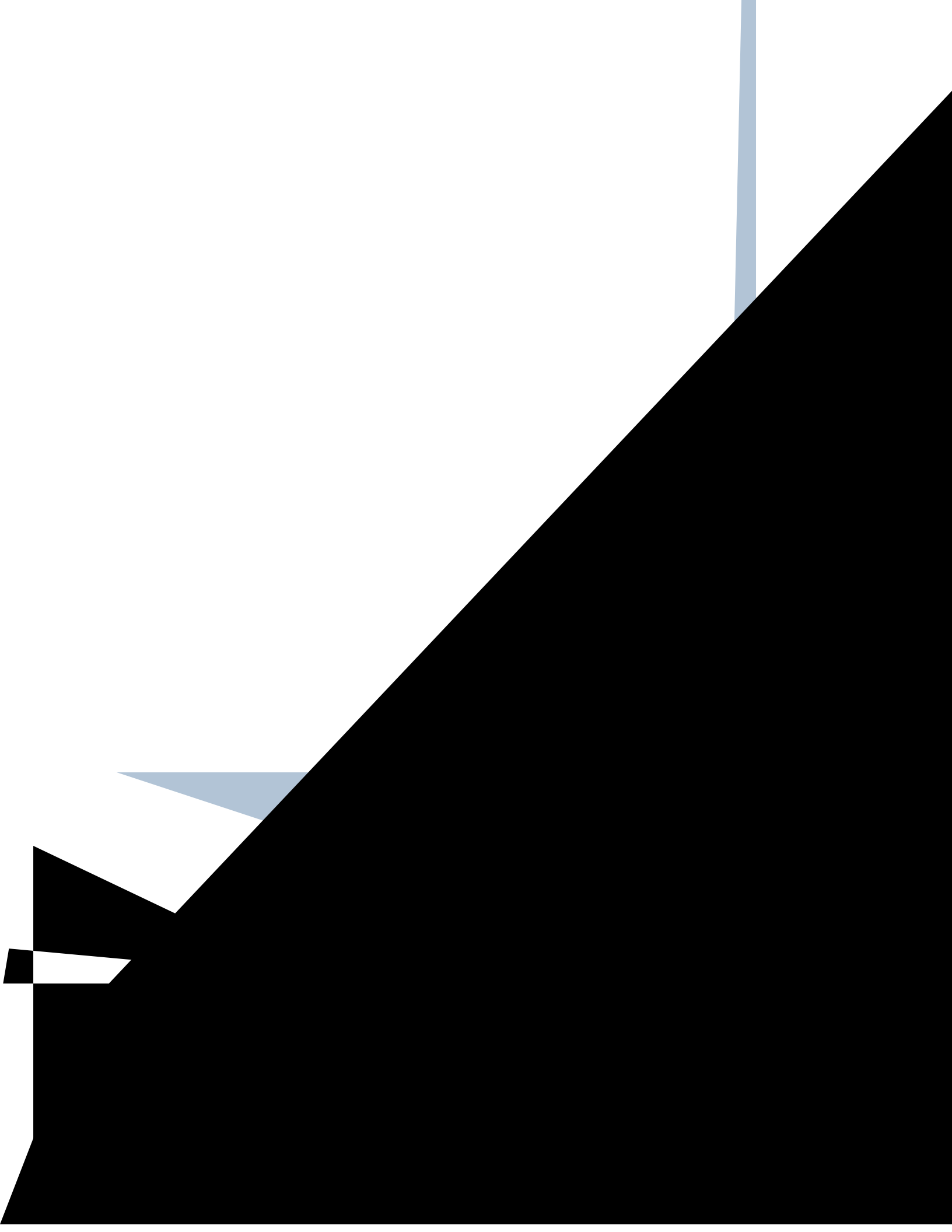

Interfacility Transfer of Injured Patients: Guidelines for Rural Communities

B Sco R. Pe e en, MD, FACS, and he Ad Hoc Commi ee on R al T a ma, ACS Commi ee on T a ma

General Principles

1. The a majo i of inj ed a ien ecei e hei o al ca e in he al ho i al, and an fe o a highe le el of ca e i no nece a .

2. Ph ician ho ld a e hei o n ca abili ie and ho e of hei in i ion. Thi a e men allo fo ea l ecogni ion of a ien ho ma be afel ca ed fo in he local ho i al and ho e ho e j e an fe o an in i ion ha can o ide o imal ca e.

3. Once he need fo an fe i ecogni ed, a angemen ho ld be e edi ed and no dela ed fo diagno ic oced e ha do no change he immedia e lan of ca e.

4. When o ible, life-h ea ening inj ie ma be abili ed a he al facili io o an o . Thi ea men ma e j e o e a i e in e en ion o en e ha he a ien i in he be o ible condi ion fo an fe . In e en ion io o an fe i a gical deci ion.

DO NOT DELAY

Transfer Protocols

Referring Physician	

Interhospital Triage Criteria

Pa ien i h ce ain ecific inj ie o combina ion of inj ie (a ic la l ho e in ol ing he b ain) o a ien ho ha e hi o ical finding indica ing high-ene g an fe ma be a i k fo dea h and a e candida e fo ea l an fe .

The follo ing c i e ia gge he nece i fo ea l an fe ; ho e e , he e c i e ia ma a i h indi id al ho i al .

Central Nervous System

Head inj - Pene a ing inj o de e ed k ll f ac e
- O en inj i h o i ho CSF leak
- GCS co e < 14 o GCS de e io a ion
- La e ali ing ign

S inal co d inj

Chest

Widened media in m o o he ign gge ing g ea e el inj
Majo che all inj o lmona con ion
Ca diac inj (bl n o ene a ing)
Pa ien ho ma e j e olonged en ila ion

Pelvis/Abdomen

Un able el ic ing di ion
Pel ic f ac e i h hock o o he e idence of con in ing hemo hage
O en el ic inj
Solid o gan inj

Major Extremity Injuries

F ac e/di loca ion i h lo of di al l e
O en long bone f ac e
C h inj ie o olonged e emi i chemia

Multiple System Injury

Head inj combined i h face, che , abdominal, o el ic inj
Majo b n o b n i h a ocia ed inj ie
M l i le long bone f ac e
Inj o o o o mo e bod egion

Comorbid Factors

Age < 5 ea o > 55 ea
Kno n ca dio e j a o o me abolic di ea e (diabe e , obe i)
P egnanc
Imm no e ion

Secondary Deterioration (Late Sequelae)

P olonged mechanical en ila ion e j ed
Se i
Single o m l i le o gan em fail e (de e io a ion in CNS, ca diac, lmona , he a ic, enal, o coag la ion em)
Majo i e nec o i

Ada ed f om ACS Commi ee on T a ma: *Resources for Optimal Care of the Injured Patient, 1999*.

633 N. Saint Clair St.
Chicago, IL 60611