



**Trauma MASS CASUALTY TRIAGE**  
 (Incident Management, SALT Triage, MCI Levels, Trauma Center Levels)  
 Practice Guideline

**Patient Care Goals:**  
 Move pts away from incident towards resources for more comprehensive care

**General Principles:**  
 Move as quickly as possible  
 Begin transports of RED a.s.a.p.  
 Don't neglect triage/ED capacity/command  
 Reassess at zone area  
 Over-triage as harmful as under-triage  
 Dynamic situation due to changing resources

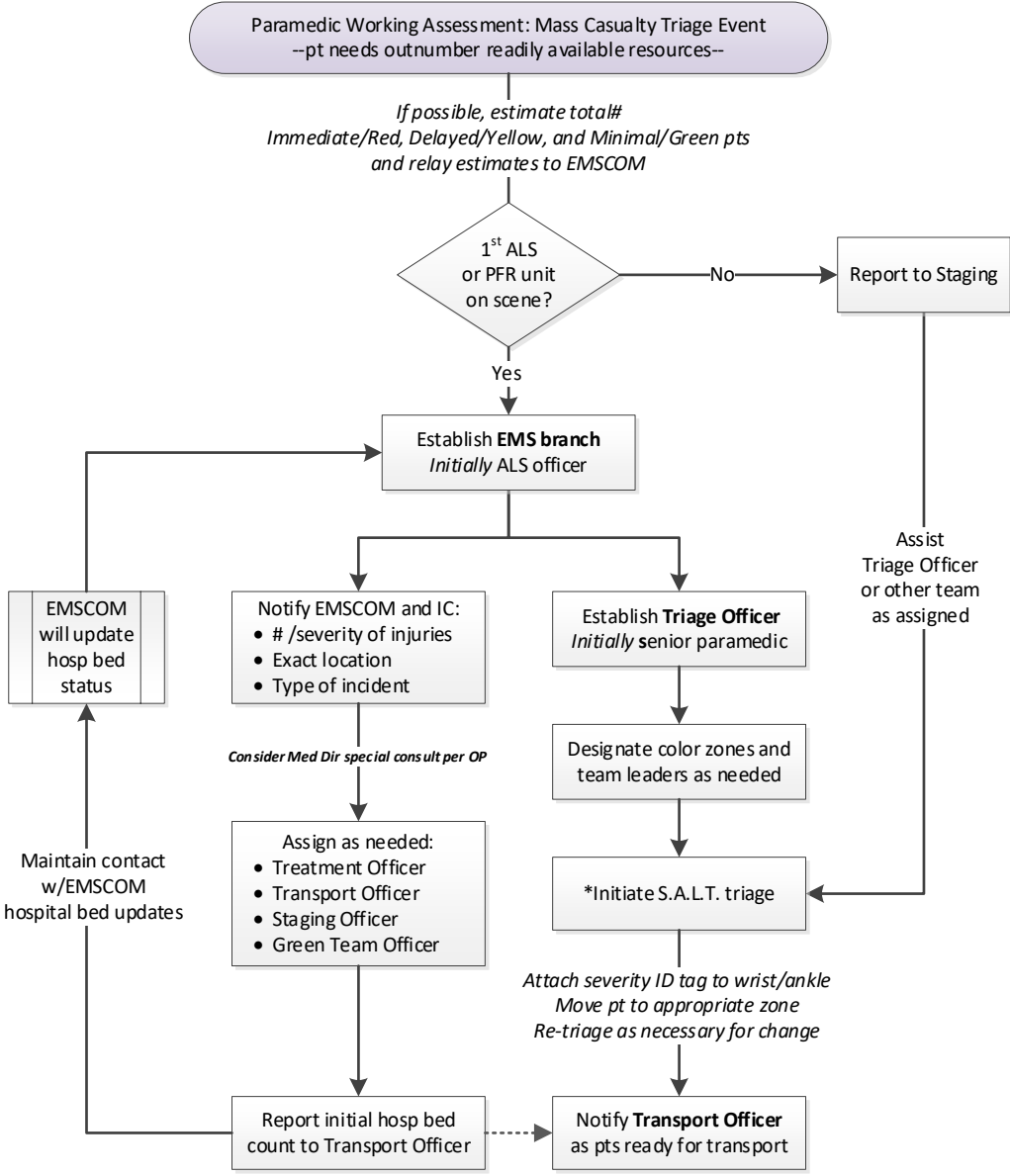
**Patient Management:**  
 \*S.A.L.T. Triage  
 Sort  
 Assess  
 Life Saving Interventions (LSI)  
 Treatment/Transport

