

**Admission Date:**

				/			/		
YYYY					MM			DD	
<input type="checkbox"/> Unknown									

Enter as much of the date as is known. If no details available, check Unknown.

**Discharge Date:**

				/			/		
YYYY					MM			DD	
<input type="checkbox"/> Unknown									

Enter as much of the date as is known. If no details available, check Unknown.

1. **Method of transport from incident scene:**  
**Method of Transport:**

- ☐ Ground Ambulance
- ☐ Air Ambulance
- ☐ Water Ambulance
- ☐ Combo of Above
- ☐ Private Transport
- ☐ Other (specify): \_\_\_\_\_

2. **First systolic blood pressure value recorded at the scene:**  
**First systolic at arrival to the trauma centre:**

\_\_\_ mmHg

3. **Intubation code indicating whether patient was intubated at the time the GCS was calculated at the scene:**  
**at arrival to the trauma centre:**

- ☐ Yes
- ☐ No
- ☐ Unknown

4. **First unassisted respiratory rate value recorded at the scene:**  
**Unassisted respiratory rate at arrival to the trauma centre:**

\_\_\_ breaths per min

5. **First serum Blood Alcohol Concentration (BAC) measured at health care centre:**  
**Blood alcohol level at arrival to the trauma centre:**

\_\_\_ mmol/L

☐ Unknown

## Glasgow Coma Scale:

### a) Field Scores:

6. Best Eye Response: \_\_\_\_\_ (1-4)  
☐ Unknown

7. Best Verbal Response: \_\_\_\_\_ (1-5, T)  
☐ Unknown  
☐

8. Best Motor Response: \_\_\_\_\_ (1-6)  
☐ Unknown

**b) Facility Scores:**

9. Best Eye Response: \_\_\_\_\_ (1-4)  
☐ Unknown

10. Best Verbal Response: \_\_\_\_\_ (1-5, T)  
☐ Unknown

11. Best Motor Response: \_\_\_\_\_ (1-6)  
☐ Unknown

**Abbreviated Injury Scores:**

**a) 9 Body Regions:**

12. Head:

- ☐ Minor
- ☐ Moderate
- ☐ Serious
- ☐ Severe
- ☐ Critical
- ☐ Unsurvivable
- ☐ Unknown

13. Neck

- ☐ Minor
- ☐ Moderate
- ☐ Serious
- ☐ Severe
- ☐ Critical
- ☐ Unsurvivable
- ☐ Unknown

14. Face:

- ☐ Minor
- ☐ Moderate
- ☐ Serious
- ☐ Severe
- ☐ Critical

**15. Chest/Thorax:**☐ Unsurvivable☐ [Unknown](#)☐ Minor☐ Moderate☐ Serious☐ Severe☐ Critical☐ Unsurvivable☐ [Unknown](#)**16. Abdomen:**☐ Minor☐ Moderate☐ Serious☐ Severe☐ Critical☐ Unsurvivable☐ [Unknown](#)**17. Spine:**☐ Minor☐ Moderate☐ Serious☐ Severe☐ Critical☐ Unsurvivable☐ [Unknown](#)**18. Lower Extremity:**☐ Minor☐ Moderate☐ Serious☐ Severe☐ Critical☐ Unsurvivable☐ [Unknown](#)**19. Upper Extremity:**☐ Minor☐ Moderate☐ Serious☐ Severe☐ Critical☐ Unsurvivable☐ [Unknown](#)**20. External and Other:**☐ Minor☐ Moderate

- ☐ Serious
- ☐ Severe
- ☐ Critical
- ☐ Unsurvivable
- ☐ Unknown

**b) 6 Body Regions:****21. Head & Neck:**

- ☐ Minor
- ☐ Moderate
- ☐ Serious
- ☐ Severe
- ☐ Critical
- ☐ Unsurvivable
- ☐ Unknown

**22. Face:**

- ☐ Minor
- ☐ Moderate
- ☐ Serious
- ☐ Severe
- ☐ Critical
- ☐ Unsurvivable
- ☐ Unknown

**23. Chest:**

- ☐ Minor
- ☐ Moderate
- ☐ Serious
- ☐ Severe
- ☐ Critical
- ☐ Unsurvivable
- ☐ Unknown

**24. Abdomen:**

- ☐ Minor
- ☐ Moderate
- ☐ Serious
- ☐ Severe
- ☐ Critical
- ☐ Unsurvivable
- ☐ Unknown

**25. Extremity:**

- ☐ Minor
- ☐ Moderate
- ☐ Serious
- ☐ Severe
- ☐ Critical

**26. External:**☐ [Unsurvivable](#)☐ [Unknown](#)☐ Minor☐ Moderate☐ Serious☐ Severe☐ Critical☐ [Unsurvivable](#)☐ [Unknown](#)**27. Injury Severity Score (ISS):**

\_\_\_\_\_ (between 0-75)

☐ [Unknown](#)**Data Collection Details****Collected by:**  
(please print name)**Initial  
Here:****Date of Data  
Extract:**

YYYY-MM-DD