

Holiday Hemorrhage

Alison Armstrong RN, BScN, ENCC Trauma Program Clinical Manager London Health Sciences Centre









1. It is acceptable to use vasopressors in rural trauma?

- A. True
- B. False





2. What position should the patient be in during resuscitation?

- A. Prone
- B. Supine
- C. Trendelenburg
- D. Reverse Trendelenburg





3. Tranexamic acid must be given:

- A. Slowly over an hour
- B. With blood
- C. As soon as possible
- D. After the first 2 trauma packs





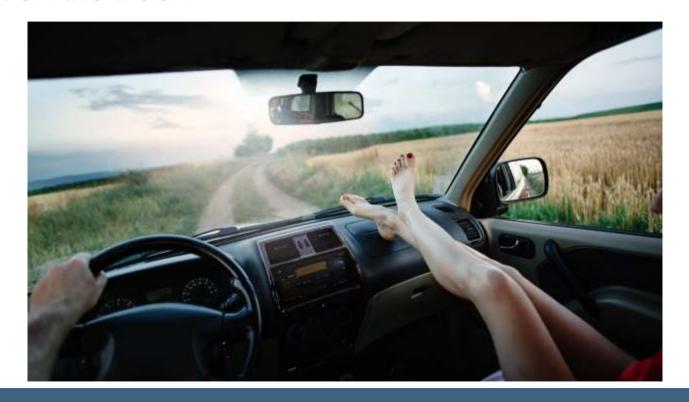
Beautiful Bruce County







"Feet on the Dash"



SOUTHWEST REGIONAL TRAUMA NETWORK

PREPARING FOR THE TRAUMA PATIENT





1	R	AUM	A PA	TIENT	
(PEOPI Doctors Nurses	X-ray		
C.		PROCI	Back-up Blood Team Roles	X-ray Chest & Pelvis Documentat	
(E		EQUIP Monitors FAST US Airway equip.	Pelvic Binder Tourniquet Vs with blood	Chest tubes Scalpel Warming Blanket	Spreaders Rapid influser
	9	The second second second	CATIONS paralytic agents ation	3% Saline Vasopressors	
		Who is call	SPORT ing Criticali trauma room	ORNGE Vs. La	nd





Paramedic Patch to "Far Away Hospital"

17 Year Old Female

- Decreased LOC
- Obvious R femur & R ankle #
- Facial injuries
- Belted

19 Year Old Male

- Alert & oriented
- Neck pain
- Chest pain
- Abdo pain
- Belted





Initial Assessment

17 Female "Unknown"

- Airway patent
- Breathing present, moaning, NRB
- Circulation pale, feels cool
- Disability verbal on AVPU
- Environment obvious R femur #, R ankle #, bilateral periorbital ecchymosis, bleeding from mouth

19 Male "Jeff"

- Airway patent
- Breathing present talking
- Circulation pale, feel cool
- Disability Alert
- Environment Seat belt sign, R ankle fracture





Vitals

17 Female

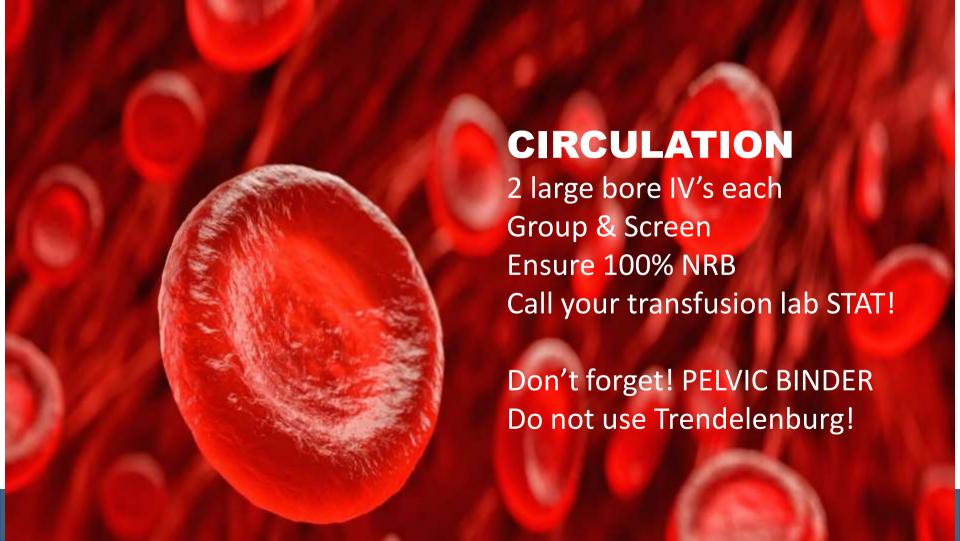
- HR 126
- RR 22
- BP 88/54
- O2 sat 94% on NRB
- Temp 35.7



















