CERT Training

CERT class 61

Triage

CERT Training

Triage

- Prioritizing patients in a multiple casualty incident
  - Who gets treatment first?
  - Who gets transported to a hospital first?
  - Quick communication about scope of incident

- The triage system we use is called START: Simple Triage and Rapid Treatment
  - Developed in 1983 in Newport Beach, CA
  - Widely used throughout the US

Triage Categories

MINOR	No field treatment needed
DELAYED	Treatment needed but no life threat
IMMEDIATE	Treatment needed for life threat
DECEASED	Dead or non-salvageable

Triage Procedure

1. On entry to the incident scene, call for anyone who is able to walk to you. "If you can hear my voice, come to me."
   - These are your <mark>MINOR</mark> patients
   - These are people you can draw on for untrained help

2. Visit each remaining patient, starting with the one closest to you and following an orderly pattern.
   - Evaluate and categorize them
   - Mark them with a triage marking
   - Direct your untrained help to provide specific treatment
   - No more than 60 seconds per patient (30 is better)

3. Report your findings, with counts of each category.

Triage Evaluation: RPM

We check for three things, by the acronym **RPM**:

Respiration: are they breathing, and not too fast?

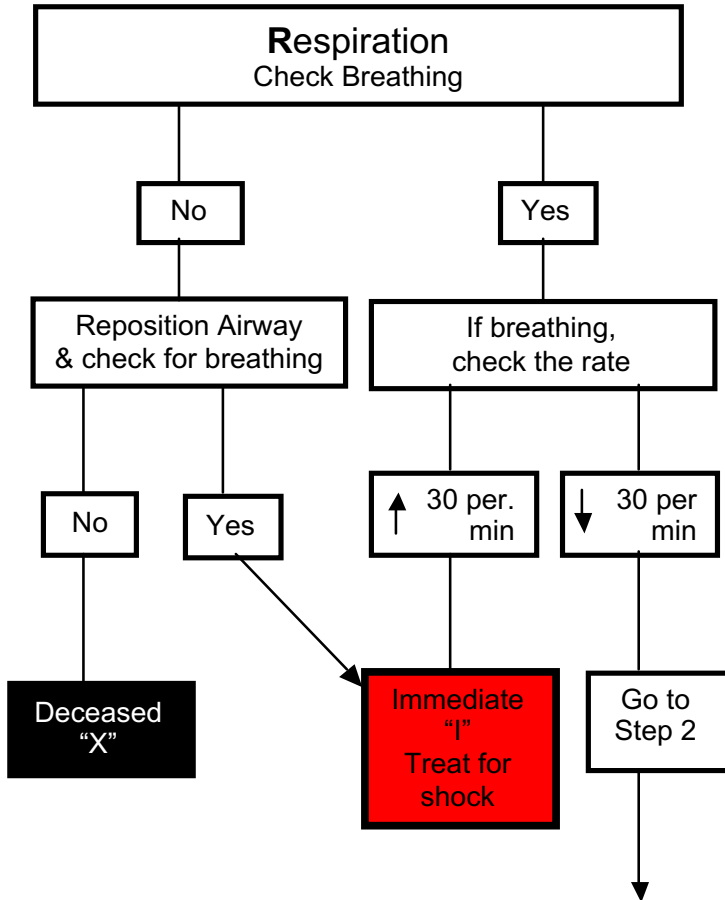**P**ulse: do they have a radial pulse?

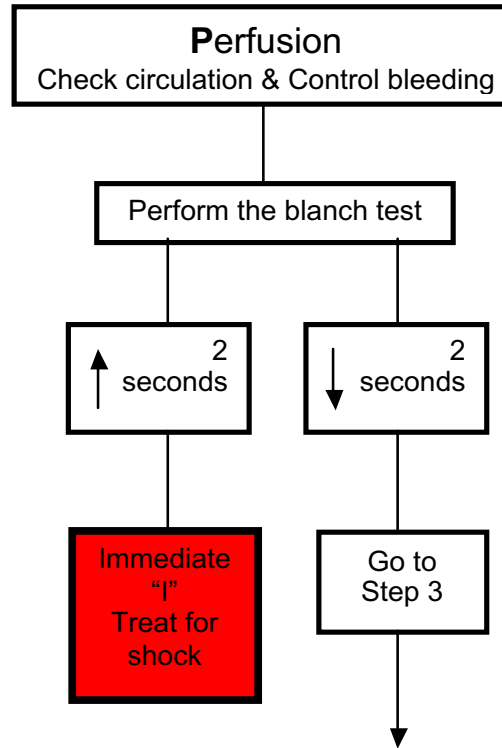**M**ental Status: can they follow simple commands?

