

MEDICAL CONTROL

T-460

IDENTIFICATION OF THE TRAUMA CENTER PATIENT

Date: 7/1/2018

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I. PURPOSE

To establish criteria for identification of trauma center patients to be transported to a designated trauma center

II. AUTHORITY: Health and Safety Code, Division 2.5, Sections 1798, 1798.102, and 1798.163.

III. DEFINITION(S)

Adult: Any trauma patient known, or appearing to be, 15 years of age or older.

Pediatric: Any trauma patient known, or appearing to be, 14 years of age or less.

IV. POLICY

- **A.** The Base Hospital Physician/Mobile Intensive Care Nurse (MICN) shall use the criteria in attachment T-460A to identify patients requiring transport to a trauma center. Criteria consists of four categories:
 - 1. Abnormal vital signs/altered level of consciousness
 - 2. Meeting anatomic injury criteria
 - 3. Meeting mechanism of injury criteria
 - 4. Special patient or system considerations

B. Transportation

- 1. The adult patient who is identified as a trauma patient will be transported to the most appropriate designated adult trauma center.
- 2. The pediatric patient who is identified as a trauma patient will be transported to the designated pediatric trauma center (Rady Children's).
- 3. When at a scene with both pediatric and adult trauma patients, when resources are available, transport the pediatric trauma patients to the designated trauma facility (Rady Children's) and the adult trauma patient to the catchment area trauma facility.
- 4. For a single ambulance (air/ground) with both a pediatric and an adult trauma patient:

San Diego County Emergency Medical Services Office Policy / Procedure / Protocol

- a. If the pediatric patient is more critical, first transport that patient to Rady Children's Hospital and then transport the adult patient to Sharp Memorial Hospital.
- b. If the adult patient is more critical transport both to the adult catchment area trauma center.
- 5. If the designated pediatric trauma center is "on bypass", pediatric trauma patients should be delivered to the Level 1 adult designated trauma facility (UCSD).

C. Destination

- 1. The Trauma Decision Tree Algorithm (CoSD EMS Policy T-460A) is a triage tool to assist in identification of the patient requiring transport to a designated trauma center. The algorithm does not exclude a patient from identification and transportation to a designated trauma center if in the judgment of the Base Hospital it is in the patient's best interest.
- 2. Patients meeting criteria #1: abnormal vital signs/altered level of consciousness, and/or #2: anatomic injury, and/or #3: mechanism of injury, shall be transported to a designated trauma center as a major trauma activation.
- 3. Patients meeting criteria #4: special patient or system considerations, may require transport to a designated trauma center. Contact the base hospital for determination of destination to a non-designated trauma center hospital or the appropriate trauma center.
- **D.** All prehospital personnel will be trained in trauma triage as part of standard agency/facility orientation curriculum, and upon any changes in trauma triage criteria.

V. ATTACHMENTS

A. T-460A (T-460 Attachment): Trauma Decision Tree Algorithm