

Yamataian Triage Practices

Triage is a system for rationing medical care when there are not enough medical professionals or equipment to adequately treat all patients. In a military situation, the severity of a patient's injuries, their rank, their importance to the mission, and the current situation must all be considered when deciding whom to treat.

Situation

[Star Army Medical](#) divides triage on a warship into two scenarios: emergency and non-emergency.

Under Emergency condition, the ship is in prolonged combat under circumstances that require as many armed personnel as possible in order to ensure its survival. Under these circumstances, priority for treatment typically falls to patients who can be returned to fighting shape with a minimum of effort. As this can lead to death and suffering that would otherwise be avoided, emergency triage operation should only begin if ordered by the ship's ranking officer except under the direst of situations.

Under Non-Emergency circumstances, there is not an immediate urgent need to have all able hands participating in battle; the goal of the medical staff is to see that as many patients survive as possible. Priority for treatment falls to patients who have the most need for immediate attention if they are to survive.

Condition

Patients are also sorted into four categories which summarize their condition and the extent of medical care needed.

Deceased

Deceased is reserved solely for patients who are braindead.

Under emergency circumstances, deceased patients should be re-created from mental backups only if there are enough spare hemosynthesis tubes and medical personnel to easily effect it; otherwise, they should be re-created after the battle. While the freshly reanimated soldier would be in prime fighting condition, they would almost certainly have no memories of the battle, meaning that they would need to be re-briefed.

Under non-emergency situations, deceased patients should be re-created only when it can be done without denying care to patients in critical condition.

Critical

Critical condition contains patients who will likely die within an hour if not given intensive medical treatment. This includes patients in shock, patients with heart or respiratory failure, and patients with severe head injuries. Note that nekovalkyrja will only rarely fall into this category, as they can often recuperate from injuries that would eventually prove fatal to humans.

In emergency situations, patients in critical condition should be denied treatment if they have a recent mental backup; for this reason, it is often considered humane to painlessly kill them and re-create them after the fight. Patients in critical condition who do not have recent mental backups should be stabilized if feasible. If there are spare hemosynthesis tanks, they should be put in to begin recovery.

In non-emergency situations, critical patients receive priority treatment; no other patient category should receive attention until they are all stabilized.

Stable

Stable patients are those who are not in danger of immediate death, but who are also not in condition to fight. This includes patients with broken bones, those with bullet wounds that haven't caused extensive bleeding or damage to the vital organs, Geshrin and Yamtaians with severe illnesses that aren't life-threatening, and nekovalkyrja with missing limbs who have suffered only minor blood loss. Almost all nekovalkyrja patients will fall in this category, as they can recover from almost anything short of a lethal wound.

In emergency situations, stable patients should receive priority treatment, preferably in order of how quickly they can be returned to combat with treatment. A nekovalkyrja in stable condition can often be ready to fight again after ten minutes of basic surgery or hemosynthesis tank immersion. Ill patients can sometimes be returned to battle if given medication to suppress their symptoms.

In non-emergency situations, stable patients should only be seen to when it can be done without neglecting a patient in critical condition. However, they should also be checked on once every few hours if possible in case complications arise. Stable patients with wounds that can be fixed through hemosynthesis tank immersion should receive that treatment, but only if the tank is not needed to heal a patient in critical condition.

Fit For Duty

Fit For Duty condition encompasses patients whose wounds do not prevent them from participating in combat. This includes cuts, scrapes, minor burns, and occasional projectile wounds. Patients in this category receive the lowest priority under all circumstances. They should always be turned away while under emergency situations. Nekovalkyrja will probably not need treatment for minor wounds. In non-emergency situations, Nepleslians and Geshrin with minor wounds can be given treatment when extra personnel are available. Those with wounds likely to become infected or necrotic if left untreated should receive priority.

Other Criteria

Mental health must also be taken into account when assigning a patient their priority: a soldier who took no serious injuries in combat, but is on the brink of suicide after seeing several of her friends killed, is most accurately in the Critical category, not Fit For Duty. In this case, stabilizing the patient can take the form of restraining them until treatment is available. A few mental conditions, such as schizophrenia, mean that the patient is not in threat of immediate death, but will still need intensive medical care before they are suitable to return to battle.

Rank and Importance

Patients with higher rank should generally be afforded treatment before patients of lower rank if both are in similar condition. Similarly, a patient who would normally have low treatment priority under the circumstances might be treated first if they far outrank another patient or are otherwise important to the mission.

Notes

Note that these are only guidelines, not fixed rules. It falls to the medical staff and the officers of the ship to determine what patients should get priority treatment under the specific circumstances. Under many circumstances, there are enough medical staff and equipment for all patients to be treated concurrently.

Also note that in non-emergency situations, there is no guideline for determining whether available hemosynthesis tanks are used to revive deceased patients or to treat stable patients. More so than the other situations, this calls for the medical staff to use their discretion.

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