## **Trauma: General**

## **Key Points/Considerations**

- Patients with unmanageable airway go to the closest hospital or call for aeromedical or request ALS rendezvous while in route to the highest level Trauma Center.
- All other UNSTABLE patients with airway managed go to highest level Trauma Center within 15 minutes:
- If more than 15 minutes from Trauma Center consider aeromedical assistance. Refer to the Aeromedical Utilization Policy.
- If more than 15 minutes from Trauma Center and aeromedical assistance is not available, transport patient to the next highest level trauma center
- All times start at the time the EMS provider determined the patient to be UNSTABLE
- Notify the receiving facility as early as possible giving brief description of mechanism of injury, and estimated time of arrival
- UNSTABLE patients should be enroute to the hospital/landing zone within 10 minutes of disentanglement/extrication
- The following are Trauma Designated Facilities in area:

St. Joseph's Regional Medical Center	Level III Trauma Center
Tri-State Memorial Hospital	Level IV Trauma Center
Pullman Regional Hospital	Level IV Trauma Center
Garfield County Memorial Hospital	Level V Trauma Center

- Trauma Code Criteria for SJRMC: Hypovolemic shock; Neck, chest and abdominal injuries; penetrating injuries to neck, chest, abdomen or pelvis; age specific hypotension in children; unable to intubate in pre-hospital setting with suspected need for surgical airway; anticipated arrival of greater than three seriously injured patients; pediatric falls greater than three times their height; or pediatric patients with significant trauma to abdomen or chest; penetrating head injury, including isolated GSW to the head; transfer patient from other hospital receiving blood to maintain vital signs.
- Trauma Alert Criteria for SJRMC: Flail chest; multiple fractures; high risk auto crash (death of same car occupant, ejection from automobile, intrusion >12 inches occupant site or >18 inches any site, or vehicle telemetry data consistent with high risk of injury); fall equal to or greater than 20 feet; pedestrian hit at equal or greater than 20 mph or thrown greater than 15 feet; motorcycle/ATV crash >20 mph; pediatric pedestrian versus car; Patients ≥ 75 years old with a ground level fall with a head strike who is on anticoagulants or other high-risk co-morbidities.