

# TRAUMA ACTIVATION CRITERIA

***Please do NOT downgrade the patient before arrival/seen, and discussion between EM and Trauma Attending/APRN/Chief***

Scene		
Level 1	Level 2	Level 3
<ul style="list-style-type: none"> <li>● Penetrating injury to the Neck, Chest, Abdomen, or Extremities proximal to the elbow/knee</li> <li>● Signs of Shock (at any time - including initial on arrival)                             <ul style="list-style-type: none"> <li>○ HR&gt;SBP (Shock Index &gt;1)</li> <li>○ SBP &lt; 90 mmHg                                     <ul style="list-style-type: none"> <li>▪ &lt; 10 years old = SBP &lt; 70+2*age)</li> <li>▪ &gt; 64 year SBP &lt;110 mmHg</li> </ul> </li> <li>○ absent carotid, femoral, or radial pulse</li> </ul> </li> <li>● Neurological injury with GCS &lt; 9 without sedation</li> <li>● Severe uncontrolled hemorrhage or transfer patients receiving blood products or &gt; 1 liter of crystalloid to treat signs of shock</li> <li>● Unable to intubate or intubated from the scene or airway compromise (including blunt neck injury with evidence of potential airway injury)</li> <li>● Emergency surgical airway placed at the scene or the referring hospital</li> <li>● Major vascular injuries, including significant crush or amputation proximal to the elbow or knee, or the need for prehospital tourniquet application</li> <li>● Suspected spinal cord injury from the scene or not stabilized at the referring hospital</li> <li>● Major impalement to the torso</li> <li>● Open or unstable pelvic fracture</li> <li>● Pregnancy with &gt; 20 weeks of gestation if other activation criteria of Level 2 or greater are present</li> <li>● Trauma Code</li> <li>● Emergency Physician Discretion</li> </ul>	<ul style="list-style-type: none"> <li>● Penetrating Injury to the Extremity distal to the elbow or knee</li> <li>● Flail Chest, multiple rib fractures</li> <li>● Major burns of &gt;20% BSA (Grade 2 or 3) or any signs of inhalation injury</li> <li>● Neurologic injury with GCS ≥ 9 or &lt; 14</li> <li>● Open and depressed skull fracture</li> <li>● Two or more long bone fractures (ulna with radius fracture or tibia with fibula count as one long bone)</li> <li>● Extremity trauma with loss of distal pulse or sensation</li> <li>● Severe maxillofacial injury with a stable airway</li> <li>● Near drowning</li> <li>● Trauma patient currently on anticoagulants (not including Aspirin) with external signs of a supraclavicular injury</li> <li>● Pregnancy with &gt;20 weeks of gestation without other level 2 criteria present</li> <li>● Major MVC: ejection from the vehicle, extrication &gt; 20 minutes, death of an occupant in the same vehicle, or impact speed &gt; 50 mph</li> <li>● Pedestrian struck by vehicle or auto-bike crash &gt; 10 mph</li> <li>● Falls &gt; 12 feet</li> <li>● Motorcycle crash/ATV &gt; 20 mph or with separation of rider from bike</li> <li>● Trauma patient with a Seatbelt Sign</li> <li>● Emergency Physician Discretion</li> </ul>	<ul style="list-style-type: none"> <li>● MVC with rollover or intrusion into the passenger compartment &gt; 12 inches not meeting higher activation criteria.</li> <li>● Hanging mechanisms (without evidence of airway compromise or evidence of airway injury)</li> <li>● Trauma Patient &gt;65 years of age</li> <li>● Stable pelvic fractures not meeting higher activation criteria.</li> <li>● Single system injury with a high index of suspicion based on the mechanism</li> <li>● Traumatic injury with hypothermia (&lt; 35oC) or hyperthermia (&gt;39oC) not meeting higher activation criteria</li> <li>● Any other trauma-related injury where two or more systems are involved that does not meet the higher activation criteria</li> <li>● MD/Charge RN Discretion</li> </ul>
Transfers		
<p><b>**If the patient has not had a complete workup for their possible injuries (e.g., CT scans, including contrast of the CAP) of all suspected injuries, use the Scene Activation Criteria (above). Please Do NOT request additional imaging if the patient has a reason for transfer.</b></p>		
Level 1	Level 2	Level 3
<ul style="list-style-type: none"> <li>● Hemodynamic instability - requiring blood transfusion, pressors, or &gt; 1 liter of crystalloid to maintain SBP &gt; 90mmHg (&gt;70+2*age if &lt;10 years)</li> <li>● HR &gt; SBP</li> <li>● Penetrating Thoracoabdominal Trauma</li> <li>● Respiratory Compromise without a definitive airway</li> <li>● Intubated patients transferred from another facility</li> <li>● Acute decompensation en route</li> <li>● MD/ Charge RN discretion</li> </ul>	<ul style="list-style-type: none"> <li>● Must meet <b>all</b> of these criteria                             <ul style="list-style-type: none"> <li>● Transfer with multiple system trauma</li> <li>● Hemodynamically stable</li> <li>● Appropriate imaging (DO NOT REQUEST ADDITIONAL IMAGING, if there is a reason for a transfer)</li> </ul> </li> <li>● Single system TBI (excluding concussion)</li> <li>● Single system injury with CT evidence of neck, chest, abdominal, vascular, or spine injury</li> <li>● MD/Charge RN Discretion</li> </ul>	<ul style="list-style-type: none"> <li>● Not meeting Level 1 or Level 2 transfer activation criteria with appropriate imaging (DO NOT REQUEST ADDITIONAL IMAGING, if there is a reason for a transfer)</li> <li>● Single system trauma, excluding transfers for isolated ENT, ophthalmology, or hand</li> <li>● ED evaluation with direct consultation to the trauma team or the responsible service</li> </ul>

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