

Welcome to the self-study Introductory Course of: Simple Triage and Rapid Treatment



A project sponsored by the California EMS Authority and
Mountain-Valley EMS Agency.

(Click anywhere on the screen to continue)



S.T.A.R.T.

- “Clicking” anywhere on the screen will advance you to the next page.
- At the end of the module, you will be given an opportunity to test your knowledge through an interactive scenario, followed by a short exam.
- You will be given the option to submit your exam results by email to the site host for course credit.



Course Objectives

Upon completion of this course, the student will be able to:

- 1 List the Triage Categories of START.
- 2 Describe the process for quickly sorting large numbers of victims during an MCI.
- 3 Identify areas for recording patient information on the triage tag.
- 4 Describe uses of various parts of the triage tag.
- 5 Demonstrate through interactive exercises and exams the major principles of START.



S.T.A.R.T.

Simple
Triage
And
Rapid
Treatment

August 29, 2008

Mountain-Valley EMS Agency



Key Point of S.T.A.R.T

Triage: Is a French term meaning “to sort”

Goals of triage

- Efficient use of personnel, equipment, and facilities
- Identify the patients with a standard system
- Provide organized care of multiple patients
- Planning and training is a must



S.T.A.R.T.

- Simple:
Does not require high degree of medical expertise or licensure
- Rapid:
Should take no more than 60 seconds per patient



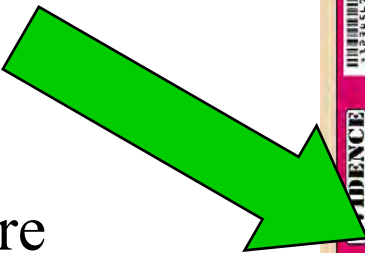
S.T.A.R.T.

The Four Triage Categories are:

- Deceased
- Immediate
- Delayed
- Minor

Minors

- The bottom strip on the Triage Tag is designated for patients with Minor injuries.
- Minors are color-coded: green.
- Patients classified as Minor:
 - a) May require hospital care
 - b) Injuries may be managed by first-aid



The image shows the front and back of a Triage Tag, a form used for patient classification and information collection. The front side includes a 'Personal Property Receipt/Evidence Tag' with a barcode, a 'Destination' field, and a 'Via' field. The 'TRIAGE TAG' section features a color-coded system (S, L, U, D, G, E, M) and an 'AUTO INJECTOR' section. A body diagram is used for marking injuries. The 'VITAL SIGNS' section includes fields for Time, BP, Pulse, and Respiration. The 'MORGUE' section has four color-coded boxes: IMMEDIATE (red), DELAYED (yellow), and MINOR (green). The back side includes a 'Comments/Information' section, a 'Patient's Name' field, and a 'PERSONAL INFORMATION' section with fields for NAME, ADDRESS, CITY, STATE, ZIP, PHONE, and COMMENTS. The 'MORGUE' section on the back also has four color-coded boxes: IMMEDIATE (red), DELAYED (yellow), and MINOR (green). The tag is labeled 'CONTAMINATED' on the sides and 'EVIDENCE' at the bottom.

Delayed

- The next strip on the Triage Tag is designated for patients with Delayed injuries.

- Delayed are color-coded: yellow.

Patients classified as Delayed:

- a) Need hospital care
- b) Are unable to walk

c) Do not meet Immediate criteria

The image shows a Triage Tag, a form used for patient classification in emergency situations. It is divided into two main sections: FRONT and BACK. The FRONT section includes a 'Personal Property Receipt/Evidence Tag' with a barcode, a 'Destination' field, and a 'Via' field. Below this is the 'TRIAGE TAG' section, which contains a color-coded classification system: 'IMMEDIATE' (red), 'DELAYED' (yellow), and 'MINOR' (green). A central diagram shows a human figure with a yellow circle indicating a delayed injury. Below this is a 'VITAL SIGNS' table. The BACK section includes 'Comments/Information', 'Patient's Name', and 'PERSONAL INFORMATION' fields. It also has a 'MORGUE' section with color-coded boxes for 'IMMEDIATE', 'DELAYED', and 'MINOR'. The tag is bordered by 'CONTAMINATED' on the left and 'EVIDENCE' on the right.

