

## Triage

Triage is a system used by medical or emergency personnel to ration care when the number of casualties needing care exceeds the resources available to perform care. It is designed to help those who can most benefit from the available care. In serious situations triage may cause some deaths that might normally be avoidable. However, these are not avoidable deaths, because the situation is not normal, and resources to care for those people are not available.

This article describes an expedient triage system that can be performed by lightly trained lay personnel in emergencies. It is not intended to supersede or instruct medical personnel or techniques. It may serve as an instructive example, and was current as of 2001.

Triage separates people into three groups: The dead or near-dead who are beyond your help, the severely injured who can be helped by immediate first aid, and the moderately injured, those who need help less urgently. Only perform triage for two or more injured persons. For a single injury, always perform first aid!

**ALWAYS ASSESS THE OVER-ALL SITUATION BEFORE BEGINNING TRIAGE.** A school bus accident in a major city is very different from a plane crash in a remote location. Always evaluate your AVAILABLE RESOURCES prior to beginning. Some form of marking is very helpful to ration care. If you have triage tags immediately available, (the right solution) use them. If you have a marker, or lipstick on your person, mark foreheads with "Dead" for dead, "I" for severely injured, or "D" for moderately injured. Unmarked or untagged persons should be considered unevaluated. If you cannot mark or tag, proceed anyway, and ignore the instructions to tag.

**Triage 1:** Loudly and authoritatively ask the group to get up and walk to a safe area that you designate. If you have not called for help, point at a particular 'walking wounded' person, and forcefully ask them to call for help. Make eye-contact, and get them to promise to do it. Say, "You! Get help! Will you do that?" or if your area has a designated emergency number, say, "You!, Call 911! Will you do that?"

**Triage 2:** On the remaining persons, check RPM, that is, Respiration, Perfusion, and Mental state. For each person, follow this procedure: Triage 2R: If a person is not breathing, adjust their head and clear their airway. If that does not restore their breathing, they are beyond your ability to help. Tag them as "dead." Triage 2P: If a person is breathing, check their perfusion by pressing a fingernail, and seeing if it turns pink within two seconds. Be alert for the presence of nail polish: or check for a pulse at their wrist. If it's dark, use your flashlight, if you have one on your person. If they are beyond your ability to help. Tag them as "dead." Checking the fingernail is both faster and more reliable than checking the pulse, if the light permits, and this means you are less likely to mistake a person as "dead."

Triage 2M: If they are breathing and perfused, check their mental state. Ask them their name, and what happened. If they cannot reply, or say something unrelated, ask again, and tell them that you are testing to see if they are mentally confused.

**Triage 3:** Recruit the moderately injured and bystanders to perform first aid operations, by telling them what to do for each severely injured person. There are almost always enough people to perform the needed first aid when given instruction. Tag each person receiving first-aid as "severe."

**Triage 4:** As time permits, examine the 'severe' and 'moderate' patients for shock?. Look for very rapid breathing, more than twice as rapid as yours, and confirm by touching their skin. If they are clammy or cold, or the breathing is sufficiently rapid, they are entering shock. Have them sit down. If they are sitting, have them lay down. If they are laying down, have them raise their legs. The object is to raise the blood pressure to their inner organs to prevent oxygen starvation of major tissues - which is one way that shock kills. If possible, try to keep shock victims dry and warm to reduce their need for oxygen. If you have oxygen, and know how to administer it, do so. As you have time, tag walking wounded as "moderate" and upgrade shock victims to "s