

Mastering Trauma Triage Tactics

IMMEDIATE	DELAYED	MINIMAL
1	2	3

Using START and SALT

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First on Scene ? First in COMMAND !



National Incident Management System
It's the LAW!

Five Tasks... Five Minutes



1. Est Command and Create a Safe Zone
2. Give an arrival report
3. Size Up and Scene Safety
4. Triage and tally
5. Request/Assign Resources/**Transfer Command !**

The Truth about TRIAGE...

- It's a very "un-natural" process for us...
- You work **ALONE**
- You provide care later
- You have "skimpy" resources



We practice essentials of MCI management in a perfect world, but your basic plans must factor in chaos and a need for "fast break" operations !



During MCIs think good BLS NOT ALS !





TRIAGE

Do the greatest good for the greatest number of people !
Efficient use of resources



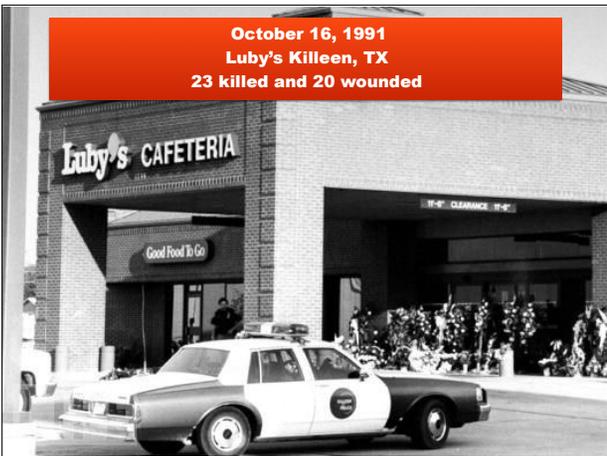
TRIAGE

Sorting of patients into categories
Tough decisions !



THE GOAL ?

GET THE RED OUT !



October 16, 1991
Luby's Killeen, TX
23 killed and 20 wounded

Some uncomfortable facts

No formal triaging occurs at many incidents

Much time wasted on “re-triaging”

Not tagging? Not triaging properly !



What's in your ambulance NOW is better than stuff in the MCI Trailer that's 30-45 minutes away !



There will be CHAOS
Got your trusty “bar code” reader?



Prepare for success!

Have triage tools in every unit
Keep some triage tagging in every "jump kit"
Use tags at small incidents



Prepare for success!



Think "Fast Break"

Have a Triage kit in every unit



Keep some tags in your jump kits



TRIAGE Tagging

IMMEDIATE	DELAYED	MINIMAL
1	2	3

Identify priority
 Can be used to “track the packages”
 International Standard-NATO





United States

My UPS > Shipments > Tracking > Freight > Location > Support > Business Solutions

Track Shipments

Track Packages by Weight: Quantity: Print Shipment View

Tracking Detail: [View Details](#) | [Print](#)

Your package is on line with a scheduled delivery date of 08/17/2009.

Tracking Number: 02 270 9517 08 000 000 3
 Type: Package (0) 00001
 Date: 08/10/2009
 Scheduled Delivery: 08/17/2009
 Shipper To: MAILINGVILLE, MD, US
 Shipper/From To: 08/10/2009
 Product: 00001000
 Weight: 80.00 kg

To view additional tracking information, please log in to My UPS.

Package Progress

Location	Date	Local Time	Description
08/10/2009	08/10/2009	12:48 P.M.	ORIGIN SCAN
CA	08/10/2009	1:10 A.M.	851.00 INFORMATION RECEIVED



How many times will it be done?

1. In wreckage or at site (primary)
2. At treatment or collection area
3. In ambulance
4. In ED



Primary Triage

IMMEDIATE 1	DELAYED 2	MINIMAL 3
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There are **two** types of triage !

Primary triage

Initial size-up and triage mode

Rapid triage and tagging (**no writing**)

Minimal ABC care provided



Secondary Triage

IMMEDIATE 1	DELAYED 2	MINIMAL 3
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Secondary Triage

Done in the **treatment area** after or collecting station

A more **complete assessment**

Tags used for documentation, ID and tracking



Small Incidents

- Primary
- Sticker, tape or tag
- Move from wreck to ambulance
- Secondary triage done in ambulance



Larger Incidents

- Primary at site
- Secondary triage done in treatment
- Or primary in the chute and secondary on the tarps



IMMEDIATE 1	DELAYED 2	MINIMAL 3
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The "Classic" Collection Point



TRIAGE Unit Leader

TRIAGE Unit Leader

1. GET ALL PATIENTS TRIAGED AND TAGGED BY CATEGORY!

IMMEDIATE (ALS- Needs stretcher)

Expectant-Not likely to survive

DEAD

DELAYED (BLS- Needs stretcher)

MINIMAL (Minor inj/Ambulatory)

EVERYBODY GETS A TAG !

