

**SURGE
SORT
SUPPORT**

DEEP center
Disaster & Extreme Event Preparedness

**SURGE
SORT
SUPPORT**

FLORIDA DEPARTMENT OF
HEALTH

DEEP center
Disaster & Extreme Event Preparedness

SURGE SORT SUPPORT

Featuring:
Continuous Integrated Triage

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THINK: HUMAN BEHAVIOR

How do SURVIVORS act?

How do SURVIVORS react?

How do RESPONDERS function?

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PSYCHOLOGICAL CASUALTIES

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Psychological Casualties

- Psychological symptoms without physical symptoms
- Multiple unexplained physical symptoms (MUPS)
- Mass Psychogenic Illness (MPI)

DEEP HEALTH Source: Shultz et al., Disaster Behavioral Health Awareness Training for Health Care Professionals, 2004

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Behavioral Triage

Distinguish persons needing acute behavioral health evaluation from those experiencing “normal distress.”

DEEP HEALTH Source: Shultz et al., Disaster Behavioral Health Awareness Training for Health Care Professionals, 2004

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Triage Complexity

Triage must consider medical and psychological casualties simultaneously

- Medical casualties** with or without prominent psychological symptoms
- Psychological casualties** with or without “psychogenic” physical symptoms

DEEP HEALTH Source: Shultz et al., Disaster Behavioral Health Awareness Training for Health Care Professionals, 2004

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Triage Complexity


Most disaster casualties have a combination of medical and psychological needs.

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Source: Shultz et al., Disaster Behavioral Health Awareness Training for Health Care Professionals, 2004

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Triage Assumptions



Triage of patients is essential during emergencies and catastrophic health events.

Triage is incomplete at the community scene.

Triage is primarily conducted at the hospital.

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Triage Assumptions



Triage will help distinguish medical and psychological casualties.

Patients are commonly triaged multiple times.

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Triage Assumptions

Distress is expected in disaster events.

Distress may spread by “contagion.”

The degree of distress is assessed during behavioral triage.

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The Ideal Mass Triage System
“CONTINUOUS INTEGRATED TRIAGE”

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The FIVE Attributes of the Ideal Mass Triage System

- 1 **FAST**
- 2 **SCALABLE**
- 3 **RECURRING**
- 4 **MEDICAL AND BEHAVIORAL TRIAGE IN ONE SYSTEM**
- 5 **RESOURCE-BASED CRITERIA FOR EXCLUSION FROM CARE**

Source: Ramirez MA, 2003. Review and Integration of Current Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved.

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SORT		IDEAL TRIAGE	CONTINUOUS INTEGRATED TRIAGE
1	FAST		
2	SCALABLE		
3	RECURRING		
4	MEDICAL + BEHAVIORAL		
5	CRITERIA FOR EXCLUSION		

DEEP HEALTH

Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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SORT		IDEAL TRIAGE	CONTINUOUS INTEGRATED TRIAGE
1	FAST		<i>Improved survival through rapid, timely care of the most severe</i>
2	SCALABLE		
3	RECURRING		
4	MEDICAL + BEHAVIORAL		
5	CRITERIA FOR EXCLUSION		

DEEP HEALTH

Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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SORT		IDEAL TRIAGE	CONTINUOUS INTEGRATED TRIAGE
1	FAST		<i>Improved survival through rapid, timely care of the most severe</i>
2	SCALABLE		<i>Speed and accuracy maintained in the face of mounting surge</i>
3	RECURRING		
4	MEDICAL + BEHAVIORAL		
5	CRITERIA FOR EXCLUSION		

DEEP HEALTH

Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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SORT		
	IDEAL TRIAGE	CONTINUOUS INTEGRATED TRIAGE
1	FAST	<i>Improved survival through rapid, timely care of the most severe</i>
2	SCALABLE	<i>Speed and accuracy maintained in the face of mounting surge</i>
3	RECURRING	<i>Evolving conditions are detected through repeated triage/monitoring</i>
4	MEDICAL + BEHAVIORAL	
5	CRITERIA FOR EXCLUSION	

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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	IDEAL TRIAGE	CONTINUOUS INTEGRATED TRIAGE
1	FAST	<i>Improved survival through rapid, timely care of the most severe</i>
2	SCALABLE	<i>Speed and accuracy maintained in the face of mounting surge</i>
3	RECURRING	<i>Evolving conditions are detected through repeated triage/monitoring</i>
4	MEDICAL + BEHAVIORAL	<i>Improved recovery through early medical & behavioral intervention</i>
5	CRITERIA FOR EXCLUSION	

