S.T.A.R.T. Triage and the PSAP

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INTRODUCTIONS

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Objectives

Upon completion of this course participants will be able to:

- Define Mass Casualty Incident (MCI)
- Understand the difference between disasters and MCIs
- Define S.T.A.R.T. and understand its components
- Understand how triage benefits resource response and management
- Understand the importance of the PSAP during an MCI
Given Virginia’s geographic location, population centers, major transportation routes, and unique hazards, there is an enormous potential for incidents to occur which injure people in numbers that could overwhelm any EMS system.
MCI vs. DISASTER

- Some people call these types of incidents disasters.
- Disaster has specific legal meaning:
  - States & localities declare “state of emergency”
  - The President declares “major disaster”
Any incident that injures enough people to overwhelm resources usually available in a particular system or area
GOALS OF MCI M
GREATEST GOOD

- Heroic resuscitative efforts NOT appropriate
  - Too much time
  - Requires equipment used for salvageable patients
  - Staffing intensive

- Concentrate on salvageable patients

Do the Greatest Good for the Greatest Number
RESOURCE DEMANDS

- Equipment
- Responding Personnel
- Facilities
DO NOT RELOCATE THE DISASTER!

- Patient prioritization at the scene important for casualty distribution
  - Don’t send all the patients to one hospital!
FIRST ARRIVING UNIT

- Begin the following actions:

5 S's
Assess scene for safety
SCENE SIZE-UP

- How big is incident and how bad is it?
  - Type of incident
  - Approximate # of patients
  - Severity of injuries
  - Area involved, including access
SEND INFORMATION

- Report Situation
- Request Assistance
- Rapid Hospital Notification
SET UP

- Incident Command Structure
- Staging

Secure Adequate Space
- Incident Command
- Triage
- Treatment
- Transportation
Simple Triage and Rapid Treatment

Assures rapid initial assessment of all patients as basis for assignment to treatment

Triage - French for “to sort”
SIMPLE TRIAGE AND RAPID TREATMENT (START) SYSTEM
PURPOSE OF TRIAGE

- Assigns treatment priorities
- Uses universal colors
- Separates victims into easily identifiable groups
Immediate (highest priority).

Problems with: RPMS
- R – Respirations/airway
- P – Perfusion/pulse
- M – Mental Status
- S - Severe burns which compromise airway
YELLOW TAGGED

- Delayed (second priority)
  - Burn patients without airway problems
  - Major or multiple bone or joint injuries
  - Back and spine injuries
GREEN TAGGED

- Minor (third priority)
  - “Walking wounded”
  - Minor painful swollen deformities
  - Minor soft tissue injuries
Dead/non-salvageable (lowest priority)

- Non-breathing patients
  - Resuscitation would normally be attempted
  - Not salvageable given resources available early in MCI response
START

VENTILATIONS

Is patient breathing?

YES

> 30 breaths/min

RED Tag

<30 breaths/min

CIRCULATION

Is patient breathing now?

YES

Radial Pulse Present

RED Tag

NO

Reposition Airway

<30 breaths/min

MENTAL STATUS

Can patient follow simple commands?

NO

RED Tag

YES

YELLOW Tag

Or

GREEN Tag

Radial Pulse Not Present

RED Tag
Role of the PSAP
Initial Communications

With caller

- Ask them to do the following:
  - Estimate number of patients
  - Provide information on types of injuries
    - i.e. burns, trauma, medical
  - Describe type of incident
    - i.e. car accident, building collapse, bombing

- May be able to guide them in basic triage methods
  - If they have breathing problems or significant bleeding – RED
  - If they appear conscious, but aren’t walking – YELLOW
  - Walking - GREEN
PSAP Responsibilities

- Dispatch of additional resources
  - In jurisdiction resources
  - Local Mutual Aid
  - Regional Mutual Aid
  - Statewide Mutual Aid

- Notification of Regional Coordination Center
  - Ensures that hospital system prepares for influx of patients
PSAP Responsibilities

- Monitor multiple channels
  - Staging, Operations, Command, and Logistics may all be on different channels

- Work with Incident Commander to conduct Personnel Accountability Reports (PAR)
What about EMD Protocols?

- Due to the nature and scope of the incident, normal EMD protocols can probably be waived and the “Emergency Rule” will be observed.
The Emergency Rule states that "one who is faced with an emergency cannot be held to the same standard of conduct that he/she would otherwise be held to when not faced with such a situation."

It is based on the "principle of reasonableness."
Non-Standard Procedures

- Units may not mark enroute to the hospital
  - Minimizes radio traffic

- Units may not mark clear from the hospital or enroute back to the scene
  - Minimizes radio traffic
Non-Incident Activities

- Regular, routine and non-incident driven calls and radio traffic will still be occurring at this time.
- Do not get “tunnel-vision”
- Allocate resources to insure all calls are handled and processed correctly.
Conclusion

- PSAP’s play important and ongoing role in mass casualty incident response

- Knowledge of progression of on-scene activities by PSAP personnel ensures more effective response during an MCI

- PSAP personnel should work with localities to participate in MCI drills
Questions/Comments

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