

Triage is derived from the French word, "trier" meaning to sort. Why triage? Triage is a process for prioritizing multiple casualties when resources are not sufficient to treat everyone immediately.

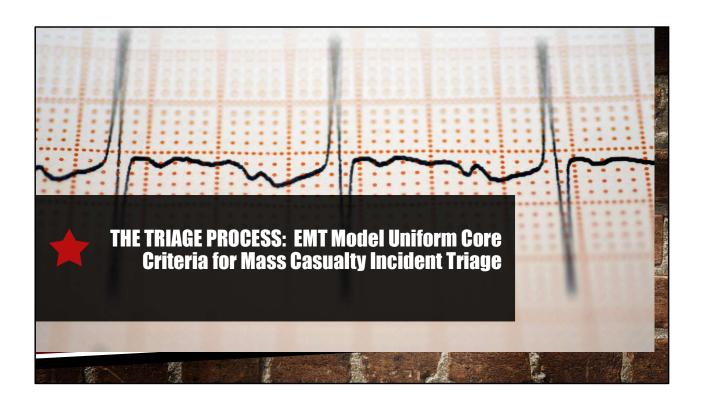
Resources = not just equipment, supplies, but also include TRAINED individuals like yourselves

Process of triage allows us to allocate resources MOST efficiently and effectively

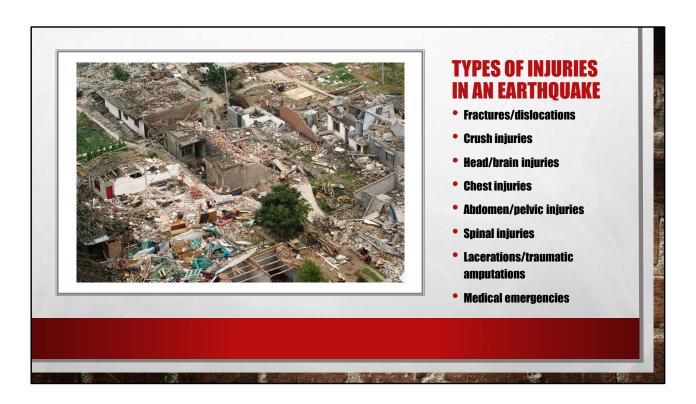
OBJECTIVES

- Be able to perform a Casualty Systematic Assessment using the Casualty Systematic Assessment Process (CSAP)
- Be able to recognize life-threatening injuries within your scope of training
- Be able to intervene and stabilize life-threatening injuries using first aid skills within your scope of training

- Be able to assign casualty triage categories
- Be able to document casualty information on a Casualty Triage Tag



Many different forms of triage; we'll be using the MUCC established as a national guideline for EMTs so that in the event of a disaster crossing state lines for example, everyone using a standardized form of triage. You'll be using YES/NO questions as the simplest way to quickly and efficiently triage patients.



A magnitude 5-7 or greater earthquake can collapse homes, topple bookcases, cause someone to fall down stairs or shake pictures off the wall onto someone's head. Most earthquake injuries are from falling and/or flying objects.

Medical emergencies = heart attacks, asthma attacks



Triage is dynamic and can change based on

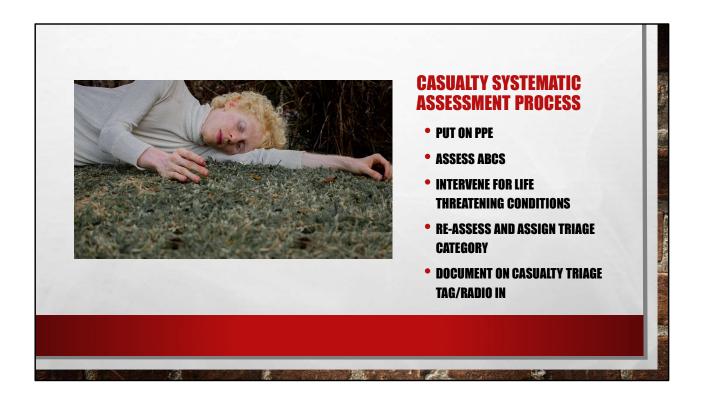
- 1. Casualty condition what are their injuries? Casualty condition can change after you perform a life-saving intervention so don't assign a triage category until AFTER intervening! E.G. Not breathing (immediate) changes to delayed after you open their airway and they start breathing.
- 2. Available resources. Resources available at the CAS that includes not just supplies, but also first aid team members.
- 3. Responder training. We are trained to give first aid care ONLY so a lot of the casualties you see will be Immediate category simply because we are trained to provide first aid ONLY so many injuries will be beyond our scope of training.