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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	IDEAL TRIAGE	CONTINUOUS INTEGRATED TRIAGE
1	FAST	<i>Improved survival through rapid, timely care of the most severe</i>
2	SCALABLE	<i>Speed and accuracy maintained in the face of mounting surge</i>
3	RECURRING	<i>Evolving conditions are detected through repeated triage/monitoring</i>
4	MEDICAL + BEHAVIORAL	<i>Improved recovery through early medical & behavioral intervention</i>
5	CRITERIA FOR EXCLUSION	<i>Ethical, resource-based decision-making regarding priority for care</i>

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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Rationale for the Ideal Mass Triage System

- Real event casualties may exceed numbers used in most plans, drills, or simulations.
- Survivors with behavioral health needs may exceed patients with medical needs.
- Limited numbers of healthcare responders necessitate that many be capable of triage.
- Under stress, disaster healthcare responders will revert to triage methods they use daily.

Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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The Ideal Mass Triage System

RATING THE TRIAGE SYSTEMS

Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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“5-TIER TRIAGE” EMERGENCY SEVERITY INDEX

- 5-TIER (Triage Categories 1—5)
Resource and complaint balanced system
- Standard for operational triage in
United States Emergency Departments
- Developed by Agency for Healthcare
Research and Quality (AHRQ)
- 8 minutes per person

Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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RATING TRIAGE SYSTEMS 1.0-of-5.0

	IDEAL TRIAGE		"5-TIER TRIAGE" EMERGENCY SEVERITY INDEX
1	FAST	0	8 MINUTES PER PATIENT
2	SCALABLE	0	EACH PATIENT REQUIRES EQUAL TIME
3	RECURRING	0	INITIAL ENCOUNTER ONLY
4	MEDICAL + BEHAVIORAL	0.5	ALL PRESENTING COMPLAINTS BUT MEDICALLY FOCUSED
5	CRITERIA FOR EXCLUSION	0.5	USE OF TRIAGE CATEGORY 5 (BUT NO SET CRITERIA FOR EXCLUSION)

Source: Ramirez MA, 2003. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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S.T.A.R.T.
Simple Triage And Rapid Treatment

Color-coded triage system based on Respirations, Pulse and Mentation

Standard for pre-hospital triage and civilian mass casualty triage

Developed by the Fire/Rescue

Modified by the Military

1 minute per person

Source: Ramirez MA, 2003. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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RATING TRIAGE SYSTEMS 3.0-of-5.0

	IDEAL TRIAGE		S.T.A.R.T. TRIAGE
1	FAST	1	1 MINUTE PER PATIENT
2	SCALABLE	0	EACH PATIENT REQUIRES EQUAL TIME
3	RECURRING	1	RECURRING UNTIL PT ENTERS TREATMENT AREA
4	MEDICAL + BEHAVIORAL	0.5	ALL PRESENTING COMPLAINTS EXCLUSIVELY MEDICAL
5	CRITERIA FOR EXCLUSION	0.5	"EXPECTANT" CATEGORY (BUT NO SET CRITERIA FOR EXCLUSION)

Source: Ramirez MA, 2003. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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PsySTART

Color-coded triage system based on questions related to psychological impact

Developed by university researcher and tested during national disaster exercise

≥8 minutes per person

Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

DEEP Disaster Emergency Preparedness

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RATING TRIAGE SYSTEMS 0.0-of-5.0

	IDEAL TRIAGE	PsySTART
1	FAST	0 ≥8 MINUTES PER PATIENT
2	SCALABLE	0 EACH PATIENT REQUIRES EQUAL TIME
3	RECURRING	0 SINGLE-TIME APPLICATION WITH REFERRAL
4	MEDICAL + BEHAVIORAL	0 EXCLUSIVELY BEHAVIORAL
5	CRITERIA FOR EXCLUSION	0 NO CRITERIA FOR EXCLUSION FROM CARE

Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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M.A.S.S.
Move, Assess, Sort, and Send

Classification of patients based on ability to walk, raise limbs, and follow commands

Developed/introduced within National Disaster Life Support (NDLS) program

<1 minute per person

Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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RATING TRIAGE SYSTEMS 3.5-of-5.0