TRACK # OF PTS AND CATEGORY

2. COMMUNICATE WITH MEDICAL BRANCH

A-Report CASUALTY COUNT and CATEGORY

B-Request resources to move patients- Manpower/Backboards/Stretchers

3. GET PATIENTS MOVED TO TREATMENT OR TRANSPORT

A-Get patients moved to either Treatment or Transportation

B-When patients are moved, report to MEDICAL Branch for reassignment

4. GET the RED OUT !

1. Primary objective is to Get the RED off the scene FIRST

2. All injured rescuers are tagged RED

1- IMMEDIATE



IMMEDIATE

- Altered mental status
- Radial pulse absent
- Major Hemorrhage
- Resp > 30
- Respiratory Distress
- Likely to Survive given current resources

1	IMMEDIATE	1
	NAME/ID	
	DESTINATION	
	EST. ENROUTE	

Usually ALS and needs stretcher



Know your specialty resources !



Level 1 Trauma ? Burns ? Amputations ?
Carbon Monoxide - Hyperbaric Medicine ?

1-IMMEDIATE



GET THE RED OUT !

1-IMMEDIATE



Injured Rescuers are tagged RED!



2-DELAYED



2-DELAYED

Alert !
Radial pulse present !
Hemorrhage Controlled !
Resp < 30 !
No respiratory distress!



Usually BLS and needs a stretcher



3-MINIMAL



Get the GREEN to safety !



3-MINIMAL

Alert !
Minor injuries
Usually ambulatory
Normal breathing
Normal perfusion



Ambulatory...But Beware !



DEAD

EXPECTANT



DEAD

Apnea after repositioning
airway

Child?

Apnea after 2 rescue
breaths



EXPECTANT

- Mortal injuries
- Likely to die given current resources
- Provide comfort care when or if resources allow



START System

- Respirations
- Radial Pulse
- Mental Status

Lower sensitivity... but simple and fast

START TAG
START

Move The Walking Wounded **MINOR**

No Resp. After Head THROPA **DEAD/DYING**

Respirations - Over 30 **IMMEDIATE**

Pulse - No Radial Pulse **IMMEDIATE**

Mental Status - Unable To Follow Simple Commands **IMMEDIATE**

Otherwise ... **DELAYED**

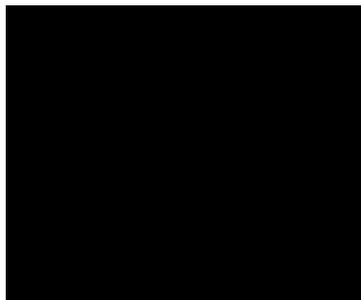
AGE: MALE FEMALE

MAJOR INJURIES: HEAD BACK CHEST EXTREMITIES AIRWAY/OTHER

TRANSPORT: HOSPITAL

DEAD/DYING	B 00244
MINOR	B 00244
IMMEDIATE	B 00244
DELAYED	B 00244





START Triage- Global Sort

- Order those who can walk to go to a collection point: those are the P-3
- That leaves P-1, P-2 and P-0 on the ground.
- Make the initial triage sweep of those who can't walk



START Triage System

IMMEDIATE

- Respiration- Resp > 30/min
- Perfusion- Radial pulse NOT palpable
- Mentation- Altered Mental Status

DELAYED

- Respiration - < 30/min
- Perfusion- Radial pulse Palpable
- Mentation- Alert

Dead

Not Breathing after 2 breaths



Now Triage Walking

MINIMAL

Minor injuries only- Ambulatory



START Recap...

IMMEDIATE

- Respirations- Resp > 30/min
- Perfusion- Radial pulse NOT palpable
- Mentation- Altered Mental Status

DELAYED

- Respirations - < 30/min
- Perfusion- Radial pulse Palpable
- Mentation- Alert

IMMEDIATE

1

DELAYED

2



Dead
Not Breathing after 2 breaths

START Triage

NOT Evidence Based !
Has some significant flaws !

START Triage Tag

Move the Walking Wounded **MINOR**

No Resp. After Head TICO/PA **DEAD/DYING**

Respirations - Over 30 **IMMEDIATE**

Pulse - No Radial Pulse **IMMEDIATE**

Mental Status - Unable To Follow Simple Commands **IMMEDIATE**

Otherwise ... **DELAYED**

AGE: ADULT CHILD INFANT

SEX: MALE FEMALE

WOUND: HEAD TRUNK EXTREMITIES OTHER

TRANSPORT: HOSPITAL

DEAD/DYING	0-0204
MINOR	0-0204
IMMEDIATE	0-0204
DELAYED	0-0204



SALT TRIAGE !

Sort
Assess
Lifesaving Intervention
Triage



SALT TRIAGE !

