Trauma_ Lec. 1

1st course

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DEFINITION

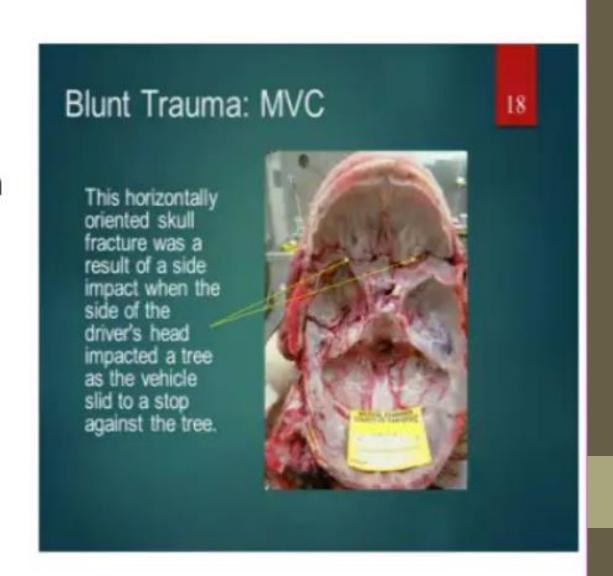
- A traumatic event is one in which a person experiences (witnesses or is confronted with):
- Actual or threatened death
- Serious injury
- Threat to the physical integrity of self or another

Mechanism Of Injury



BLUNT TRAUMA

- MVC
- Pedestrian vs. Vehicle
- Falls





Blunt Trauma to the Chest

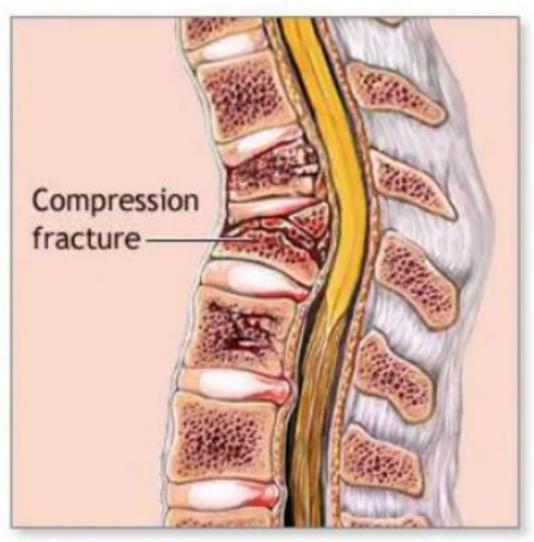


SPECIAL SITUATIONS

- Explosions
- Blunt + penetrating + burns
- Burns
- Crush injuries
- Drowning
- Hypothermia/





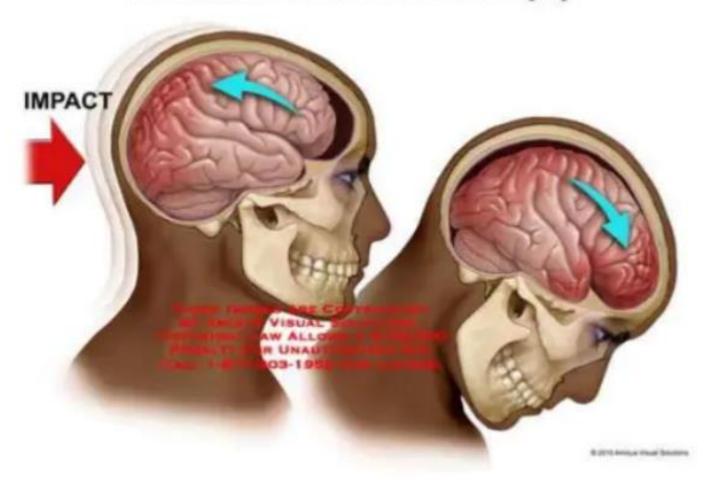


*ADAM.

COMPRESSION INJURY

- Frontal brain contusion
- -Pneumothorax
- Rupture of Left hemi diaphragm
- -Small bowel rupture
- -Chance fracture

Acceleration - Deceleration Brain Injury



ACCE-DECELERATION INJURY

- Aortic tear
 - Fixed descending aorta
- Acute subdural brain hematoma
- Kidney avulsion
- Splenic pedicle

PENETRATING TRAUMA

- Gunshot wounds
- Stab wounds
- Impalement



CLASSIFICATION

Major trauma trauma

MAJOR TRAUMA

 Major trauma is any injury that has the potential to cause prolonged disability or death.

