AIR MEDICAL SCENE RESPONSE GUIDELINES

Trauma: General & mechanism considerations:
- Trauma score <12
- Unstable VS (e.g., hypotension, tachypnea)
- Multi-system injuries
- Ejection from a vehicle
- Pedestrian or cyclist struck by a motor vehicle
- Death in same passenger compartment
- Ground provider perception of significant damage to patient’s passenger compartment
- Penetrating trauma to abdomen, pelvis, chest, neck or head
- Crush injury to abdomen, chest or head
- Fall from a significant height (child 10 ft / adult 20 ft)

Consider Early Activation or Standby: Fly distance >10 min. (25 miles) and/or patient further than 20 miles from specialty hospital & patient criteria is critical in nature including, but not limited to:
- Prolonged (>20 min.) extrication time
- Multiple victim incident
- Ejection from vehicle
- Pedestrian struck with serious injury
- Death of occupant in same vehicle
- Critical burns >10% of total BSA
- Falls with serious injury
- Deep penetrating injury to head, neck or torso
- Unstable vital signs
- Acute stroke
- STEMI

WHEN IN DOUBT, TRANSPORT INJURED PATIENTS TO A TRAUMA CENTER
PHYSIOLOGIC / INJURY CONSIDERATIONS

Neurologic Considerations:
- GCS <10
- Deteriorating mental status
- Skull fracture
- Neurologic presentation suggestive of spinal cord injury (SCI)

Thoracic Considerations:
- Major chest wall injury (e.g., flail chest)
- Pneumothorax or Hemothorax
- Suspected cardiac injury

Abdominal / Pelvic Considerations:
- Significant abdominal pain after blunt trauma
- Presence of “seatbelt sign” or other abdominal wall contusion
- Obvious rib fracture below the nipple line
- Major pelvic fracture

Orthopedic / Extremity Considerations:
- Partial or total amputation of a limb (exclusive of digits)
- Finger/thumb amputation
  - Emergent surgical evaluation for transplant consideration and
  - Rapid ground transport not available
- Fracture or dislocation with vascular compromise
- Extremity ischemia
- Open long-bone fractures
- Two or more long-bone fractures

Major Burns:
- >20% BSA
- Face, head, hands, feet or genitalia involved
- Inhalation injury
- Electrical or chemical burns
- Burns with associated traumatic injuries

Patients With Drowning-Related Injuries

Non-Trauma Scene Response Considerations:
- STEMI (ST Elevation Myocardial Infarction)
- Acute stroke
- Consider the following in the decision making:
  - Logistical considerations (location & transport distance to definitive care)
  - Pre-hospital provider clinical judgment
  - Medical control input