Maryland Triage System
Tag, START, and JumpSTART
Enabling Objectives

Upon completion of this training the participant will be able to:

• Define TRIAGE and explain when it is appropriate for use
• List three reasons a patient triage and tracking system is required for successful operations
• Categorize the Triage status of patients utilizing the START and JumpSTART Triage Systems
• Explain the design and use of paper Triage Tags
• Identify five capabilities of the paper Maryland Triage Tags
Triage

The sorting of and allocation of treatment to patients and especially battle and disaster victims according to a system of priorities designed to maximize the number of survivors
(from the French *trier*, to sort)
(Merriam-Webster)

Developed by Baron Dominique-Jean Larrey, Napoleon's Chief Surgeon, for use by the first ambulance corps—the *ambulances volantes*—during the early 1800s
Why Triage and Tag?

• Sorting of patients to provide for the survival of the most patients
• Assignment of resources in the most efficient method
• Most severe survivable injuries receive rapid treatment
• Accountability of patients
• Family reunification
Triage: A rapid approach to prioritizing a large number of patients

Simple Triage And Rapid Treatment

JumpSTART
Triage

• Triage should be performed RAPIDLY

• Utilize START/ JumpSTART Triage to determine priority

• 15–60 seconds per patient

• Affix a color tape on upper arm or leg
START – JumpSTART Triage

• Clear the “walking wounded” with verbal instruction:
  
  
  *If you can hear me and you can move, walk to...*

• Direct patients to the casualty collection point (CCP) or treatment area for detailed assessment and medical care

• Assign a Green Minor Manager to the area to control patients and manage area

• Tag will be issued at the CCP

• These patients may be classified as MINOR
Now use START/JumpSTART to assess and categorize the remaining patients...

USE COLORED RIBBONS ONLY
Categorize the patients by assessing each patient’s RPMs...

- Respiration
- Pulse/perfusion
- Mental Status
RESPIRATIONS
Is the patient breathing?

Yes

Adult – respirations > 30 = Red/Immediate
Pediatric – respirations < 15 or > 45 = Red/Immediate

Adult – respirations < 30 = check perfusion
Pediatric – respirations > 15 and < 45 = check perfusion
RESPIRATIONS
Is the patient breathing?

No
Reposition the airway...

Respirations begin = IMMEDIATE/RED

If patient is APNEIC
- Adult – deceased = BLACK
- Pediatric: Pulse Present – give 5 rescue breaths
  - respirations begin = IMMEDIATE/RED
  - absent respirations – deceased = BLACK
PULSE/PERFUSION

Is the RADIAL pulse present?

Yes
Check mental status

No
Adult: Pulse absent or CR > 2 seconds patient = IMMEDIATE/RED
Pediatric: No palpable pulse patient = IMMEDIATE/RED
MENTAL STATUS...

Can the patient follow simple commands?

Yes

Adult = **DELAYED / YELLOW**

Pediatric: alert, verbal, or pain response is appropriate

= **DELAYED / YELLOW**

No

Adult = **IMMEDIATE / RED**

Pediatric – “P” pain causes inappropriate posturing or “U” unresponsive to noxious stimuli = **IMMEDIATE/ RED**
If the patient is **IMMEDIATE/RED** upon initial assessment...then, before moving the patient to the treatment area, attempt only life-saving interventions:

Airway, Needle Decompression, Tourniquet, Antidote

**DO NOT ATTEMPT ANY OTHER TREATMENT AT THIS TIME**
** Using the JS algorithm evaluate all children first who did not walk under their own power. Evaluate infants first in secondary triage using entire JS algorithm.

Combined START/JumpSTART Triage

CAN YOU WALK?
- YES: MINOR
- NO: Breathing?
  - NO: Position Upper Airway: BREATHING
    - ADULT: IMMEDIATE
    - PEDIATRIC: IMMEDIATE
  - YES: Respiratory Rate?
    - < 30 ADULT: IMMEDIATE
    - 15 - 45 PEDI: Perfusion?
      - YES: Mental Status?
        - DOESN'T OBEY COMMANDS: “P” INAPPROPRIATE POSTURING OR “U” ( PEDIATRIC ) - IMMEDIATE
        - OBEY COMMANDS - ADULT: “A”, “V”, OR “P” ( APPROPRIATE ) - PEDIATRIC
      - NO PALPABLE PULSE: IMMEDIATE
    - CR > 2 Sec or NO PALPABLE PULSE: IMMEDIATE
  - 45 > OR < 15 PEDI: IMMEDIATE
  - NO PULSE: IMMEDIATE

BREATHING
- APNEIC: Expected / Deceased
- HAS A PULSE: 5 Rescue Breaths
  - > 30 ADULT: IMMEDIATE
  - 45 > OR < 15 PEDI: IMMEDIATE

