

Silver Trauma Safety Net


Hospital Response

When you receive a **“SILVER TRAUMA ALERT”**
from the Ambulance Service

You should:

1. Allocate a cubicle to receive the patient
2. Allocate at least a middle grade clinician to assess the patient upon arrival as a priority
3. Consider if you need to activate your trauma team policy

The **pre-hospital** silver trauma safety net triggers are:

Silver Trauma Safety Net			V4 May 2023
Aged 65 years and over?			
With any of the following:			
<p>PHYSIOLOGY</p> <ul style="list-style-type: none"> • Systolic BP <110mmHg following an accident 	<p>ANATOMY</p> <ul style="list-style-type: none"> • Injury to 2 or more body regions (excluding injuries distal to wrist/ankle joints) • Suspected shaft of femur fractures • Open fracture proximal to wrist / ankle 	<p>MECHANISM</p> <ul style="list-style-type: none"> • Fall downstairs • From an RTC: <ul style="list-style-type: none"> • Entrapment >30mins • Ejection • Death in same incident • Pedestrian vs Car– direct to MTC • Cyclist vs Car– direct to MTC 	
<p>Discuss with the RTD: who will 'SILVER TRAUMA PRE -ALERT' the approp. Emergency Department (TU as a minimum)</p> <p><i>Be aware of patients on anticoagulants as the destination may need upgrading from TU to MTC.</i></p> <p>The TU should then</p> <ol style="list-style-type: none"> 1. Allocate a cubicle to receive the patient 2. Allocate a senior clinician (ST3+) 3. Activate the Trauma Team at their discretion 			
<p>Associated documents: via https://www.mcctn.org.uk/silver-trauma.html</p>			

Issues/incidents should be reported to the network office using the TRID reporting process via <https://www.mcctn.org.uk/trid.html>