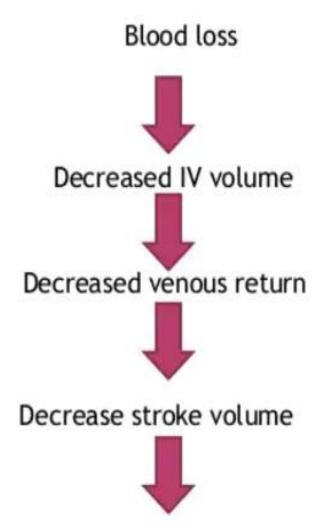
MINOR TRAUMA

 "Minor injury" means an employment injury or an occupational disease for which first aid or medical treatment is provided and excludes a disabling injury.

HOW CAN U CLASSIFY THE TRAUMA?

- Injuries generally are classified by either
 - ♦severity,
 - The location of damage, or a combination of both.
 - ◆ Demographic group, such as age or gender.
 - Type of force applied to the body, such as blunt trauma or penetrating trauma.
 - ◆Major trauma sometimes is classified by body area; injuries affecting 40% are polytrauma, 30% head injuries, 20% chest trauma, 10%, abdominal trauma, and 2%, extremity trauma.

PATHOPHYSIOLOGY



Decrease cardiac output



Reduce blood pressure



Hypo perfusion of tissue (Tissue hypoxia)



Multiple organ damages

SIGN AND SYMPTOMS

- Some major sign and symptoms are :-
 - Tachycardia
 - Hypotensive
 - Narrow pulse pressure
 - Cold peripheries
 - Shock
- Compensatory mechanism
 - Increase SVR
 - Increase HR
 - -Preserve CO/BP

MANAGEMENT

- History collection
 - -A = Allergies.
 - -M = Medication currently used.
 - -P = Past illnesses/Pregnancy.
 - -L = Last meal.
 - -E = Events/Environment related to injury

Physical examination

- -Lap belt marks: Correlate with small intestine rupture
- -Steering wheel-shaped contusions
- -Ecchymoses involving the flanks (Grey Turner sign) or the umbilicus (Cullen sign): Indicates retroperitoneal hemorrhage, but is usually delayed for several hours to days
- Abdominal distention
- -Auscultation of bowel sounds in the thorax:
 May indicate a diaphragmatic injury

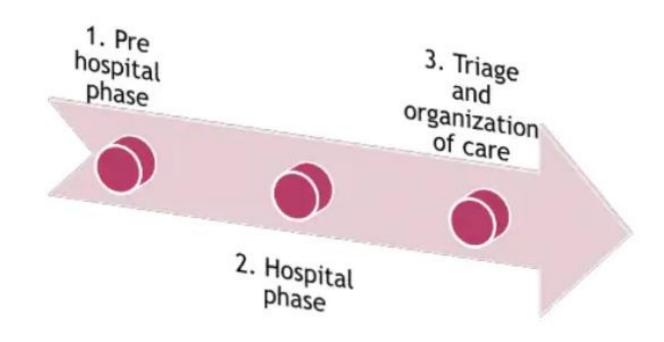
- Abdominal bruit: May indicate underlying vascular disease or traumatic arteriovenous fistula
- Local or generalized tenderness, guarding, rigidity, or rebound tenderness: Suggests peritoneal injury
- Fullness and doughy consistency on palpation: May indicate intra-abdominal hemorrhage

 Crepitation or instability of the lower thoracic cage: Indicates the potential for Splenic or hepatic injuries

INVESTIGATION

- complete blood count (CBC)
- arterial blood gases (ABGs)
- urine pregnancy test (for females of childbearing age).
- Radiographic studies

TRAUMA ASSESSMENT



Preparation and Triage

Pre-Hospital phase

Pre-hospital agency coordination

Call on emergency number

Mobilizes the trauma team to ED Hospital phase

Advance planning

Saves time

TRIAGE AND ORGANIZATION OF CARE

- Priority 1 (P1) or Triage 1 (T1): <u>immediate</u> <u>care needed</u> - requires immediate life-saving intervention. Color code red.
- P2 or T2: intermediate or urgent care needed - requires significant intervention within two to four hours. Color code yellow.
- P3 or T3: <u>delayed care</u> needs medical treatment, but this can safely be delayed. Color code green.
- Dead is a fourth classification and is important to prevent the expenditure of limited resources on those who are beyond help. Color code black.

MANAGEMENT

ATLS management

A: Airway with cervical spine protection



C: CIRCULATION with hemorrhage control





D: Disability



E: Environment

(completely undress the patient but prevent hypothermia)

NURSING DIAGNOSIS

- Fluid volume deficit related to active body fluid loss secondary to bleeding from open wound
- Acute pain related to traumatic injury
- Risk of infection related to open wound
- Impaired mobility related to fracture.

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