



Disaster Response:

Principles of Preparation and Coordination

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Appendix D: 5-CATEGORY TRIAGE CLASSIFICATION EXAMPLES

NOTE: This list gives examples of conditions that might be found in disaster casualties and how they would be classified in the 5-category system described in Chapter 8. Since it is not always possible to make the correct diagnosis in the field, important signs and symptoms are also listed. The reader may notice that the examples include conditions more reminiscent of routine emergency medical conditions rather than those typical of disasters. They are included for two reasons:

- 1) People do not cease becoming ill or having babies simply because disaster strikes. Those with non-disaster related medical conditions would still require treatment and need to be considered when priorities are assigned.
- 2) If triage categories are to be used on a daily basis, then one must be able to determine triage categories for routine emergencies.

EXAMPLES OF "CRITICAL" (RED) CASUALTIES

- Upper airway obstruction.
- Life-threatening bleeding.
- Tension pneumothorax.
- Contamination with a hazardous substance.
- Second or third degree facial burns (when the total body surface area burned is less than 50%) which may rapidly lead to upper airway obstruction.
- Stridor (crowing or raspy inspiratory sounds - suggests upper airway obstruction).
- Severe, rapidly progressing allergic symptoms such as: rash, generalized or facial swelling, wheezing, stridor or breathing difficulty, and weak, thready pulse.
- Severe sore throat when accompanied by drooling, muffled voice, inability to swallow, or difficulty opening the jaw - suggests a serious infection in the airway which may quickly lead to its obstruction.
- Complicated obstetrical delivery (e.g., breech position, or compressed umbilical cord).
- Cardiac rhythm abnormality if accompanied by the sudden onset of circulatory shock, decreased mental alertness, or pain, burning, pressure or tightness in the chest, upper abdomen, upper extremity, neck, jaw, or back - suggests a heart attack.
- Untreated poisoning (after initial treatment such as the administration of syrup of ipecac, some cases may be retriaged to a lower priority category).
- Hypoglycemia, insulin shock, or insulin reaction (severe decrease in blood sugar which may occur in diabetics).
- Respiratory distress (blue skin color, asymmetrical chest motion or sounds, noisy breathing, nasal flaring, tightening of the neck muscles during breathing efforts, or retraction of the

skin between the ribs, about the collar bones or above or below the breastbone).

- Circulatory shock.
- Rapidly deteriorating level of consciousness.
- Rapidly progressive nervous system disorder (paralysis, weakness, numbness, tingling, incoordination, confusion, or visual disturbance).
- Seizure during pregnancy (suggests eclampsia or toxemia).
- Status epilepticus (more than two seizures without regaining full consciousness in between).
- Penetrating wounds of the chest, abdomen, pelvis, rectum, vagina, head or neck.
- Embedded radioactive foreign bodies.
- Sunstroke or fever greater than 105°F.
- Coma.
- Untreated cervical spine injuries (after these are properly immobilized, their priority for care may decrease).

EXAMPLES OF "CATASTROPHIC" (BLUE) CASUALTIES

- Cardiac arrest (especially resulting from trauma or blood loss). Respiratory arrest when not due to drugs or upper airway obstruction.
- Sudden onset of severe abdominal pain and circulatory shock in an elderly subject who has a pulsating abdominal mass - suggests a ruptured abdominal aneurysm.
- Massive brain injuries (indicated by massive head trauma, dilated-fixed pupils, absence of all reflexes, extrusion of brain matter).
- Second and/or third degree burns exceeding a total of 50% of the body surface (especially in elderly persons with serious underlying medical disorders such as emphysema, diabetes, or cirrhosis of the liver).
- Penetrating wounds of the trunk with coma and no detectable blood pressure.
- Penetrating gunshot wounds of the head with coma. Cardiogenic shock.

EXAMPLES OF "URGENT" (YELLOW) CASUALTIES

- Circulatory shock which has responded adequately to initial treatment with one liter of IV fluid.
- Interference with circulation due to a fracture or dislocation.
- Severe bleeding controlled by a tourniquet.
- Compartment syndrome (swelling due to an injury, usually a fractured elbow or shin, which interferes with capillary blood flow to the muscle tissue; usually characterized by severe pain which is aggravated by movement of the joints beyond the injury and, *sometimes*, by a sensory or pulse deficit).
- Dislocations of the hip, elbow, or knee-which may compress arteries or nerves, or may be difficult to reduce if treatment is delayed.
- Open dislocations and fractures.
- Acute urinary retention (especially in chronically paralyzed patients).
- Second or third degree burns (not including the face or airway, and totaling less than 50% of the body surface).
- Uncomplicated bends (decompression sickness, caisson's disease).
- Apparently complete recovery after resuscitation from drowning. Electrical burns.
- Non-severe bleeding from the genitalia, digestive tract or lungs in the absence of circulatory shock.
- Uncomplicated obstetrical delivery or impending delivery (some might even consider this belonging to category Green).

