

Appendix A:

Patient Distribution Guidelines

In the event that at least 5 red/yellow patients need to be transported to the hospital, the following steps will be completed:

1. Complete an initial triage assessment and patient count.
2. If criteria met, first arriving unit will banner the event.
3. Patients will be distributed according to following algorithm:

Immediates/RED (Critical)

First Wave

TIER I HOSPITAL: UNMH

4 of the most critical **RED** patients are transported to the UNMH in the first distribution of patients.

This can be done by transporting 2 **RED** triaged patients per transport unit

TIER II HOSPITALS: PRES DT, LOVELACE

After UNMH has designated 4 critical **RED** patients, 2 critical **RED** patients can be transported to a TIER II hospital.

TIER III HOSPITALS: RUST, WESTSIDE, WOMEN'S, SRMC, HEART, KASEMAN

In the event that multiple critical patients need transport and the previous hospitals have received critical patients, these hospitals will take 1 **RED** triaged patient.

Subsequent Waves

Once the first wave of critical **RED** triaged patients have been delivered to all capable hospitals, the distribution will go as follows:

- 2 critical **RED** patients per hospital starting with TIER I, then TIER II hospitals.
- Next, 1 critical **RED** patient to any TIER III hospital.
- This cycle can be repeated until all **RED** triaged patients are transported.

Delayed/YELLOW (Stable and non-ambulatory)

- Stable patients shall not delay the transportation of **RED** triaged patients.
- Transport of Delayed/Minor patients should be evenly distributed to ED's that have not received **RED** triaged patients. Distribution is at the discretion of the IC or Transport Officer.
- If deemed safe for the patient and minimal chance that the patient's condition could deteriorate, a Delayed or Minor patient can be transported in a transport capable unit's front seat.
- If in doubt, keep this patient on scene until more transport units become available.
- Delayed and minor patients can be transported to any hospital ED in an MCI scenario.

Minor/GREEN (Walking Wounded)

- Anticipate that minor patients in an MCI event will leave the scene via POV or other means.
- If the MCI presents with multiple Minor patients, it is an option to transport these patients via BUS or high capacity transportation vehicle.
- These patients are a low transport priority and treatment can be completed on scene until transport is available.

KEY POINTS

- If patient is in dire need of treatment and travel time to a TIER I or II hospital is a factor, TIER III hospitals can be utilized in the MCI scenario
- TIER II & III hospitals are **ONLY** to receive critical trauma patients in Multi-Casualty Incidents
- TIER II & III hospitals goals for patient care will be stabilization (medical or surgical) and transfer to the UNMH or appropriate hospital; this could be located in NM or outside of the state
- Patients can be distributed to hospitals outside of the Bernalillo County metro area from the scene
- The objective of an MCI is to transport all critical patients off the scene without delay
- The Veteran Administration ED will accept "Yellow" and "Green" triaged patients only in the event of an MCI
- The VA will also accept non-veterans patients in the event of an MCI
- If possible, patients with specific health care needs (i.e. Pediatrics or OB) should be transported to hospitals with those specialties
- Refer to most recent hospital capabilities chart or default to UNMH