

Trauma Activation Criteria

Trauma Stat:

- Any penetrating injury to head, neck or trunk
- Respiratory difficulty as evidenced by one or more of the following:
 - Significant increase or decrease in respiratory rate
 - Significant retractions or grunting
 - Patient intubated prior to arrival
 - Unable to maintain or difficult airway
- Tachycardia and / or poor perfusion or unexplained tachycardia (no significant pain or crying as a source)
- Hypotension
- Blood given prior to the patient's arrival
- 40 mL/kg bolus given prior to arrival
- Glasgow Coma Score (GCS) ≤ 8
- GCS deterioration by 2
- Hypothermic arrest

OR Resuscitation:

- Full arrest with pre-hospital signs of life following a non-cranial, penetrating chest or abdominal injury
- Penetrating injury unresponsive to 40 mL/kg fluid **administration**
- At the discretion of the ED and surgical attending

Trauma Alert:

- Evidence of abdominal injury on physical exam
 - Abdominal tenderness upon palpation
 - Abdominal bruising or seatbelt mark
 - Without hemodynamic compromise
- GCS 9 – 13
- Spinal cord injury with neurologic deficit
- Two or more proximal long bone fractures
- Ejection from automobile
- Partial or full thickness burn of $\geq 10\%$ TBSA
- Significant vascular injury including amputation of limb proximal to wrist or ankle
- Tourniquet application prior to arrival
- Emergency Department discretion

The trauma team should be activated for any patient who meets criteria regardless of prior evaluation at an outside facility

Normal Vital Signs Table

Modified from PALS 2016

	Heart Rate	Respiratory Rate	Systolic Blood Pressure
Infant (1 – 12 month)	90 – 180	30 – 53	>70
Toddler (1 – 2 years)	80 – 140	22 – 37	>70
Preschool (3 – 5 years)	65 – 120	20 – 28	>80
School-Age (6 – 12 years)	58 – 118	18 – 25	>85
Adolescent (12+ years)	50 - 100	12 - 20	>90

Trauma Evaluation

- Mechanism of Injury
 - Motor vehicle collision
 - Struck or run over by motor vehicle (pedestrian or bike)
 - Fall greater than 5 feet or 2x patient's height (whichever is smaller)
 - Any mechanism deemed to place the patient at risk for multi-system injury
- Head injury with GCS ≥ 14 **AND** any of the following:
 - LOC of more than 5 seconds
 - Multiple episodes of vomiting
 - Severe headache
 - Altered mental status
 - Signs of basilar skull fracture (i.e., bruising around eyes or behind ears)
- Any patient immobilized with a backboard and/or cervical collar
- Partial or full thickness burn between 5% and 9% TBSA
- Any burn less than 5% requiring immediate pain management
- GSW (non-BB) to an extremity