Immediate

- The next strip on the Triage Tag is designated for patients with Immediate injuries.
- Immediates are color-coded: red.
- Patients classified as Immediate:
 - a) Require immediate care
 - b) Should receive attention before all others

FRONT

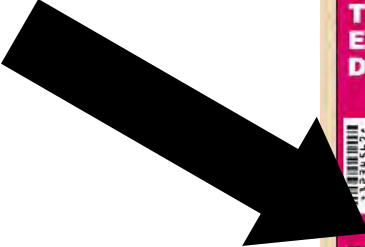
Personal Property Receipt/Evidence Tag
Destination
Via
TRIAGE TAG
AUTO INJECTOR
VITAL SIGNS
MORGUE

BACK

Comments/Information
Patient's Name
RESPIRATIONS
PERFUSION
MENTAL STATUS
Move the Waking Wounded
No Respirations After Head Tilt
Respirations - Over 30
Perfusion - Capillary Refill Over 2 Seconds
Mental Status - Unable to Follow Simple Commands
Otherwise
PERSONAL INFORMATION
MORGUE

Morgue

- The next strip on the Triage Tag is designated for deceased patients.
- Morgue is color-coded: black.
- Patients classified as Deceased/Morgue are:
 - a) Dead or non-salvageable
 - b) No C.P.R. initiated



The image shows the front and back of a Triage Tag, a form used for patient classification in emergency situations. The front side includes a 'Personal Property Receipt/Evidence Tag' section with a barcode, a 'Destination' field, and a 'Via' field. Below this is the 'TRIAGE TAG' section with a color-coded status indicator (S, L, U, D, G, E, M) and an 'AUTO INJECTOR' section. A central diagram shows a human figure with various injury sites labeled. To the right of the figure is a 'VITAL SIGNS' table with columns for Time, BP, Pulse, and Respiration. The bottom of the front side features a 'MORGUE' section with four color-coded boxes: IMMEDIATE (red), DELAYED (yellow), and MINOR (green), each with a barcode. The back side includes a 'Comments/Information' section, a 'Patient's Name' field, and a 'PERSONAL INFORMATION' section with fields for NAME, ADDRESS, CITY, ST, ZIP, PHONE, and COMMENTS. The bottom of the back side also features a 'MORGUE' section with four color-coded boxes: IMMEDIATE (red), DELAYED (yellow), and MINOR (green), each with a barcode. The entire form is bordered by a pink strip with the word 'EVIDENCE' repeated vertically on both sides.

FRONT

Personal Property Receipt/
Evidence Tag

Destination _____
Via _____

TRIAGE TAG

S L U D G E M

AUTO INJECTOR

For the Primary Doctor
For the Secondary Doctor

Chart Name _____
Sex _____
Age _____
Height _____
Weight _____
Last Name _____
First Name _____
Middle Name _____
Last Name _____
First Name _____
Middle Name _____
Last Name _____

Other: _____

VITAL SIGNS

Time	BP	Pulse	Respiration

Time _____ Drug Solution _____ Dose _____

MORGUE

IMMEDIATE IMMEDIATE
Life Threatening Life Threatening
Injury Injury

DELAYED DELAYED
Serious Serious
Non-Life Threatening Non-Life Threatening

MINOR MINOR
Walking Wounded Walking Wounded

BACK

Comments/Information

Patient's Name _____

RESPIRATIONS R ☐ Yes ☐ No ☐ 2 Sec ☐ 2 Sec ☐ 2 Sec ☐ 2 Sec

PERFUSION P ☐ Yes ☐ No ☐ 2 Sec ☐ 2 Sec ☐ 2 Sec ☐ 2 Sec

MENTAL STATUS M ☐ Gt 10s ☐ Gt 10s ☐ Gt 10s ☐ Gt 10s

Move the Walking Wounded: **MINOR**

No Respiration After Head Tilt: **MORGUE**

☐ Respiration: Over 30: **IMMEDIATE**

☐ Perfusion: Capillary Refill Over 2 Seconds: **IMMEDIATE**

☐ Mental Status: Unable to Follow Simple Commands: **IMMEDIATE**

Otherwise: **DELAYED**

PERSONAL INFORMATION

NAME: _____
ADDRESS: _____
CITY: _____ ST: _____ ZIP: _____
PHONE: _____
COMMENTS: _____

MORGUE

Pulseless/Non-Breathing

IMMEDIATE IMMEDIATE
Life Threatening Life Threatening
Injury Injury

DELAYED DELAYED
Serious Serious
Non-Life Threatening Non-Life Threatening

MINOR MINOR
Walking Wounded Walking Wounded



START Triage

The first step is:

- Start where you stand
- Identify the Minors (Walking Wounded) by announcing: “Everyone who can walk” go to a designated location, directing them to a safe spot, out of the danger zone or area of chaos.



R.P.M.

START includes the assessment of the following three systems:

- R: Respirations (greater than 30/ minute)
- P: Pulse (radial pulse absent)
- M: Mental Status
(unable to follow simple commands)

Patients meeting *any* of the above criteria will be classified as **Immediate**.



START

The START assessment begins with AIRWAY

– Is the patient breathing?

