Part A   Triage in the Emergency Room Continued

1. **Read the handout, *Patients' Vital Signs: Preliminary information*, as a team. Briefly discuss the condition and future outlook of each patient.**
    a. *Pay particular attention to the description of each patient's injury or illness*

2. **Divide your triage team to work in pairs. Each pair should complete the following tasks for half of the patients, using the *Triage Data Sheet* handout:**
    a. **Task 1: Record the vital signs of each patient and mark whether they are within or outside normal ranges. Use a checkmark to indicate vital signs that are within normal limits. Use an X to indicate those that are outside normal limits.**
    b. **Task 2: Identify the body systems that are most likely disrupted by each patient's injury or illness.**

3. **How will your team decide whom to treat first? Read the *Patient Assessment Guidelines*. As you read, note whether any of your patients has an airway obstruction, critically impaired breathing or circulation, shock or hyperthermia.**

    Patient Assessment Guidelines
    1. All emergency care begins with the ABCs. Make sure there is an open airway, that the patient is breathing, and that the patient has adequate circulation.
        a. *Airway*. Remove obstructions from the mouth, if necessary. Move the tongue if it is obstructing the airway. Close opening such as the nose or wounds that prevent the lungs from filling air
        b. *Breathing*. Restore breathing by artificial resuscitation. (In artificial resuscitation, another person or device can temporarily provide air to a patient.) Or administer oxygen, if necessary.
        c. *Circulation*. Checking and restoring circulation take priority over airway and breathing. Restore heartbeat by cardiopulmonary resuscitation (CPR), if necessary. CPR is a technique in which another person temporarily provides air and heart contractions for a patient whose heart has stopped beating or si no pumping blood effectively. Stop blood loss from serious wounds.
    2. Look at the patient and assess his or her injuries. Immobilize any injuries to the neck. The patient may become paralyzed if you initiate any movement. Always suspect neck injuries when there is extensive injury to the head or face.
    3. Check the patient for **shock**. This condition is extremely serious and life threatening. It occurs when blood flow to the tissues drops to a dangerously low level. Often, shock is accompanied by very low blood pressure. When a person is in shock, the circulatory system no longer delivers adequate supplies of oxygen and nutrients to the tissues. Shock can result from failure of the heart to pump vigorously enough. It can

also result from serious blood loss or from a reduction of effective blood volume due to pooling in the capillaries or to dehydration.

Shock due to reduced blood volume can be treated by elevating the feet, by using pressure suits that force blood from the extremities (arms and legs) back into the body core, or by infusing blood or saline solution into the circulatory system. Shock due to weakness of the heart or damage to the circulatory system may require medication or mechanical devices that assist circulation.

4. Check the patient's temperature. The hypothalamus normally controls internal body temperature. If this control is lost, the core body temperature can rise to dangerously high levels, a condition known as **hyperthermia**. Extreme hyperthermia can kill cells, particularly brain cells. In these cases, external measures must be taken, such as rubbing the patient with ice to bring the body temperature back within normal limits.

   Conversely the body can cool to dangerous levels. This is a condition known as **hypothermia**. Hypothermia can occur when people are cold and wet for a long period of time. Rapid evaporation of water can cool a person quite quickly, even if the air temperature is not extremely cold. In such cases, the body must be warmed slowly to bring it back within normal limits.

5. Consolidate your assessment by designating the patient's condition as critical, serious, or stable. "Critical" indicates that the patient has a life-threatening condition. "Serious" indicates that the patient has a condition that causes a loss of normal function. "Stable" indicates that the patient's condition will not change quickly and that a delay in treatment would not cause further harm.

5. Complete the next 3 tasks as a group of 4.

   a. Task 1: Compare all your patients and, as a team, decide treatment priorities for each patient. Assign treatment priorities of critical (+++), serious (++), or stable (+) to each patient and record on the *Triage Data Sheet*.

   b. Task 2: Suggest initial triage treatments and explain your priority choice for each patient. Write a brief justification for the treatment priority your assigned each patient.

   c. Task 3: Decide the order that patients should be given their triage treatment. Consider how many of the patient's vital signs are in the serious range and how fast you think the patient may be declining. In the first column, next to the patient's name, write the number that corresponds to the order of treatment your team agrees on.