2. Warm Zone/Indirect Threat care considerations:
   a. Maintain situational awareness
   b. Ensure safety of both responders and patients by rendering equipment and environment safe (firearms, vehicle ignition)
   c. Conduct primary survey, per the General Trauma Management Guideline, and initiate appropriate life-saving interventions
      i. Hemorrhage control
         1. Tourniquet
         2. Wound packing if feasible
      ii. Maintain airway and support ventilation [See Airway Management Guideline]
   d. Maintain body temperature and prevent hypothermia
   e. **Do not delay** patient extraction and evacuation for non-life-saving interventions
   f. Consider establishing a casualty collection point if multiple patients are encountered
   g. Unless in a fixed casualty collection point, triage in this phase of care should be limited to the following categories:
      i. Uninjured and/or capable of self-extraction
      ii. Deceased/expectant
      iii. All others

Patient Safety Considerations

1. Anticipate unique threats based on situation
2. During high threat situations, clinician safety should be considered in balancing the risks and benefits of patient treatment

Notes/Educational Pearls

Key Considerations

1. In high threat situations clinician and patient safety will need to be simultaneously considered
2. During high threat situations, an integrated response with other public safety entities may be warranted
3. Risks taken and threats to responder safety must be weighed in relations to the expected benefit to patient safety and outcome
4. During these situations, maintaining communications and incident management concepts may be crucial to maximizing efficiency and mitigating dangers

Quality Improvement

Associated NEMSIS Protocol(s) (eProtocol.01) *(for additional information, go to www.nemsis.org)*
None noted

Key Documentation Elements

- Traditional documentation may not be appropriate during Hot Zone/Direct Threat and Warm Zone/Indirect Threat care
- Documentation of key intervention should be relayed:
  - Time of tourniquet application
  - GCS for patients with suspected head injury