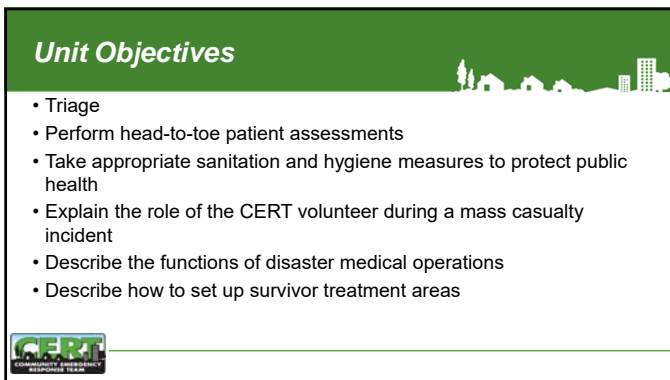
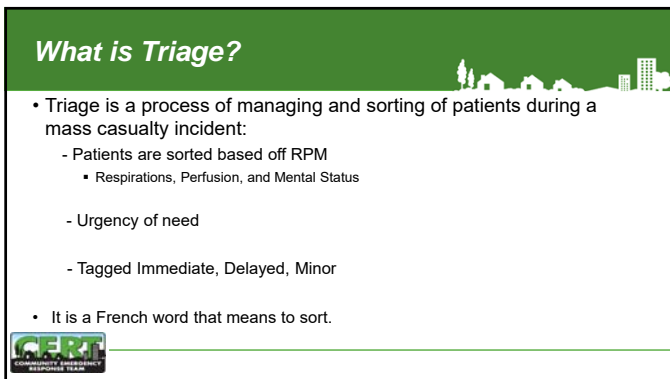




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3

What is Triage?


- Triage is a process of managing and sorting of patients during a mass casualty incident:
 - Patients are sorted based off RPM
 - Respirations, Perfusion, and Mental Status
 - Urgency of need
 - Tagged Immediate, Delayed, Minor
- It is a French word that means to sort.



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Triage Process


- Step 1: Stop, Look, Listen, and Think
- Step 2: Conduct voice triage
- Step 3: Start where you stand; follow systematic route
- Step 4: Evaluate each victim and tag
- Step 5: Treat "I" victims immediately
- Step 6: Document triage results



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Triage Process

- Check RPM
 - Respirations – Open airway, check breathing
 - Perfusion – Capillary Refill, pulse; Circulation & bleeding
 - Mental Status – Ask questions; Alert & oriented



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Triage Video




Part 1: <https://www.youtube.com/watch?v=73kJ-4gEsnA>
 Part 2: <https://www.youtube.com/watch?v=4NHS AZW0d5Y>



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Triage Categories


- I: Immediate**
 - Life-threatening conditions resulting in shock
- D: Delayed**
 - Treatment can be delayed (fractures, burns)
 - Injuries do not jeopardize victim's life
- M: Minor**
 - “Walking wounded” (cuts, abrasions)
- X : Dead**
 - No CPR: If breathing cannot be restored on the second try, CERT members must move on the the next victim



