

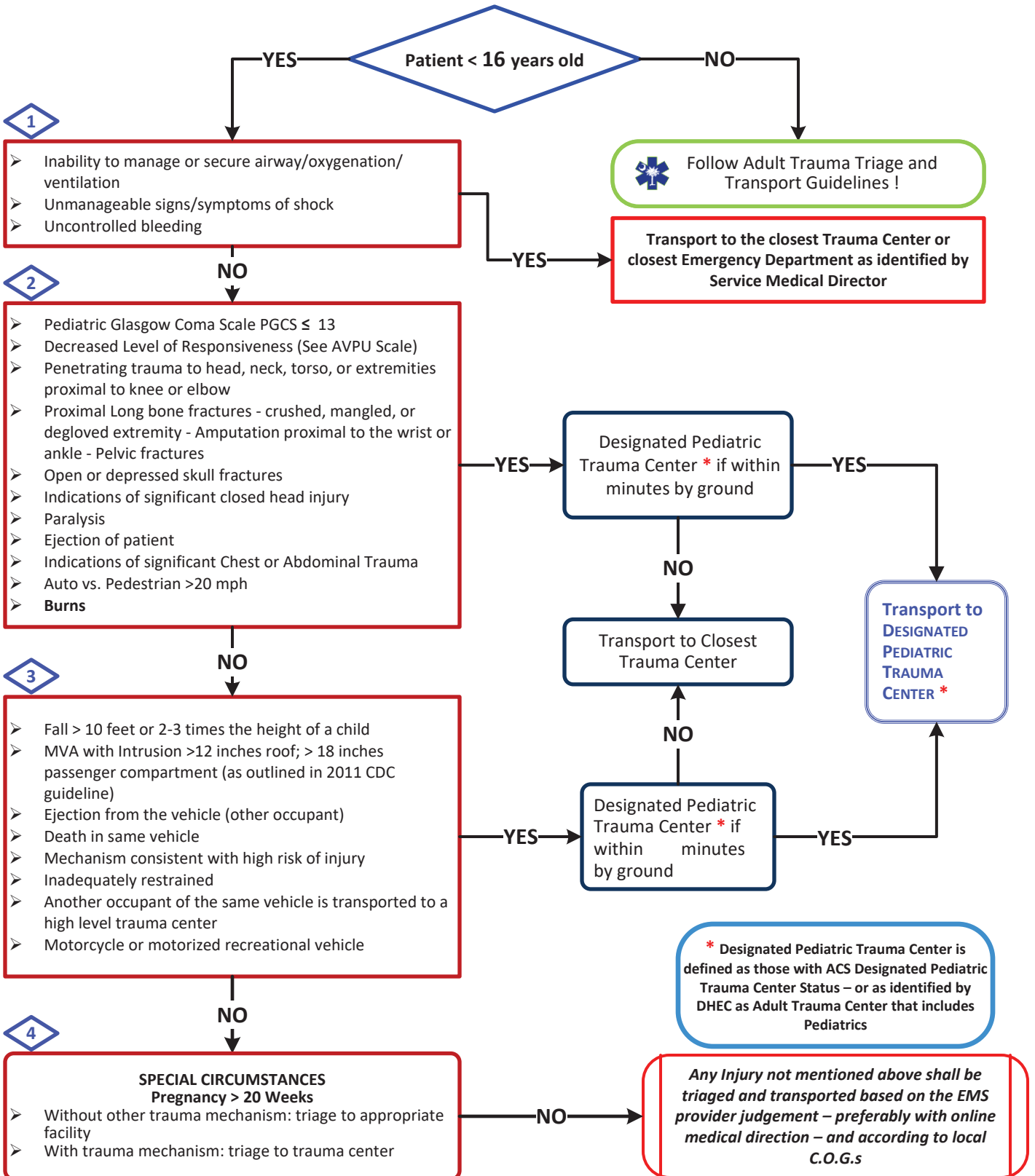


Pediatric Trauma Triage & Transport



Assessment for Serious Signs / Symptoms / Mechanism

This protocol applies to patients a prudent provider should consider as having a mechanism/event consistent with significant/major trauma and is not meant to be inclusive of all minor injuries



PEDIATRIC TRAUMA

* Designated Pediatric Trauma Center is defined as those with ACS Designated Pediatric Trauma Center Status – or as identified by DHEC as Adult Trauma Center that includes Pediatrics

Any Injury not mentioned above shall be triaged and transported based on the EMS provider judgement – preferably with online medical direction – and according to local C.O.G.s



PEDIATRIC GLASGOW COMA SCALE (PGCS)				
ACTION	AGE > 1 year	AGE < 1 YEAR		SCORE
EYE Opening	Spontaneously	Spontaneously		4
	To Verbal Command	To Shout		3
	To Pain	To Pain		2
	No Response	No Response		1
MOTOR Response	Obeys	Spontaneously		6
	Localizes Pain	Localizes Pain		5
	Flexion - Withdrawal	Flexion - Withdrawal		4
	Flexion - Abnormal (Decorticate Rigidity)	Flexion - Abnormal (Decorticate Rigidity)		3
	Extension (Decerebrate Rigidity)	Extension (Decerebrate Rigidity)		2
	No Response	No Response		1
	> 5 years	2 - 5 Years	0 - 23 Months	
VERBAL Response	Oriented	Appropriate words/phrases	Smiles/coos appropriately	5
	Disoriented/Confused	Inappropriate words	Cries and IS Consolable	4
	Inappropriate words	Persistent cries and screams	Persistent inappropriate crying and/or screaming	3
	Incomprehensible sounds	Grunts	Grunts, agitated, and restless	2
	No Response	No Response	No Response	1
Total Pediatric Glasgow Coma Score (3-15)				

Age Adjusted Abnormal Vital Signs			
Age	Heart Rate	Respiratory Rate	Systolic BP mm/Hg
Infant - 1 Y	<100 or >180	<30 or >60	<70
Toddler (1-2 Y)	<80 or >150	<20 or > 40	<75
Preschooler (3-5 Y)	<75 or >110	<20 or > 34	<80
School Age (6-9 Y)	<70 or > 100	<16 or >25	<85
Adolescent (10-17 Y)	<60 or >100	<12 or >20	<90

AVPU Scale	
A	Patient Alert
V	Patient Responds to Voice
P	Patient Responds to Pain
U	Patient Unresponsive

***** WHEN IN DOUBT – TRANSPORT TO PEDIATRIC TRAUMA CENTER.
*** DO NOT HESITATE TO CONTACT MEDICAL CONTROL FOR QUESTIONS OR ADVICE !**

*** DESIGNATED PEDIATRIC TRAUMA CENTERS (SC)**

- Grand Strand Medical Center [F00004780]
- PRISMA Health Greenville Memorial [F00004703]
- MUSC Children's Health [F00004807]
- PRISMA Health Richland [F00004741]

*** DESIGNATED PEDIATRIC TRAUMA CENTERS (Out of State)**

- CMC Charlotte (NC)
- Augusta UMC / Children's Hospital of Georgia (GA)
- Savannah Children's (GA)

KEY DOCUMENTATION ELEMENTS:

- Mechanism of injury
- Patient age and sex
- Primary and secondary survey
- Apparent injuries
- Serial vital signs including neurologic status assessments
- Some clinicians ask for the lowest blood pressure and highest pulse
- Scene time
- Procedures performed and patient response
- Pre-arrival notification and preparation