Triage Flow Chart

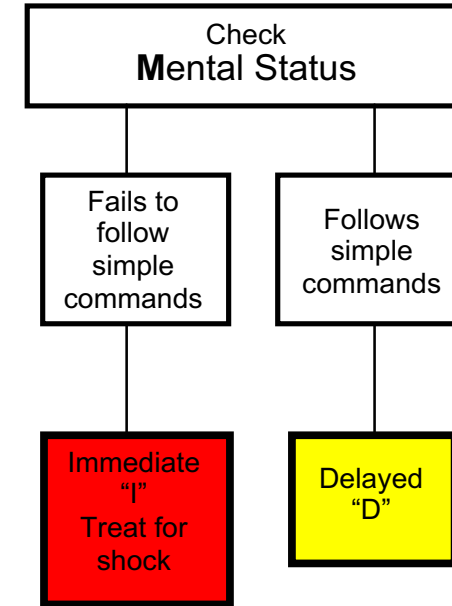**All walking wounded are Minor "M"**

Step 1

Respiration
Check Breathing

- No
  - Reposition Airway & check for breathing
    - No → Deceased "X"
    - Yes → Immediate "I" Treat for shock
- Yes
  - If breathing, check the rate
    - ↑ 30 per. min → Immediate "I" Treat for shock
    - ↓ 30 per min → Go to Step 2

Step 2

Perfusion
Check circulation & Control bleeding

- Perform the blanch test
  - ↑ 2 seconds → Immediate "I" Treat for shock
  - ↓ 2 seconds → Go to Step 3

Step 3

Check **M**ental Status

- Fails to follow simple commands → Immediate "I" Treat for shock
- Follows simple commands → Delayed "D"

↑ = More Than   ↓ = Less Than

Assessments - RPM

- Respirations (breathing)

- Pulse

- Mental Status

Triage Evaluation: Respiration (1)

Are they breathing? Look, listen, and feel for at least 5 sec.

YES: Move on to Respiration (2)

NO: Reposition the airway and check again.

Are they now breathing?

YES: IMMEDIATE (have a bystander maintain the airway)

NO: DECEASED *

* They may not actually be deceased, but they are beyond saving in a triage situation.

Triage Evaluation: Respiration (2)

Is their breathing excessively rapid (>30/min)?

YES: <mark>IMMEDIATE</mark>

NO: Move on to **P**ulse

You don't need to count their breaths. Excessive breathing is obvious.

Triage Evaluation: Pulse

Can you feel their radial pulse?

Capillary refill: should be less than 2 seconds

YES: Move on to Mental Status

NO: IMMEDIATE

A capillary refill test can be used instead of a radial pulse check, but the radial pulse check is more accurate and can be performed in more situations.

Triage Evaluation: Mental Status

Can they follow simple commands (e.g. "squeeze my hand")?