- Severe headache not related to an injury, with decreased alertness, or with confusion, fever, or a stiff neck (inability of the patient to touch his chin to his chest) - suggests meningitis or an infection or bleeding in the brain.
- Uncomplicated hypothermia (rectal temperature less than 95° F). Swelling of a digit or the genitalia due to a constricting object or band.
- Sustained blood pressure exceeding 200 mm systolic or 120 mm diastolic, especially in pregnancy.
- Severe abdominal pain with abdominal wall rigidity or localized tenderness - suggests internal bleeding or infection such as that due to a perforated stomach ulcer or a ruptured appendix.
- Pelvic fractures in the absence of circulatory shock.
- Smoke inhalation in the absence of respiratory distress. Uncomplicated gunshot or stab wound to an extremity. Multiple fractures in the absence of shock.
- Immobilized, uncomplicated cervical spine injuries.
- Traumatic crush injuries or amputation of an extremity in the absence of serious bleeding or circulatory shock (except crush injuries of a fingertip, which may be in category Green).
- Fever with severe joint pain, or fever in a child or infant who refuses to use an extremity - suggests a severe infection of a joint. Sudden onset of confusion, disorientation, combativeness, or psychotic behavior (when not due to injury, hypoglycemia, poisoning or overdose, shock, or oxygen deficiency).
- First onset of severe, incapacitating headache - suggests meningitis, brain infection, or bleeding in the brain.
- Sudden onset, but not rapidly progressive, localized sensory loss or abnormality, partial or complete paralysis, or sustained loss of balance.
- Sudden, partial or complete, temporary or sustained, but not progressively deteriorating abnormality of vision.
- Penetrating wound of the eyeball.
- Rectal temperature greater than 104° F in a child.
- Fever in a child who is unusually lethargic or refuses to eat or play. Rectal temperature greater than 100° F in an infant less than 3 months old.
- Oral temperature greater than 103° F in an adult. Uncomplicated femoral (thigh) fractures.
- Vaginal bleeding in pregnancy.
- Vaginal bleeding accompanied by light-headedness, fainting, or severe back, abdominal, or shoulder pain.
- Sudden onset of severe testicular pain - suggests a twisting of the testicular cord which has cut off the blood supply.
- Soft tissue infections of the face, especially about the eye or nose can travel to the brain if not treated.
- Soft tissue infections or animal (especially human) bites of the hand can cause, within hours, permanent damage to the hand. Wounds of the external genitalia (in the absence of shock or continued bleeding).
- First onset of seizures (in the absence of status epilepticus, hypoglycemia, poisoning or overdose, injury, cardiac rhythm disturbance, or oxygen deficiency).
- Vomiting more than twice after a head injury.
- Repeated vomiting or diarrhea in a child who is abnormally lethargic, has a weak cry, dry tongue or inability to make tears - suggests serious illness or dehydration.
- Repeated vomiting in a diabetic - suggests diabetes is out of control.
- Serious surface injury to the face or head (in the absence of uncontrolled bleeding, airway problems, circulatory shock, decreased mental alertness, confusion, vomiting or non-immobilized cervical spine injury).
- Large, dirty, or crushed soft tissue wounds.

EXAMPLES OF "MINOR" (GREEN) CASUALTIES

- Closed dislocations of the jaw, kneecap, or finger (especially if they have been reduced).
- Closed, uncomplicated fractures of the upper extremity, lower leg, foot, kneecap, ankle, or face.
- Uncomplicated, clean lacerations (including those involving tendons or peripheral nerves).
- Fingertip amputations with loss or crushing of the amputated part (which precludes sewing it back on).
- Burns in adults totaling less than 20% of the body surface area (when they do not involve the face, airway, groin or anal area, eye, feet, or hands).
- First degree burns not affecting the airway or eye. Frostbite.
- Sprains, strains, and moderate bruises.
- Dental pain in the absence of facial infection.
- Psychiatric or emotional disorders (when not due to physical injury or disorder and not involving suicidal or homicidal tendencies).
- Uncomplicated abrasions.
- Nosebleeds that can be stopped by direct pressure (firm pinching of the soft part of the nose).

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