THIS IS THE SYSTEMATIC PROCESS that you'll use for every casualty

UHUUI	ALTY TRIAGE TAG	
	TRIAGE TAG	PROPERTY TRIAGE TAG ACCOUNT LOCATION MARKER
	No.	Name: — Address: —
	MOVE THE WALKING WOUNDED MINOR	Phone: Hospital:Transport:
	NO RESPIRATION AFTER HEAD TILL OPA DECEASED	Gender: Male Female Age: Major Injuries:
	Pulse — NO RADIAL PULSE IMMEDIATE	HEAD BACK CHEST EXTREMITIES
	Mental Status — unable to invertage	ABDOMEN OTHER
	OTHERWISE DELAYED	ALLERGY:
	Time Pulse 8.P Resp Awake	NOTES:
	Pain	
	DO RECEIVED	DO
	PO DECEASED	PO DECEASED STATES OF THE PARTY
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Let's look at a scenario to understand how the CSAP works. These cards are in your first aid bags to document casualty information and their triage category



A man runs up to you In your golf cart from his house that displays a HELP sign; he says you need to come to the backyard...my wife Janice has collapsed. He tells you, "I was inside when the shaking started...my wife Janice was outside gardening.

Introduce yourself...Go to yard...he says, "I found her like this and was afraid to move her" You have him help you roll her over and you start your Casualty Systematic

Assessment Process; PPE...assess ABC's. Not breathing, no carotid pulse. ASK the husband, how long has she been like this? He tells you, I found her like this after the earthquake started earlier this morning (4 hours ago). Realistically, we won't be getting to casualties until Day 2 or even Day 3 depending on the extent of damage, trees down, etc.





NO AED!

Let's go back and look at Janice in a different scenario...her husband tells you, I SAW HER FALL OVER just now, then flagged you down. No breathing/no pulse. What's the intervention? Start CPR? YES...NOTE THE TIME; Janice responds

Just did an intervention, what do you do now? RE-ASSESS!

TRIAGE CATEGORY: YES/NO QUESTIONS

- A = CHECK AIRWAY/ A=ALERT=ABLE TO FOLLOW COMMANDS?
- B = BREATHING. IN OBVIOUS RESPIRATORY DISTRESS?
- C = CIRCULATION. HAS A CAROTID PULSE?
- D = DISABILITY/MECHANISM OF INJURY = WHAT HAPPENED?
- ARE INJURIES LIKELY SURVIVABLE GIVEN AVAILABLE RESOURCES?

IMMEDIATE: look at casualty triage card.

Unable to follow commands.



CACHAIT	TY TRIAGE TAG	
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	TRIAGE TAG	PROPERTY TRIAGE TAG ACCIDENT LOCATION L
	No IIIIII	Name:
Ask for their	MOVE THE WALKING WOUNDED MINOR	Address:
	NO RESPIRATION AFTER HEAD TILL OPA	Hospital:Transport: Gender: Male Female Age:
Vial of Life	RESPIRATIONS — OVER 30	Major Injuries:
Form or for	Pulse — NO RADIAL PULSE IMMEDIATE	CHEST EXTREMITIES ABDOMEN OTHER
	MENTAL STATUS — UNABLE TO IMMEDIATE POLLOW SIMPLE COMMANDS	ALLERGY:
them to access	OTHERWISE DELAYED Time Pulse B.P Resp Anake	Rc: NOTES:
SMART911	Verbal	
JIIIIII III	□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	
	PO DECEASED	PO DECEASED STATE
	P1 IMMEDIATE	P1 IMMEDIATE STATE OF THE PARTY
	P2 DELAYED IIIIIII	P2 DELAYED Spiral cord injury, multiple regire instructions and in the cord injury and i
	P3 MINOR	P3 MINOR All STOTE and AMERICAN STOPPERS

look at the triage tag that has NAME at the top. This tag when completed, is what you'll use to do R...radio in the casualty information.

