

Triage

What is triaging?

A different way to look at triaging

How to make triage easy

Examples

One Final Thought

Why Triage?

- Prioritise *treatment*
- Determine who will benefit the most from early initiation of **treatment**
- Will the treatment be lifesaving, reduced disability/harm, improve outcome

A Different way of looking at **how** to triage



EMERGENT

URGENT

ROUTINE

T1 / T2

T3 / T4

T5

Priority treatment
Is Lifesaving

Priority treatment
Results in better outcome

What defines **EMERGENT**

Threat to

LIFE

LIMB

EYESIGHT

The patient needs “rescuing”

What defines URGENT

Abnormal vitals

Extremes of age (young v old)

Acute decompensation of a chronic disease

+/- Bounceback

What defines Routine

Anything that is not emergent or urgent

Examples

2 yo has fallen off a swing and she has injured her right elbow.
It is swollen, and deformed.
Her hand looks blue and feels cold.

She is distressed and difficult to examine.
Can't obtain vitals

85 yo rest home resident presents acutely confused with reduced oral intake.

P 90 BP 90/70 S 99

RR 15

GCS 14

Acutely Disorientated x 3

65 yo women, presents with a painful unilateral red Right eye.

P 70 BP 135/75 S 99 RR 15

VA l6/6 left, r/36

6 week old boy presents with fevers, irritability and reduced oral intake.

T 38.5 rectal

P 170, RR 40, S 97, CR 3

Irritable but consolable

75 yo man with known COPD.

Presents acutely SOB without fever or cough

P 90, S 94, RR 12, BP 130/70

Increase work of breathing.

35 yo man presents with acute migraine for 10 days.
Known migraine sufferer.

P 60, S 99, RR 12, BP 125/75. Pain score 4/10,
Alert, well appearing and undistressed.

OK.... Same case but this is his forth presentation in 10 days

20 yo man presents with acute Rt sided testicular pain.

P 90, BP 150/90, S 99, Pain score 6/10, GCS 15

Final Thoughts

Triaging is an Art not a Science.
You're allowed to be wrong but it must be for the right reasons