

TRIAGE TUESDAY

Goal:

To have Emergency Medical Services (EMS) agencies and hospitals periodically use triage tags in conjunction with the START and JumpSTART triaging protocols so that there is enhanced competency by both EMS providers and hospital staff in utilizing the system prior to a real time incident.

Objectives:

1. EMS will voluntarily participate in “Triage Tuesday” to routinely evaluate providers triage training and competency by using triage tags for all patients, transported to local hospitals.
2. Hospitals will voluntarily participate in “Triage Tuesday” by agreeing to follow through the process and use triage tags for all patients including those presenting to the ED by private vehicle or ambulance periodically, to increase the hospital’s staffs knowledge and comfort with triage tags in establishing patient priority, which is based on the triage colors for severity.

Process:

1. Triage Tuesday will occur on a designated day (example: 3rd Tuesday of every month) as determined by the EMS and hospitals in the pilot project of the NSPA/WVEMS/BREMS region.
2. Participating EMS agencies will use a triage tag on all patients, transported to the ED to identify triage acuity.
3. EMS and hospitals may elect to provide patients with an informational brochure to explain to the patient why they are being tagged (see **Attachment A: Information for Patients**)
4. There is no requirement that hospitals or EMS retain the tags as part of the patient record, since this is only meant to be an educational tool for healthcare providers.
5. Hospitals and EMS agencies agreeing to participate will help promote “Triage Tuesday” to their staff and provide advanced training on how the system will be utilized.
6. The goal of the program is to allow:
 - a. Hospitals to use the triage tags to achieve the following purposes:
 - i. to determine if the triage tag color code used by the EMS was reinforced by the triage decision made at the ED

- ii. to determine whether the information provided on the triage tag was beneficial to the ED staff in determining patient identification, complaint or level of care needed upon arrival to the ED
 - iii. to determine from the ED staff perspective what enhancements can be made to the triage tagging process to improve the utilization of such system prior to its utilization in a large scale incident
 - b. EMS Transport Services are to use the triage tags to achieve the following purposes:
 - i. to determine any issues that may occur when EMS staff utilize the system for the purposes of triage and tagging patients in the field
 - ii. to determine the usability of such tool in the field during large scale emergency situations.
- 7. Following the implementation of Triage Tuesday the EMS agencies and hospitals shall meet to discuss issues that resulted from “Triage Tuesday” a regional group meeting for After Action Review.
- 8. The Regional Coordinators will identify any regional/statewide issues that should be brought to the attention of the NSPA, WVEMS/BREMS, and/or state HEMC/OEMS.

Action Steps:

1. It is recommended that EMS Transport Services and hospitals, for the purposes of “Triage Tuesday” use the Standardized Triage Tag¹. (see **Attachment B: Triage Tag Criteria**) adopted by the state OEMS.
2. The Regional Coordinators of NSPA/WVEMS/BREMS will provide participating EMS agencies and hospitals with state OEMS tags for “Triage Tuesday” at no cost².
3. “Triage Tuesday” is a voluntary effort. Each Regional Coordinator will consider what options are available for any area where a hospital or EMS Transport Service does not want to participate.

It is encouraged that both the hospital and the EMS Transport promote their participation in “Triage Tuesday” through the media through a coordinated press release so that the community is aware of these emergency preparedness efforts. This will allow participants at both the hospital and EMS agencies are taking both the steps to serve their community during disasters (see **Appendix C: Template News Release**).

¹ The Regional Coordinator(s) will supply all hospitals and EMS Transport units in its region with the standardized triage tag at no cost. Hospitals and EMS Transport may choose to use tags that they have in stock. The goal is to have one tag that meets certain criteria to achieve consistency.

² The triage tags are funded through the ASPR Hospital Preparedness Program & EMS Council funds.

Attachment A: Information for Patients

This Tuesday is “Triage Tuesday” this means that all patients who come to the Emergency department will receive a “triage tag”.

Area hospitals and EMS agencies are voluntarily participating in “Triage Tuesday”. On the 3rd Tuesday of each month, all patients, being transported to the hospital by an ambulance and all patients who come to the Emergency Department seeking care will be “tagged.”

