

Tuolumne County Emergency Medical Services Agency
EMS System Policies and Procedures

Policy: Pediatric Trauma Triage

#535.10

	Creation Date:	2-22-01
Medical Director: _____	Revision Date:	8-24-2011
EMS Coordinator: _____	Review Date:	8-2016

I. AUTHORITY

Division 2.5, California Health and Safety Code, Sections 1797.220 and 1798.163.

II. DEFINITION

- A. Major trauma patient means a patient who upon assessment by pre-hospital personnel meets one or more of the adult or pediatric trauma triage criteria defined by EMS Policies No 535.00 and 535.10.
- B. Pediatric patients means a patient 14 years of age or younger.
- C. Pediatric Trauma Center or PTC means a hospital that has been designated, by a local EMS agency, as meeting State and Local requirements as a Pediatric Trauma Center including a California Children's Services approved pediatric intensive care unit.

III. PURPOSE

The purpose of this policy is to guide EMS personnel in determining which pediatric trauma patients require the services of a designated Pediatric Trauma Center and to establish the EMS system standard for triage of pediatric patients suffering acute injury or suspected acute injury.

IV. POLICY

- A. Pediatric Trauma Triage Criteria
 - 1. Physiologic
 - a. Glasgow Coma Scale less than 14
 - b. Systolic Blood Pressure at any time
 - i) < 85 mmHg [child age 7-14]
 - ii) < 70 mmHg [child age 0-6]
 - c. Respiratory Rate

- i) < 10 or > 30 breaths/min
- ii) < 20 breaths/min [*infant age 0-1*]

- 2. Anatomic
 - a. All penetrating injuries to head, neck, torso, and extremities proximal to elbow and knee
 - b. Flail chest
 - c. Two or more proximal long bone fractures
 - d. Crushed, degloved, or mangled extremity
 - e. Amputation proximal to wrist and ankle
 - f. Suspected pelvic fracture
 - g. Open or depressed skull fracture
 - h. Paralysis
- 3. Mechanism of Injury
 - a. Falls > 10 feet or 2-3 times the height of the child
 - b. High Risk Automobile Crash
 - i) Intrusion > 12 inches at occupant site
 - ii) Ejection (partial or complete) from automobile
 - iii) Unrestrained rollover
 - iv) Vehicle telemetry data consistent with high risk of injury (if available)
 - c. Automobile vs. Pedestrian/Bicyclist
 - i) Pedestrian/bicyclist thrown or run over
 - ii) Significant (> 20 mph) impact
 - d. Motorcycle Crash > 20 mph
- 4. Special Considerations
 - a. Should be triaged preferentially to pediatric-capable trauma centers
 - b. Anticoagulation and bleeding disorders
 - c. Burns Refer to burn center triage criteria
 - d. Death in same passenger compartment
 - e. End stage renal disease requiring dialysis
 - f. EMS provider judgment

- A. All pediatric patients suffering acute injury or suspected acute injury shall be assessed using Pediatric Trauma Triage Criteria.
- B. Patients meeting one or more of the Pediatric Trauma Triage Criteria shall be managed as a major trauma patient.
- C. Trauma patients shall be transported to a designated trauma center or receiving hospital in accordance with EMS Policy No. 531.50 Trauma Patient Destination.