** PEDI Neurological Assessment

<table>
<thead>
<tr>
<th></th>
<th>Alert</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Responds to Verbal Stimuli</td>
</tr>
<tr>
<td>V</td>
<td>Responds to Painful Stimuli</td>
</tr>
<tr>
<td>P</td>
<td>Unresponsive To Noxious Stimuli</td>
</tr>
<tr>
<td>U</td>
<td></td>
</tr>
</tbody>
</table>
Fast Triage – Ribbon Applied First

Apply ribbon to upper arm or upper thigh
**RED** Triage Category (Immediate)

**Adult**
- Respirations $> 30$ BPM
- CR $> 2$ seconds or no palpable radial pulse
- Cannot follow simple commands
- Pneumothorax
- Hemorrhagic Shock
- Closed Head Injury

**Pediatric**
- Respirations $< 15$ or $> 45$
- CR $> 2$ seconds or no palpable radial or brachial pulse
- Inappropriate “Pain” (e.g., posturing) or “Unresponsive”
YELLOW Triage Category (Delayed)

Adult: respirations, capillary refill, and mentation are normal

- Isolated burns
- Extremity fractures
- Stable other trauma
- Most patients with medical complaints

Pediatric: “A,” “V,” or appropriate “P” (e.g., withdrawal from pain stimulus)
GREEN Triage Category (Minor)

- “Walking wounded”
- Psychological casualties
- Always look for children being carried and assess them
BLACK Triage Category (Deceased)

- Obvious mortality or death (pulseless and apneic)
  - Decapitation
  - Blunt trauma arrest
  - Injuries incompatible with life
  - Brain matter visible
Revised Paper Triage Tag

Do Not Use Gray Category
Triage Tag Sections

- Patient information
- Triage status
- Chief complaint
- Transporting unit
- Peel-off bar codes
- Transport record

- Vital signs
- Medical history
- Treatment
- Family contact
- Wrist band

* Triage tags should be used in all MCI scenarios, even when handheld device is employed.
- **PATIENT INFORMATION**
- Triage status
- Chief complaint
- Transporting unit
- Peel-off bar codes
- Transport record
- Vital signs
- Medical history
- Treatment
- Family contact
- Wrist band
The paper triage tag includes a GREY category for future use based on anticipated national acceptance.

**IT WILL NOT BE USED IN THE TRIAGE OF PATIENTS UNTIL APPROVED BY MIEMSS.**

- Patient information
- **TRIAGE STATUS**
- Chief complaint
- Transporting unit
- Peel-off bar codes
- Transport record
- Vital signs
- Medical history
- Treatment
- Family contact
- Wrist band
- Patient information
- Triage status
- **CHIEF COMPLAINT**
- Transporting unit
- Peel-off bar codes
- Transport record
- Vital signs
- Medical history
- Treatment
- Family contact
- Wrist band
- Patient information
- Triage status
- Chief complaint
- **TRANSPORTING UNIT**
- Peel-off bar codes
- Transport record
- Vital signs
- Medical history
- Treatment
- Family contact
- Wrist band
- Patient information
- Triage status
- Chief complaint
- Transporting unit
- PEEL-OFF BAR CODES
- Transport record
- Vital signs
- Medical history
- Treatment
- Family contact
- Wrist band
• Detachable as a tear-off and as a peel-off sticky label
• Used to document patient movement
• Must be affixed to Transport Tactical Worksheet with the unit, priority, and destination marked and initialed.

Commonly called the “Ticket”

- Patient information
- Triage status
- Chief complaint
- Transporting unit
- Peel-off bar codes
- TRANSPORT RECORD
- Vital signs
- Medical history
- Treatment
- Family contact
- Wrist band
Removable wrist band has been added with an area for DOB and name

- Patient information
- Triage status
- Chief complaint
- Transporting unit
- Peel-off bar codes
- Transport record
- Vital signs
- Medical history
- Treatment
- Family contact
- WRIST BAND
• Patient information
• Triage status
• Chief complaint
• Transporting unit
• Peel-off bar codes
• Transport record
• **VITAL SIGNS**
• Medical history
• Treatment
• Family contact
• Wrist band
- Patient information
- Triage status
- Chief complaint
- Transporting unit
- Peel-off bar codes
- Transport record
- Vital signs
- **MEDICAL HISTORY**
- Treatment
- Family contact
- Wrist band
• Patient information
• Triage status
• Chief complaint
• Transporting unit
• Peel-off bar codes
• Transport record
• Vital signs
• Medical history
• **TREATMENT**
• Family contact
• Wrist band
• Patient information
• Triage status
• Chief complaint
• Transporting unit
• Peel-off bar codes
• Transport record
• Vital signs
• Medical history
• Treatment
• FAMILY CONTACT
• Wrist band
Triage Summary

• Triage allows for effective and efficient care, helping to increase the survivability for as many patients as possible
• Assignment of resources will increase efficiency
• Most severely injured patients will receive rapid treatment and transport in logical order
• Ensures accountability of all patients
• Allows for family reunification
Maryland Triage System

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Maryland Triage System

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