

PRACTICE GUIDELINE

Effective Date: **6-11-17**

Manual Reference: **Deaconess Trauma Services**

TITLE: **T2 Internal ED Triage Process**

PURPOSE: To provide a guideline for quick identification of the injured geriatric patients on blood thinner medications. To decrease the time to reversal of anticoagulation. To lessen the wait time for potential trauma patients to be seen by a physician. To shorten time from arrival to CT. To provide more expedient care to those who have a mechanism of injury/trauma to the head, neck, chest, back and/or abdomen and are on blood thinner medications.

SCOPE: All injured patients with a mechanism of injury that may possibly meet CAT II activation criteria once workup is complete. The exclusion criteria is as follows: isolated extremity injuries and isolated facial injury.

GUIDELINES:

1. All injured patients will be assessed for a mechanism of injury and/or trauma to the head, neck, chest, back, and/or abdomen.
 - a. If the resulting answer is “yes”, then the patient will be activated as a “T2” and will populate as such on the track board in the ED.
 - b. These patients are potential CAT II patients and should be triaged accordingly.

2. All injured patients who have a mechanism of injury and/or trauma to the head, neck, chest, back, and/or abdomen will next be asked if they are on any of the following medications: Coumadin, Plavix, Pradaxa, Eliquis, or Xarelto.
 - a. If the resulting answer is “yes”, then the ED nurse will order Trauma II Panel from the order set.

REFERENCES:

* Geriatric TQIP Presentation 2016

REVIEWED DATE	REVISED DATE
JAN 18	
JAN 19	