Appendix 1. Criterion Outcomes Tool.

|  |  |
| --- | --- |
| **COT Black Criteria** | Decapitation |
| Brain Exposed |
| Cervical spine fracture above C4 with respiratory failure |
| Apnea despite 2 breaths |
| No pulse |
| Defibrillation |
| Transection through a non-extremity |
| Died in ED |
| If black, why? Describe in more detail. |
| **COT Red Criteria** | ICH requiring immediate surgical intervention, invasive ICP monitoring or mannitol/3% NS in ED |
| OR < 90 minutes |
| Intubation in ED |
| Requires supportive ventilation with palpable pulse in ED: e.g. BVM, intubation, extraglottic, supraglottic, and surgical airway |
| Noninvasive positive pressure ventilation in ED |
| Emergent removal of an airway foreign body |
| More than 60 ml/kg NS bolus for shock |
| Vasopressors required in ED |
| Blood given in ED |
| Cardiac intervention with documented poor perfusion\*: e.g. cardioversion, pacing, pharmacologic interventions |
| Chest tube/needle decompression within 2 hours |
| Pericardiocentesis |
| Thoracotomy in the ED |
| Burn requiring escharotomy of chest/abdomen or airway protection |
| Administered antidote/counter measure for a life-threatening chemical or toxin exposure |
| If yes, why Red: describe event in more detail |
| **COT Yellow Criteria** | Ophthalmology intervention other than lac repair or OR repair within 24 hours to preserve vision |
| ENT/OMFS surgical intervention (bedside or OR) to preserve functional outcome |
| Spinal injury with neurologic findings not requiring immediate operative intervention (e.g. paralysis, weakness) |
| Supplemental oxygen for O2 sat < 94%, respiratory distress, or simple pneumothorax |
| Four or more nebulized treatments or continuous treatments |
| Cardiopulmonary monitored (e.g. ICU or step-down admission) bed admission for greater than 48 hours |
| Two saline boluses needed: 40 ml/kg in < 6 hours no matter where they are |
| Cardioversion without poor perfusion\*: e.g. tachycardia unresponsive to adenosine |
| Chest tube placed after 2 hours: e.g. non-tension pneumothorax |
| Go to OR in > 90 min for abdominal injury |
| Monitored bed admission for documented intra-organ injury |
| Placement of stabilization device: e.g. TLSO or halo placement |
| Go to OR in > 90 min for spinal injury |
| Extraperitoneal bladder rupture, ureteral, or urethral injury |
| Positive cysturethrogram |
| Any genitourinary injury requiring OR repair |
| Fracture requiring closed reduction or ORIF |
| Vascular injury requiring compression only |
| OR or bedside fasciotomy/escharotomy in < 90 min for limb threat from neuro vascular injury (6P’s): e.g. compartment syndrome, arterial bleeding, nerve injury |
| Open fracture requiring wash out |
| Transfer to burn center for meeting national burn center criteria |
| Hyperbaric therapy or 100% O2 required for CO poisoning |
| Admission for IV pain control and neurovascular monitoring |
| If Yellow, describe why in detail |
| **COT Green Criteria** | Injuries not requiring treatment to preserve life/limb/vision function |
| Abbreviations: GCS Glasgow coma scale, CR capillary refill, mL milliliters, ED emergency department, LOS length of stay, OR operating room, ICU intensive care unit, H hospital, ISS injury severity score, NTDB national trauma database, ICH intracranial hemorrhage, ICP intracranial pressure, NS normal saline, BVM bag valve mask, kg kilogram, ENT ears nose and throat surgeon, OMFS oral maxillary facial surgeon, O2 oxygen, TLSO thoracic lumbar sacral orthosis, ORIF open reduction internal fixation, CO carbon monoxide, IV intravenous | |