- Evidence Based
- Driven by the CDC
- Supported by all National EMS Organizations
- Our New National Standard



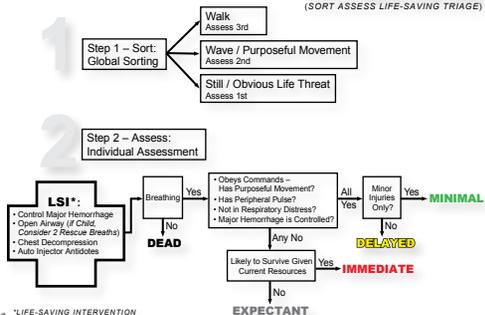
This field triage decision scheme, originally developed by the American College of Surgeons Committee on Trauma, was revised by an expert panel representing emergency medical services, emergency medicine, trauma surgery, and public health. The panel was convened by the Centers for Disease Control and Prevention (CDC), with support from the National Highway Traffic Safety Administration

The SALT Triage guideline was supported by the Department of Health and Human Services, Centers for Disease Control and Prevention as part of the Terrorism Injuries: Information Dissemination and Exchange (TIIDE) grant. The consensus committee included an expert panel of work group participants that included members from:

- The American College of Emergency Physicians
- The American Medical Association
- The American College of Surgeons-Committee on Trauma
- The National Association of Emergency Medical Technicians
- The National Association of State Emergency Medical Service Officials
- The National Association of EMS Physicians
- The Native American Emergency Medical Services Association
- Other additional participants



S.A.L.T. TRIAGE FLOW SHEET (SORT-ASSESS LIFE-SAVING TRIAGE)



SALT - Global Sort

SALT Triage First Step

Step # 1
Initial Sorting

Walk
P-3
Assess LAST

Wave
P-2
Assess SECOND

Still
P-1
Assess FIRST





- Control Major Hemorrhage
- Open Airway (if Child, Consider 2 Rescuer Breaths)
- Chest Decompression
- Auto Injector Antidotes

IMMEDIATE • Respiratory Distress! • Bleeding Uncontrolled (major) - NO Peripheral Pulses • Does not obey command - Non purposeful movements • Likely to survive given current resources
DELAYED • NOT in Respiratory distress • Bleeding Controlled - Has Peripheral Pulses • Obeys command-Purposeful Movements • Non-Ambulatory
MINIMAL • NOT in Respiratory Distress • Bleeding Controlled - Has Peripheral Pulses • Obeys Command - Purposeful Movement • Ambulatory and MINOR Injuries
EXPECTANT

SALT Triage - Global SORT FIRST!
Walk - Wave - Still
Perform Lifesaving Interventions as you go!

IMMEDIATE

- Respiratory Distress!
- Bleeding Uncontrolled (major) - NO Peripheral Pulses
- Does not obey command - Non purposeful movements
- Likely to survive given current resources

• Non-Ambulatory

EXPECTANT

Not likely to survive given current resources

DEAD

Not breathing after 2 ventilations



SALT Triage - Global SORT FIRST!
Walk - Wave - Still
Perform Lifesaving Interventions as you go!



Questions So Far ?



TRIAGE Drill!

IMMEDIATE 1 **DELAYED 2** **MINIMAL 3**

You MUST Keep a Master Triage Tally

TRIAGE	1-RED	2-YELLOW	3-GREEN	E-EXPECTANT	0- BLACK
Transport Guideline	One/Ambulance	Two/Ambulance	Four/Ambulance	Transport PRN	NO TRANSPORT
TOTALS					
# of Amb Needed			Consider BUS		0

This helps determine resources!



5. Supine, alert, HR-90, R-20, femur FX



2
DELAYED
2

NAME/ID
DESTINATION
SPP DURATION

6. Unresponsive,HR-140,R-36



1
IMMEDIATE
1

NAME/ID
DESTINATION
SPP DURATION

7. Alert, 100% full thickness burns,
HR-110, R-40



E
EXPECTANT
E

NAME/ID
DESTINATION
SPP DURATION

**8. Ambulatory, alert, facial lacerations,
HR-100, R-28**



MINIMAL	3
	<small>NAME/ID</small>
3	<small>DESTINATION</small>
	<small>EST. ENROUTE</small>

**9. Responsive, HR-150, R-36,
Unstable pelvis, massive leg Fx**



IMMEDIATE	1
	<small>NAME/ID</small>
1	<small>DESTINATION</small>
	<small>EST. ENROUTE</small>

**10. Supine, alert, HR-100, R-20
Obvious arm Fx**



DELAYED	2
	<small>NAME/ID</small>
2	<small>DESTINATION</small>
	<small>EST. ENROUTE</small>

11. Unresponsive, multiple chest wounds, HR-unobtainable R-agonal



EXPECTANT	E
E	3

12. Ambulatory, alert, shoulder dislocation, HR-100, R-24



MINIMAL	3
3	3

The TRIAGE Tally ?

TRIAGE	1-RED	2-YELLOW	3-GREEN	E-EXPECTANT	0-BLACK
Transport Guideline	One/Ambulance	Two/Ambulance	Four/Ambulance	Transport PRN	NO TRANSPORT
TOTALS	3	3	2	2	2
# of Amb Needed			Consider BUS		0