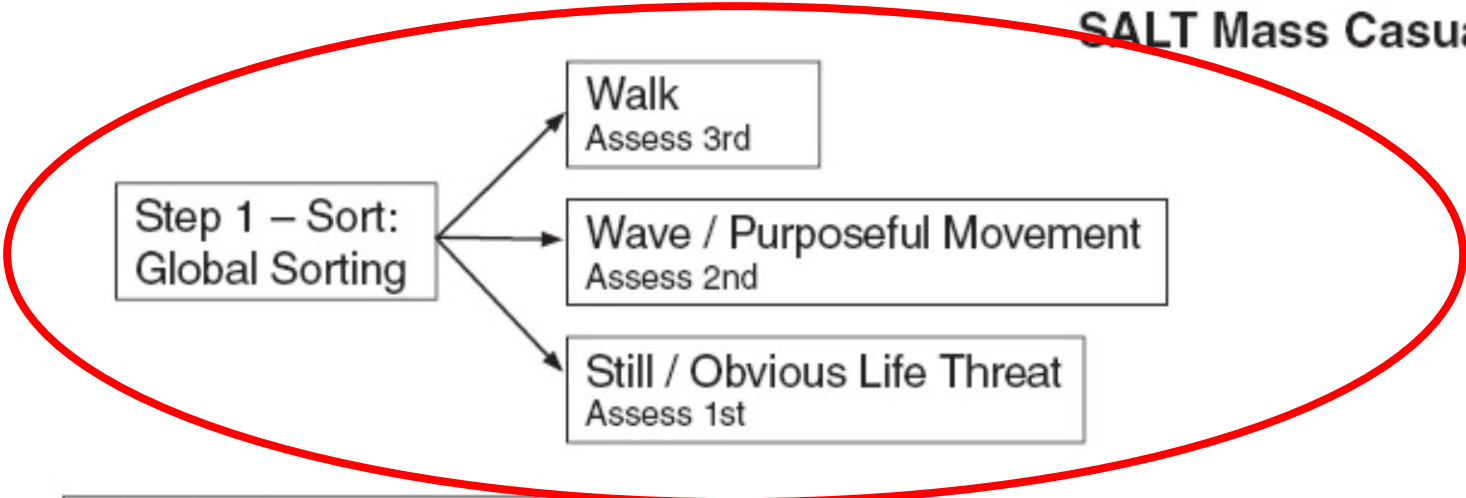
# SALT Mass Casualty Triage



## Step 2 – Assess: Individual Assessment



# SALT Mass Casualty Triage



## Step 2 – Assess: Individual Assessment

**LSI:**

- Control major hemorrhage
- Open airway (if child consider 2 rescue breaths)
- Chest decompression
- Auto injector antidotes

Breathing

Yes

No

Dead

- Obeys commands or makes purposeful movements?
- Has Peripheral Pulse?
- Not in respiratory distress?
- Major hemorrhage is controlled?

Any No

Likely to survive given current resources

Expectant

All Yes

Minor Injuries only?

