

## Driscoll Children's Hospital – Trauma Activation Criteria

### 1.1 Trauma Code Activation Criteria (regardless of mode of arrival)

- o Traumatic cardiac arrest with penetrating MOI
- o Traumatic injury with signs of shock\* (see shock table below)
- o Penetrating injuries to the cranium, neck, chest, abdomen or pelvis
- o Intubated patient transferred from the place of injury
- o Respiratory distress secondary to trauma or inhalation injury
- o Facial or tracheal injury with airway compromise
- o Flail Chest
- o GCS < or = 8 without sedation
- o Open skull fractures
- o Suspected spinal cord injury associated with flaccidity, areflexia or unexplained hypotension
- o 2 or more long bone fractures in different extremities
- o Complicated pelvic fractures with urinary or rectal injury
- o Amputation proximal to the wrist or ankle
- o Falls 3x's height of patient
- o Any trauma transfer with respiratory, hemodynamic instability, receiving blood products to maintain hemodynamic stability or GCS < or = to 8 without sedation or paralytics
- o Motor vehicle crashes with reported history of:
  - Ejection (partial or complete) of patient from the vehicle
  - Prolonged extrication of patient (> 20 minutes)
  - Impact speed > or = to 40 mph
  - Death of occupant in same vehicle
  - Roll Over
  - Intrusion into compartment > 12"; intrusion 18" any other side of vehicle
- o Auto-Pedestrian/Bicyclist thrown, run over or with significant impact > or = 10mph
- o \*Emergency Physician discretion for all trauma patients who do not fall within the above stated criteria

### 1.2 Trauma Alert Criteria (regardless of mode of arrival)

- o Blunt trauma cardiopulmonary resuscitation in progress
- o Neurological injuries with a GCS < or = 13
- o Depressed skull fractures
- o Crush injuries proximal to the wrist or ankle
- o Burns 2<sup>nd</sup> degree > 15% TBSA; 3<sup>rd</sup> degree >5%
- o Burns to head, face, hand, genitalia, or feet
- o Electrical burn injury
- o Falls 1.5x's height of patient
- o Hanging or strangulation mechanisms

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- o Stable trauma transfers less than 24 hours post injury
- o Emergency Physician discretion for all trauma patients who do not fall within the above stated criteria
- o Motorcycle or ATV crash > than 10mph
- o Snakebites
- o Complicated handlebar injuries
- o Impalement injuries
- o Pregnant > 20weeks
- o Near-drowning r/t trauma

### 1.3 Trauma Evaluation

- o Those patient with single system injury from a traumatic mechanism should have an evaluation by the appropriate surgical subspecialist credentialed in trauma care (i.e. neurosurgery, orthopedic surgery, etc) at the discretion of the ED Attending
- o Isolated injuries transferred from another hospital for services of a surgical specialist
- o Patients that do not meet Trauma Code or Trauma Alert criteria but have a high index of suspicion based on mechanism of injury
- o Non-accidental trauma cases to be admitted

#### Definition of Shock

Age Group	Heart Rate (beats/min)	Pulse Character	Blood Pressure (mm Hg)	Respiratory Rate (breaths/min)	CNS
Birth to 6 months	> 190	Weak, thready central pulses  Absence of peripheral pulses	< 60	>70	Change in level of consciousness, dulled response to pain, or comatose
Infant	>176	Same	<75	>50	Same
Preschool	>132	Same	<85	>40	Same
Adolescent	>120	Same	<95	>30	Same