**DIRECT TO TRAIGE PROTOCOL**

- LOW ACUITY / PRIORITY 3 PATIENT
- PATIENT IS 18 YEARS OR OLDER
- ABLE TO COMMUNICATE W/ EMS
- UNDERSTANDS PROCESS
- ABILITY TO SIT INDEPENDENTLY IN A WHEELCHAIR

![Diagram](https://via.placeholder.com/150)

- VITAL SIGNS ACCEPTABLE? (SEE CHART – 1)
  - IF YES, MOVE ON

- HIGH RISK CONDITIONS? (SEE CHART – 2)
  - IF ANY PRESENT, STOP
  - IF NONE, MOVE ON

- TIME DEPENDENT NEEDS? (SEE CHART – 3)
  - IF ANY PRESENT, STOP
  - IF NONE, MOVE ON

- DISCUSSION TAKES PLACE WITH PATIENT ABOUT PLACEMENT IN TRIAGE

- END OF CALL
  - SHORT FORM COPIED AND GIVEN TO APPROPRIATE NURSE FOR RN SIGNATURES
  - PATIENT TRANSFERRED OFF STRETCHER
  - REPORT GIVEN

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**ACCEPTABLE VITAL SIGNS:**

1. **RESPIRATIONS:** 10-20
2. **PULSE:** 60-100
3. **PULSE OX:** >92% (room air)
4. **TEMPERATURE:** 96-101°F
5. **BLOOD GLUCOSE (if indicated):** 71-299 MG/DL
6. **BLOOD PRESSURES:**
   - BETWEEN 110 AND 180 - SYSTOLIC
   - BETWEEN 60 AND 100 – DIASTOLIC

**HIGH RISK CONDITIONS**

1. UNEXPLAINED ABDOMINAL PAIN
2. ALTERED MENTAL STATUS
3. UNEXPLAINED BACK PAIN
4. CHEST PAIN
5. DYSPNEA / SHORTNESS OF BREATH
6. (ACUTE) FOCAL NEUROLOGICAL DEFICITS
7. SEIZURES
8. SEPSIS (SUSPECTED)
9. SYNCOPE
10. SUICIDAL / HOMICIDAL IDEATIONS
11. REQUIRES MORE THAN MINIMAL ASSISTANCE TO WALK
12. UNABLE TO COOPERATE WITH HISTORY AND EXAM

**TIME DEPENDENT NEEDS**

1. AIRWAY
2. BREATHING
3. CIRCULATION (INCLUDING TO EXTREMITY)
4. DISABILITY (DEFICIT) OR DEFORMITY
5. SEVERE TENDERNESS WITH PALPATION / EXAM
6. SIGNIFICANT HEAD OR TRUNCAL TRAUMA
7. UNCONTROLLABLE BLEEDING
8. REQUIRES ALS MONITORING OR INTERVENTIONS
9. CONCERN FOR POTENTIAL DETERIORATION

Approved 10.12.2021