Uncrossmatched Blood









"Far Far Away Hospital's" Massive Hemorrhage Protocol









Do NOT use crystalloid!



TXA





Pre-Arrival to Lead Trauma Hospital

17 Female "Unknown"

- HR 118
- BP 92/64
- O2 sat 98% NRB
- Temp 35.8
- GCS 14
- 2 units with 3rd up & 500mls RL

19 Male "Jeff"

- HR 132
- BP 77/48
- O2 sat 91% NRB
- Temp 35.6
- GCS 9
- 2 units & 500mls RL





Blood Ready-To-Go



- Trauma team activation
- Emergency team organizes roles
- Transfusion lab sends blood
- Labelled "Female 17" and "Male 19"
- Rapid infuser on & warming
- FAST US ready to diagnose
- OR is on-call







Rapid Infusion

Massive Hemorrhage (MHP)Tracking Form

Patient name and PIN:	MHP Activation (Date/ Time):	
	MHP Discontinuation (Date/Time):	

	TIME																
Blood	Trauma Pack (TP)		TP	# 1			TP	#2	M		TE	#3			1	P#4	
Products Transfused	PRBC	:1:	2	3.	4	8:	6	7	0.	.9.	10.	11	12	13.	14	15	10
Transiuseu	Plasma	+	2	3	4	5	- 6	7.	8	9	10	11	12	13	14	15	16
- 3	Platelets.						4					-				2	
	Fitmagen Replacement						A					7	ď				
1	TIME																
	Trauma. Pack (TP)		TP	#5	W		TP	#6	N	K	77	**7		7	т	P#8	
- 3	PRBC	17	58	19	20	25	22	23	24	25	26	27	28	29	30	31	32
	Plasma	17	18	19	20	21	22	23.	24	25	26	27	26	20	30	31	32
	Plateleta	.00	line.			1	3		do.		-	·				4	
	Fibrinogen Regiscement	1		0		7		40						1,1			

Tranexamic Acid		
Dose 1(Time):	Dose 2 :(Time)	
Patient Temperature (C	n Initiation of MHP then q15min)	01 1101
TIME:		

- Check blood!!!
- Give TXA 1G ASAP
- Group and Screen
- Run blood on largest IV until central line available
- Heat blood
- 4u PRBC's come first
- Then TP (Trauma packs) arrive





Get MORE Blood!



- RUNNER!
- 4u PRBC's
- 4u Plasma
- 1 Pack of Platelets
- Give blood products until BP 90/







Trauma Operating Room







Interventional Radiology







Jeff 19 Year Old Male



- Ruptured diaphragm
- Esophageal tear with subcutaneous emphysema causing mediastinal shift
- Grade V Spleen laceration
- C5-7 spinous process fractures





Sally 17 Year Old Female



- Right zygomatic fracture
- Lefort II Fracture
- Right femur fracture
- Left femoral neck fracture
- Bleeding in pelvis from iliac vein
- Small bladder tear
- Right Hyphema





1. It is acceptable to use vasopressors in rural trauma?

- A. True
- B. False





2. What position should the patient be in during resuscitation?

- A. Prone
- B. Supine
- C. Trendelenburg
- D. Reverse Trendelenburg





3. Tranexamic acid must be given:

- A. Slowly over an hour
- B. With blood
- C. As soon as possible
- D. After the first 2 trauma packs





