

Health education: ER-101

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Introduction of Triage



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All information above has been reviewed by Emergency Medicine specialists
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1. What is triage?

Emergency triage refers to the process of classification of patients on the initial arrival at the emergency room by the professional and sophisticated triage nurse, using standard methods to quickly assess and determine the priority of patients' treatment according to the severity of their condition. It helps the emergency room to divert and dispose patients, so that critical patients could get immediate treatment. Emergency triage is divided into four major categories, including non trauma adult, non-trauma children, trauma, and environment.

2. The purpose of triage

- (A) To quickly identify whether the patient has an emergency or life-threatening condition.
- (B) To assess the severity and priority classification.
- (C) To direct the patient to the appropriate medical area.
- (D) To determine the interval of reassessment of the patient according to the level of classification while waiting.

3. The basis for triage

When the patient enters the emergency room, the patient is quickly inspected, and the vital signs are measured by the triage nurse. At first, the most appropriate chief complaint of the patient is selected based on the patient's statement, and then the primary and secondary adjustment variables are used to determine the severity and urgency of the patient's condition. Primary adjustment variables include respiratory distress, hemodynamics, awareness, body temperature, the degree of pain, high risk of injury (trauma patients). Secondary adjustment variables are the degree of each primary variable, such as mild to severe respiratory distress, low to high-grade fever, whether the symptoms are present or not, the degree of pain and so on.

4. The classification of triage

According to the new five-level classification of triage criteria published in 2010, the patient is classified as resuscitation, emergent, urgent, less urgent, and non-urgent to get appropriate treatment. The first level of emergency (RESUSCITATION) should be treated immediately; the second level of emergency (EMERGENT) may wait for 10 minutes to get

reassessment or treatment; the third level of emergency (URGENT) may wait for 30 minutes; the fourth level of emergency (LESS URGENT) may wait for 60 minutes; and the fifth level of emergency (NON URGENT) may wait for 120 minutes. Thanks to the detailed content of classification of the new triage criteria, by computer assistance, the triage nurse can objectively and accurately determine the severity and priority of the patient, so that each patient can receive the most appropriate treatment by priority. (Table 1)

Table 1: Taiwan Triage and Acuity Scale (TTAS)

Triage Classification	Condition	Definition
First level	Resuscitation	Critical, life or limb-threatening
		conditions
		Require immediate treatment
Second level	Emergent	Conditions potentially critical to life,
		limbs, and organ functions
		Require reassessment or to be quickly
		controlled and treated within 10
		minutes.
Third level	Urgent	Potentially deteriorating conditions
		Patients may have symptoms or signs
		of discomfort, impacting on daily
		activities.
		Require reassessment or emergency
		treatment within 30 minutes,
Fourth level	Less urgent	Conditions may include acute episodes
		of chronic diseases, or complications
		associated with certain diseases
		Require reassessment or treatment in
		60-120 minutes to avoid deterioration
		or gain recovery.
Fifth level	Non urgent	A non-emergency condition.
		Require reassessment or make
		differential diagnosis or referral to
		out-patient department in 120 minutes
		or more to avoid future complications.

5. Conclusion

Nowadays, it is quite a serious problem for most of hospitals in Taiwan that emergency rooms are overcrowded with patients. Most of the patient and family, who could not realize not only the limited resources of emergency medical system but also the meaning of triage, are often unable to wait patiently, impetuously rush into clinic area and even act with rage since they feel they have been waiting too long. It could disturb and distract the medical staff, resulting in interruption and having a great impact on the treatment of critically ill patients.

It is crucial to maintain the quality of medical care as the well-being for the people in developed countries that visiting the hospital of each grade by the severity of condition and waiting patiently at emergency room by triage classification level to make time and resources for critically ill patients. In any case, based on the new five-level classification of triage, the emergency medical staff will provide the most appropriate service and resources for the patient as best and fast as possible.

6. Reference:

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- Shivanna H.K., Ramesh A.C., & M Rangaswamy K.M. (2022). Implementation and evaluation of the five-level emergency triage (emergency severity index tool): A hospital-based, prospective, observational study. *Journal of Emergency Practice and Trauma.*; 8(1), 43-48.

讓我們來進行測驗,以確認您已充分了解

1. Triage is to triage emergency patients so that truly critical patients can receive immediate treatment.		
○是 ○否 ○不知道		
2. There are five levels of emergency injury classification. Patients at all levels will be seen first if they are seriously ill; patients of the same level will be seen first come first served.		
○是 ○否 ○不知道		
3. There are five levels of emergency injury classification. The third level is "urgent" and needs to be handled within 60 minutes.		
○是 ○否 ○不知道		
4.Emergency medical examination classification is based on TTAS (Taiwar Emergency Medical Examination System).		
○是 ○否 ○不知道		
5.If a patient develops cardiogenic angina or acute hematemesis, it is a second-level "critical" and needs to be dealt with within 10 minutes.		
○是 ○否 ○不知道		