Prehospital Radiological Triage
Version 1.1, March 2020

**Multi-Casualty Incident**
辐射检测 - IND/核武器可能

**Secondary Triage**

- Triage
- Ill/injured requiring EMS Treatment?
  - YES
  - Move ill/injured to lower dose rate area
  - 1. Non-ambulatory transport
  - 2. Self-evacuate
  - 3. Self-decontaminate
  - 4. Remove/contain clothing
  - 5. Refer to Reception Center and/or Population Monitoring (including *Radiological Triage*)
- NO

**Initial Triage**

- YES
  - High Dose Rate?
    - YES
    - Transport
    - *Radiological Triage: Contaminated/Exposed
    - Refractory Vomiting?
      - YES
      - Vomiting in <1 hour after event?
        - YES
        - Treat Medical/Trauma
        - Transfer Patient per Destination Guidelines
        - Dose likely > 6 Gy
      - NO
      - Vomiting in 1-4 hours after event?
        - YES
        - Treat Medical/Trauma
        - Transfer Patient per Destination Guidelines
        - Dose likely 2-4 Gy
      - NO
      - Possible Acute Radiation Syndrome (ARS). Refer for more definitive care (e.g., nearest Field Treatment Site)
  - NO
    - Significant or Life-Threatening Injuries?
      - YES
      - Transport
      - *Radiological Triage: Contaminated/Exposed
      - Refractory Vomiting?
        - YES
        - Vomiting in <1 hour after event?
          - YES
          - Treat Medical/Trauma
          - Transfer Patient per Destination Guidelines
          - Dose likely > 6 Gy
        - NO
        - Vomiting in 1-4 hours after event?
          - YES
          - Treat Medical/Trauma
          - Transfer Patient per Destination Guidelines
          - Dose likely 2-4 Gy
        - NO
        - Possible Acute Radiation Syndrome (ARS). Refer for more definitive care (e.g., nearest Field Treatment Site)
      - NO
        - Combined injuries (e.g., >20% BSA burn, moderate trauma) will negatively impact triage category.

**EMS Activation**

- Refer to local protocols for dose rate guidance and additional actions, such as administering Potassium Iodide (KI) to rescue teams prior to entering high fallout areas.

**Radiological Triage Questions:**
1. Where was victim in relation to event?
2. How long was victim in that location?
3. Was victim sheltered? If so, what type of shelter? (basement, windows, etc.)
4. How long was victim in the shelter? How long were they in the open?
5. If victim exited area, what path was taken? What was the mode of transport?
6. Was there anyone else co-located with the victim?