	IDEAL TRIAGE		M.A.S.S.
1	FAST	1	<< 1 MINUTE / PATIENT: VERY RAPID
2	SCALABLE	1	TIME PROPORTIONAL TO SIZE OF SURGE
3	RECURRING	0.5	PARTIAL ONGOING TRIAGE THROUGHOUT TREATMENT
4	MEDICAL + BEHAVIORAL	0.5	PREDOMINANTLY MEDICAL
5	CRITERIA FOR EXCLUSION	0.5	"EXPECTANT" CATEGORY (BUT NO SET CRITERIA FOR EXCLUSION)

DEEP HEALTH SOURCE: RAMIREZ MA, 2008. REVIEW AND INTEGRATION OF CIVILIAN TRIAGE SYSTEMS FOR OPTIMAL PATIENT CARE AND HEALTHCARE EFFICIENCY. HIGH ALERT LLC, KISSIMEE FL. ALL RIGHTS RESERVED.

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SALT / CDC / AMA Draft Triage System

Combination of elements from M.A.S.S. and S.T.A.R.T with interventions to decrease progression of critical patients

Developed by Centers for Disease Control and Prevention (CDC) and American Medical Association (AMA)

<1 minute per person

DEEP HEALTH SOURCE: RAMIREZ MA, 2008. REVIEW AND INTEGRATION OF CIVILIAN TRIAGE SYSTEMS FOR OPTIMAL PATIENT CARE AND HEALTHCARE EFFICIENCY. HIGH ALERT LLC, KISSIMEE FL. ALL RIGHTS RESERVED.

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RATING TRIAGE SYSTEMS 4.0-of-5.0

	IDEAL TRIAGE		SALT / CDC / AMA
1	FAST	1	<< 1 MINUTE / PATIENT: VERY RAPID
2	SCALABLE	1	TIME PROPORTIONAL TO SIZE OF SURGE
3	RECURRING	1	RECURRING UNTIL PT ENTERS TREATMENT AREA
4	MEDICAL + BEHAVIORAL	0.5	EXCLUSIVELY MEDICAL
5	CRITERIA FOR EXCLUSION	0.5	"EXPECTANT" CATEGORY (BUT NO SET CRITERIA FOR EXCLUSION)

DEEP HEALTH SOURCE: RAMIREZ MA, 2008. REVIEW AND INTEGRATION OF CIVILIAN TRIAGE SYSTEMS FOR OPTIMAL PATIENT CARE AND HEALTHCARE EFFICIENCY. HIGH ALERT LLC, KISSIMEE FL. ALL RIGHTS RESERVED.

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**CONTINUOUS INTEGRATED TRIAGE (CIT):
FIVE OPERATING PRINCIPLES**

- Each healthcare provider updates triage as part of each patient encounter.
- Resource-based and absolute triage exclusion criteria are fully integrated into triage process.
- Medical and behavioral triage occurs together.
- Exclusion criteria are included for both medical and behavioral patients.
- CIT is a streamlined, rule-based process.

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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RATING TRIAGE SYSTEMS 5.0-of-5.0

	IDEAL TRIAGE	CONTINUOUS INTEGRATED TRIAGE	
1	FAST		
2	SCALABLE		
3	RECURRING		
4	MEDICAL + BEHAVIORAL		
5	CRITERIA FOR EXCLUSION		

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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RATING TRIAGE SYSTEMS 5.0-of-5.0

	IDEAL TRIAGE	CONTINUOUS INTEGRATED TRIAGE	
1	FAST	1	<< 1 MINUTE / PATIENT: VERY RAPID
2	SCALABLE		
3	RECURRING		
4	MEDICAL + BEHAVIORAL		
5	CRITERIA FOR EXCLUSION		

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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RATING TRIAGE SYSTEMS 5.0-of-5.0

	IDEAL TRIAGE		CONTINUOUS INTEGRATED TRIAGE
1	FAST	1	<< 1 MINUTE / PATIENT: VERY RAPID
2	SCALABLE	1	TIME PROPORTIONAL TO SIZE OF SURGE
3	RECURRING		
4	MEDICAL + BEHAVIORAL		
5	CRITERIA FOR EXCLUSION		

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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RATING TRIAGE SYSTEMS 5.0-of-5.0

