I. **POLICY**

To establish criteria for consideration of transfer to a Trauma Center.

II. **RESPONSIBILITY**

A. Emergency Physician / Resident / Advanced Practice Clinician  
B. Emergency Nursing staff

III. **PROCEDURE**

A. Patients presenting with a traumatic injury will receive a medical screening exam by the Emergency Physician / Resident / Advanced Practice Clinician. (See also ER. 81 Medical Screen Exam)  
B. Additional services may be consulted at the Emergency Physician / Resident / Advanced Practice Clinician discretion.  
C. **Criteria for Consideration of Transfer:**  
   1. Carotid or vertebral arterial injury.  
   2. Torn thoracic aorta or great vessel.  
   3. Cardiac rupture.  
   4. Bilateral pulmonary contusion with significant hypoxemia.  
   5. Major abdominal vascular injury.  
   6. Grade IV or V liver injuries requiring transfusion of more than 6 U of red blood cells in 6 hours.  
   7. Unstable pelvic fracture requiring transfusion of more than 6 U of red blood cells in 6 hours.  
   8. Fracture or dislocation with loss of distal pulses.  
   9. Penetrating injuries or open fracture of the skull.  
   10. Glasgow Coma Scale score of less than 14 or lateraizing.  
   11. Potentially unstable spinal fracture or spinal cord deficit.  
   13. More than two unilateral rib fractures or bilateral rib fractures with pulmonary contusion (if no critical care consultation is available).  
   14. Significant torso injury with advanced comorbid disease (such as coronary artery disease, chronic obstructive pulmonary).  

(Resources for Optimal Care of the Injured Patient: 2014, Committee on Trauma, American College of Surgeons 2014)

IV. **REFERENCES**

- Admission of Patient ER.8  
- Transfer of Patient NUR.1.06 / ER.10  
- Discharge / Referral Procedure ER.11  
- American College of Surgeons Criteria for Consideration of Transfer