Yes

No

Delayed

Minimal

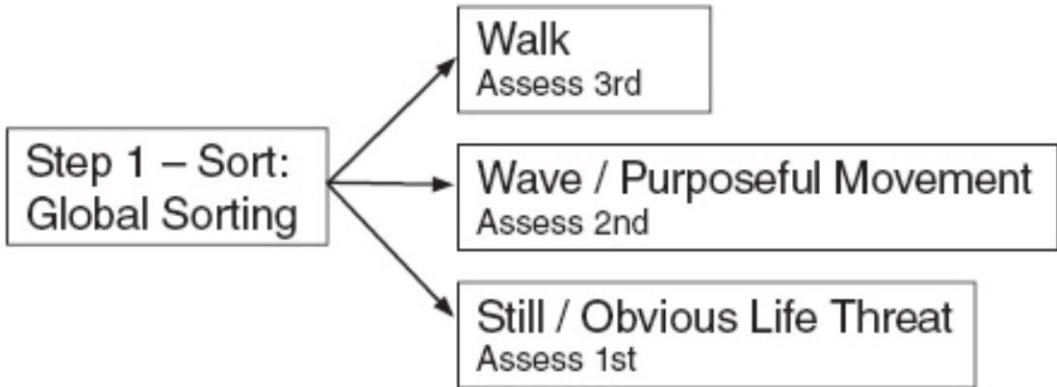
Immediate

# Global Sorting Result

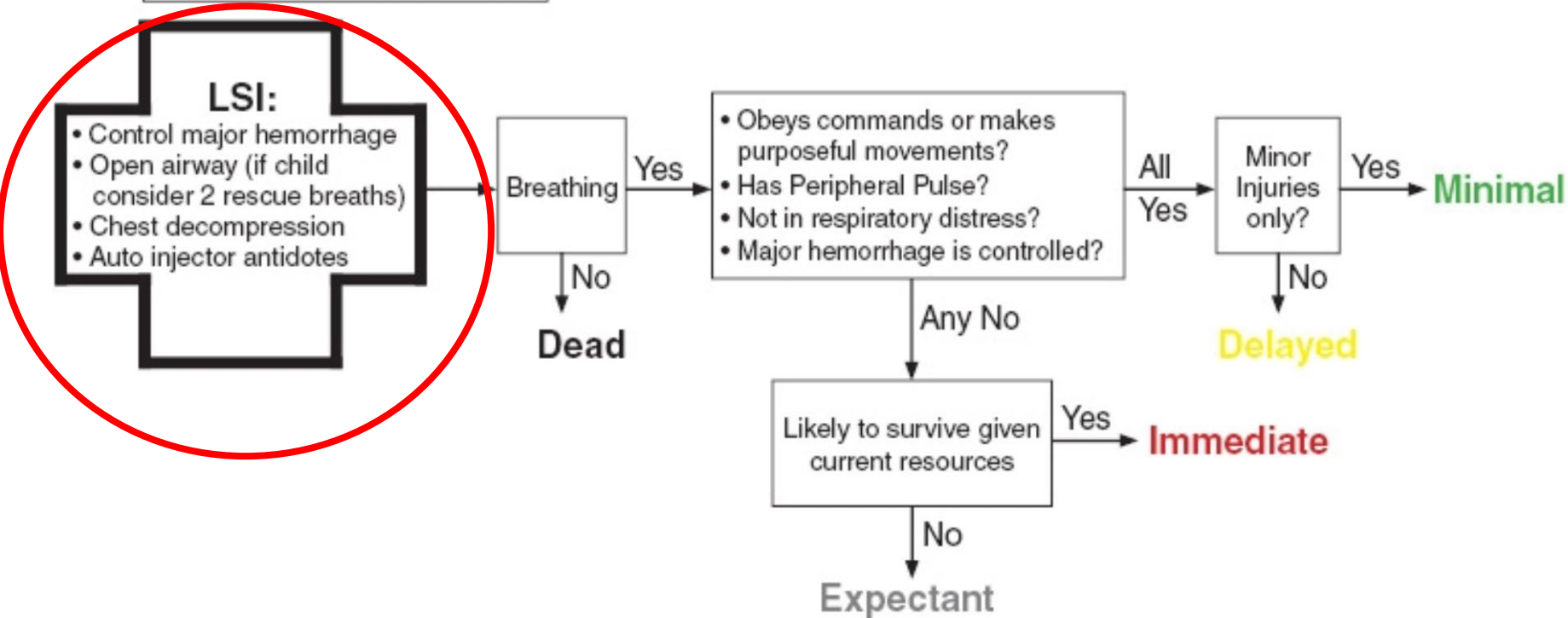
- Casualties are now prioritized for individual assessment
  - Priority 1: Still, and those with obvious life threat
  - Priority 2: Waving/purposeful movements
  - Priority 3: Walking