YES: DELAYED
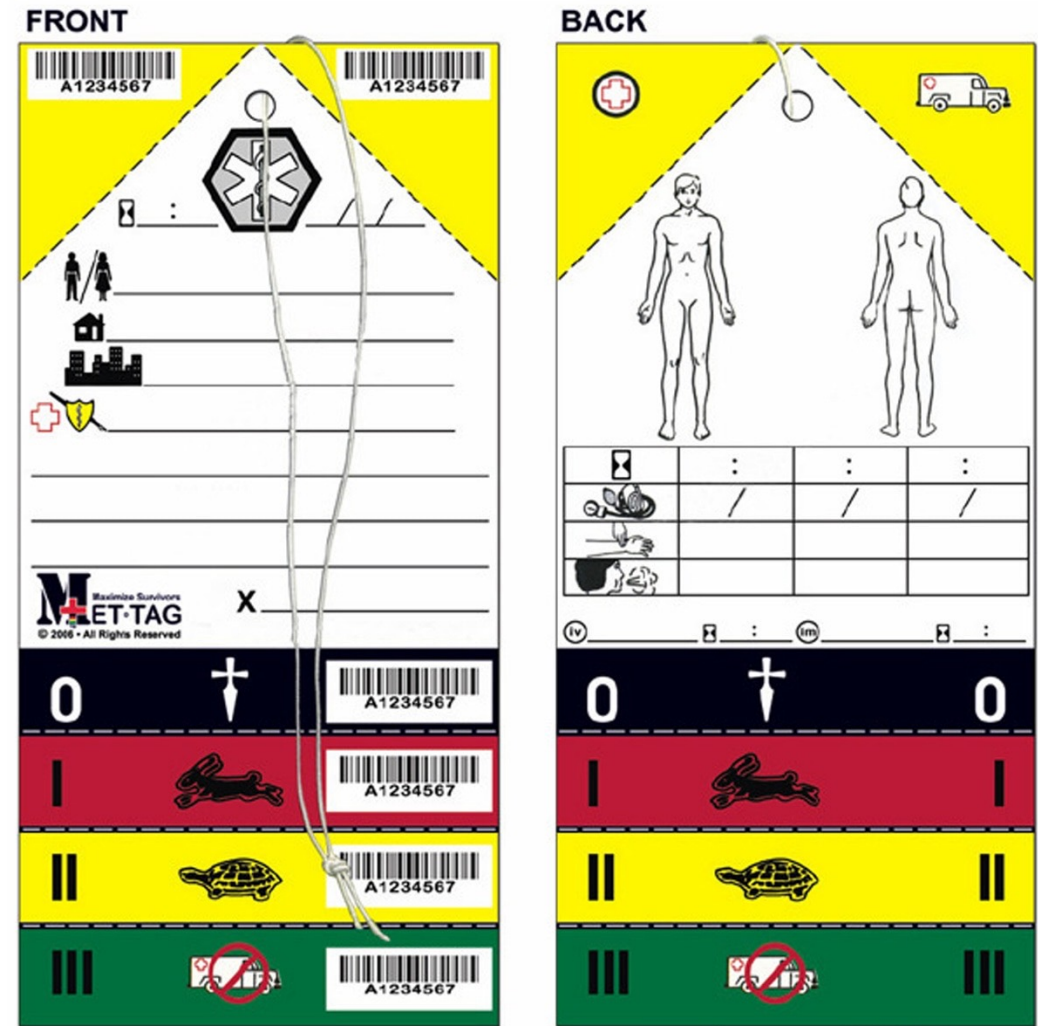
NO: IMMEDIATE

Note: Not following spoken English commands may be indicative of a language barrier or a disability rather than an injury.

Triage Markings

- Triage tags

- Colored ribbons

- Writing on skin:
M = MINOR
D = DELAYED
I = IMMEDIATE
X = DECEASED

If you write on skin, be consistent about where you write.

Treatment during Triage

Don't take more than a few seconds to treat a patient, until they've all been triaged and you know who needs it most. Leave more time-consuming treatment to bystanders.

In START Triage, treatment is limited to:

- Repositioning the airway (rescuer)

- Maintaining the repositioned airway (bystander)

- Direct pressure and elevation for bleeding (bystander)

- Elevating feet and covering with blanket (bystander)

Reporting

When reporting the results of your triage:

- Give the number of patients in each category:
  "I have 3 immediates, 2 delayed, and 1 deceased."

- If you are using triage tags, hand over the stubs you tore off

Extra credit:

- Locations of the immediates

- Obvious conditions of the immediates:
  "That one has a crushed arm."

