EMS Under-triage of Elderly Fall Victims by Current Trauma Triage Guidelines

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Introduction:
With our aging population, the increasing numbers of elderly trauma victims will change the way EMS triages these patients. Studies have shown that age and other co-morbidity factors increase the severity of injury. The CDC released their revised Guidelines for Triage of Injured Patients in January 2009 that addresses these issues. Under current NJ trauma triage guidelines, age and co-morbidity issues are not included.

Hypothesis:
Adherence to NJ trauma triage guidelines results in under-triage of elderly fall victims.

Methods:
A retrospective chart review was conducted from 6/1/2008 to 5/31/2009 of elderly fall victims (>65yrs of age) in Ocean County, NJ, who were (a) transferred to the regional trauma center from local hospitals, (b) that suffered head injuries secondary to falls and (c) who were on anti-coagulants. As the sole provider of ALS in the county, we compared those numbers to our ALS dispatch and treatment records.

Results:
In the study time frame, the regional trauma center reported 32 patients, >65 years of age from Ocean County, NJ, that were transferred from local hospitals, that had suffered a head injury, secondary to a fall and who were on anti-coagulants. In the same time frame, our ALS units were dispatched to 295 calls for fall victims, treating 15 patients. We were cancelled prior to arrival on 280 calls. Only 1 patient, meeting the three study criteria, was treated and transported to the trauma center by ALS. The other 14 patients, whom were assessed or treated by ALS, did not meet the criteria for a trauma center nor for the study criteria. ALS was not dispatched or was cancelled on the 32 patients that were transferred.

Conclusions:
With 32 patients being transferred to the trauma center without ALS intervention (100%), 280 of 295 patients having ALS cancelled prior to arrival (95%) and only 1 patient (0.34%) of the 15 assessed by ALS, treated to the trauma center, EMS does under-triage elderly fall victims using current NJ trauma triage guidelines.

Recommendations:
As our elderly population increases, EMS will have to be better educated on co-morbidity factors in dealing with elderly trauma victims.