**LSIs**  
 Control major hemorrhage  
 Open airway (if child, 2 rescue breaths)  
 Needle chest decompression  
 Auto-inject antidotes if appropriate and if available

**Categories**  
**Red** ● Immediate  
**Yellow** ● Delayed  
**Green** ● Minimal  
**Gray** ● Expectant  
**Black** ● Dead

**Utilization order of EMS resources:**  
 ◇ Local EMS agency, shared services, and mutual aid units (including air ambulances)  
 ◇ Zone resources (MABAS)  
 Consider Rescue 719 MCFD at MKE  
 ◇ Activation of Milwaukee County Disaster Plan may be requested by Incident Commander through Milwaukee County Emergency Management

Refer to individual fire department disaster/multi-casualty incident position descriptions for further specific duties.  
 BLS transport units should use MCI ambulance-to-hosp communication protocol  
 EMS units should report back to staging after transport until released by Incident Command



**Report format to EMSCOM for MCI transports**  
 Unit number  
 Destination  
 Number of patients  
 Triage color of each patient  
 ETA

*\*SALT Triage Diagram p.2*



**Trauma**  
**MASS CASUALTY TRIAGE**  
 (Incident Management, SALT Triage, MCI Levels, Trauma Center Levels)  
 Practice Guideline

**Step 1**  
Global sorting

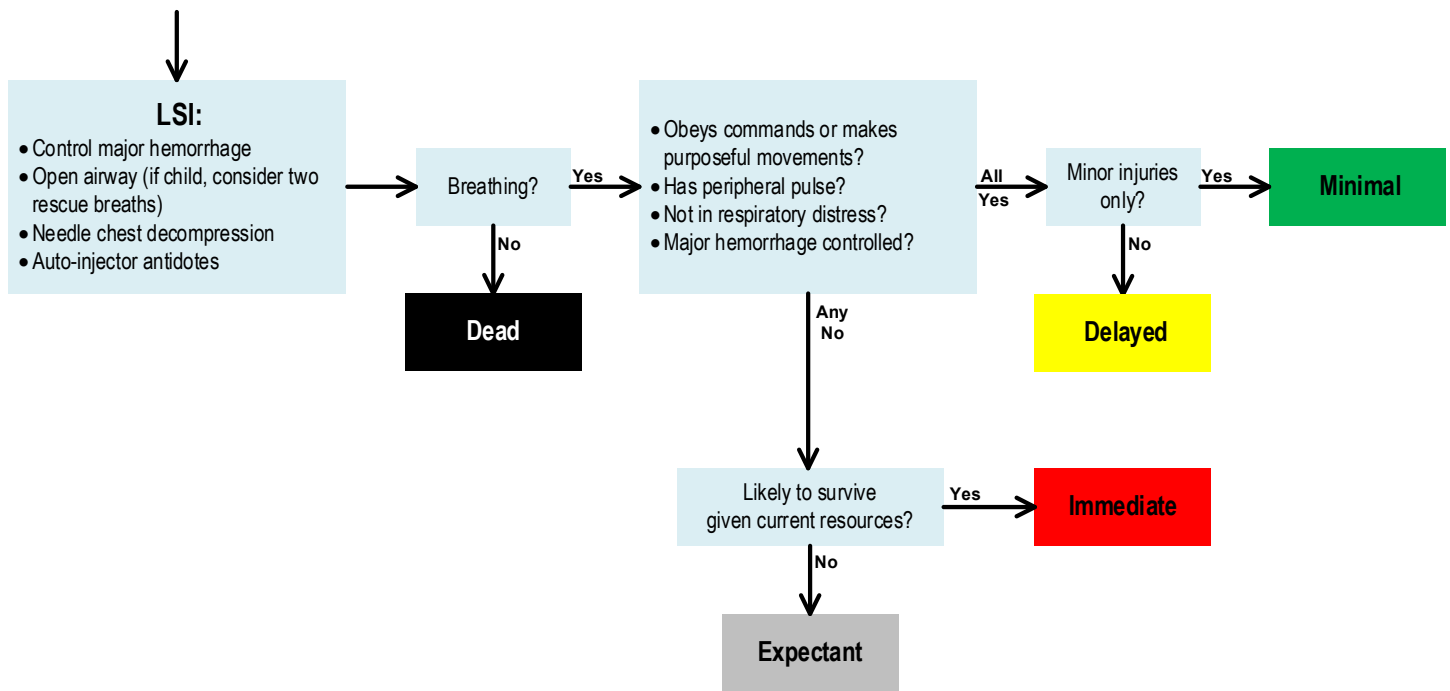
**Still / obvious life threat**  
Assess first

