

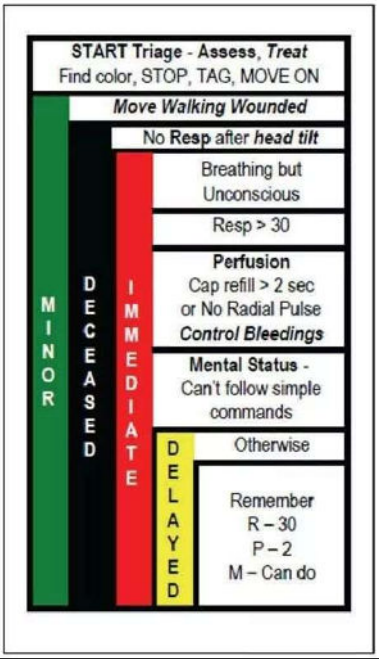
Thank you Missah!

In this lesson, we will talk about another triage called Simple Triage and Rapid Treatment or S T A R T in short.

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WHAT IS START?

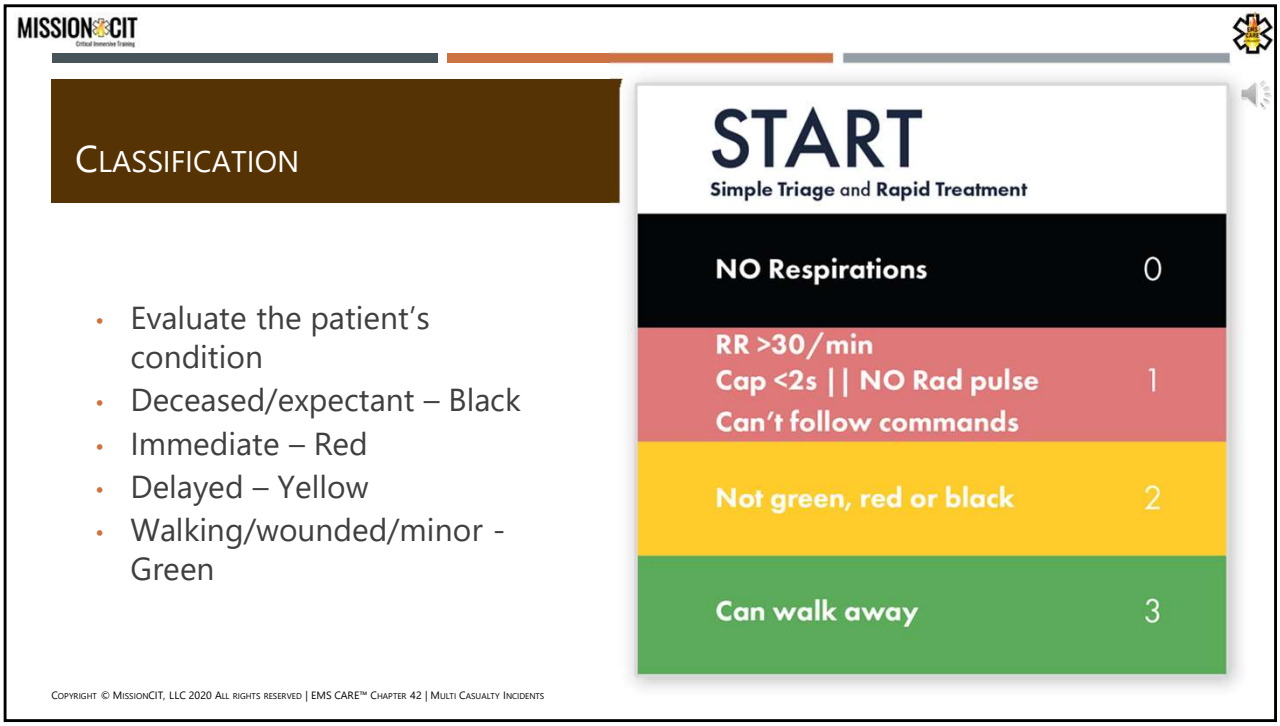
- Triage system
- Used to classify a patient
- Severity of the injury
- Developed way back in 1983
- Used widely in the United States



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START is a triage system used by first responders to classify a patient based on the severity of injury in a mass casualty incident. It was developed way back in 1983 by the Hoag Hospital and Newport Beach Fire Department located in California. It is currently used widely across the United States.