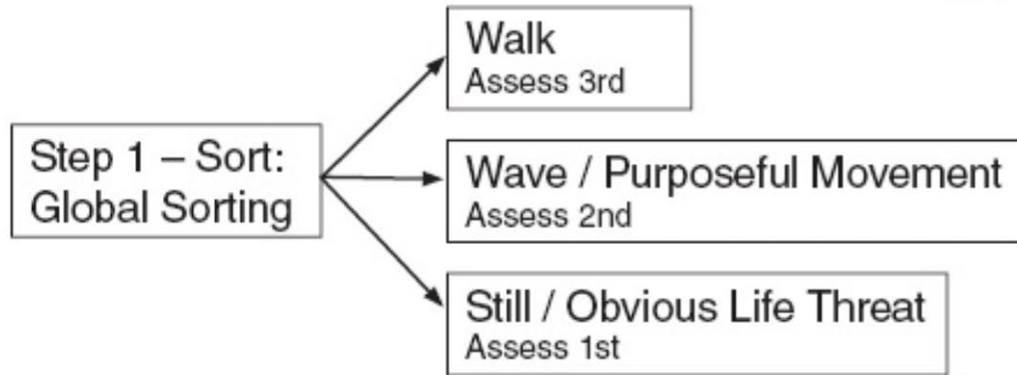
# SALT Mass Casualty Triage



## Step 2 – Assess: Individual Assessment



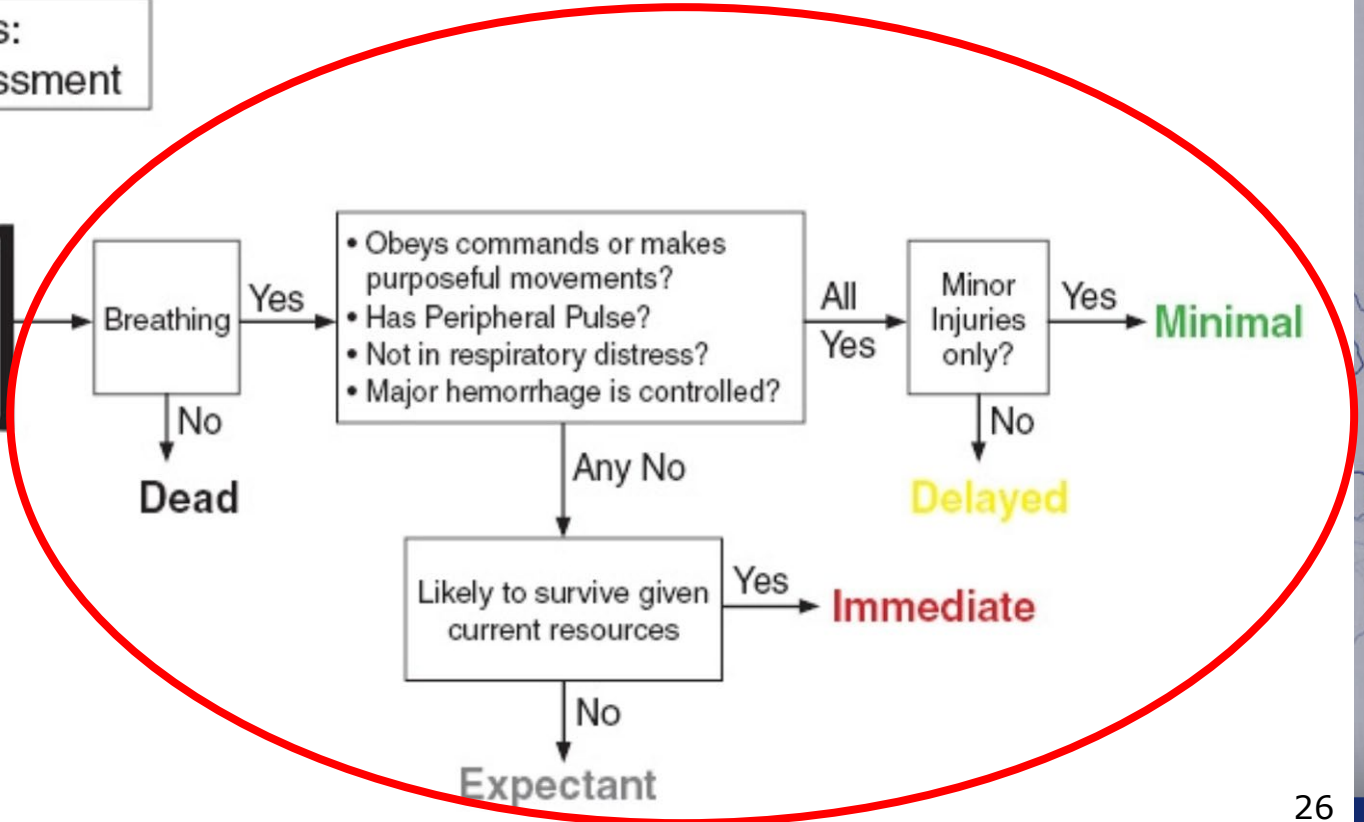
# SALT Mass Casualty Triage



**Step 2 – Assess: Individual Assessment**

**LSI:**

- Control major hemorrhage
- Open airway (if child consider 2 rescue breaths)
- Chest decompression
- Auto injector antidotes



