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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 |