

PROTOCOL FOR: Category II Modified Trauma Alert

- POLICY:
1. Patients will be evaluated by set criteria in the field by EMS and in the Emergency Department by the E.D. Physician. Patients sustaining injury meeting the criteria, will be seen by the Emergency Department Physician on arrival.
 2. The Emergency Department Physician will notify the trauma surgeon within a 20 minute period of patient arrival, discuss the case, and determine further diagnostic testing and/or plan of care.
 3. If necessary, based on the ED Physician's assessment, the Surgical House staff or Surgical Physician Assistant will arrive to the ED within 30 minutes of the call.
 4. The Attending General Surgeon must be present to see the patient within one hour after notification by the Emergency Department.

DECISION MAKING

PROCESS:

The following situations require a MODIFIED TRAUMA ALERT (provided the patient does not meet any of the criteria for a Full Trauma Alert):

A. Physiologic Criteria

1. Glasgow Coma Score < 14 with evidence of trauma
2. Pregnancy > 3 months

B. Anatomic Criteria

1. Second or third degree burns 10-24% of body involving hands, feet or genitalia, without respiratory distress
2. Two or more long bone fractures
3. Penetrating extremity trauma (excluding hands and feet) in proximity to vascular structure

C. Environmental Criteria

1. Unrestrained occupant in a rollover
2. Auto-Pedestrian collision with injury
3. Injuries for more than 1 organ system or fracture above and below the diaphragm
4. A fall from a height > 10 feet with injury
5. Victim extraction time > 30 minutes

APPROVAL: ED Trauma Committee
Nursing Standards Committee

EFFECTIVE DATE: 7/99

REVISION DATE(S):

REVIEW DATE(S): 1/06, 12/08