# Dead

- Patient is not breathing after opening airway
  - In Children, consider giving two rescue breaths
  - If still not breathing must tag as dead
- Tag dead patients to prevent re-triage
- Do not move
  - Except to obtain access to live patients
  - Avoid destruction of evidence
- If breathing conduct the next assessment

# Immediate

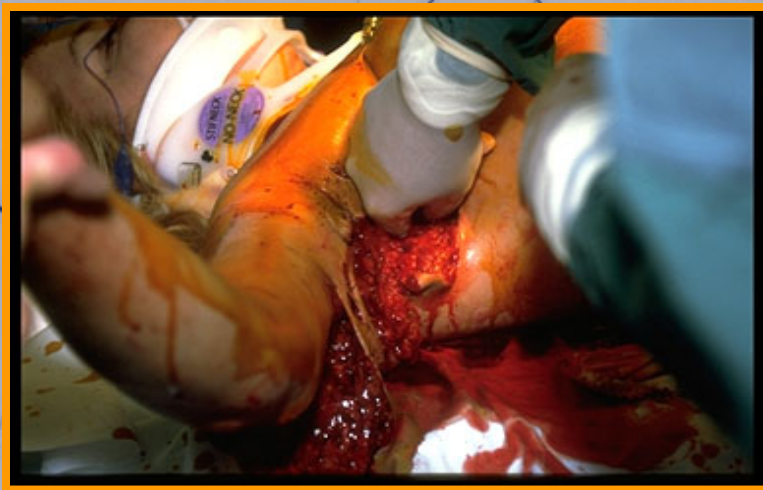


Photo Source: [www.swsahs.nsw.gov.au](http://www.swsahs.nsw.gov.au) Public Domain

- Serious injuries
- Immediately life threatening problems
- High potential for survival
- Examples
  - Tension pneumothorax
  - Exposure to nerve agent
    - Severe shortness of breath or seizures

# Immediate

- **No** to **any** of the following
  - Has a peripheral pulse?
  - Not in respiratory distress?
  - Hemorrhage is controlled?
  - Follows commands or makes purposeful movements?
- **Likely** to survive given available resources

# Expectant

- **No to any** of the following

- Has a peripheral pulse?

- Not in respiratory distress?

- Hemorrhage is controlled?

- Follows commands or makes purposeful movements?

- **Unlikely** to survive given available resources

# Expectant

- DOES NOT MEAN DEAD!
- Important for preservation of resources
  - Should receive comfort care or resuscitation when resources are available
- Serious injuries
  - Very poor survivability even with maximal care in hospital or pre-hospital setting
- Examples
  - 90% body surface area burn
  - Multiple trauma with exposed brain matter

# Delayed

## ■ Examples

- Long bone fractures
- 40% BSA exposure to Mustard gas

## ■ Serious injuries

- Require care but management can be delayed without increasing morbidity or mortality



Photo Source: Phillip L. Coule, MD



# Delayed

- Yes to all of the following

- Has a peripheral pulse?

- Not in respiratory distress?

- Hemorrhage is controlled?

- Follows commands or makes purposeful movements?

- Injuries are **not** Minor and require care

# Minimal

- **Yes to all of the following**

- Has a peripheral pulse?

- Not in respiratory distress?

- Hemorrhage is controlled?

- Follows commands or makes purposeful movements?

