

Maine Medical Center
REMIS/OneCall

EMS Priority 1		EMS Priority 2		EMS Priority 3	
Critically ill and require immediate attention. Delays in treatment may be harmful to the patient. ▶ ED Physician Response: ED Attending PG #2 , 3 ▶ Trauma Team		Conditions requiring emergency medical attention, but not posing a threat to life. ▶ ED Physician Response: ED Attending; PG # 3 ▶ Trauma Team		Conditions requiring medical attention, but not on an urgent basis. Pt usually does not require a Critical Care Room Assignment	
Priority 1 Medical	Priority 1 Trauma	Priority 2 Medical	Priority 2 Trauma	Priority 3 Medical	Priority 3 Trauma
<p><u>Airway</u> Any airway compromise</p> <p>Any intubated or Respiratory Assisted pt</p> <ul style="list-style-type: none"> •Hemodynamically unstable <p><u>Hypotension BP_{sys}</u> Adult <90 >6 years <90 2-6 years <80 <2 years <70</p> <ul style="list-style-type: none"> •Unresponsive GCS <9 (postures, responds to pain only) <ul style="list-style-type: none"> •Cardiac arrest 	<p><u>Airway</u> Adult : RR >30 or <10 Child <6 years: RR>60 any intubated or Respiratory Assisted pt</p> <ul style="list-style-type: none"> •Hemodynamically unstable <p><u>Hypotension BP_{sys}</u> Adult <90 >6 years <90 2-6 years <80 <2 years <70</p> <ul style="list-style-type: none"> •Unresponsive GCS <9 (postures, responds to pain only) <ul style="list-style-type: none"> •Amputation above ankle or wrist <ul style="list-style-type: none"> •Hanging + GCS <9 •Cold, pulse-less extremity or active bleeding •GSW or Stab Wound to head, neck, torso, groin •Any Trauma transfer Pt with Blood Hanging •Field judgment •Hanging with GCS< 9 •Blunt Trauma Victims in Cardiac Arrest 	<ul style="list-style-type: none"> •STEMI*** •Stroke*** •Sepsis alert <p>fever with altered mental status</p> <ul style="list-style-type: none"> •Known or suspected AAA •Drug ingestion • Combative, escalating pt requiring immediate Security assistance(Code Green) <p>*Any pt with the above complaint but with Airway or hemodynamic compromise is upgraded to a Priority 1</p> <p><u>OB Trauma Guideline patients are Priority "2" and overhead Paged as a "P2 OB Trauma patient"</u></p>	<ul style="list-style-type: none"> •GCS <13 (Responds to Voice but not following commands, not alert) <ul style="list-style-type: none"> • Flail chest • Spinal cord injury, not able to move arms or legs • Suspect abdominal injury • Multiple long bone or open fractures • Suspected pelvic ring injury • Occupant death, prolonged extrication, ejection • Motorcycle Crash + injury • Falls > 3X Height or 20 feet • Burns >20% BSA 2nd and 3rd degree • Pedestrian struck by motor vehicle <ul style="list-style-type: none"> •Hanging with altered LOC <p>•Pts who bypass a Community Hospital at the request of local Medical Control who do not fit P1 criteria</p>	<p>Elderly Pts > 65 Pregnant pts should be upgraded if there is a question</p>	<p>Pts initially called a Trauma Priority 3 are upgraded if they: <u>Upgrade If:</u></p> <ul style="list-style-type: none"> •Meet 1 or 2 criteria • are moved directly into a Trauma Room •Trauma Service admission • Are admitted to a subspecialty service that desires a Trauma Consult • Require an Abdominal evaluation <ul style="list-style-type: none"> •Attempted hanging

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