

TRIAGE PRIORITY	MAXIMUM WAITING TIME STANDARD	CLINICALS SCENARIOS
P-1	Immediately	Patients with compromised ABC, severe bleeding, decreased level of consciousness, severe medical problems, poisoning with altered mental status, burn > 15%, Acute Airway Obstruction, drug overdose, Ongoing Seizures, trauma patients those fulfilling trauma activation criteria
P-2	With in 15 minutes	Cardiac chest pain, GCS<9,Open fracture with massive bleeding, fever >40 c , especially children & elderly, sever dehydration, SOB but able to give history, acute abdominal pain with LMP 6 weeks or Ectopic pregnancy, Pre-eclampsia, Acute Psychosis, History of Seizures, vitally unstable patients.
P-3	With in 60 minutes	Non cardiac chest pain (history and -ve EKG), SOB with no history of Asthma & can sit comfortably, poisoning with GCS 15 acute abdominal pain. Pain (not Ectopic), Depression, Eye trauma ((no threat to vision), Diarrhea with mild dehydration. Musculoskeletal trauma
P-4	With in 2 hours	Viral syndromes, respiratory infections, suture removal, mild UTI, nausea vomiting & diarrhea without dehydration, cough with underlying signs of COPD or asthma. 1 st & 2 nd Degree Burns of < 5%, children with fever < 39 C , minor abrasions & sprains , Insect bits without any systematic symptoms, patients only for Drug Administration