



McLean County Area EMS System

705 N East Street
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Title of Policy: <i>Field Triage of the Trauma Patient</i>	Policy Number: Ops-103
Effective Date: 10/2004	Review Date: 01/22/2017
Policy Area: Operations	Approvals: EMSSC, EMS MD

Background to Policy:

The goal of triage is prompt and appropriate treatment, at a facility with capabilities for optimal care of the individual's injuries.

Policy Statement:

Triage has been defined as the classification of patients according to medical need. Field triage requires EMS personnel to make an estimation of injury severity and match patient needs with available resources.

Policy:

- A. The Trauma Field Triage Criteria as created by the committee on Trauma of the American College of Surgeons, 1993, and by the American College of Emergency Physicians, "Trauma Care System Guidelines" 1992, has been adapted for use in Region 2. Any patient who meets the ACS guidelines for field triage, as defined, will be considered to have entered the Trauma System.
- B. **TRANSPORT TIME LESS THAN 25 MINUTES:** Any trauma patient who meets the following criteria shall be transported to the closest Trauma Center.
- C. **TRANSPORT TIME GREATER THAN 30 MINUTES:** Any trauma patient who meets the following criteria with a transport time greater than 30 minutes to a Trauma Center or to an affiliate trauma hospital, transport to the nearest hospital.
- D. **TRANSPORT TIME GREATER THAN 45 MINUTES:** Any trauma patient who meets the following criteria with a transport time greater than 45 minutes to a Trauma Center or to an affiliate trauma hospital in a rural area where there is no comprehensive hospital available, transport to the nearest hospital.
- E. Field Triage Medical/Legal Considerations.
 - If patient is unconscious and meets ACS Trauma Field Triage Criteria, the patient shall be taken to a Level I or II Trauma Center.
 - If a patient has an altered level of consciousness and meets ACS Trauma Field Triage Criteria, the patient shall be taken to a Level I or II Trauma Center.
 - If an adult patient is alert and oriented to person, place and time with stable vital signs, refer to the Patient Hospital Preference policy.
 - In the case of a Minor or an Incompetent Adult patient, and a guardian or person with the Power of Attorney for Healthcare is present at the emergency scene, that person can provide the Informed Consent for the patient to be transported to the appropriate facility according to the ACS Trauma Field Triage Criteria. Also, refer to the Patient Hospital Preference policy.



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- If there are any questions regarding the patient's status, treatment or destination, the EMS provider must contact the Medical Control Physician.
- ACS strongly recommends that pre-hospital care providers inform the patient, the patient's legal guardian or Power of Attorney for Healthcare, or the patient's family member(s) of the appropriate Trauma Center care availability and capability. The patient's choice, the patient's legal guardian or Power of Attorney for Healthcare choice of receiving hospital shall be documented.

F. If the more distant hospital is full or is on Trauma Center bypass, the patient shall be transported to the nearest hospital.

G. **Advocate BroMenn Medical Center** and **OSF St. Joseph Medical Center** are designated Level II Trauma Centers by the State of Illinois, Department of Public Health. If either facility has determined the need to initiate Trauma Center bypass, the respective Medical Control Physician, after proper notification, shall have all ambulances with trauma patients diverted to other hospital emergency departments. Both hospitals comply with the **REGION 2** Emergency Department Trauma Center Bypass Policy. Refer to the Trauma Center Bypass policy.

Resources:

1. [Guidelines for Field Triage of Injured Patients: Recommendations of the National Expert Panel on Field Triage, 2011](#)
2. [IDPH 515. Appendix C Minimum Trauma Field Triage Criteria](#)