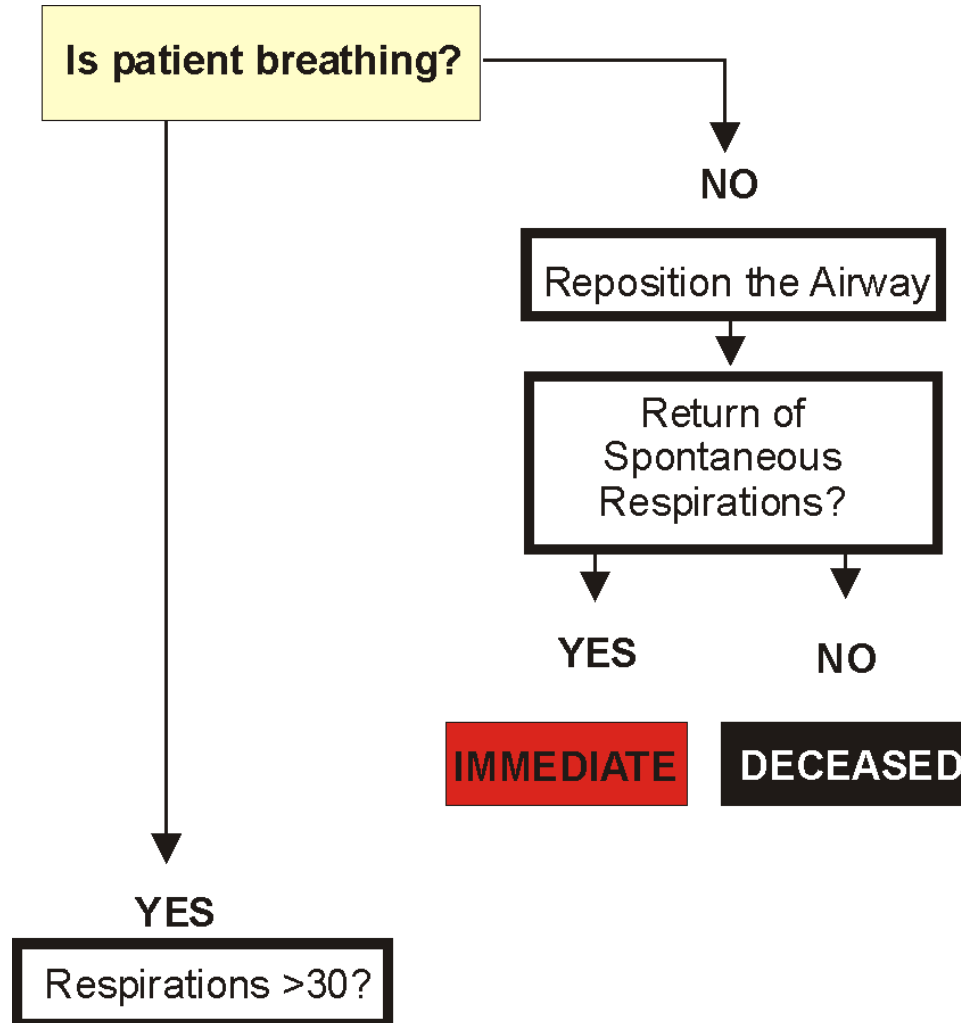
- If not, reposition the airway*
- If so, assess Respirations.

– Are respirations greater than 30/minute

- If not, proceed to Pulse
- If so, patient is tagged **Immediate**, no further assessment should be conducted.

*If after reposition of the airway, there are no spontaneous respirations, tag patient “Deceased”