In this method, first responders evaluate the condition of a patient and assign that person to one of these four categories.

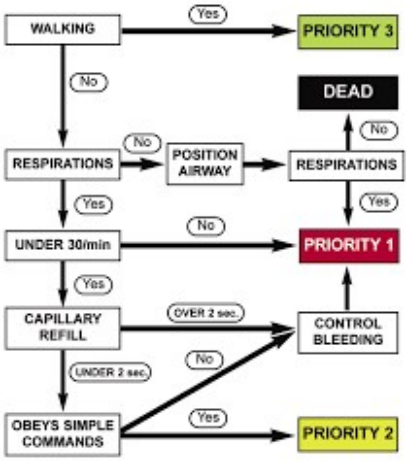
- Deceased/expectant is denoted by black. Here expectant means someone alive, but has no chance of survival with the currently available resources.
- Immediate is denoted by red. This means the patient is in a life-threatening situation and can survive with the appropriate intervention.
- Delayed is denoted by yellow and this means, the patient requires treatment but is not in a life

threatening situation

- Walking/wounded/minor is denoted by green and means that the patient has minor injuries and may not require treatment at all.

How To Classify?

- A flowchart that explains how to classify
- No respiration after a head tilt – Deceased
- Moving and able to follow instructions – Minor
- Respiration > 30, perfusion capillary refill > 2, no radial pulse – Immediate
- Perfusion s 2, respiration is 30, mental status is good - Delayed



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START has a flowchart that explains how you can classify a person based on the medical need. First off, if a patient is moving and able to follow instructions, he or she falls into the minor category. Likewise, if there is no respiration after a head tilt, that patient is considered deceased. Both these groups don't need much care from you.

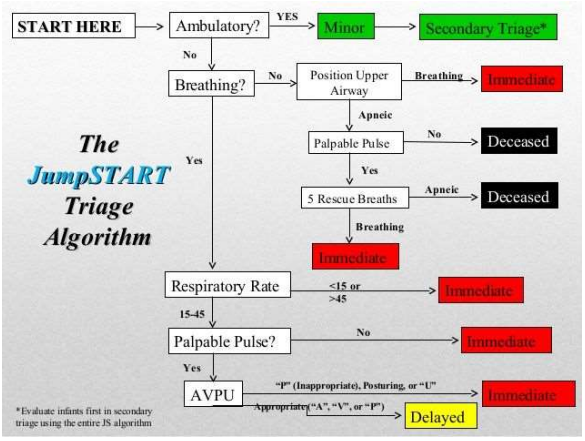
Next, if a patient is breathing but unconscious, if the respirations are over 30, if the perfusion capillary refill is more than 2, unable to follow simple commands, and if there is no radial pulse, this person goes into the

immediate category.

Finally, if the perfusion is 2, respiration is 30, and mental status is fine, this person goes into the delayed category.

JumpSTART

- Modified for pediatric patients
- Identify ambulatory patients
- Assess respiratory rate.
- Respiratory rate < 15 or > 45, no peripheral pulse, and inappropriate mental status – Immediate
- Respiratory rate between 15 and 45, palpable peripheral pulse, and age-appropriate mental status - Delayed



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The START triage has been modified for pediatric patients and this modified version is called Jump START.

In this algorithm, the first step is to identify ambulatory patients. They have minor injuries and don't require extensive treatment. In the second step, you check if the patient is breathing, and if so, move to the third step, which is to assess the respiratory rate, perfusion, and mental status. A child falls in the immediate category if the respiratory rate is under 15 or over 45, no peripheral pulse, and the mental status is inappropriate for the age based on the AVPU scale.

To be in the yellow triage, a child must have a respiratory rate between 15 and 45, have a palpable peripheral pulse, and have age-appropriate mental status.

With this, we come to the end of this lesson and in the next one, Missah will take you through the CDC field triage.