**Wave / purposeful movement**  
Assess second

**Walk**  
Assess third

**Step 2**

Individual assessment





**Trauma**  
**MASS CASUALTY TRIAGE**  
 (Incident Management, SALT Triage, MCI Levels, Trauma Center Levels)  
**Practice Guideline**

	Casualty Numbers	Hospital Reports	Alternate Trauma Destinations	Alternate Strategic General Hospital Triage	Hospital Decompression Unit	On Site Care Consisting of Field Hospital	Non-traditional Transport Vehicles ICS Coordinated
<b>1</b>	5-9	Normal	Green: No	Green: No	No	No	No
			Yellow: No	Yellow: No			
			Red: No	Red: No			
<b>2</b>	10-19	Truncated by MED Unit	Green: No	Green: No	No	No	No
			Yellow: No	Yellow: No			
			Red: No	Red: No			
<b>3</b>	20-49	Truncated by Transport Officer	Green: Incorporate Level 4 Trauma Centers	Green: Avoid closest hospitals	No	No	No
			Yellow: No	Yellow: No			
			Red: No	Red: No			
<b>4</b>	50-99	Truncated by Transport Officer	Green: Incorporate all EDs	Green: Avoid closest hospitals Utilize non-MKE county hospitals	No	No	No
			Yellow: Incorporate Level 4 Trauma Centers	Yellow: Avoid closest hospitals			
			Red: No	Red: No			
<b>5</b>	100-500	Truncated by Transport Officer	Green: Incorporate all EDs	Green: Avoid closest hospitals Utilize non-MKE county hospitals	Consider for closest hospital and trauma hospitals	Consider	Consider
			Yellow: Incorporate Level 4 Trauma Centers	Yellow: Avoid closest hospitals			
			Red: Incorporate Level 3 Trauma Centers	Red: No			
<b>6</b>	>500	Truncated by Transport Officer	Green: On-Site Care	Avoid closest hospitals as able Use regional hospitals	Yes for closest hospital and trauma hospitals	Yes	Yes
			Yellow: Incorporate all EDs				
			Red: Distribution among all Regional Trauma Centers				

Triage Color	Category
<b>GREEN</b>	<b>Minimal</b>
<b>YELLOW</b>	<b>Delayed</b>
<b>RED</b>	<b>Immediate</b>

**YELLOW** Triage patients should be preferentially transported to Level 3 Trauma Centers unless indicated above.

**RED** Triage patients should be preferentially transported to Level 1 Trauma Centers unless indicated above.

Initiated: 05/22/1998  
 Reviewed/Revised: 07/01/2024  
 Revision 12

Approved: Benjamin Weston, MD, MPH Medical Director  
 Approved: Dan Pojar, BSEMS, FP-C, NRP EMS Division Director  
 WI DHS EMS Approval: 06/15/2020

Pg 3 of 4



Trauma  
**MASS CASUALTY TRIAGE**  
 (Incident Management, SALT Triage, MCI Levels, Trauma Center Levels)  
 Practice Guideline

Trauma Level	Health System	Hospital
<b>LEVEL I</b>	Froedtert	Froedtert Hospital Milwaukee
	Children's	Children's Hospital Wisconsin
<b>LEVEL III</b>	Ascension	All Saints Racine, St Mary's Ozaukee
	Aurora	Grafton, St Luke's
	Froedtert	Froedtert Menomonee Falls
	ProHealth	Waukesha Memorial
<b>LEVEL IV</b>	Ascension	Elmbrook, St Joseph's, St Mary's Milwaukee, Franklin
	Aurora	Sinai, West Allis, St Luke's South Shore, Mt Pleasant
<b>OTHER SYSTEM HOSPITALS</b>	Ascension	St Francis LRH: Greenfield, Ascension Menomonee Falls
	Froedtert	LRH: Mequon, New Berlin, Oak Creek, Pewaukee
	VA	Zablocki VA Medical Center
<b>OUT-OF-SYSTEM HOSPITALS</b>	Aurora	Level II: Summit Level III: Burlington, Lakeland, Kenosha, Elkhorn Level IV: Washington County
	Froedtert	Level III: Pleasant Prairie Level IV: West Bend
	ProHealth	Level III: Oconomowoc