START



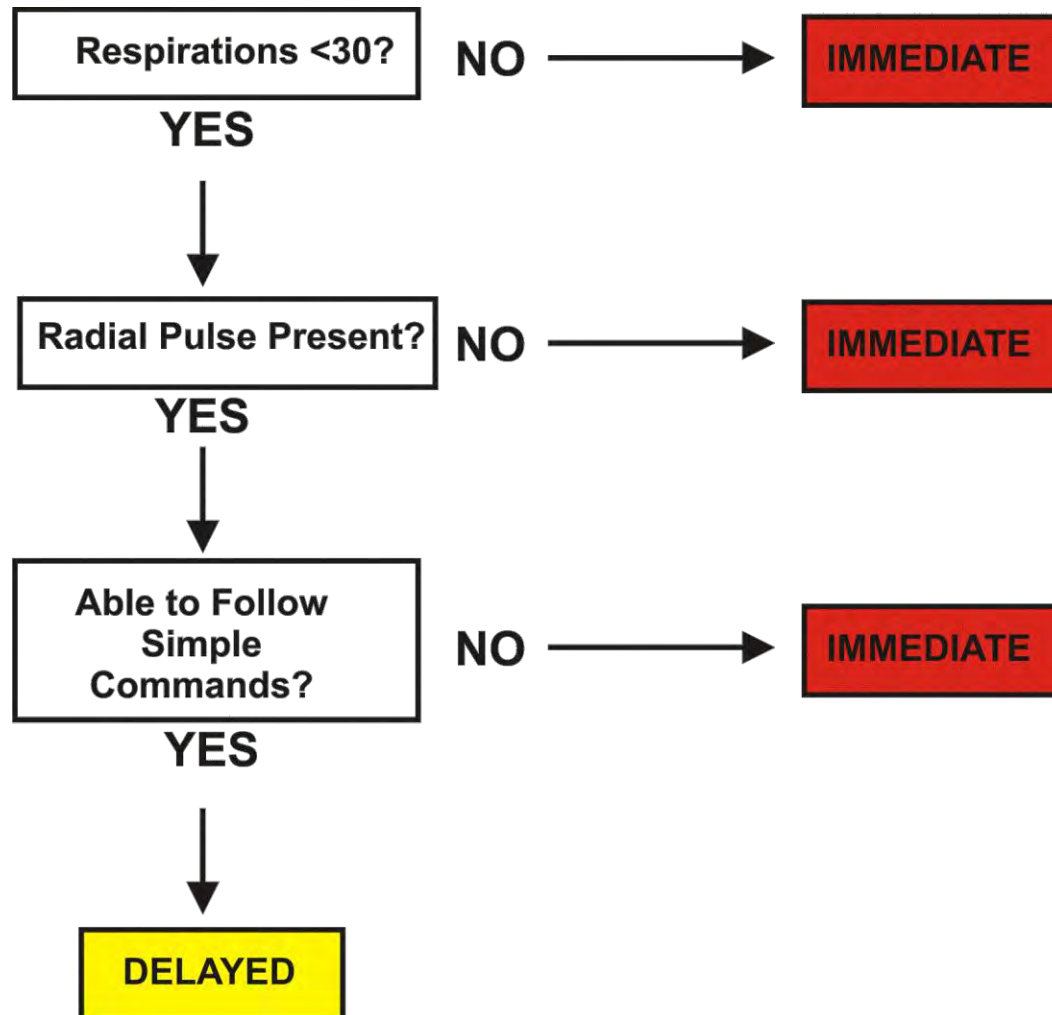


START

- If Respirations are less than 30/minute:
 - Assess the Radial Pulse*
 - Radial Pulse indicates BP of at least 80 systolic
 - If Radial Pulse is absent, tag patient **Immediate**, no further assessment is required.
 - If Radial Pulse is present, assess Mental Status

*Original START method assessed Perfusion (>2 second Capillary Refill = Immediate)

START Triage





START

The only treatment that should be conducted *during* START is:

- Opening the Airway
- Control Major Bleeding

In both cases, these procedures should be maintained with the assistance of other victims, bystanders, or the patient him/herself.

The rescuers' primary goal should be to complete START on all victims before providing any additional treatments.



START

- START is designed to conduct rapid *initial* triage of victims.
- More detailed assessments and re-triage of victims should be conducted as time allows.
- Once all victims have been triaged, a list of all victims by triage category should be provided to the Patient Transportation Unit Leader.



Summary

- The four triage categories are: Immediate, Delayed, Minor, and Deceased
- The first group of victims to be sorted are the Minors
- The only treatments allowed during START are Opening the Airway and Control of Major Bleeding



Frequently Asked Questions

- *Shouldn't slow respirations also be considered an Immediate?*
- No. By adding additional parameters, we defeat the purpose of keeping this simple. Patients that have very slow respirations will likely be picked up in one of the subsequent assessments: Pulse or Mental Status.
- *Even if someone is just breathing fast due to anxiety, we're supposed to tag them Immediate?*
- Yes. During START triage is not the time to be asking "why" a patient has certain symptoms, patients should be reassessed once moved to a treatment area.



Frequently Asked Questions

- *Is CPR ever allowed at an MCI?*
- Performing CPR is the number one error made by medical people during an MCI. Nobody should ever perform CPR before START triage is completed on every patient. CPR may only be performed if the on-scene resources exceed all patients' needs, meaning no living patients should be put at risk to resuscitate a deceased patient at an MCI. This is a national standard.
- *What happens if the patient's status changes?*
- If the patient is being upgraded, simply remove the appropriate colored tags, leaving the new triage status. If the patient is being *downgraded*, place a new triage tag over the old tag (after removing new ID numbers). Never remove a triage tag.



User Interaction

START

August 29, 2008

Mountain-Valley EMS Agency



Patient #1

- You come upon an unconscious patient with obvious massive head injury.
- What is your first action?
 - Determine if patient is breathing



Patient #1

- You've determined that the patient is breathing.
- What is your next action?
 - Tag the patient **Immediate**, and move on.
 - Since we already know that patient is unconscious, there is no further assessment necessary.



Patient #2

- Your next patient is complaining of abdominal pain and showing signs of bruising over the abdomen.
- What is your first action?
 - Assess Respirations



Patient #2

- This patient is obviously breathing faster than 30 times per minute.
- What is your next action?
 - Tag the patient **Immediate** and move on.
 - Since the patient meets one of the Immediate Triage criteria, no further assessment is necessary.