Triage Procedure

- Check the scene - "Size-up" your surroundings
- Call 911 if possible
- Put on Personal Protective Equipment (PPE)
- Work with a buddy
- Call for walking wounded
- Use uninjured to help
- Remove hysterical people

Triage Video

Exercise

1   *Minor*   *Delayed*   **Immediate**   **Deceased**

- Impaled, 3 inch piece of shrapnel in right eye

  - Respirations under 30/minute
  - Has radial pulse; capillary refill under 2 seconds
  - Awake – Alert and talking

1 *Minor* *Delayed* *Immediate* **Deceased**

- Impaled, 3 inch piece of shrapnel in right eye

  - Respirations under 30/minute
  - Has radial pulse; capillary refill under 2 seconds
  - Awake – Alert and talking

2	*Minor*	*Delayed*	**Immediate**	***Deceased***

- Sudden onset of chest pain with shortness of breath

  - Respirations under 30/minute
  - Has radial pulse; capillary refill under 2 seconds
  - Awake – Alert and talking

2 ***Minor*** ***Delayed*** ***Immediate*** ***Deceased***

- Sudden onset of chest pain with shortness of breath

  - Respirations under 30/minute
  - Has radial pulse; capillary refill under 2 seconds
  - Awake – Alert and talking

3 **Minor** **Delayed** **Immediate** **Deceased**

- Skinned knee

  - Respirations under 30/minute
  - Has radial pulse; capillary refill under 2 seconds
  - Awake – Alert and talking

3 *Minor* *Delayed* *Immediate* *Deceased*

- Skinned knee

  - Respirations under 30/minute
  - Has radial pulse; capillary refill under 2 seconds
  - Awake – Alert and talking

4 *Minor* *Delayed* **Immediate** **Deceased**

- Excessive bleeding from thigh

  - Respirations over 30/minute
  - Weak radial pulse; capillary refill over 2 seconds
  - Unresponsive

4 **Minor** **Delayed** **Immediate** **Deceased**

- Excessive bleeding from thigh

    - Respirations over 30/minute
    - Weak radial pulse; capillary refill over 2 seconds
    - Unresponsive

5   *Minor*   *Delayed*   **Immediate**   **Deceased**

- No visible wounds

  - Respirations none
  - No radial pulse; capillary refill over 2 seconds
  - Unresponsive

5 *Minor*   *Delayed*   **Immediate**   **Deceased**

- No visible wounds

  - Respirations none
  - No radial pulse; capillary refill over 2 seconds
  - Unresponsive

6   *Minor*   *Delayed*   **Immediate**   **Deceased**

- Female six months pregnant with broken left lower leg

  - Respirations over 30/minute
  - Has radial pulse; capillary refill under 2 seconds
  - Awake – Alert and talking

6 *Minor* *Delayed* (Immediate) **Deceased**

- Female six months pregnant with broken left lower leg

  - Respirations over 30/minute
  - Has radial pulse; capillary refill under 2 seconds
  - Awake – Alert and talking

7   *Minor*   *Delayed*   **Immediate**   **Deceased**

- Impaled stick in chest

  - Respirations under 30/minute
  - Has radial pulse; capillary refill under 2 seconds
  - Awake – Alert and talking

7 ***Minor*** ***Delayed*** ***Immediate*** ***Deceased***

- Impaled stick in chest

  - Respirations under 30/minute
  - Has radial pulse; capillary refill under 2 seconds
  - Awake – Alert and talking

8 *Minor*   *Delayed*   **Immediate**   **Deceased**

- Patient saying same words over and over "What's happening?"

    - Respirations under 30/minute
    - Has radial pulse; capillary refill under 2 seconds
    - Unable to follow simple commands

8   *Minor*   *Delayed*   *Immediate*   *Deceased*

- Patient saying same words over and over "What's happening?"

  - Respirations under 30/minute

  - Has radial pulse; capillary refill under 2 seconds

  - Unable to follow simple commands

Gotchas

- Resist the temptation to start with the loudest patient or the most obvious injury.
- Resist the temptation to treat the injuries you find.
- Don't refer to triage categories by just their colors.
  - "Yellow", "red", and "black" all have racial overtones.
- Don't be concerned if professionals re-triage your patients.
  - Patient status changes over time
  - Professionals may need to mark or track patients differently
- Your own health comes first!
  - Don't do triage in an unsafe environment — not your job.
  - Stop triage if you find it's causing you intolerable stress.

Q & A