

# The State of Wisconsin Trauma Field Triage Protocol

1

Assess Airway: Patient has a protected airway or able to insert a functioning advanced airway

**YES**

Transport to the closest appropriate Hospital or ALS/Air Medical Intercept for RSI/Definitive Airway Treatment

**NO**

2

Measure Vital Signs and Assess Level of Consciousness

Glasgow Coma Scale <14 or  
Systolic Blood Pressure <90 or  
Respiratory Rate <10 or >29 (<20 in infant <1 year)  
PEDS: 1 or more abnormality in Pediatric Assessment Triangle

**YES**

Expedite transport to the highest level of trauma care within 30 minutes, preferentially a Level I or II Trauma Center.

Steps 1--3 attempt to identify the most seriously injured patients.  
PEDS: Consider transport to a pediatric trauma center within region.

**PEDIATRIC TRIANGLE**

GENERAL IMPRESSION

APPEARANCE  
CIRCULATION TO SKIN  
WORK OF BREATHING

**NO**

Assess anatomy of injury

3

All penetrating injuries to head, neck, torso, and extremities proximal to elbow and knee  
Flail chest  
Two or more suspected fractures involving the femur or humerus  
Crushed, degloved, or mangled extremity  
Complete or partial amputation proximal to wrist and ankle  
Pelvic fractures/unstable pelvis  
Open or depressed skull fracture  
New onset paralysis (paraplegia/quadruplegia)

**YES**

Expedite transport to the highest level of trauma care within 30 minutes, preferentially a Level I or II Trauma Center.

Steps 1--3 attempt to identify the most seriously injured patients.  
PEDS: Consider transport to a pediatric trauma center within region.

**NO**

Assess mechanism of injury and evidence of high-energy impact

4

**FALLS** Adults >20 ft. (one story is equal to 10 ft.)  
Children >10 ft. or 2-3 times the height of the child  
**HIGH-RISK AUTO CRASH** Intrusion >12 in. occupant site; >18 in. any site  
Ejection (partial or complete) from automobile  
Death in same passenger compartment  
Vehicle telemetry data consistent with high risk of injury  
Auto v. Pedestrian/Bicyclist Thrown, Run Over, or with Significant (>20 MPH) Impact  
Motorcycle Crash >20 MPH

**YES**

Transport to closest appropriate trauma care facility, which depending on the trauma region, need not be the highest level trauma center.

**NO**

Assess special patient or system considerations

5

**AGE** Older Adults: Risk of injury death increases after age 55  
Children: Consider transport to a pediatric trauma center within region  
**BURNS** Without other trauma mechanism: Triage to burn facility  
With trauma mechanisms: Triage to trauma center  
Anticoagulation and Bleeding Disorders  
Time Sensitive Extremity Injury  
End-Stage Renal Disease Requiring Dialysis  
Pregnancy >20 Weeks  
EMS Provider Judgment

**YES**

Contact medical control and consider transport to a trauma care facility or a specific resource hospital.

**NO**

Transport according to protocol

When in Doubt, Transport to a Level I or II Trauma Center