

South East of Scotland Major Trauma Centre Training and Education



ICU Trauma Mechanisms of Injury and Injury Patterns

Front impact RTC:

Bent steering wheel/dashboard knee imprint/windscreen bull's-eye fracture

- C-spine fracture
- Anterior flail chest
- Mvocardial contusion
- Pneumothorax
- Traumatic aortic disruption
- Fractured spleen or liver
- Head injury
- Posterior fracture/dislocation of hip and/or knee
- Facial fracture

Side impact RTC:

Contralateral neck sprain

- Head injury
- C-spine fracture
- Lateral flail chest
- Pneumothorax
 - Traumatic aortic disruption
- Diaphragmatic rupture
- Fractured spleen, liver or kidney
- Fractured pelvis or acetabulum

Rear impact RTC:

- C-spine injury
- Head injury
- Soft tissue injury to the neck

Blunt Injury

Ejection from vehicle:

Ejection from vehicle precludes meaningful prediction of injury patterns, but places patient at greater risk for virtually all injury

- C-spine injury
- Head injury
- Soft tissue injury to the necl



Motor vehicle vs pedestrian:

- Head injury
- Traumatic aortic disruption
- Abdominal visceral injuries
- Fractured lower limbs/pelvis



Fall from height:

- Head Hijuly
- Axial spine injury
- Abdominal visceral injuries
- Fractured pelvis or acetabulum
- Bilateral lower limb fractures including calcaneal fractures



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Stab wounds:

Anterior chest:

Cardiac tamponade; haemothorax; pneumothorax; Haemopneumothorax

Left thoraco-abdominal:

Injury - Left diaphragm; Spleen;

Haemopneumothorax

Abdomen: Abdominal visceral injuries

Penetrating Injury

Gunshot wounds:

Truncal and extremities

High likelihood of injury

Neurovascular injury

Fractures

Compartment syndrome

Thermal Injury

Thermal burns:

Circumferencial eschar on extremity or chest

Electrical burns:

Cardiac arrhythmias

Myonecrosis

<u>Inhalation burns</u>:

CO2 poisoning

Upper airway swelling

Pulmonary oedema