	IDEAL TRIAGE		CONTINUOUS INTEGRATED TRIAGE
1	FAST	1	<< 1 MINUTE / PATIENT: VERY RAPID
2	SCALABLE	1	TIME PROPORTIONAL TO SIZE OF SURGE
3	RECURRING	1	ONGOING REASSESSMENT THROUGHOUT TREATMENT
4	MEDICAL + BEHAVIORAL		
5	CRITERIA FOR EXCLUSION		

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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RATING TRIAGE SYSTEMS 5.0-of-5.0

	IDEAL TRIAGE		CONTINUOUS INTEGRATED TRIAGE
1	FAST	1	<< 1 MINUTE / PATIENT: VERY RAPID
2	SCALABLE	1	TIME PROPORTIONAL TO SIZE OF SURGE
3	RECURRING	1	ONGOING REASSESSMENT THROUGHOUT TREATMENT
4	MEDICAL + BEHAVIORAL	1	MEDICAL/BEHAVIORAL TRIAGE INTEGRATION
5	CRITERIA FOR EXCLUSION		

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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RATING TRIAGE SYSTEMS 5.0-of-5.0

	IDEAL TRIAGE		CONTINUOUS INTEGRATED TRIAGE
1	FAST	1	<< 1 MINUTE / PATIENT: VERY RAPID
2	SCALABLE	1	TIME PROPORTIONAL TO SIZE OF SURGE
3	RECURRING	1	ONGOING REASSESSMENT THROUGHOUT TREATMENT
4	MEDICAL + BEHAVIORAL	1	MEDICAL/BEHAVIORAL TRIAGE INTEGRATION
5	CRITERIA FOR EXCLUSION	1	"EXPECTANT" CATEGORY (WITH CRITERIA FOR EXCLUSION)

DEEP HEALTH

Source: Ramirez MA, 2003. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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**CONTINUOUS INTEGRATED TRIAGE (CIT):
TRIAGE STEP 1a: WALK**

*"If you can hear the sound of my voice,
stand up and walk to...(specified location)"*

Triage Step 1a is observational.

Requires a group of persons to see, hear, understand, comprehend, process, and comply with an instruction to walk to a designated area.

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Source: Ramirez MA, 2003. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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**CONTINUOUS INTEGRATED TRIAGE (CIT):
TRIAGE STEP 1a: WALK**

KEY OBSERVATIONS

Survivor able to walk ≥ 100 feet with minimal or no assistance.

Survivor is neurologically intact bilaterally.

Survivor is capable of complying with instruction and authority.

Survivor aware and able to perceive environment correctly.

STABLE FOR TRANSPORT

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Source: Ramirez MA, 2003. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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**CONTINUOUS INTEGRATED TRIAGE (CIT):
TRIAGE STEP 1a: WALK**

STANDARD PATIENT CLASSIFICATIONS

New York Heart Classification (NYHC)	Stage 1
Gold Pulmonary Classification	Stage 1
NIH Stroke Scale (NIHSS)	Score: 0
Glasgow Coma Scale	15/15
Global Assessment of Functioning	>50

STABLE FOR TRANSPORT

Source: Ramirez MA, 2003. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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**CONTINUOUS INTEGRATED TRIAGE (CIT):
TRIAGE STEP 1a: WALK**

KEY OBSERVATIONS

CONSCIOUS	AMBULATORY
ALERT	FOLLOWS COMMANDS
ORIENTED	

STABLE FOR TRANSPORT

Source: Ramirez MA, 2003. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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**CONTINUOUS INTEGRATED TRIAGE (CIT):
TRIAGE STEP 1b: WAVE**

*"If you can hear the sound of my voice,
wave an arm or raise a leg in the air"*

Triage Step 1b is observational.

Requires a group of persons who cannot walk to see, hear, understand, comprehend, process, and comply with an instruction to wave an arm or leg.

Source: Ramirez MA, 2003. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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**CONTINUOUS INTEGRATED TRIAGE (CIT):
TRIAGE STEP 1b: WAVE**

KEY OBSERVATIONS

- Survivor unable to walk but able to move major motor group.
- Survivor is neurologically intact bilaterally or unilaterally.
- Survivor is capable of complying with instruction and authority.
- Survivor aware and able to perceive environment correctly.

