MINNESOTA EMERGENCY MEDICAL SERVICES **REGULATORY BOARD**



Minnesota EMS Trauma Field Triage Guideline

August 2023

	Field Triage Indicator	Evidence ¹	Trai
Airway	Compromised and unsecure airway	Airway obstruction	Transport to the closest des
		 Unable to intubate or place supraglottic airway 	minutes.
Breathing	Respiratory distress	 RR < 10 or > 29 	 Transport to a designate within 30 minutes transport to a level 1 or 2 within 3 closest designated traum time, or to a more approxif predetermined by location. If no designated trauma time, transport to the closest designated trauma time transport to the closest designated trauma transport to the c
		 Need for respiratory support 	
		 Room-air pulse oximetry <90% 	
Circulation	Signs of shock	 HR > SBP 	
		Hypotension	
Disability	Unable to follow commands ³	GCS motor score < 6	
		 AVPU < A 	
Injury Pattern	Known or suspected high-risk injury	Proximal penetrating injuries	
		Skull deformity	
		Chest wall instability	
		Suspected pelvic fracture	
		 Extremity crushed, degloved, mangled, or pulseless 	
		Proximal amputation	
		 Uncontrolled hemorrhage 	
		 Hemorrhage requiring tourniquet 	
Mechanism of Injury	High-risk mechanism	 High-risk motor vehicle crash 	Consider transport to a desi
		 Partial or complete ejection 	
		 Significant intrusion 	
		 > 12 inches occupant side 	
		 > 18 inches anywhere 	
		Need for extrication	
		 Death in same compartment 	
		 Unrestrained child < 10 y.o. 	
		 Vehicle telemetry data consistent with severe injury 	
		 Rider separated from vehicle with significant impact (motorcycle, ATV, 	
		horse, etc.)	
		 Pedestrian or bicycle rider thrown, run over, or significant impact 	
		 Fall > 10 feet (any age) 	
EMS Judgement	Trauma with risk factors	 Low-level falls, < 6 or > 65 y.o. with significant head impact 	
		 Anticoagulant use 	
		 Suspected child abuse 	
		 High-resource health care needs 	
		 Pregnancy > 20 weeks 	
		 Burns with concomitant trauma 	

Children \leq 14 y.o. should be preferentially triaged to a pediatric trauma hospital when possible.

ransport Directive²

esignated trauma hospital within 30

ated level 1 or 2 trauma hospital that is nsport time.

n 30 minutes transport time, transport to uma hospital within 30 minutes transport propriate higher-designated trauma hospital ocal medical directions.

na hospital is within 30 minutes transport closest hospital.

esignated trauma hospital.

¹ Items listed in the *Evidence* column suggest that the Field Triage Indicator may be met but are not required criteria for the purposes of Minnesota Statutes 144E.101, Subdivision 14.

² EMS agencies wishing to deviate from these trauma field triage guidelines due to the availability of local or regional resources can apply to the EMSRB in accordance with Minnesota Statutes 144E.101, Subdivision 14 if the deviation is in patients' best interest.

³ Altered from baseline and resulting from a traumatic event