

# **EAST REGION PATIENT CARE PROCEDURE #3 TRAUMA TRIAGE AND TRANSPORT**

## **I. STANDARD:**

1. *All verified ambulance verified aid services and affiliated agencies shall comply with the Washington Prehospital Trauma Triage Procedures as defined in the current WAC. All verified ambulance services shall transport patients to the most appropriate designated facility*
2. *All verified ambulance and verified aid services shall consider activating ALS rendezvous or helicopter response - Patient Care Procedure #7 if beyond the 30 minutes transport time to a designated facility OR if transport time to the appropriate facility may be reduced by more than 15 minutes.*
3. *Each trauma-designated facility will determine when it is appropriate to alert verified ambulance services to divert to another trauma designated facility.*

## **II. PURPOSE:**

1. To implement regional policies and procedures for all emergency medical patients and all trauma patients who meet the criteria for trauma system activation as described in the Washington Prehospital Trauma Triage Procedure.
2. To ensure that all emergency medical and/or trauma patients are transported to the most appropriate designated facility in accordance with the current WAC.
3. To allow the receiving facility adequate time to activate their emergency medical and/or trauma response team.

## **III. PROCEDURES:**

1. The first certified EMS/TC provider determines that a patient:
  - a. Needs definitive trauma care
  - b. Meets the trauma triage criteria
  - c. Presents with factors suggesting potential severe injury (in accordance with the Washington Prehospital Triage Procedure).
  - d. Determine if patients meet all hazards (procedure #8) criteria
2. The provider then proceeds with primary resuscitation for the patient.
3. The provider then determines what step in the Prehospital Triage Procedure that the patient's condition/injuries meet; determination of destination is made based upon the step identified and the following:
  - a. For patient meets Step 1 or Step 2 Criteria:
    1. Take the patient to the highest-level trauma center within 30 minutes transport time via ground or air transport according to DOH approved Regional Patient Care Procedures.
    2. Apply "Trauma ID Band" to the patient.
  - b. Patient meets Step 3 Criteria:
    1. Take the patient to the nearest designated facility. (No change)
    2. Consult county procedure, IF:

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- (a) The patient requests to bypass the nearest facility\*
  - (b) EMS personnel judgment suggests that the patient be taken to a higher-level facility\*
3. Apply “Trauma ID Band” to the patient.
4. On-line medical control for all counties shall be accessed per County Operating Procedures (COPs)
5. Communication will be initiated with the receiving facility as soon as possible to allow the receiving facility adequate time to activate their emergency medical and/or trauma response team.
6. *The receiving facility will notify the verified ambulance service about diversion according to COPs.*
7. Medical control and/or the receiving facility will be provided with the following information, as outlined in the Prehospital Destination Tool:
  - a. Identification of EMS agency
  - b. Vital signs. (Include First and/or Worst)
  - c. Level of consciousness
  - d. Anatomy of injury
  - e. Biomechanics of injury
  - f. Any co-morbid factors
  - g. Timely updates on patient status
8. The first EMS provider to determine that a patient meets the trauma triage criteria will attach a Washington State Trauma Registry Band to the patient’s wrist or ankle.
9. All information shall be documented on an appropriate medical incident report (MIR) form accepted by the County MPD, which meets trauma registry data collection requirements as outlined in WAC.

**IV. QUALITY IMPROVEMENT:**

The East Region Prehospital & Transportation Committee will review this PCP upon receipt of suggested modifications from a local provider, the East Region QI Committee, the Department of Health, or any other entity suggesting modifications to the document, at least biennially.

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TRAUMA TRIAGE AND TRANSPORT**

Adopted Regional Council	6/12/96
Approved DOH	7/16/96
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Revised ER Prehospital & Transportation Committee	10/14/98
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Final Review PH	5/17/00
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DOH Approved	10/28/02
Reviewed by PH Committee	11.05
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Posted on the EREMSTCC Website	9.29.06
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Approved by Steering Committee	3/21/07

Approved

**PATIENT CARE PROCEDURE #3A**  
**TRIAGE & TRANSPORT FOR**  
**MEDICAL & NON-MAJOR TRAUMA PATIENTS**  
**No Change**

**I. STANDARD**

*All licensed ambulance services shall transport patients to the most appropriate facility in accordance with County Operating Procedures (COPs).*

**II. PURPOSE**

1. To implement regional policies and procedures for all **medical and non-major trauma patients who do not meet the criteria for trauma system activation** as described in the Washington Prehospital Trauma Triage Tool.
2. To ensure that all medical and/or non-major trauma patients are transported to the most appropriate facility.

**III. PROCEDURES**

1. **Patients not meeting prehospital trauma triage criteria for activation of the trauma system, and all other patients will be transported to facilities based on County Operating Procedures (COPs).**

**IV. QUALITY IMPROVEMENT:**

The East Region Prehospital & Transportation Committee will review this PCP upon receipt of suggested modifications from a local provider, the East Region QI Committee, the Department of Health, or any other entity suggesting modifications to the document, at least biennially.

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Reviewed by PH Committee	11.05

## **EAST REGION PATIENT CARE PROCEDURE #3B PEDIATRIC TRAUMA TRIAGE & TRANSPORT**

### **I. STANDARD**

1. *All verified ambulance, verified aid services, and affiliated agencies shall comply with the Washington Prehospital Trauma Triage Procedures as defined in current WAC. All verified ambulance services shall transport patients to the most appropriate designated facility.*
2. *All verified ambulance and verified aid services shall consider activating ALS rendezvous or helicopter response - Patient Care Procedure #7 - if beyond the 30-minute transport time to a designated facility OR if transport time to the appropriate facility may be reduced by more than 15 minutes.*
3. *Each trauma-designated facility will determine when it is appropriate to alert verified ambulance services to divert to another trauma designated facility.*

### **II. PURPOSE**

1. To ensure that consideration is given to early transport of a child to the regional pediatric trauma center(s) when required surgical or medical subspecialty care of resources are unavailable.

### **III. PROCEDURES**

1. The first certified EMS/TC provider determines that a pediatric patient:
  - A. Needs definitive trauma care
  - B. Meets the trauma triage criteria
  - C. Presents the factors suggesting potential severe injury (in accordance with the Washington Prehospital Triage Procedure
  - D. Determine if patient meets Patient Care Procedure #8 for All Hazards Mass Casualty
2. The provider then proceeds with airway management and primary resuscitation for the pediatric patient.
3. Apply "Trauma ID Band" to the patient.
4. Take the pediatric patient to the highest-level pediatric trauma center within 30 minutes transport time via ground or air transport according to DOH approved regional patient care procedures and approved County Operating Procedures (COPs).
5. If a pediatric designated facility is not available within 30 minutes, take the patient to the highest adult designated facility within 30 minutes.

### **IV. QUALITY IMPROVEMENT:**

The East Region Prehospital & Transportation Committee will review this PCP upon receipt of suggested modifications from a local provider, the East Region QI Committee, the Department of Health, or any other entity suggesting modifications to the document, at least biennially.

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