STABLE TO WAIT FOR CARE

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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**CONTINUOUS INTEGRATED TRIAGE (CIT):
TRIAGE STEP 1b: WAVE**

STANDARD PATIENT CLASSIFICATIONS

New York Heart Classification (NYHC)	Stage 1 or 2
Gold Pulmonary Classification	Stage 1 or 2
NIH Stroke Scale (NIHSS)	Score: <2
Glasgow Coma Scale	15/15
Global Assessment of Functioning	>50

STABLE TO WAIT FOR CARE

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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**CONTINUOUS INTEGRATED TRIAGE (CIT):
TRIAGE STEP 1b: WAVE**

KEY OBSERVATIONS

CONSCIOUS	NOT AMBULATORY
ALERT	FOLLOWS COMMANDS
ORIENTED	

STABLE TO WAIT FOR CARE

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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**CONTINUOUS INTEGRATED TRIAGE (CIT):
TRIAGE STEP 2a: START**

RPMs: PULSE

No Pulse	Dead <small>CPR contraindicated in mass casualty</small>	Next Patient
Abnormal Rate	Adult <60 or >100 Child <70 or >130	Critical or Expectant
Normal Rate	Adult 60-100 Child 70-130	Evaluate Mentation

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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**CONTINUOUS INTEGRATED TRIAGE (CIT):
TRIAGE STEP 2a: START**

RPMs: MENTATION

Alert, Oriented, Follows Commands, Ambulatory	"Stable" GREEN
Alert, Oriented, Follows Commands, NOT Ambulatory	"Urgent" YELLOW
Unconscious, Disoriented, Unresponsive, Inappropriate, Disconnected, Uncooperative	"Critical" or "Expectant" RED or BLACK

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

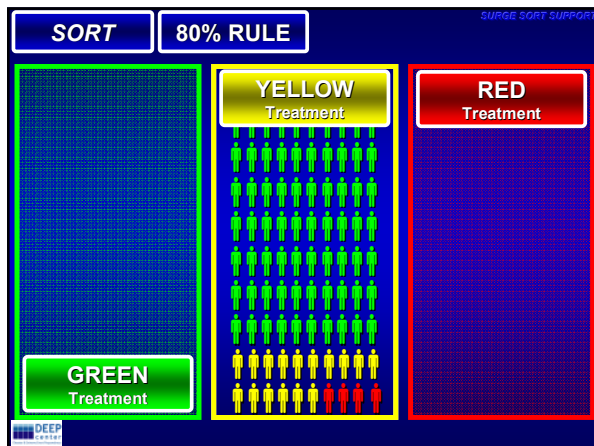
SORT **80% RULE** SURGE SORT SUPPORT

80% of medical casualties: GREEN

80% of remaining casualties (16%): YELLOW

4% RED

DEEP HEALTH





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**CONTINUOUS INTEGRATED TRIAGE (CIT):
TRIAGE STEP 2b:
BEHAVIORAL HEALTH TRIAGE**

Much information for behavioral health triage is Available from the Situation Report.

Initial behavioral health triage level is NEVER BETTER than the medical triage level.

Evaluation of MENTATION under START includes behavioral health triage.

Unconscious, disoriented, unresponsive, Inappropriate, disconnected, uncooperative

DEEP

Source: Ramirez MA, 2003. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved.

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BEHAVIORAL HEALTH TRIAGE LEVEL IS NEVER BETTER THAN MEDICAL TRIAGE LEVEL

PSY

MED	Fear of HAZMAT exposure
Unaccompanied minor	HAZMAT exposure
Missing family member	Decontamination
Separated from family	Home uninhabitable
Parent of child <18 years	Displaced from home

Source: Ramirez MK, 2003. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

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RED VS. BLACK: CRITERIA FOR EXCLUSION

Resource-based ethical decision:
Triage **CRITICAL (MED or PSY)**/Treat immediately:
when resources are available to treat the patient without endangering TWO or more other patients

MED: Red (Critical) Medical
Treat in Red Medical Treatment Area

PSY: Red (Critical) Psych
Treat in Red Behavioral Health Treatment Area

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RED VS. BLACK: CRITERIA FOR EXCLUSION

Resource-based ethical decision:
Triage **EXPECTANT (MED or PSY)**:
when resources are NOT available to treat the patient without endangering TWO or more other patients