Patient #3

- Your next patient is awake and clutching a one-foot piece of shrapnel protruding from his right eye.
- What is your first action?
 - Assess respirations



Patient #3

- The patient is breathing less than 30 times per minute.
- What is your next action?
 - Assess Radial Pulse



Patient #3

- You are able to palpate the patient's radial pulse.
- What is your next action?
 - Tag the patient Delayed and move on.
 - Even though some injuries are very serious and impressive, the purpose of START is to quickly evaluate *all* patients before focusing on any one patient or injury.



Patient #4

- Your next patient is awake and appears to be approximately six months pregnant. She is suffering from an obvious break to her left lower leg.
- What is your first action?
 - Assess respirations



Patient #4

- Her respirations are less than 30 per minute.
- What is your next action?
 - Assess her Radial Pulse



Patient #4

- You can palpate her radial pulse.
- What is your next action?
 - Tag her Delayed, and move on.



Patient #5

- Your next patient is awake and having severe difficulty breathing- chest sinks in on inspiration.
- What is your first action?
 - Assess Respirations



Patient #5

- Patient is obviously breathing greater than 30 times per minute.
- What is your next action?
 - Tag the patient **Immediate** and move on.



California Fire Chiefs Triage Tag Review

August 29, 2008

Mountain-Valley EMS Agency

FRONT

BACK

CONTAMINATED

CONTAMINATED

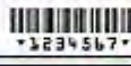
Personal Property Receipt/
Evidence Tag



Destination _____
Via _____



TRIAGE TAG



☐ S ☐ L ☐ U ☐ D ☐ G ☐ E ☐ M
S: Salivary, L: Laceration, U: Urinary, D: Dental, G: Gunshot, E: Explosive, M: Miscellaneous

AUTO INJECTOR ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Type	Primary Device
Size	Secondary Device
Solution	
<input type="checkbox"/> Blast Trauma <input type="checkbox"/> Burn <input type="checkbox"/> Chemical <input type="checkbox"/> Electrical <input type="checkbox"/> Friction <input type="checkbox"/> Radiation <input type="checkbox"/> Penetrating Injury	
Other: _____	

Age _____
☐ Male ☐ Female

VITAL SIGNS			
Time	B/P	Pulse	Respiration
Time	Drug Solution	Dose	

MORGUE

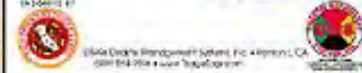
IMMEDIATE *1234567*	IMMEDIATE *1234567*
DELAYED *1234567*	DELAYED *1234567*
MINOR *1234567*	MINOR *1234567*

Comments/Information

Patient's Name _____

RESPIRATIONS R ☐ Yes ☐ No
PERFUSION P ☐ < 2 Sec ☐ > 2 Sec
MENTAL STATUS M ☐ Can't Do ☐ Can't Do

Move the Walking Wounded ➔ **MINOR**
 No Respirations After Head Tilt ➔ **MORGUE**
☐ Respirations - Over 30 ➔ **IMMEDIATE**
☐ Perfusion - Capillary Refill Over 2 Seconds ➔ **IMMEDIATE**
☐ Mental Status - Unable to Follow Simple Commands ➔ **IMMEDIATE**
 Otherwise ➔ **DELAYED**



PERSONAL INFORMATION	
NAME	
ADDRESS	
CITY	ST ZIP
PHONE	
COMMENTS	RELIGIOUS PREFERENCE

MORGUE

Pulseless/Non-Breathing

IMMEDIATE Life Threatening Injury	IMMEDIATE Life Threatening Injury
DELAYED Serious Non-Life Threatening	DELAYED Serious When Life Threatening
MINOR Walking Wounded	MINOR Walking Wounded

EVIDENCE

EVIDENCE

August 29, 200



Triage Tag Construction

- Synthetic paper
 - Water resistant
 - 100 % resistant to all commonly used decontamination solutions
 - May be worn while patient is being decontaminated



- This area of the triage tag will be utilized only in the event of a Mass Casualty Incident where the use of Auto-Injectors to treat the public has been approved by the EMS Agency

and/or

- for recording number of Mark-1 kits, self or buddy administered, by safety personnel (Officer, Firefighter, Paramedic, etc.) who have now been included in the Mass Casualty Incident.

<input type="checkbox"/> S	<input type="checkbox"/> L	<input type="checkbox"/> U	<input type="checkbox"/> D	<input type="checkbox"/> G	<input type="checkbox"/> E	<input type="checkbox"/> M
Salivation	Lacrimation	Urination	Defecation	G.I. Distress	Emesis	Miosis

- This area of the tag is used to document patient symptoms from a suspected nerve agent exposure.

