



Triage and emergency  
first aid

# What is triage?

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- Prioritising patients according to the severity of their presenting injury/illness (Lane et al. 2008).

UK national triage scale		
1	Immediate resuscitation	Patient in need of immediate treatment for preservation of life
2	Very urgent	Seriously ill or injured patients whose lives are not in immediate danger
3	Urgent	Patients with serious problems, but apparently stable condition
4	Standard	Standard cases without immediate danger or distress
5	Non-urgent	Patients whose conditions are not true accidents or emergencies

# Information gathering

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The information that you can get from the client will determine how the patient is triaged

- Age, species and breed of the animal.
- Presenting issue and length of time.
- Patient condition (respiration rate and effort, gum color, level of consciousness, posture).
- If there is an obvious injury, what is this and what time did it occur.
- Any vomiting, retching, diarrhea or abdominal distention.
- Any concurrent illness or medications.
- Estimated time of arrival
- Contact information

(Marshall 2021)

Remember these clients may be panicking so it is important that you remain calm (easier said than done).

# Emergencies

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There are several emergencies where the client should be advised to come straight to the practice!

- Respiratory distress
- Severe blood loss
- Road traffic accidents
- Unconsciousness
- Penetrating foreign body
- Actively seizing (lasting longer than 3 minutes)
- Rapid abdominal distension + unproductive retching
- Sudden collapse
- Large burns/scalds
- Extreme pain

(Boag & Marshall 2020)

# Appointments

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An emergency appointment should always be advised for the following

- Abdominal distension
- Unable to pass urine
- Sudden onset of neurological abnormalities
- Severe vomiting and diarrhoea especially if haemorrhagic (or lasting more than 24 hours)
- Ingestion of toxin
- Fracture
- Burns/scalds
- Dystocia (difficulty giving birth)
- Eye injury
- Heatstroke
- Anorexia (if not eaten for 24 hours/12 hours if a puppy or kitten)

(Boag & Marshall 2020)

# Information Task

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# Respiratory Emergency

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The client should be asked the following questions.

- Describe how the patient is breathing
- What colour are the patient's mucous membranes (gums)?
- Does the patient have any underlying heart conditions?
- Could the patient have an obstruction?
- What species is the patient?
- What breed is the patient?





# Toxin Ingestion

It is not always appropriate to induce vomiting, as in some cases this can cause further problems.

- What has been ingested, how much and what time?
- How much does the patient weigh?
- Has the patient vomited?
- What species is the patient?



If possible, please ask the owner to bring any packaging to the practice with them.



# Toxin Ingestion

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- Possible toxins may include.....
- Human food
- Medications
- Plants
- Foreign body
- Household chemicals
- Pesticides/rodenticides/insecticides
- Antifreeze (ethylene glycol)



# HEMORRHAGE/WOUNDS

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- Is the cause of the injury known?
  - When did the injury occur?
  - How large is the wound?
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- If blood is gushing from the wound (and there is no foreign body) then firm direct pressure should be applied using clean towels, sheets or clothing.
  - If the wound is open but not actively bleeding, then prevent the patient from licking and book in for an appointment – advise not to feed the patient in case sedation/general anesthetic is required for a stitch up.

# PENETRATING FOREIGN BODY

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- Do not remove any penetrating foreign body! Gently wrap the affected area in a towel or sheet.
- If the FB has already been removed from the chest, then wrap the chest in clingfilm.
- If the FB has already been removed from the abdomen, then wrap in a towel.



# RTA/TRAUMA

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An appointment should be advised for any RTA/trauma even if the owner says that the patient seems fine!

- Is the cause of the trauma known?
- If an RTA estimated speed of vehicle?
- If a fall estimated height?
- Are there any obvious injuries?
- How would you transport an RTA patient?



# SEIZURING

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- Any history of seizures?
- Length of seizure and frequency?
- How many seizures has the patient had?
- Any known toxin ingestion?
- Any known head trauma?
- Age of the patient?
- Does the owner have any prescribed medication at home e.g., rectal diazepam?



