## **Guiding Principles for Major Trauma** inter hospital transfer

Vital Signs (major trauma if any one if the following present)

	Adult ≥ 14 yrs	Child < 14 yrs
Respiratory Rate	<10 or >29	Vital signs are age-dependant,
SpO2	<94%	monitor trends, discuss
SBP	<100mmHg	early with Paediatric
Conscious State	GCS < 14	major trauma service.
Heart Rate	<50 Or >120	-



YES

**Initiate Trauma Treatment Protocol** 



## **Early Liaison with**

Major Trauma Service contact within 15-30 minutes RPH Fellow/Reg 0404894277 or RPH Trauma Surgeon 92243399 or **Emergency Physician in Charge** 

If child <14 years, PCH ED admitting officer 64560010

92241676



If transfer is appropriate, prepare for Rapid and Early transport to Major Trauma Service through Acute **Patient Transfer Coordination (APTC)** 1800 951 211



Perform complete trauma evaluation and appropriate serial observation



YES

Deterioration of GCS, vital signs, or patient's condition and/or significant findings on further evaluation





Consider discharge or

admission after

appropriate evaluation

and observation

Liaise with

**YES** 

**Major Trauma Service** 



Initiate trauma treatment protocol Prepare for Rapid and Early

transport to Major Trauma Service

## Injuries

- Multiple body regions injured
- Limb fractures: with major open wounds, vascular compromise, and/or ≥ 2 bones
- Amputation/crush injury (proximal to wrist or ankle)
- Degloved or mangled extremity
- Suspected spinal injury
- Open or depressed skull fracture / Traumatic Brain Injury
- Suspected pelvic fractures
- Penetrating injury to head/neck/torso (proximal to elbows/knees)
- Burns, with > 10% or airway injury
- Chest all injury, pre-hospital decompression, suspected ≥ 3 rib, and/or flail segment
- Positive FAST scan.



## High Risk Patients / Mechanism

- Pedestrian / Cyclist vs vehicle
- Fall >3m
  - Age >65 or <14</li>
- Fatality within the same vehicle
- Pregnancy
- Crush / entrapment with concerns for reperfusion
- Gunshot, explosion and missile injuries
- · Major animal related mechanisms: Horse/kangaroo kicks, livestock crush etc
- Cabin intrusion (>30cm occupants' side or > 45 cm any
- MVC > 60kph with: fatality at scene, rollover, ejection or other major concern
- Motortbike, E-rideable + Bicycle crashes > 30kph
- Major abdominal blunt force injury: seatbelt + handlebar type injuries
- Comorbidities including anticoagulation therapy.

Date issued: July 2024 Review date: July 2027 Please liaise with Major Trauma Service early if Pt meets criteria regardless of your local ability to treat