Figure 1. Field Triage Decision Scheme

Measure vital signs and level of consciousness

Step One

Glasgow Coma Scale <14 or
Systolic blood pressure, mm Hg <90 or
Respiratory rate, /min <10 or >29 (<20 in infant less than 1 year)

Yes → Take to a trauma center. Steps 1 and 2 triage attempts to identify the most seriously injured patients in the field. These patients would be transported preferentially to the highest level of care within the trauma system.

No → Assess anatomy of injury

Step Two

- 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 fracture
- Paralysis

Yes → Take to a trauma center. Steps 1 and 2 triage attempts to identify the most seriously injured patients in the field. These patients would be transported preferentially to the highest level of care within the trauma system.

No → Assess mechanism of injury and evidence of high-energy impact

Step Three

- Falls
  - Adults: >20 ft (1 story = 10 ft)
  - Children: >10 ft or 2 to 3 times the height of the child
- High-risk auto crash
  - Intrusion : >12 in, occupant site; >18 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

Yes → Transport to closest appropriate trauma center which, depending on the trauma system, need not be the highest level trauma center

No → Assess special patient or system considerations

Step Four

- Age
  - Older Adults: Risk of injury/death increases after age 55
  - Children: Should be triaged preferentially to pediatric-capable trauma centers
- Anticoagulation and bleeding disorders
- 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

Yes → Contact medical control and consider transport to trauma center or a specific resource hospital

No → Transport according to protocol

When in doubt, transport to a trauma center