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| **Summary of Suggested Changes to the ASA PS Classification System** |
| -State whether to use pre-injury or post-injury status-Provide a definition of “massive trauma”-State if ASA VI requires “E” designation-Provide examples of conditions which should receive “E” designation (consider collaborating with surgical specialty (e.g., orthopedics, neurosurgery) associations on injuries which require immediate surgical intervention)-Determine if there should be timing associated with “E” designation (e.g., a case should be assigned “E” if it needs to go to the operating room within 1 hour)-Provide 1-2 examples of traumatic injuries for each ASA PS grade -Assign the following injuries/conditions to the appropriate ASA PS grade: -Age (especially elderly) -Hemorrhagic shock -Septic shock -TBI without mass effect -Solid organ injury grading -Anemia and coagulopathies  -Transplanted organ recipients -Rib fractures/flail chest -Open versus closed fractures  |