- **Injuries are Minor**

# Minimal

- Injuries require minor care or no care
- Examples
  - Abrasions
  - Minor lacerations
  - Nerve agent exposure with mild runny nose



Photo source: Phillip L. Coule, MD

# After Patients are Categorized

- Prioritization process is dynamic
  - Patient conditions change
  - Correct misses
  - Resources change

# Case Study

## ■ Multiple GSW at Local Sporting Event

You and partner respond (one ambulance)

8 casualties

The scene is safe and additional assistance has been requested

What do you do first:

# Initial Sorting of Patients

■ Walk

□ 2 patients

■ Wave

□ 3 patients

■ Still

□ 3 patients

# Still

## Immediate

### ■ 29 yr male

- GSW left chest, radial pulse present, severe respiratory distress

## Expectant

### ■ 8 yr female

- GSW head (through and through), visible brain matter, respiratory rate of 4, radial pulse present

## Dead

### ■ 50 yr male

- GSW to abdomen, chest, and extremity, no movement or breathing

# Waving

- 14 year male

**DELAYED\*\*\*after tourniquet**

- GSW right upper extremity, active massive hemorrhage, good pulses

- 65 year male

**IMMEDIATE**

- severe chest pain, diaphoretic, obvious respiratory distress, no obvious GSW

- 22 year female

**DELAYED**

- GSW right lower extremity, good pulses, no active bleeding



# Walked

## Minimal

■ 29 yr male

Superficial GSW in the skin of left upper extremity

## Delayed

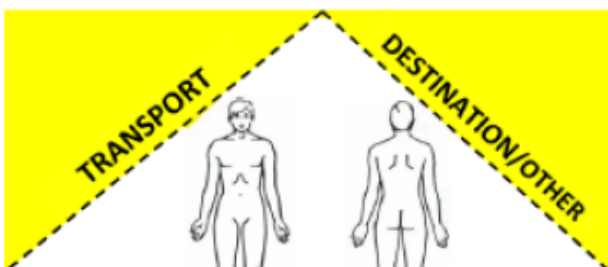
■ 37 yr male

GSW left hand. Exposed muscle, tendon and bone fragments, peripheral pulse present

# What next?

- Another ambulance arrives and transports 2 of your immediate patients
- Your partner is providing care to the other immediate patient
  - What do you do next?
    - Re-assess

# FRONT



Notes

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Destination

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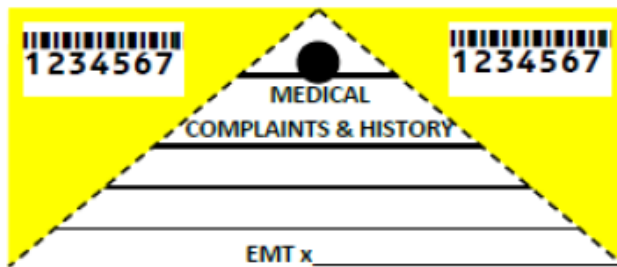
Major Injuries

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Time	BP	Pulse	Resp.	Responsiveness
				A V P U
				A V P U
				A V P U

Not Breathing	<b>DEAD</b>
Not likely to survive	<b>EXPECTANT</b>
Likely to survive given current resources	<b>IMMEDIATE</b>
Obeyes commands or makes purposeful movements AND Has peripheral pulse AND Not in respiratory distress AND Major hemorrhage controlled	<b>DELAYED</b>
Minor injuries only	<b>MINIMAL</b>

# BACK



EMT x

Time : Date / /

Male  Female Age Weight

TIME	INTERVENTION

Name

---

Address

---

City State

---

Phone

---

800-425-5397 mettag.com MT-501



<b>DEAD</b>	1234567
<b>EXPECTANT</b>	1234567
<b>IMMEDIATE</b>	1234567
<b>DELAYED</b>	1234567
<b>MINIMAL</b>	1234567

# Summary

- SALT Triage

- Global Sort

- Individual Assessment

- Life Saving interventions

- Assign Category

# SALT Triage

**Step 1 - Sort:  
Global Sorting**

- Walk (Assess 3<sup>rd</sup>)
- Wave/Purposeful Movement (Assess 2<sup>nd</sup>)
- Still/Obvious Life Threat (Assess 1<sup>st</sup>)

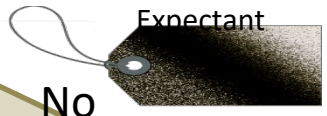
**Step 2 – Assess: Individual Assessment**

### Lifesaving Interventions:

- Control major hemorrhage
- Open airway (if child consider 2 rescue breaths)
- Chest decompression

**Step 3 – Treatment and/or Transport**

Breathing



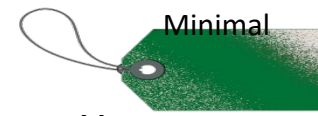
No

Yes

- Obeys commands or makes purposeful movements?
- Has peripheral pulse?
- Not in respiratory distress?
- Major hemorrhage is controlled?

