

Major Trauma Triage Tool - Primary Patient Transfer

In the context of Major Trauma:

Step 1

Assess vital signs and level of concsiousness

Glasgow Coma Score <14
Lucid Interval
Sustained systolic blood pressure <90
Respiratory rate <10 >29
OR abnormal paediatric value

Step 2

Assess anatomy of injury

Chest injury with altered physiology

Traumatic amputation proximal to wrist/ankle Penetrating trauma to neck, chest, abdomen, back or groin Suspected open and/or depressed skull fracture Suspected pelvic fracture

Spinal trauma suggested by abnormal neurology
Trauma along with facial and/or circumferential burns
Time critical (e.g. isolated burns in excess of 20%)
Two or more long bone fracture

Haemorrhage controlled by CAT Haemostatic dressings

Step 3

Evaluate mechanism of injury

Traumatic death in same passenger compartment
Falls >20 feet (two floors)
Person trapped under vehicle
Bullseye window and/or damage to the 'A' post of vehicle

Pedestrian/cyclist vs motor vehicle, thrown/ run over with significant impact
Ejection from a vehicle at speed

Ljection from a venicle at spec

Step 4

Assess special patient or system consideration

Patients who have sustained trauma but do not fit any of the criteria above but are:

- Older patients (>55)
- Pregnant (>20 weeks)
- Known to have a bleeding disorder
- Morbidly obese
- Burns circumferential or 20% (BSA)
- Compensating paediatrics

practicable S σ SOOI S ത Ŏ ш Contact the

YES to any; Convey to Major Trauma Centre YES to any; Convey to Major Trauma Centre YES to any: Consider transfer to Major Trauma Centre Consider taking clinical advice YES to any; Consider transfer to Major Trauma Centre

The Major Trauma Centre in the East Midlands
Network is;

Queen's Medical Centre Nottingham

Bordering MTCs are as follows:
Hull Royal Infirmary,
Northern General Hospital and
Sheffield Children's Hospital,
University Hospitals Coventry and
Warwick Hospital
University Hospitals North Staffs &
Stoke
Birmingham Children's Hospital

If you cannot reach a Major Trauma Centre within 60 minutes, transport to nearest Trauma Unit and inform EOC

University Hospitals of Birmingham

In the event of airway compromise or major haemorrhage, consider diverting patient to nearest Trauma Unit and inform EOC

If not conveying to the Major Trauma Centre, complete the associated major trauma checklist as a precaution



East Midlands Ambulance Service **MHS**

NHS Trust

If not conveying to the major trauma centre use this checklist to assist your decision-making. Does the patient fulfil any of the following criteria?

Sustained respiratory rate <10 or >29	YES	NO
Systolic BP <90mmHg or absent radial pulses		NO
Sustained tachycardia >120 or tourniquet applied	YES	NO
GCS motor score of 4 or less (withdrawal to pain)	YES	NO
Open pneumothorax or flail chest		NO
Crushed, de-gloved or mangled limb	YES	NO
Suspected major pelvic fracture	YES	NO
Neck or back injury with paralysis	YES	NO
Amputated limb proximal to wrist or ankle		NO
Suspected open or depressed skull fracture	YES	NO

If YES to any of the criteria move to Section 2

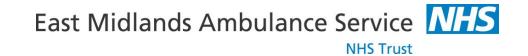
If NO criteria are met, transport to nearest trauma unit as per normal procedures

Section 2 Does the patient fulfil the following safety criterion?				
Can the airway and any catastrophic bleeding be controlled?	YES	ОИ		
Can the major trauma centre be reached within 60 minutes of leaving scene?	YES	NO		

If YES transport to nearest major trauma centre

If NO criteria are met, transport to nearest trauma unit as per normal procedures





EMAS ATMIST Handover Tool				
Age				
Time of incident				
Mechanism of injury				
Injuries				
Signs and symptoms	Pulse:	Resps:		
	O2 sats:	BP:		
	GCS:	Other:		
Treatment given/immediate needs				