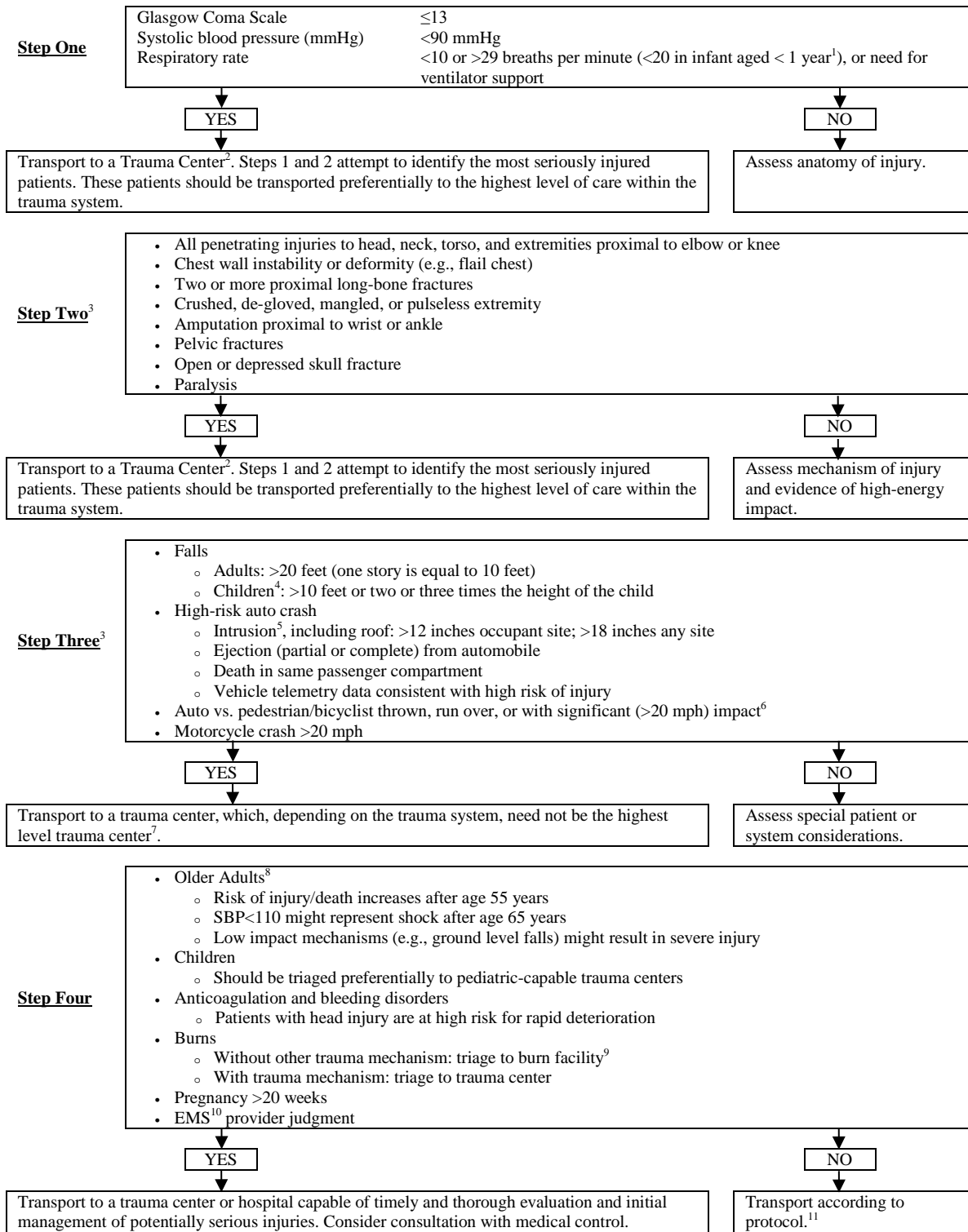


Arizona Guidelines for Field Triage of Injured Patients

(Regional modifications are permissible)

FIELD TRIAGE DECISION SCHEME

Measure vital signs and level of consciousness



WHEN IN DOUBT, TRANSPORT TO A TRAUMA CENTER

FIELD TRIAGE SCHEME FOOTNOTES

¹ The upper limit of respiratory rate in infants is >29 breaths per minute to maintain a higher level of over-triage for infants.
² Trauma centers are designated Level I-IV. A Level I center has the greatest amount of resources and personnel for care of the injured patient and provides regional leadership in education, research, and prevention programs. A Level II facility offers similar resources to a Level I facility, possibly differing only in continuous availability of certain subspecialties or sufficient prevention, education, and research activities for Level I designation; Level II facilities are not required to be resident or fellow education centers. A Level III center is capable of assessment, resuscitation, and emergency surgery, with severely injured patients being transferred to a Level I or II facility. A Level IV trauma center is capable of providing 24-hour physician coverage, resuscitation, and stabilization to injured patients before transfer to a facility that provides a higher level of trauma care.
³ Any injury noted in Step Two or Step Three triggers a "YES" response.
⁴ Age <15 years.
⁵ Intrusion refers to interior compartment intrusion, as opposed to deformation which refers to exterior damage.
⁶ Includes pedestrians or bicyclists thrown or run over by a motor vehicle or those with estimated impact >20 mph with a motor vehicle.
⁷ Local or regional protocols should be used to determine the most appropriate level of trauma center; appropriate center need not be Level I.
⁸ Age >55 years.
⁹ Patients with both burns and concomitant trauma for whom the burn injury poses the greatest risk for morbidity and mortality should be transferred to a burn center. If the non-burn trauma presents a greater immediate risk, the patient may be stabilized in a trauma center and then transferred to a burn center.
¹⁰ Emergency medical services.
¹¹ Patients who do not meet any of the triage criteria in Steps One through Four should be transported to the most appropriate medical facility as outlined in local EMS protocols.

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