

## Proposed Draft Trauma Classification Criteria 2/25/09

### Class I = Red

- Glasgow Coma Scale < 14 at time of report
- Systolic blood pressure <90 at any time in adults, age-specific hypotension in children, and/or clinical signs of shock
- Respiratory rate <10 or >29
- HR >120 in adults, age specific tachycardia in children, and/or clinical signs of shock
- All penetrating injuries to head, neck, torso, and extremities proximal to elbow and knee
- Flail chest
- Two or more proximal long-bone fractures
- Crush, degloved or mangled extremity
- Amputation proximal to wrist and ankle
- Pelvic fractures
- Open or depressed skull fractures
- Paralysis or signs of spinal cord injury/focal neurologic deficit
  
- *Active or uncontrolled hemorrhage*
- *Airway compromise or obstruction, flail chest, hemo- or pneumothorax, patients intubated on scene*
- *Extremity trauma with loss of distal pulses*
- *Major burns >20% BSA or any signs of inhalation injury*
- *Penetrating traumatic cardiopulmonary arrest with < or = 15 minutes pre-hospital CPR*
- *Any trauma patient receiving blood or blood products to maintain adequate perfusion*
- *Emergency medicine attending/paramedic discretion*

### Class II= Yellow

- Do not meet Class I physiologic criteria
- Falls
  - Adults: > 20 ft (one story = 10 ft.)
  - Children: > 10 ft. or 2-3 times height of the child
- High-risk auto crash
  - Intrusion: > 12 in occupant site; > 18 inches in any site
  - Ejection (partial or complete) from automobile
  - Death in same passenger compartment
  - Vehicle telemetry data consistent with high risk of injury
- Auto v. Pedestrian/bicyclist thrown, run over, or with significant (> 20 mph) impact
- Motorcycle crash > 20 mph
  
- *Auto crash*
  - *Initial speed > 40 mph*
  - *Death in same passenger compartment/vehicle*
  - *Extrication time > 20 minutes*
  - *Ejection from automobile or auto rollover*
  - *Motorcycle crash or ATV crash speed >20 mph with separation of rider*
- *Auto-pedestrian/auto-bicycle injury with > 5 mph impact*
- *Falls >12 feet vs 20 feet*

- *Assault with LOC*
- *GCS 12-14 with mechanism of injury*
- *All open fractures*
- *> or = two extremity fractures*
- *All degloving/Crush injuries*
- *Penetrating injuries to extremities to distal extremity (distal to elbow to knee)*
- *Penetrating trauma to head or proximal extremity (proximal elbow or knee, that do not meet Class I criteria)*
- *Amputation distal to wrist or ankle of two or more digits*
- *Pregnancy with acute abdominal pain vs pregnant trauma patient > or = 24 weeks*
- *Age >55 with significant mechanism of injury*
- *Intubated patients transferred from another facility who are stable from a respiratory standpoint*
- *Blast injury*
- *Burns with associated trauma*
- *Blunt traumatic cardiopulmonary arrest*
- *Multiple system trauma transfer involving > or = 2 surgical specialties*
- *Emergency Medicine Attending discretion*

Class III= **Green**

- Do not meet Class I physiologic criteria
  - Age
    - Older adults: Risk of injury/death increases > age 55
    - Children: Should triage preferentially to pediatric trauma center (< 5 years with potential for admission)
  - Anticoagulation and bleeding disorder
  - Burns
    - Without other trauma mechanism: Triage to burn facility
    - With trauma mechanism: Triage to trauma center
  - Time sensitive extremity injury
  - **End-stage renal disease requiring dialysis**
  - Pregnancy > 20 weeks
  - EMS provider judgment
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- *MVC < 40 MPH or UNK speed*
  - *Assault without LOC*
  - *Burns < 20%*
  - *Auto-pedestrian and auto-bicycle <5 mph impact*
  - *MCC/ATV crash <20 mph*
  - *All falls of = or < 5 feet or 5 steps*
  - *Penetrating injury distal to elbow or knee*
  - *Pregnant patients involved in traumatic event*
  - *Any trauma patient evaluated by the Emergency Medicine Attending requiring admission for observation/treatment for one or more injuries (does not include isolated, single-system injuries who can appropriately be cared for on other surgical specialty services)*

