

SUBSAR Triage and Treatment Principles

Triage

- Perform initial, rapid assessment of casualties for assignment to treatment areas.
- Specific and complete diagnoses are not necessary. Only need to determine severity, nature (i.e. dysbaric vs. trauma) and treatability of injuries to properly assign to treatment
- Treatment is not initiated in Triage
- Inform Admin/Med regulating as each casualty is assigned to a Treatment Area.

Recompression

- ADMO and Dive Sup to ensure chamber flashed and operators prepared to begin dives.
- All dysbaric casualties to be placed on 100% O₂.
- All dysbaric casualties should be given 1 litre bolus of IV NS as time and resources allow, however do not delay recompression of severe DCS/AGE
- If no IV fluids given, ensure oral hydration (1 litre in first 10-20 mins)
- Ensure no casualty enters chamber with potential sources of fuel or ignition
- All recompressions are to 60 fsw / 18 metres.
- Air breaks shall be determined by the ADMO utilizing the 'Treatment Matrix'.
- Inside Tenders will ideally be changed out at 45 minute intervals.
- Recompress dysbaric casualties in order of presentation until such time as chamber capacity is reached.

- Once chamber capacity is reached, ADMO will prioritize treatments according to severity and response to treatment of casualties in chamber versus severity and number of casualties waiting for treatment
- All dysbaric casualties exiting the chamber should be placed on 100% O₂ until such time as directed otherwise by the ADMO.
- Dysbaric casualties exiting the chamber shall be observed for recurrence either in the Recompression area or one of the other treatment areas as dictated by their other injuries.
- Inform Admin/med regulating as dysbaric casualties arrive, are treated and exit the chamber.

Red

- Establish critical diagnoses and treat accordingly.
- Once critical injuries stabilized, maintain casualty in RED area until appropriate to transfer to other treatment area, other vessel or shore-side facility.
- Observe for late presenting complications from injury or dysbarism.
- Inform Admin/med regulating as casualties are diagnosed, treated and transferred.
- Inform SCC if additional resources are required.

Yellow

- Establish specific and complete diagnoses and treat accordingly.
- Once casualty stabilized and injuries treated to the extent possible with available resources, consider transfer to other treatment area, other vessel or shoreside facility.
- Observe for late presenting complications from injury or dysbarism.

- Inform Admin as casualties are diagnosed, treated and transferred.
- Inform SCC if additional resources are required.

Green

- As per Yellow

Black

- Provide palliative care and comfort to those casualties not expected to survive.
- Provide respectful care to the deceased.
- Inform Admin/med regulating as casualties arrive.