MED: Black (Expectant) Medical
Treat in Black Expectant Medical Treatment Area

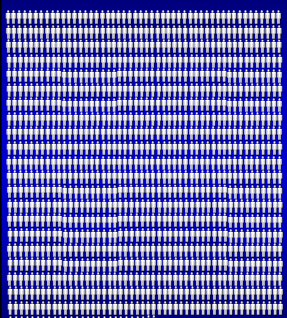
PSY: Black (Expectant) Psych
Treat in Black Expectant Behavioral Health Treatment Area

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APPLYING WALK/WAVE/START:
 HURRICANE KATRINA

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

SORT **CIT IN DISASTER** SURGE SORT SUPPORT



**Hurricane Katrina
New Orleans
August 31, 2005:**

Dr. Maurice Ramirez and team from FL-DMAT-3 enter Louis Armstrong International Airport and find 5,387 Katrina survivors in Concourse D.

Helicopter flight lines go active at the moment the team arrives, bringing in more patients each hour.

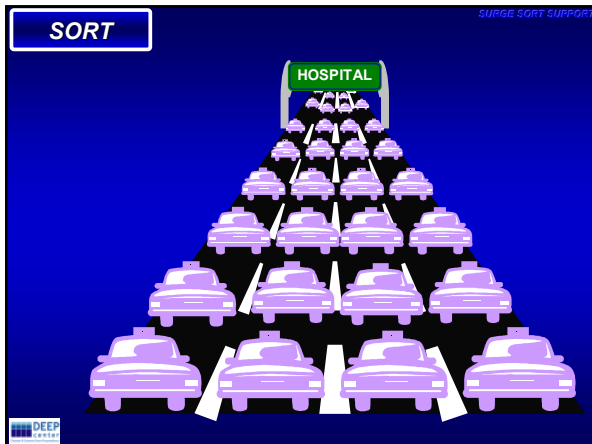
Challenge:
Triage 5,387 patients in 1 shift.

Scale:
 † = 5 Survivors

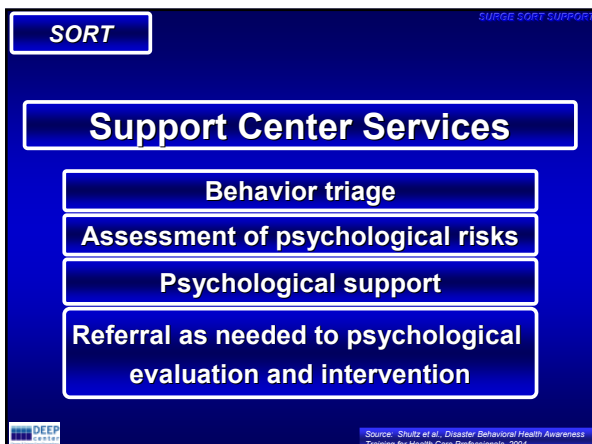
5,387 SURVIVORS

DEEP HEALTH Source: Ramirez MA, 2008. Review and Integration of Civilian Triage Systems for Optimal Patient Care and Healthcare Efficiency. High Alert LLC, Kissimmee FL. All Rights Reserved

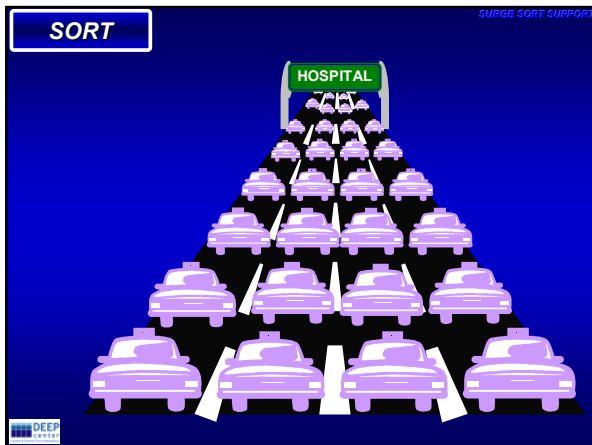
SORT **August 31, 2005** SURGE SORT SUPPORT