- S - salivation (excess drooling)
- L - lacrimation (tears)
- U - urination
- D - defecation
- G - gastric distress (nausea, etc)
- E - emesis (vomiting)
- M - miosis (pinpoint pupils)

“Contaminated” Strip

- This magenta colored strip prevents the use of this tag until patient contamination has been ruled out.
- If contamination is suspected the magenta strip is removed and placed in the bag with the victims clothing.
- This supports law enforcement agencies in adhering to evidence collection protocols.
- If contamination is not suspected, the strip may be removed and properly discarded.

CONTAMINATED

1111111111
+3234567+

EVIDENCE

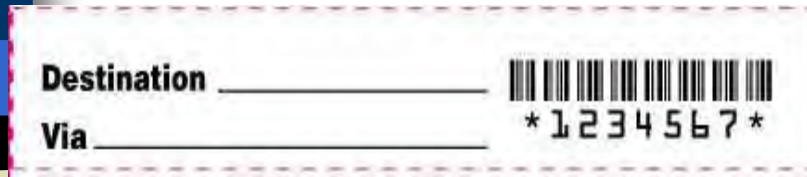


Personal Property Receipt/ Evidence Tag  *1234567*	Comments/Information
--	-----------------------------

Front

- This portion of the tag provides a Personal Property Receipt for valuables belonging to victims that may be contaminated.
- Place the valuables and the tag into a bag and seal it.
- The triage tag being worn by the patient has the corresponding number for claiming these valuables once the incident has been mitigated.

Back



Front of triage tag. It features a dashed border. On the left, there are two lines for text: "Destination" followed by a blank line, and "Via" followed by a blank line. To the right of these lines is a barcode. Below the barcode is the number "* 1 2 3 4 5 6 7 *".

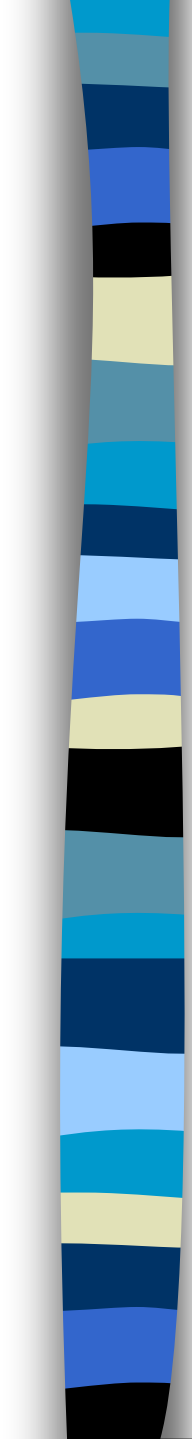
Front



Back of triage tag. It features a dashed border and a single line for text: "Patient's Name" followed by a blank line.

Back

- This portion of the triage tag is to be removed at the ambulance loading area to record the patients destination.
- The name of the patient should be written on the back of this portion of the tag to expedite patient processing.



Yes	No	Primary Decon
Yes	No	Secondary Decon
Solution		

- This area of the tag is to record patient decontamination information, gross decon, secondary decon as well as the solutions used.
- This information will be recorded prior to the patient leaving the decontamination reduction zone.

Agent Symbol Identification

- Circle the category of the agent(s) contaminating the patients, if known:



RADIOLOGICAL
AGENT



BIOLOGICAL
AGENT

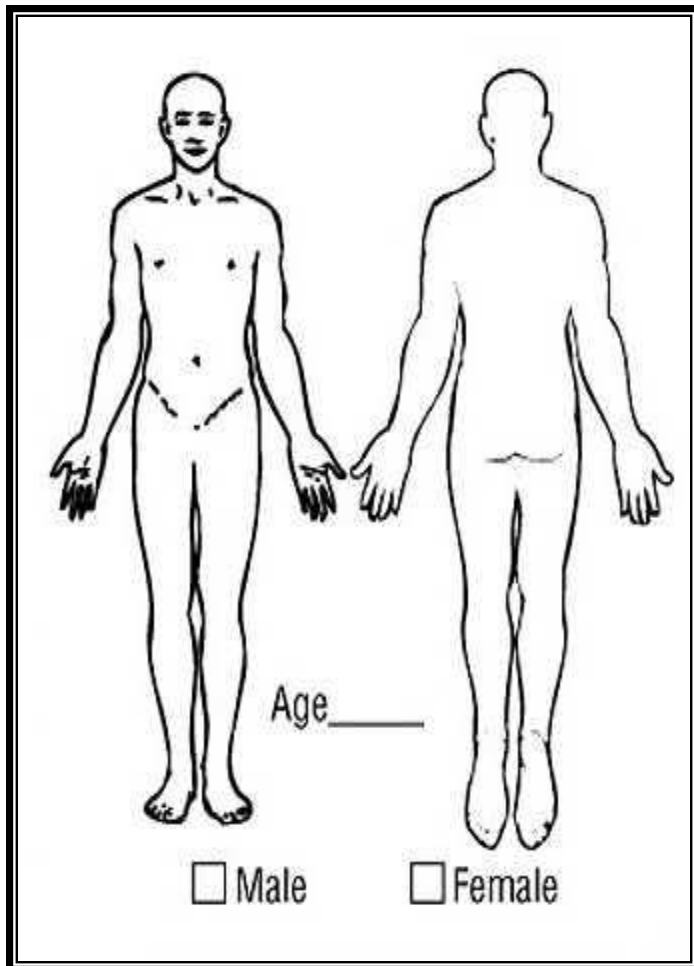


CHEMICAL
AGENT

Rapid Triage (START)

RESPIRATIONS	PERFUSION	MENTAL STATUS
R <input type="checkbox"/> Yes	P <input type="checkbox"/> + 2 Sec.	M <input type="checkbox"/> Can Do
<input type="checkbox"/> No	<input type="checkbox"/> - 2 Sec	<input type="checkbox"/> Can't Do
Move the Walking Wounded ▶		MINOR
No Respirations After Head Tilt ▶		MORGUE
<input type="checkbox"/> Respirations - Over 30	▶	IMMEDIATE
<input type="checkbox"/> Perfusion - Capillary Refill Over 2 Seconds	▶	IMMEDIATE
<input type="checkbox"/> Mental Status - Unable to Follow Simple Commands	▶	IMMEDIATE
Otherwise	▶	DELAYED

Body Map, Gender, Age



- Mark the area of injury or exposure.
- Enter the patients age.
- Select the patients gender.

Document Vitals Signs & Treatment

Other: _____

VITAL SIGNS

Time	B/P	Pulse	Respiration

Time	Drug Solution	Dose

August

Patient Information

PERSONAL INFORMATION		
NAME		
ADDRESS		
CITY	ST	ZIP
PHONE		
COMMENTS	RELIGIOUS PREF.	



Front



Back

- Split tear off tags.
- One side stays with the patient tag
- The other is collected by the “acting” Triage Unit Leader to obtain an accurate count of the injured.

**Personal Property Receipt/
Evidence Tag** *731259*

Destination _____
Via _____

**TRIAGE
TAG** *731259*

☐ S ☐ L ☐ U ☐ D ☐ G ☐ E ☐ M
Salivation Lacrimation Urination Defecation G.I. Distress Emesis Miosis

**AUTO
INJECTOR** ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

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Yes	No	Primary Decon
Yes	No	Secondary Decon

Solution

Blunt Trauma
Burn
C-Spine
Cardiac
Crushing
Fracture
Laceration
Penetrating Injury

Age _____

☐ Male ☐ Female

Other: _____

VITAL SIGNS

Time	B/P	Pulse	Respiration

Time	Drug Solution	Dose

MORGUE

IMMEDIATE
731259

Example of a split tear off tag (for an immediate patient)

■ Triage Tag goes with the patient.

■ This portion of the triage tag goes with the acting Triage Leader.

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Mountain-Valley EMS Agency



Hints When Using The Triage Tag

- Before tearing along perforation area of triage tag, fold area that will be affected for easy removal.
- If triage tag is likely be exposed to water, documentation should occur prior to getting wet.
- Name or identification should be included on the back of Personnel Property Receipt /Evidence Tag



S.T.A.R.T.

- Triage tags should be applied to the upper or lower extremity (not to clothing) and be clearly visible to other responders.
- Triage tags should never be removed, except by the final medical receiving facility.
- Triage tags should become part of the patient's permanent record at the final receiving facility.



S.T.A.R.T. Interaction

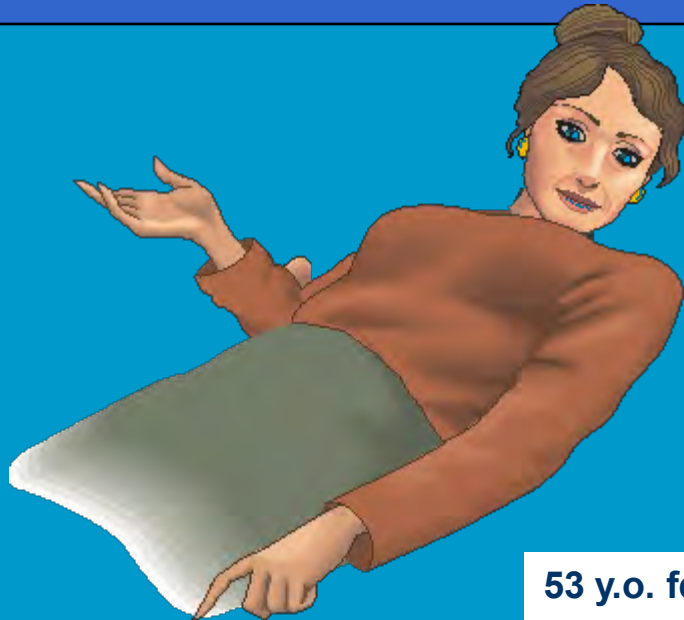
August 29, 2008

Mountain-Valley EMS Agency

S.T.A.R.T. Interaction

Test your START triage ability.