# BURNS/SCALDS

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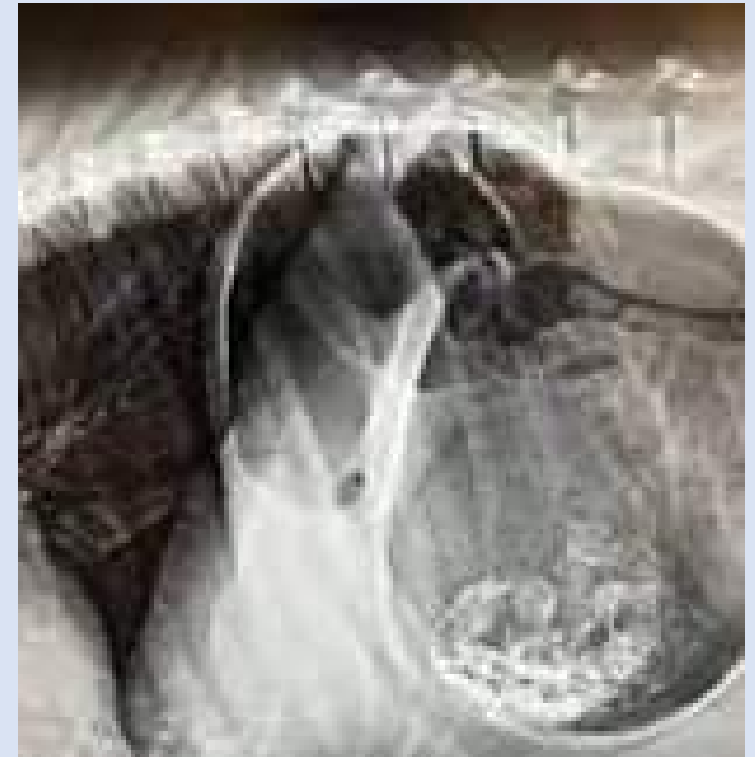
- If it is safe to do so, then remove the patient from the source.
- Liberally apply tepid water to the area for a minimum of 15 minutes.
- Prevent the patient from licking the area.
- Come straight to the practice after water has been applied.
- If a chemical burn bring any packaging if available.



# ABDOMINAL DISTENTION (BLOAT)

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- What is the breed of the patient?
- When did the owner first notice this?
- When did the patient last eat and how much?
- When was the patient last exercised?
- Has the patient been vomiting or retching?
- Is the patient uncomfortable or in pain?
- Is the patient collapsed?
- Are there any underlying medical conditions?



# VOMITING/DIARRHOEA

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- How long has this been going on for? (if this is for longer than 12 hours you should advise that they are seen).
- Is there any blood present?
- Has there been any contact with others with similar symptoms?
- Have there been any dietary changes?
- Is there undigested food in the vomit?
- Any known medical issues
- Any known foreign body ingestion?
- How is the patient in themselves?
- Are they fully vaccinated?



# Anorexia

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Can be a symptom of many conditions.

- When did they last eat, how much and what was it?
- Any vomiting or diarrhoea?
- Is the patient lethargic?
- How old is the patient?
- What species/breed are they?



# URINARY DIFFICULTY

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- Species, breed and sex of the patient?
- When did they last pass urine?
- Are they straining to urinate?
- Are they able to pass any urine at all?
- Any history of urinary issues?
- Do they seem painful?
- Any known trauma?
- Is there an increase in urine production?



# Difficulty giving birth

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- When was she bread?
- What breed?
- How old is the bitch?
- Any previous litters (were there any issues)?
- Have any puppies been delivered?
- Is there a puppy visible?
- Is there any discharge, if so, what does this look like?
- Is she having contractions?
  - How often?
  - How long have they been occurring for?
  - How forceful are the contractions?



# Difficulty giving birth

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- An appointment should be strongly advised for the following...
- Forceful contractions for over 30 minutes with no puppy.
- Weak intermittent contractions with no puppy within 2 hours.
- Bloody discharge.
- Foul smelling discharge.
- Green colored discharge.
- Obvious difficulty passing puppy.
- Prolonged pregnancy lasting over 65-68 days