In an incident where there are large numbers of patients involved in an emergency a triage tag will aid both EMS ambulances and hospital emergency departments in providing care rapidly to the sick and injured. The tag is designed to help all involved in at care to better identify the type of care needed and make sure that those with critical injury or illness receive care quickly.

“Triage” is a French word that means “to sort”. It is a process that occurs everyday by EMS and Emergency Departments across the country, but usually the “tags” are not utilized. Utilizing the triage tag today on all patients will insure providers are prepared for real world emergencies as they happen.

Attachment B: Criteria for Triage Tags

The goal is to utilize the Start and Jumpstart triage system consistently for tagging and tracking patients across the region prior to a real world disaster. During this process the regional councils will evaluate if:

- a. there is a need to connection the triage tag # and a # issued by the hospital(s) for patient tracking purposes
- b. tag/tracking must be based on START triage protocols
- c. tag is to include chemical symptomology and treatment, if applicable
- d. tag is to incorporate whether personal belongings/valuables are being transported with patient or, if not, how to identify location of these belongings/valuables
- e. the tag is to include a cross reference to other patients on scene triaged/treated/transferred, who may be related to the patient tagged (if known)
- f. the tag is to identify if the patient is a special needs group (if known)
- g. if the tag utilized by OESM contains the information needed, for items of critical high priorities. No decision will be made on tagging/tracking protocols until there is involvement of all key constituents.

Additional Issues to consider include:

- a. Which agencies need to be involved in patient tracking
- b. Standardized tags will be used, so the same patient identifying number will not appear at various hospitals
- c. How can hospitals use their tag # to correlate to the hospital Medical Record system #
- d. There is a need for a unique identifier
- e. How do hospitals cooperate in answering the question “Where can I find my loved one?”
- f. What information is absolutely critical for the hospital when the patient is brought in from the field?
- g. How can a patient tracking (numbering) system be devised so that a patient can be tracked from the field to the hospital to other referral hospitals or other destinations?

Appendix C: Template News Release

The following sample news release. Feel free to use all or some of the material and adapt it as you see fit to your community.

Using realistic training everyday—TRIAGE TUESDAY!!

If you or a family member is brought to a local hospital by ambulance this Tuesday, you may be wearing a tag! This tag would be a “triage tag” primarily used in mass casualty incidents (MCI) but is now being utilized by local EMS and area hospitals as training prop to prepare for catastrophic events.

Area hospitals and Emergency Medical Services (EMS) have the opportunity to participate in a new educational experience known as “Triage Tuesday.” On a given Tuesday, all patients being transported to the hospital by ambulance or who present to the Emergency Department for treatment will be triaged and “tagged.”

“Triage” is a French word that means “to sort”. It is a process that occurs daily with every ambulance and ride at every Emergency Department across the country. All patients are “triaged” so that those most in need of emergent care receive it first; the only difference between a normal day and Triage Tuesday is that usually “tags” are not involved.

“In an incident where there are many patients involved, a triage tag will help both EMS providers and hospital emergency department staff prioritize care of you, your loved ones and neighbors,” says (name) Trauma/EMS Coordinator at (name) Hospital. “The tag will help all of us involved in your care to better identify the type of care that you need and make sure that those most in need of care receive it first.”

“When there is an incident, involving many people, EMS and First responders must act quickly to identify those most in need of immediate treatment,” said (name) of (name) Ambulance Company. “By tagging patients, we are “triaging” (sorting) the patients and identifying them by a color-code. When there is little time for communication, the triage tag will be a visual sign telling everyone involved the urgency of treatment to the patient.”

Triage Tuesday is sponsored by the (name) Regional EMS Council, whose mission is to improve care of those injured and work toward reducing injury and the Regional Near Southwest Preparedness Alliance coalition, whose mission is to assist healthcare in preparing to care for patients, involved in a mass casualty incident or other public health emergency.

For further information about Triage Tuesday, please contact (name) at (telephone or email or address).