G= GET INFO: from husband.

- --life-threatening allergies (not seasonal allergies or cat allergies)...something they might require an epi pen GET THE PEN
- --Rx: meds they're on that if they don't take them, they could die.
- --Notes: MOI, also who is with the casualty? CRITICAL....might never see the person again. EMS needs to know WHAT HAPPENED, helps to provide insight as to how the injuries can progress over the next few hours/days. Are they able to self-care? Neighbors willing to help? Time placed tourniquet, compression bandage, quikclot if can't write on the tourniquet.

BACK OF CARD

use the cards to radio in triage category and speak w/the FA team as needed. and leave card with the casualty for EMS to use.



Other examples of immediate category injuries.

Severe bleeding that is uncontrollable w/FA supplies

Wife takes you to backyard; this man on the ground bleeding.

CSAP

TRIAGE CATEGORY: YES/NO QUESTIONS

- A = CHECK AIRWAY A=ALERT. ABLE TO FOLLOW COMMANDS?
- B = BREATHING. IN OBVIOUS RESPIRATORY DISTRESS?
- C = CIRCULATION. HAS A LIFE-THREATENING EXTERNAL HEMORRHAGE?
- D = DISABILITY/WHAT HAPPENED? MECHANISM OF INJURY
- ARE INJURIES LIKELY SURVIVABLE GIVEN AVAILABLE RESOURCES?

Max time of application (24 hrs) and tourniquets never removed except by EMS or hospital personnel. DO NOT use QuikClot on eyes, don't use it to pack an open major chest or abdominal wound, or an open skull fx's. External wounds only! NOTE TIME THEY WERE APPLIED.

Any casualty w/a tourniquet/Quikclot = IMMEDIATE and call EMS



Driving in golf car; see this lady sitting on curb holding her arm

TRIAGE CATEGORY: YES/NO QUESTIONS

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- B = BREATHING. IN OBVIOUS RESPIRATORY DISTRESS?
- C = CIRCULATION. HAS A LIFE-THREATENING EXTERNAL HEMORRHAGE?
- D = DISABILITY/MECHANISM OF INJURY (WHAT HAPPENED?)
- ARE INJURIES LIKELY SURVIVABLE GIVEN AVAILABLE RESOURCES?

Let's use the CSAP I'm this older casualty; who wants to volunteer to start a Casualty Systematic Assessment on me? Use your ABC cards!





Man lying on lawn in front of a house that has obviously burned. CSAP

IMMEDIATE



An older man walks up to you as you're leaving and says, "can you look at this, I fell down, what should I do?". He is shaking and distraught. You're thinking minor injury and ask him to turn his hand over and see......



E not only environment but think EXPOSE. Always inspect all aspects of a wound.

Think of expose as removing clothing but also means asking them to turn their hand over, lift their leg, roll over if possible and look at their back starting at the head to toe.



CSAP

DELAYED triage category



Day 2; in your golf cart assessing structures. You see a home demolished like in the top picture. A man is outside on the curb asking you to help his wife who he has dragged out into the street.



Crush injury to chest

Right side of head deformed with open, bleeding skull fx

Struggling to breathe, can't find a carotid pulse

UNLIKELY to survive?



Provide basic first aid/COVER.....insure safety. Expectant. Call it in to OPS

DEAD BODY

California Code, Government Code - GOV § 27491

In California, you are not permitted to move a body after an unattended death without the explicit permission of the county coroner or their deputy. Violating this law is a misdemeanor offense.

Why the body cannot be moved

An unattended death, where a physician was not present, automatically falls under the coroner's jurisdiction. The scene and the body are considered evidence in an official inquiry to determine the cause and manner of death. Any unauthorized movement of the body or other items could compromise the investigation.

