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**TRAUMA PATIENT CRITERIA (#7100)**

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1. **INTRODUCTION** - The goal of the Alameda County trauma system is to transport confirmed Critical Trauma Patient(s) (CTP) or, potential CTPs who might benefit from care at a trauma center directly to a designated Trauma Center in a timely manner, bypassing non-trauma centers.

**2. CRITICAL TRAUMA PATIENT CRITERIA**

2.1 A patient is identified as a CTP when any of the following physiologic and/or anatomic factors are present. These patients should be transported code 3.

**Physiologic criteria**

- Glasgow Coma Scale  $\leq 12$  **or**;
- Blood pressure  $\leq 90$  systolic **or**;
- Respiratory rate  $< 10$  or  $> 29$

*Please note: Normal vitals for pediatric patients differ (see LBRT).*

**Anatomic injury factors:**

- Penetrating injury to the torso, head, neck, groin, or extremity proximal to the knee or elbow
- Evidence of two or more proximal long bone fractures (femur, humerus)
- Traumatic amputation above the wrist or ankle
- Traumatic paralysis

2.2 **Paramedic Consideration** In addition, the following mechanisms of injury may be used to identify a CTP. In general, these patients are transported code 2, however, differing field circumstances and/or patient condition may require a code 3 transport.

- Death of an occupant in the same passenger space
- Extrication time of greater than twenty (20) minutes
- Auto vs. pedestrian greater than or equal to 20 mph
- Auto vs. pedestrian ( $\leq 14$  or  $\geq 55$  years of age)
- Submersion with trauma
- Significant blunt trauma to head, neck, torso or abdomen (e.g. starred windshield, loss of consciousness)
- Vehicle rollover without restraints
- Ejection of patient from vehicle
- Falls greater than or equal to fifteen (15) feet
- Falls greater than ten (10) feet ( $\leq 14$  or  $\geq 55$  years of age)
- Significant vehicle damage (e.g. front axle rearward displaced; passenger space intrusion of one foot or more; bent steering wheel/column)
- Ejection from a moving object

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3. **TRANSPORT** - Patients identified as a CTP will be transported to **the closest, most appropriate, designated Trauma Center**. **Exception:** The patient is identified as a CTP or Potential CTP but presents with one of the following:

PATIENT PRESENTATION:	ACTION:
<b>UNMANAGEABLE AIRWAY</b> . . . . .	<b>Closest Basic E.D.</b> <i>The patient requires intubation, and the paramedic is unable to intubate, and an adequate airway cannot be maintained with B.V.M. device.</i>
<b>ADULT TRAUMA ARREST - BLUNT or PENETRATING</b> . . . . .	<b>Determination of Death in the Field</b> (policy #8030) <b>Note:</b> Coroner’s personnel must transport all dead bodies. If ordered to move a body by law enforcement, note the time, name, and badge number of the officer, and comply with the request. Ensure that the police officer on scene has contacted the Coroner’s Bureau for permission to move the body
<b>PEDIATRIC TRAUMA ARREST BLUNT or PENETRATING:</b>	
<ul style="list-style-type: none"> <li>● ETA to the Pediatric Trauma Center ≤ 20 minutes. . . . .</li> <li>● ETA to the Pediatric Trauma Center &gt;20 minutes. . . . .</li> </ul>	<ul style="list-style-type: none"> <li>Pediatric Trauma Center</li> <li>Closest Adult Trauma Center</li> </ul>
<b>PATIENTS WITH BURNS</b> . . . . .	<b>See burn patient criteria - policy # 7009</b> unless patient is identified as a CTP, then transport to the Trauma Center.

4. **TRAUMA BASE CONTACT** - Varying field circumstances make rigid application of any set of rules impractical. These criteria should serve as guidelines. Clinical circumstances may dictate that transport be undertaken immediately with Trauma Base contact made enroute.
- 4.1 **Designated trauma base hospital** - Highland Hospital is the Designated Trauma Base for all trauma patients requiring base contact.
- 4.2 **Trauma base contact is not required** if the patient meets "Critical Patient Criteria" or "Paramedic Consideration Criteria" **and** is transported to an Alameda County Trauma Center.
- 4.3 If the patient meets any of the "Paramedic Consideration Criteria" and Trauma Base contact cannot be established or maintained, transport the patient to a Trauma Center.
- 4.4 Contact the trauma base physician if:**
- ✓ The patient meets the criteria listed in the "paramedic consideration" criteria but the paramedic is requesting transport to a basic ED.
  - ✓ The patient requires medical treatment not covered in the "Trauma Patient Care" protocol (see policy #7101)
  - ✓ An Out-of-County Trauma Center is being considered.
  - ✓ The patient would benefit from consultation with the base physician.

**TRAUMA PATIENT CRITERIA (#7100)****5. OUT-OF-COUNTY TRANSPORT**

- 5.1 The physician at the Trauma Base Hospital may route the patient to an out-of-county trauma center if the out-of-county Trauma Center is the closest most appropriate facility for the medical needs of the patient.
- 5.2 Prior to approving transport to an out-of-county Trauma Center, the Alameda County Trauma Base Hospital must:
- ✓ Contact the out-of-county Trauma Center by landline to determine if they can accept the patient
  - ✓ Give a brief report including E.T.A.
  - ✓ If the patient is going to John Muir Hospital, advise them to turn on their MEDNET radio. Advise the paramedics to contact John Muir via MEDNET when they are five minutes out to give an update.
  - ✓ If the patient is going to any other out-of-county Trauma Center, the Alameda County Trauma Base will be required to relay information via landline.

**5.3 Out-of-County Trauma Centers:**

<b>TRAUMA CENTER</b>	<b>LOCATION</b>
John Muir Medical Center	Walnut Creek
Santa Clara Valley Medical Center	San Jose
Regional Medical Center	San Jose
Stanford University Medical Center	Palo Alto
San Francisco General Hospital	San Francisco

(8/06)

6. **POST CALL-IN** - If a CTP is transported to a Receiving Hospital and Trauma Base contact was not made (e.g. a patient with an unmanageable airway). The paramedics **must** call the Trauma Base from the Receiving Hospital and give a report on a taped line.