Geriatric Trauma Activation Criteria ≥ 65 years
(Upon notification or realization that any of the following conditions exist)

L1 – Level I Activation

Physiologic Criteria:
- Altered level of consciousness: GCS ≤ 8
- Respiratory distress/failure - RR < 10 or > 30
- Persistent cyanosis or persistent compromised oxygenation with low oxygen saturations below 90%
- Shock/diminished perfusion, BP <110, HR >120
- All intubated patients (exclude patients intubated at another facility who are now stable from a respiratory standpoint)

Anatomic Criteria:
- Cardiac or major vascular injuries
- Significant thoracic trauma
- Compromised airways (including evidence of facial burns or inhalation injuries)
- All patients receiving blood products to maintain vital signs
- Severe burns (including electrocution)

Mechanism of Injury:
- Traumatic arrest
- Penetrating wounds to the head, neck, and torso
- Traumatic proximal amputations
- Fall > 20 Feet
- Ejection from auto

Upgrade from Level 2 based on physician discretion

L2 – Level 2 Activation

Physiologic Criteria:
- GCS > 8 and <14
- Patients intubated at another facility and now stable from a respiratory standpoint

Anatomic Criteria: (Upgrade to L1 if on anti-coagulation)
- Severe orthopedic and/or crush injuries
- Traumatic paralysis

Mechanism of Injury:
- Death in same passenger compartment
- Combination trauma with burns
- Hanging

Diagnosis at OSH: (Upgrade to L1 if on anti-coagulation)
- Major pelvic fractures
- Traumatic ICH with Altered Mental Status
- Solid organ injury
- Multiple long bone fractures

Physician Discretion

10/2019