What to do after an unattended death

- 1. Do not touch or move the body. It is crucial to leave the body and surrounding items exactly as they are.
- 2. Contact law enforcement immediately. A death must be reported immediately to the coroner if it occurs under unusual or unattended circumstances. Call 911 or your local law enforcement's non-emergency line.
- 3. Provide access for the coroner. Once the proper authorities arrive, the coroner or their appointed deputy will examine the scene. They may order the body to be removed for further investigation or an autopsy.

ASSESSED TO SELECTION OF THE SECOND



Take a 10 minute break



Most earthquake injuries from falling or flying objects



Possibly 2-3 days when you get to a casualty or this might be someone who walks into our CAS. Battle's sign= basilar skull fx. (named after English surgeon William Battle)
Racoon eyes=basilar skull fx

MOI= blunt trauma to back of head or temporal region

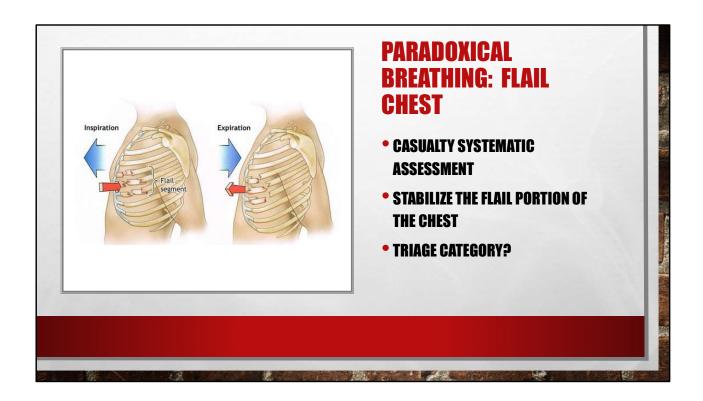
TRIAGE IMMEDIATE; call EMS



IMMEDIATE; call EMS



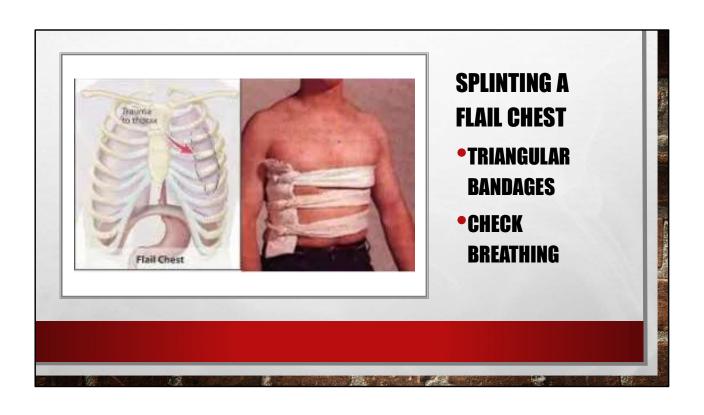
Bookcase falls on husband



You also notice something called paradoxical breathing, an unusual movement of the chest. Put your hands over your chest on either side, take a deep breath, now exhale

A flail chest is when multiple contiguous ribs on one side are broken in more than one place causing that loose segment to move or "flail" separately from the rest of the rib cage

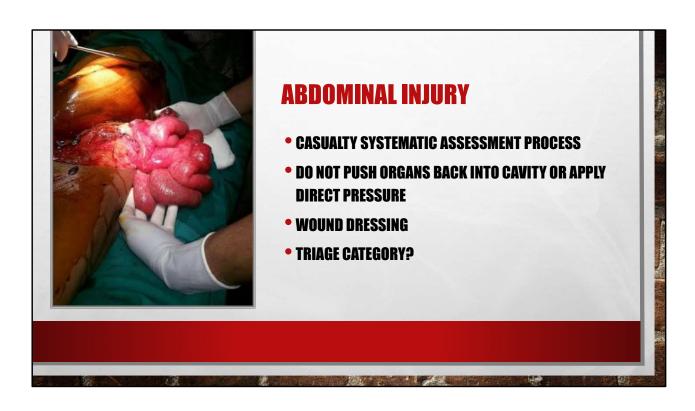
Use pillow/towel to splint flail chest. If have to leave; abd pad w/triangular bandages LOOSE TRIAGE IMMEDIATE; call EMS