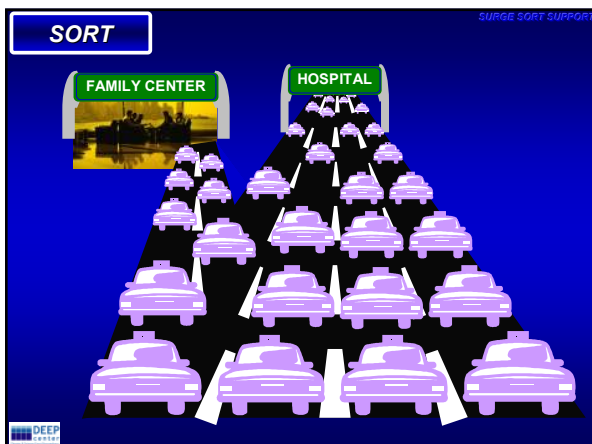


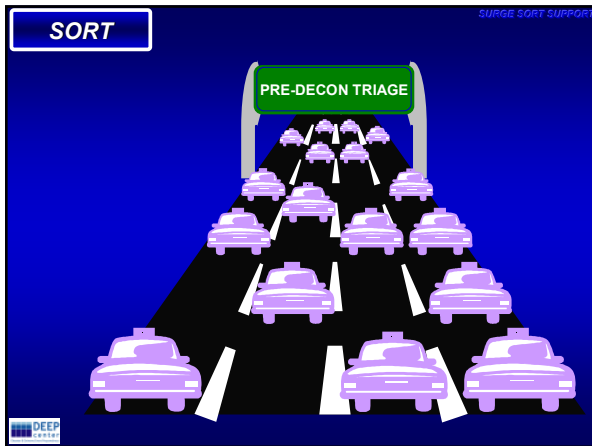


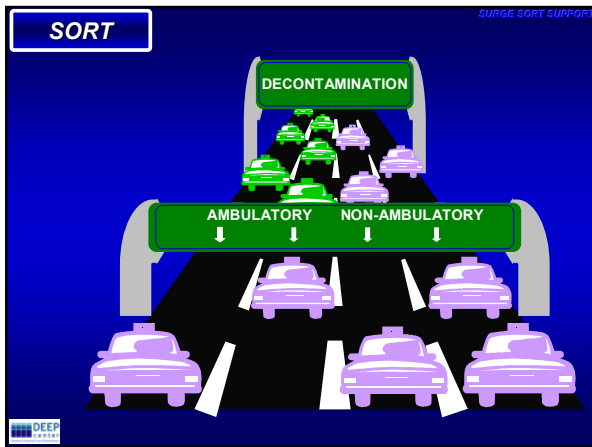


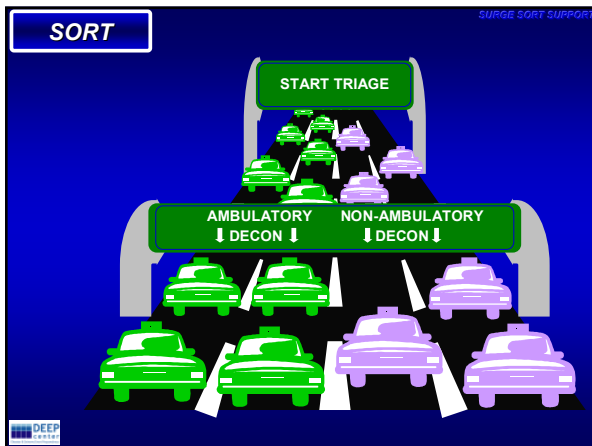


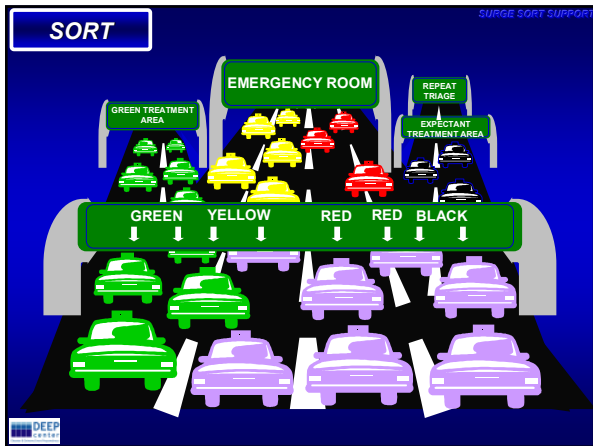


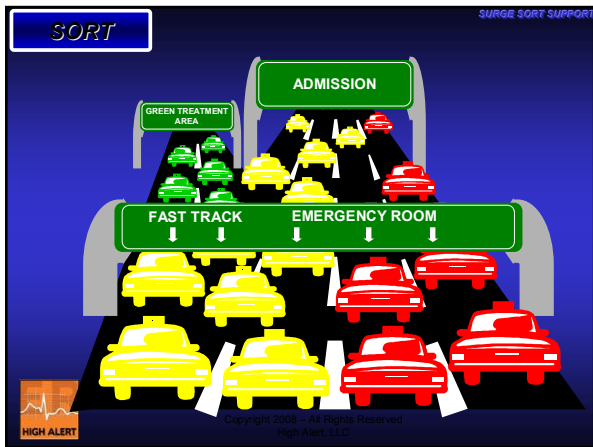


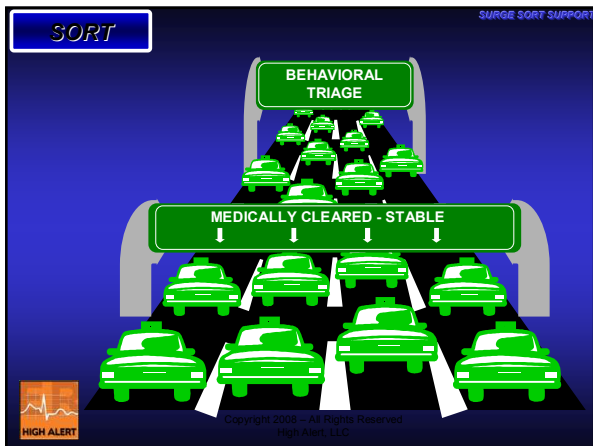




