

Pre-hospital Information

Date and time of arrival

Mode of arrival (EMS, POV, Walk-In)

Date and time of injury (if known)

Date and time of pre-hospital trauma activation
(if applicable)

Interventions & Treatments prior to arrival

Triage Assessment

Chief complaint

Mechanism of Injury

Trauma Team Activation (if applicable)

Time of trauma activation

Time of arrival for trauma team members

Trauma activation criteria met

Trauma Flow Sheet Nursing Audit Tool

Assessments & Treatments

Initial/Primary assessment-ABCDE
Area of injury
Interventions & Treatments
Removal of clothing & Warming measures
Secondary assessment
Medical & Surgical history
Risk assessments & Screenings

Vital Signs

On arrival: Temp, BP, HR, RR, O2 Sat, GCS, RTS, Pain
At least hourly: BP, HR, RR, O2 Sat, GCS, I/O's, Pain,
Neuro V's

On discharge: Temp, BP, HR, RR, O2 Sat, GCS,
RTS, Pain

ED Disposition

MEDCOM activation form completed
Date and time of ED departure
Disposition status (Admit, Discharge, Transfer,
MEDCOM)
Mode of ED departure/Name of transport
service

Trauma Flow Sheet Nursing Audit Tool