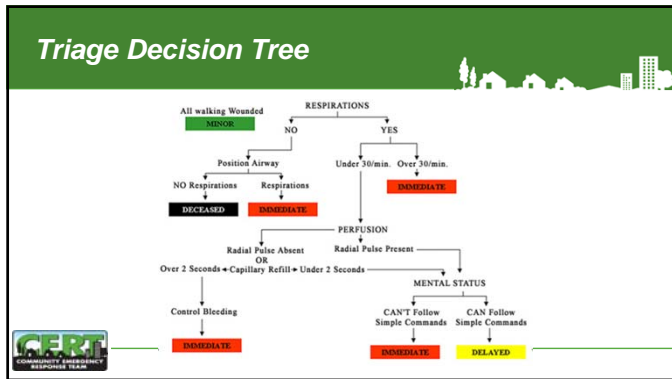
8

Triage Tests - RPM

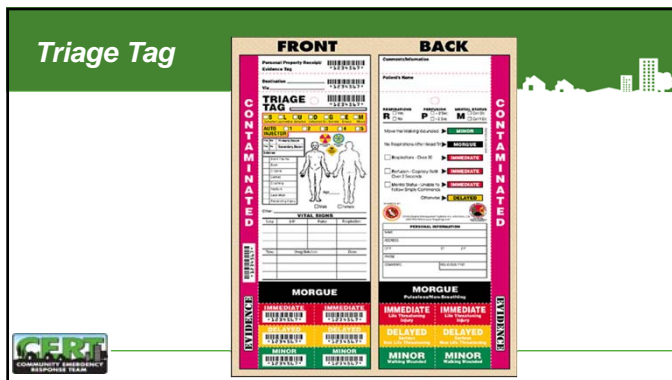
- Respiration
 - >30bpm = **IMMEDIATE**
- Perfusion: Capillary Blanche
 - >2sec = **IMMEDIATE**
- Mental Status
 - Unconscious = **IMMEDIATE**
 - Can't follow simple command = **IMMEDIATE**



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Triage System


- Make the scene safe to approach, Start where you stand!
- "Anyone that can hear me, come to the sound of my voice!"
 - Walking Wounded = MINOR
- Systematic and Thorough
 - Start with the first one you find
 - Less than one minute per victim
- Tag or mark
- Document!
- Repeat - Start with IMMEDIATES



13

Head-to-Toe Assessment

- Conducted on ALL victims
- Verbal, hands-on
 - Wear protective gear
- Look, listen, and feel for anything unusual
 - Assess from top to bottom
- Assess completely before beginning treatment
- Document: injuries and treatment
- Treat all victims as if they have a spinal injury until certain they do not
- Check color, warmth, and sensation on all extremities
- Look for medical identification



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DCAP-BTLS


- Deformities
- Contusions
- Abrasions
- Punctures
- Burns
- Tenderness
- Lacerations
- Swelling




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Conducting Head-to-Toe Assessment


- Pay careful attention
- Look, listen, and feel
- Suspect a spinal injury in unconscious survivors and treat accordingly
- Check own hands for patient bleeding



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Order of Assessment


1. Head
2. Neck
3. Shoulders
4. Chest
5. Arms
6. Abdomen
7. Pelvis
8. Legs



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Closed-Head, Neck, Spinal Injuries


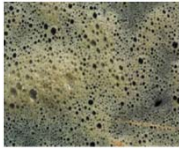
- If injuries to the head or spine are suspected, **do no harm**
 - Minimize movement of head and neck while treating life-threatening conditions
- If survivors exhibit signs or are found under heavy debris, treat them as having a closed-head, neck, or spinal injury



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Public Health Considerations



- Maintaining proper hygiene
- Maintaining proper sanitation
- Purifying water (if necessary)
- Preventing spread of disease



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Maintaining Hygiene

- Wash hands frequently
 - Or use alcohol-based hand sanitizer
- Wear non-latex exam gloves
- Keep dressings sterile
- Wash areas that come in contact with body fluids



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Maintain Sanitation



- Control disposal of bacterial sources
- Put waste products in plastic bags
 - Tie off bags and mark them as medical waste
- Bury human waste



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Water Purification Methods


- Boil water for 1 minute
- Water purification tablets
- Non-perfumed liquid bleach
 - 8 drops/gal of water
 - 16 drops/gal if water is cloudy
 - Let stand for 30 minutes before use



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Mass Casualty Incidents


- Incidents in which the number of casualties overwhelms the local resources
 - Commuter train derailment
 - Multi-car accident
 - Bus accident
 - Building collapse
 - Natural disasters (e.g., tornadoes)



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Role of First Responder Personnel


- During mass casualty events, first responder personnel will:
 - Establish command and control of the incident area
 - Conduct a scene size-up and set-up
 - Send survivors with relatively minor injuries to a holding area to await treatment
 - Identify survivors who require life-saving interventions and treat them immediately



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Role of First Responder Personnel


- During mass casualty events, first responder personnel will also:
 - Identify deceased victims as well as survivors too severely injured to save
 - Manage medical transportation for survivors who require additional treatment
 - Secure the area to protect first responders, survivors, and evidence for law enforcement investigations
 - Remove debris and other safety or health threats



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Role of CERT Volunteers

- Respond to the Call Out notification
- Check in and get assignment
- Put on PPE and any CERT affiliated gear



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Functions of Disaster Medical Operations


- Triage/Assessment
- Treatment
- Morgue



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Establish a Medical Treatment Area


- DPS will advise what location will be set up for the treatment area
 - The EOC will decide the location
 - There is a predetermined list from which the EOC will pick from



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Safety for Rescuers

YOUR safety is the number one priority



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