ECC ELDERLY/ FRAIL TRAUMA SCREENING TOOL

Significant Mechanism of injury, as per trauma team activation SOP.



ACTIVATE TRAUMA TEAM

Anatomy/mechanism of injury		
Significant injuries to TWO or more body regions.		Name: Hospital No DOB:
Significant pelvic, head, spinal or chest injury.		
Crush injuries.		History:
Physiological parameters		
Systolic BP <110mmHg		
Heart Rate >100bpm.		
GCS <15, OR reduced from baseline		
Other considerations		Maintain average trauma, para significant in energy med (Fall<2m, reference from standing)
Anticoagulant medication or bleeding disorder		
Significant medical history, co-morbidities, frailty.		
Inappropriate or inadequate medical history.		
Any other clinical concern.		

wareness of SILVER tients can sustain injuries from low chanisms of injury oll out of bed, fall ing).



Immediate senior clinician review – early adequate examination, imaging and identification of all injuries.

Consider CT Scan rather than plain film.

If appropriate;

Early discussion with relevant MTC. (TTL to TTL referral).

CMFT (MRI)

SRFT (Hope)