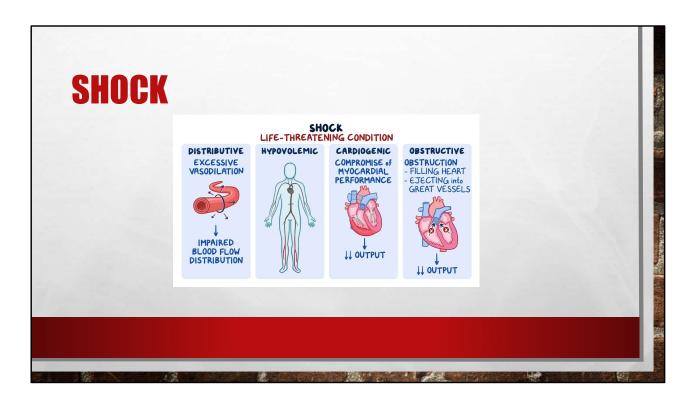
Same guy; here, part of the broken bookcase punctured his chest and during your Casualty Systematic Assessment you see this and hear a sucking, gurgling sound every time he takes a breath.

TRIAGE: IMMEDIATE call EMS



Moisten sterile dressing w/clean, warm tap water and apply over the wound. Cover w/plastic wrap or aluminum foil.

TRIAGE CATEGORY immediate and radio in open abdominal wound injury. Call EMS



Learning point: shock not always from massive hemorrhage so MOST important you can recognize signs (something you can see w/your eyes) and symptoms (something the person tells you).

Distributive: anaphylaxis

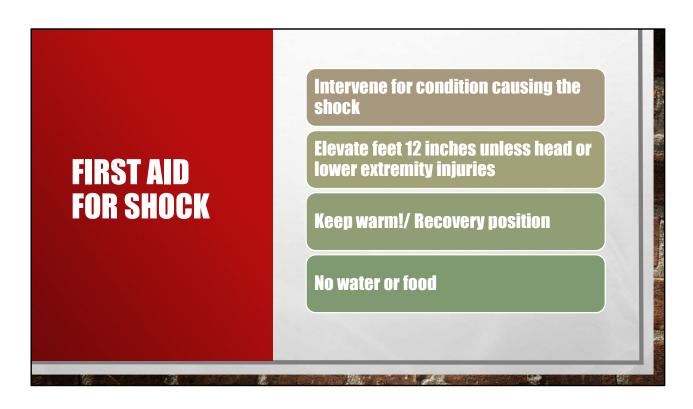
Hypovolemic; hemorrhage

Cardiogenic: heart attack now heart failing

Obstructive: pulmonary embolism



DO NOT give water/food as they may aspirate/vomit

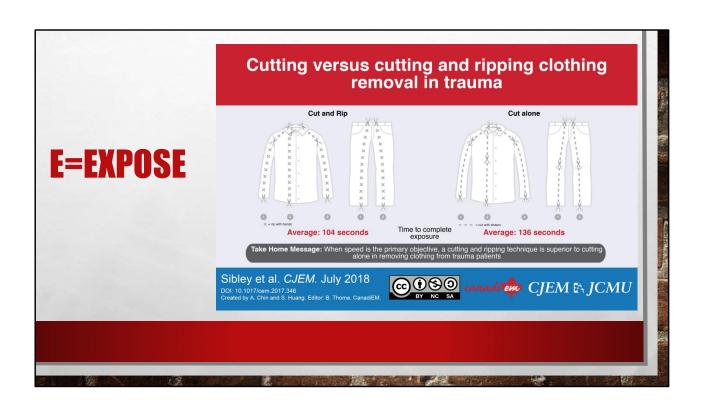


Anaphylactic; EPI pen

Intervene: CSAP, provide first aid for lifethreatening external hemorrhage

No matter how thirsty; no water!

Triage category: IMMEDIATE. Call EMS





I'd like to conclude by saying how impressive it is that all of you are here today preparing yourselves to help neighbors during a MASCAL event here at OHCC. That takes courage and a good amount of sacrifice on your part! It's my honor to be part of something much larger than us and that is a willingness to serve others in a time of need. Thanks for your attention.

Any questions?