GEORGIA TRAUMA COMMISSION

Indications for Pediatric Trauma Patients Requiring Rapid Transfer to a Pediatric Trauma Center

Traumatically injured children and adolescents frequently require expeditious specialized care in order to maximize survival and recovery. In an effective and efficient trauma system, rapid stabilization and transport of injured children to the appropriate center is imperative. The following guideline for decision to transfer injured children is recommended by the Georgia Trauma Commission to accomplish this goal and is meant to encourage small rural, critical access and adult trauma center emergency departments to plan for transfer to a pediatric-specific trauma center at the earliest identification of any of the following:

PEDIATRIC TRAUMA PATIENTS THAT REQUIRE STABILIZATION AT THE NEAREST TRAUMA (PEDIATRIC OR ADULT) INCLUDE:

- **Traumatic arrest/CPR at the scene or en route**
- **Inability to obtain airway in the field**
- **Penetrating injuries with age-specific hypotension**
- **Hemorrhagic shock without availability of blood products**

PRESENCE OR IDENTIFICATION OF ONE OR MORE OF THE FOLLOWING IN A PEDIATRIC TRAUMA PATIENT SHOULD PROMPT IMMEDIATE TRANSFER TO THE APPROPRIATE PEDIATRIC TRAUMA CENTER <u>PRIOR TO CT IMAGING</u>:

- **Age-specific hypotension or a shock index pediatric adjusted (SIPA) score elevated for age group**
  - **Systolic blood pressure < 70 mm Hg + (2 x age in years)**
- **Airway/Ventilatory Compromise in a child**
  - **Intubated**
  - **Need for an emergent airway (may consider transfer to nearest trauma center for airway management)**
- **Glasgow Coma Score <14 or AVPU (Alert, Verbal, Pain, Unresponsive) = V (does not respond to verbal stimulus) with traumatic mechanism**
- **Pediatric trauma patient receiving blood or blood products**
- **Tourniquet in place for hemorrhage**
- **Open depressed skull fracture**
- **Crushed, degloved, or mangled extremity**
- **Traumatic amputation proximal to wrist or ankle**
- **Paralysis**

PRESENCE OR IDENTIFICATION OF ONE OR MORE OF THE FOLLOWING IN A TRAUMA PATIENT AT ANY POINT DURING WORKUP SHOULD PROMPT URGENT TRANSFER TO A PEDIATRIC TRAUMA CENTER:

- **Non-accidental trauma**
- **Intraabdominal injury, intracranial bleed, intrathoracic injury, or unstable spinal injury**
- **Two or more proximal long bone fractures**
- **Any identified injury that exceeds the capability/resources of local facility**

Georgia ACS-Verified Pediatric Trauma Centers:
Children's Healthcare of Atlanta
Scene: 404-785-6540
Transfer: 404-785-7778
WellStar MCG Augusta/ Wellstar Children's Hospital of GA
877-561-5600