Which triage category would you place the patient in?



53 y.o. female

Complaining of back pain

Unable to walk without difficulty

Respirations: 24

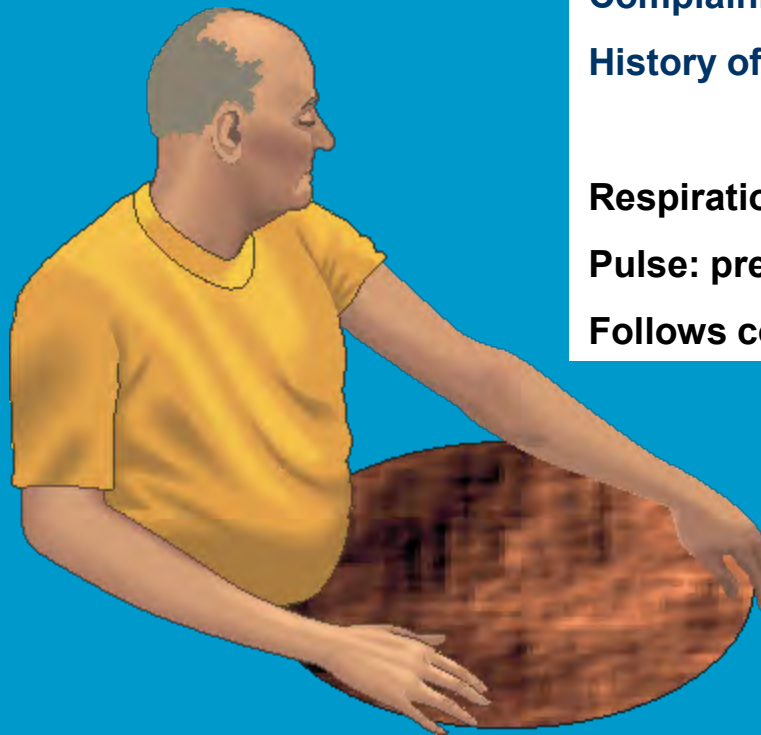
Pulse: present

Follows commands

S.T.A.R.T. Interaction

Test your START triage ability.

Which triage category would you place the patient in?



66 y.o. male

Complaining of shortness of breath

History of cardiac disease

Respirations: 32

Pulse: present

Follows commands

S.T.A.R.T. Interaction

Test your START triage ability.

Which triage category would you place the patient in?



77 y.o. female

Searching for her tricycle

Respirations: 18

Pulse: present

Happily obeys your requests

S.T.A.R.T. Interaction

Test your START triage ability.

Which triage category would you place the patient in?



82 y.o. male

Impaled pipe to abdomen

Respirations: 0

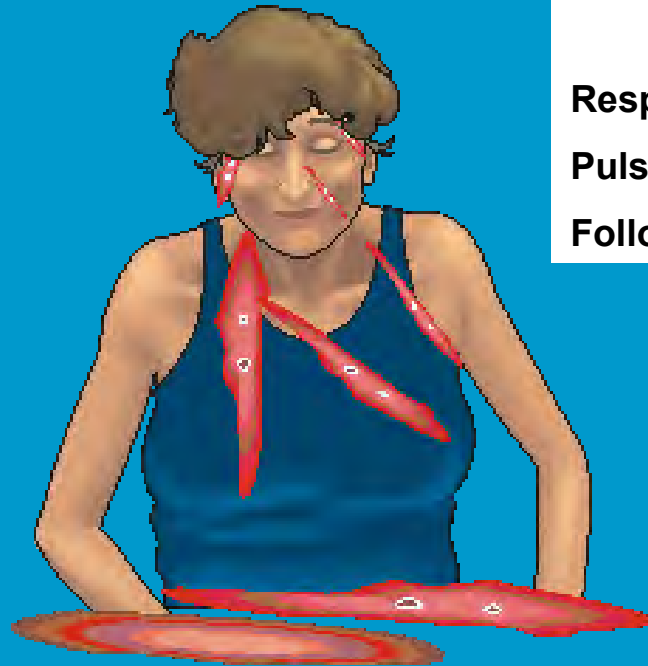
Pulse: weak and thready

Unconscious

S.T.A.R.T. Interaction

Test your START triage ability.

Which triage category would you place the patient in?



61 y.o. female w/ gaping scalp laceration – multiple facial abrasions covered with large amount of blood

Respirations: 24

Pulse: present

Follows commands