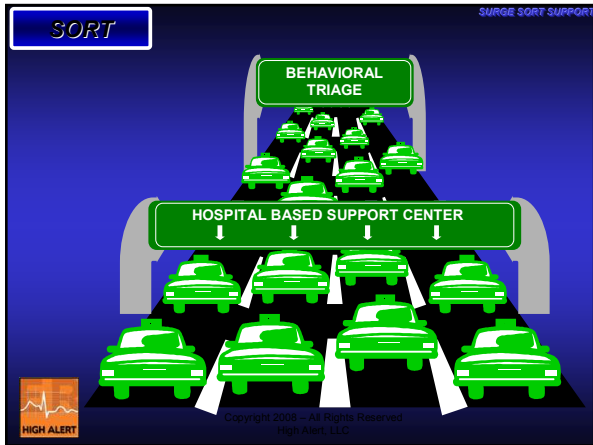


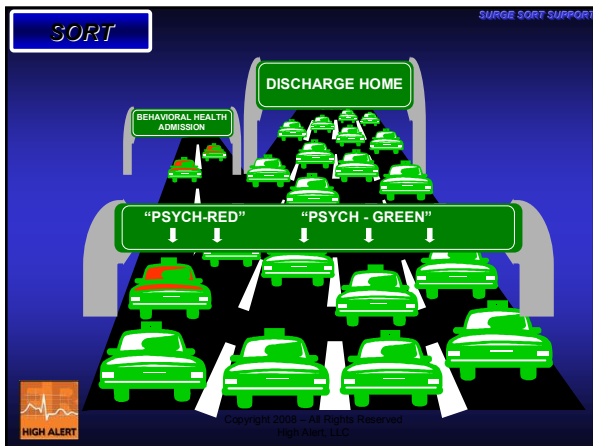


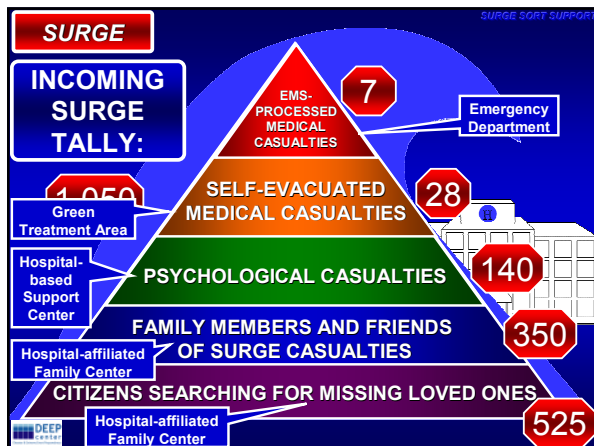












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Questions?

Email Questions?
jshultz1@med.miami.edu
ask@mauricearamirez.com

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