i ruman management By M.Atef Elbegawy Lecturer of General surgery

Principles

- 1 Rapid evaluation •
- 2 Application of 1st aid management whatever the type of trauma
- 3 Right management in the 1st hour (the golden hour) is very important in short and long term pt survival

Mechanism of injury

Penetrating & Blunt...•

Penetrating
low velocity and high velocity

Blunt

Direct trauma... road traffic accidents... fall from hight

Causes of trauma mortality

Within few minutes like major trauma to heart or great vessel

Early

Within few hours like internal bleeding or major fractures

Late

Within weeks because of sepsis and multiorgan

Organized trauma care

- Trauma team •
- Resuscitation area •
- Trauma triage in mass causality accidents
- advanced trauma live support (ATLS) == •

 1ry survey then 2ry survey then

 definitive ttt

1ry Survey

- A = airway + cervical spine •
- B = breathing •
- C = circulation •
- D = disability •
- E = exposure •

A = Airway + Cervical spine

Clean the airway •

protect the airway (airway tube or • endotracheal intubation)

Cx spine control by rigid collar and inline immobilization

B = Breathing

- Inespection: chest movement.. tracheal shift.. resp rate
- Palpation: subcutaneous emphysema.. flail chest
- Percution: hyperresonance.. dullness •
- Auscultation: for upper and lower airways

Life threatening thorathic • conditions:

- Tension pneumothorax •
- cardiac tamponad •
- flail chest •
- massive heamothorax •
- open pneumothorax •

C = Circulation

```
Shock... (hemorrhagic.., •
cardiac..., neurogenic)
stop bleeding by direct control •
Insertion of 2 canula's •
Blood sampling •
start fluid infusion until the blood is •
available
```

D = Disability

Brief neurological examination •

E = Exposure

Remove clothes + warmth • insert urethral catheter & nasogastric • tube

2ry Survey

- Complete history •
- Complete examination •
- Drug allergy •
- Investigations and lab •
- Management plans •

Definitive ttt

Management according to type of • injury

Thanks