Adult Triage Criteria

(Adapted from the Canadian ED Triage and Acuity Scale)

Conditions that are life or limb threatening (or with imminent risk of deterioration) needing immediate aggressive intervention.

Time to doctor: IMMEDIATE

- Usual presentations: 1. Cardiac and/or pulmonary arrest
- 2. Major trauma
- 3. Shock states
- 5. Severe respiratory distress
- 6. Status epileptious
- 7. Acute coronary syndrome/ chest pain 8. CWA/ stroke
- 9. DKW HHS 10. Shock states (Trauma haereonhagie / soptie
 - * BP* <90/00 Temp<3600 or >3800
 - Pflicfübern or >100born
- RRc16bpm or >84bpm 11, Hyperlensive Emergencies
 - blurred vision / veriting / CWA / confusion
 - · BP >180/110mmHg with

12. GI bleed

- 13. Severe astivnatic attack
 - · SP02 -90% Single word speech
 - Silent obest
- 14. Deranged blood glacose levels
 - (<3mmol/Lar >18mmol/Lwith combision / selzures / diaphonosis)
- Pregnancy related complications
 Presenting field parts

 - · Prolapsed cord
 - · Vaginal bleeding josp. 3rd trimester
 - Absent fetal movements
 - Edarapsia
- 16. Severe head injury (GDS: 3-8/15)
- 17. Drug / substance abuse / into haemodynamic instability

LEVEL II: EMERGENT

Conditions that are potential threat to life, function or limb, requiring rapid medical intervention.

Time to dector < 15min

Usual presentations:

- 1. Altered mental state
- 2. Head injury (mild / moderate with GCS of 9-15) 12. Severe abdominal / groin pain /
- 3. Neonates
- 4. Eye pain/injuries 5. Drug and/or substance overdose / intoxication /
- withdrawal with stable vitals 6. Asthrea (moderate)
- 7. Anaphylaxis
- B. Heavy vaginal bleeding /apute pelvic or lower
- abdominal pain Sepsis/pyrexis
 Severe varnising and/or diarrhoea
- (haemodynamically unstable)

TRIAGE I

IMMEDIATE

acute abdomen

11. Agute psychosis / extreme

agitation

- 13. Severe hypertension or hypotension (BP > 180/110 mmHg or
 - < 90/60 remit(g)
- 14. Abuse / reglect / sussuit (physical / sexual)
- 15. Patients on chereotherapy
- 16. Acute paix severe (pain score 8-10/10)
- 17. Seizure disorder

Conditions could potentially progress to a serious problem requiring emergency intervention. May be associated with significant discomfort or affecting ability to function at work or activities of daily living.

Time to doctor < 30min

Usual presentations

- Authma, mild
 Acute pain moderate (pain score 4-7/10)
- Vomiting or diannous with dehydration
- 4. Dialysis or transplantation codients) 5. Other diabetic - associated conditions e.g. neuropathy, nephrogathy, relinopathy.

MINUTES

LEVEL IV: LESS URGENT

Conditions could potentially progress to a serious problem requiring emergency intervention. May be associated with significant discomfort or affecting stillity to function at work or activities of daily living.

Time to dector a 1 hour

- 1. Minor traums with soft tissue injuries 2. Headache (pain score 0-3/10)
- 4. Eur acts
- 5. Back pain, chronic
- 6. URTI symptoms with fever
- Vomiting and/or diarrhos with no signs of dehydration
- P. Acuto main mile (pain score 0-3/10)

HOUR

LESS URGENT

LEVEL V: NOT URGENT

Problem with or without evidence of deterioration.

Time to doctor « 2 hours

Usual Presentations

- 1. Sore Throat/URTI without fever
- 2. Abdominal pain without varniting

TRIAGE V

HOURS

3. Diarrhoea or vorniting alone without dehydration

