

## Triage/Activation Criteria for Geriatrics

Undertriage is associated with a two-fold increase in the risk of death in elderly patients. To mitigate late recognition of significant injury, a lower threshold for trauma team activation should be used for elderly trauma patients. While every facility has their own specific activation criteria, the STN Geriatric subcommittee recommends the following considerations when geriatric trauma victims present to your facility:

1.  $\geq 60$  y/o with polytrauma and/or significant mechanism-consider low level activation
2. Increased age  $\geq 65$  with pre-existing medical conditions and poor physiologic reserve-consider low level activation
3. Anticoagulant use-consider low level activation
4. For any low level criteria, if patient is  $\geq 65$  elevate status to highest level activation
5. Use systolic blood pressure of  $< 110$  (rather than 90) for patients age  $\geq 65$  as criteria for highest level activation.
6. Falls with evidence of TBI-consider activation
7.  $\geq 65$  with significant chest, abdomen, pelvic, extremity, or head trauma-consider low level activation