All  
Yes

Minor injuries only?

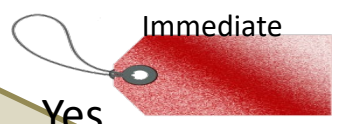


Minimal

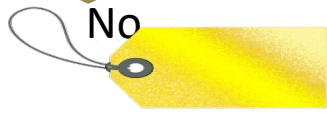
Yes

Any no

Likely to survive given current resources?



Yes



Delayed

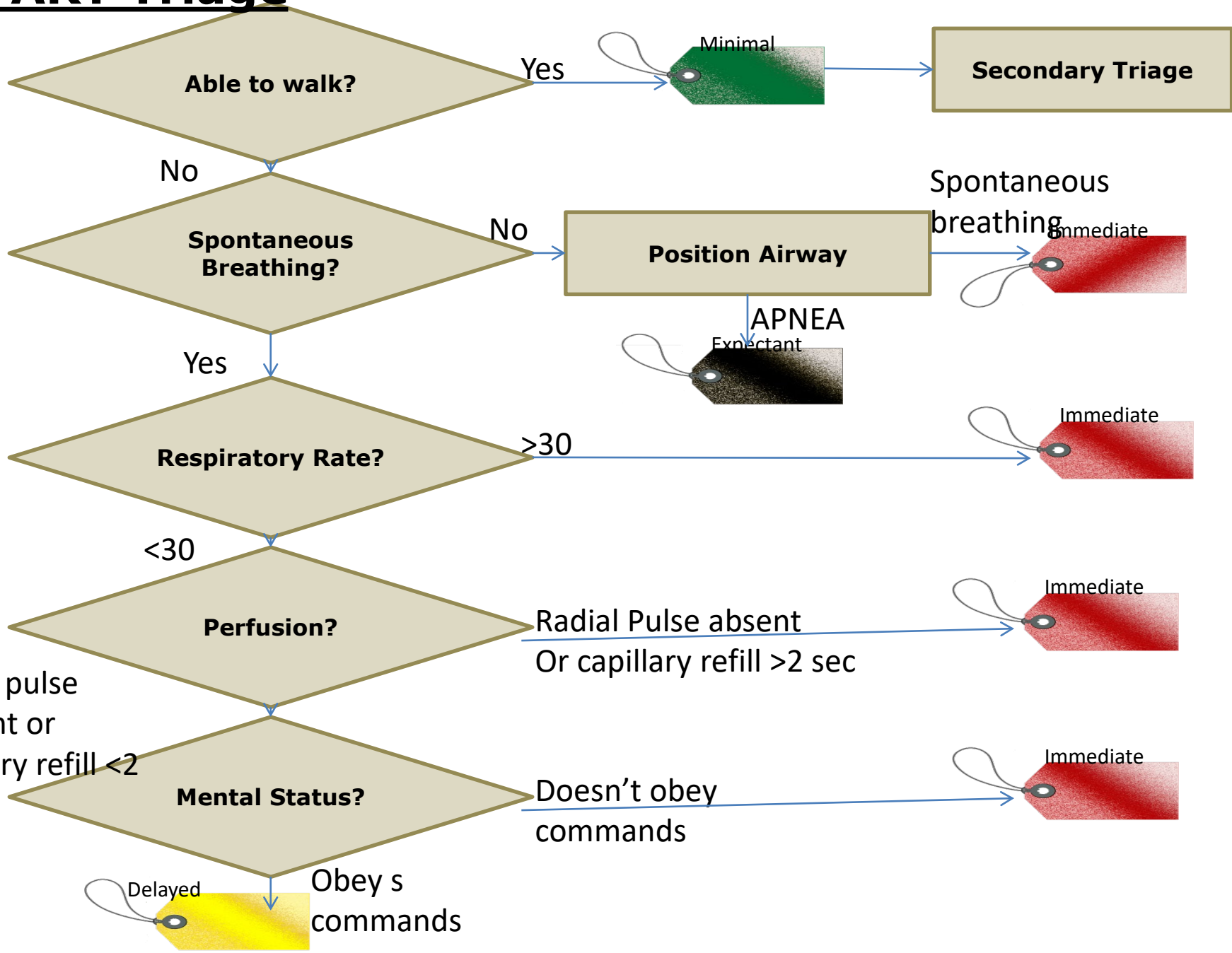
No

No

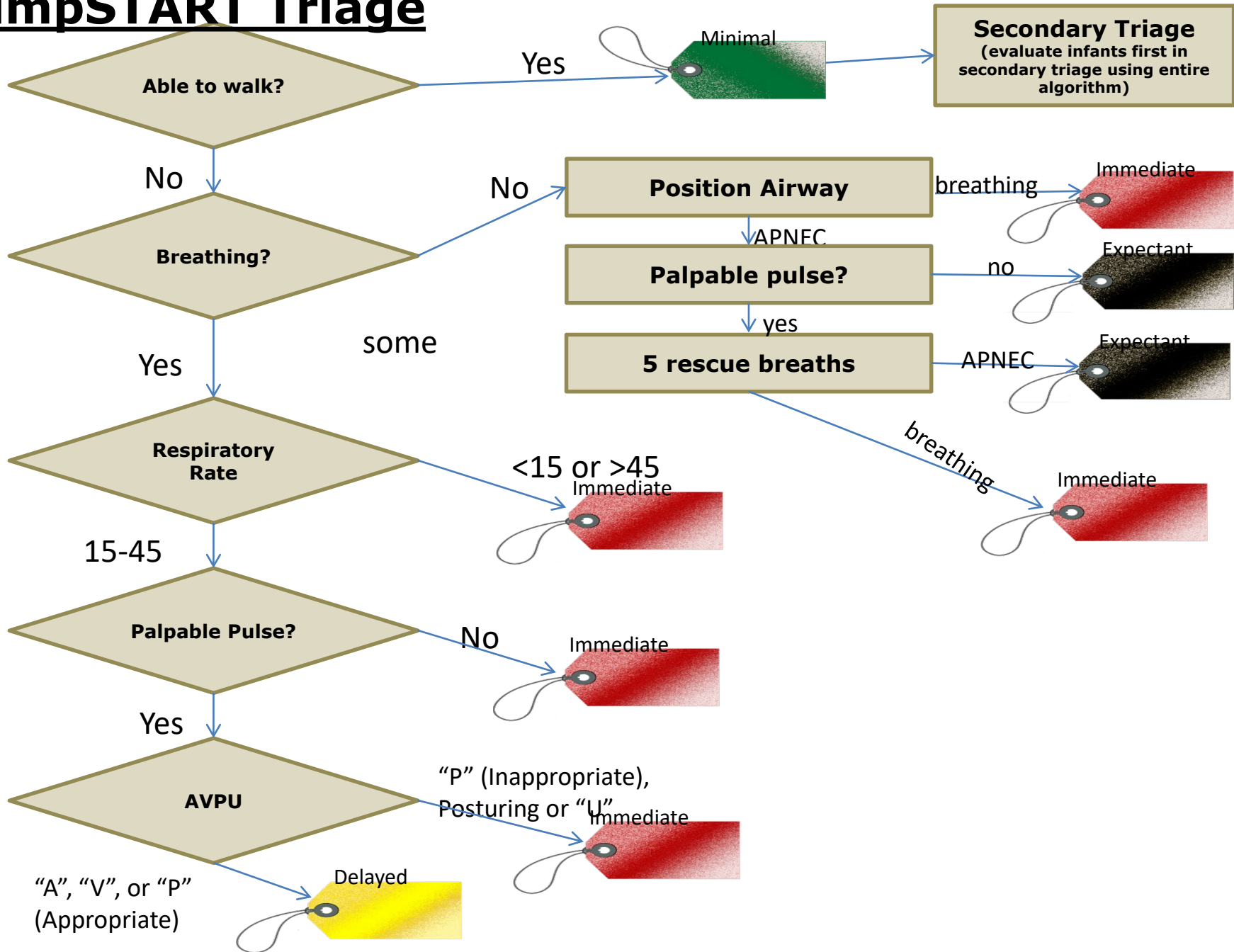


Expectant

# START Triage



# JumpSTART Triage



# Questions?

## SALT Mass Casualty Triage

