

Trauma Patient Criteria for Consideration of Emergency Transfer to the Trauma Service at RCH / ARH: A No-refusal Guideline

- The following apply to adult trauma¹ patients requiring transfer to a Trauma Centre in FH.
- Transferring or consulting physicians contact PTN (1-866-233-2337) who will call the 24/7 Trauma Service at RCH / ARH.
- Trauma patients who meet the following criteria should be considered for transfer to RCH / ARH Trauma Service (they do not require full diagnostic work-up prior to transfer consideration)
- For major pediatric trauma patients contact PTN who will call the BCCH Intensivist on-call

Physiological criteria:

Systolic BP < 90
GCS < 14

Anatomical:

Open or depressed skull fracture
C-T-L #s without deficit
Major penetrating injury
Two or more long bone fractures
Crush, de-gloved, mangled extremity or amputation proximal to finger / toe
Unstable pelvic fracture
Flail chest
Facial injury with impending airway compromise

Mechanism Criteria:

Falls > 5 m (15 feet)
MVI – intrusion, ejection, or death of occupant
Pedestrian / bicycle struck > 30 km / h
Motorcycle collision high speed / high energy (separation from bike etc)

Special Considerations

Head Injury
Frail elderly
Anticoagulation
Time sensitive limb injury
Dialysis
Pregnancy > 20 weeks

¹ Trauma is defined as an injury to human tissue / organs from the transfer of energy from the environment. Injuries result when the energy exceeds the body's resilience to tolerate.