

# Trauma

Primary survey

- ▶ EMS providers
- ▶ ED prepare
- ▶ Focused history (AMPLE)
- ▶ ED care of the trauma patients begins with an initial assessment for potentially serious injuries.

# Triage and trauma system entry

- ▶ Physiologic abnormalities(BP,GCS,need for intubation)
- ▶ Injury pattern(penetrating wound to head,neck or torso, Gunshot wound,flail chest.....)
- ▶ Mechanism of injury(fall of >20 feets,ejection from vehicle....)

- ▶ A (airway and cervical spine)
- ▶ B (breathing)
- ▶ C (circulation)
- ▶ D (disability)
- ▶ E (exposure)

# Airway management

- ▶ \*\*Whenever possible, 2 persons
- ▶ Assess, clear and protect airway
- ▶ When we must perform endotracheal intubation
- ▶ Use of other methods

# Breathing

- ▶ Is the breathing adequate?
- ▶ Is there respiratory distress?
- ▶ Are bilateral breath sounds presents?
- ▶ Inspection and palpation
- ▶ Treat life threatening diagnosis.

# Circulation

- ▶ Is the patient in shock? If yes, which type?
- ▶ 2 large-bore peripheral IV catheters
- ▶ Blood sampling
- ▶ Warm crystalloid solution/Packed red blood cells/Platelets/plasma
- ▶ Bleeding control(localized, long bones fractures/pelvic fracture/internal hemorrhage)
- ▶ eFAST

# Disability

- ▶ Assess neurologic and mental status examination
- ▶ Pupil size
- ▶ Glasgow coma scale
- ▶ Consider blood sugar level



# Exposure

- ▶ Completely disrobe the patient and inspect
- ▶ Logroll the patient

- ▶ Any deterioration occurs in patient conditions, we must do:  
ABCDE



▶ So thanks