TRAUI NETW SOUTH

South East of Scotland Major Trauma Centre Training and Education



ICU Trauma ABCDE Approach including Primary and Secondary Survey

Quick 10 second assessment of ABCD by:

- Identifying yourself to the patient
- Ask patient's name and what has happened

If patient answers lucidly, then YOU KNOW:

- Patent airway patient is talking
- Adequate circulation: brain perfusion maintained (patient answered questions)
- Neurological status is good as patient can recall events

Primary Survey



A – Airway (with restriction of c-spine movement)

- Foreign bodies, facial trauma, tracheal/laryngeal trauma
- Suction to clear blood/saliva
- Establish airway if in doubt patient can maintain their own
- Use jaw thrust or chin lift, DO NOT head tilt
- Insert oropharyngeal airway

ALWAYS ASSUME C-SPINE INJURY UNTIL PROVEN OTHERWISE – FIT C-SPINE COLLAR WHEN POSSIBLE

B

B - Breathing

- Expose patient's chest and neck
- Check position of trachea
- Assess chest wall movement
- Auscultate the chest
- Give oxygen

LOOK for

- Tension pneumothorax
- Massive haemothorax
- Open pneumothorax
- Tracheal or broncheal injuries



C – Circulation

- Signs of bleeding?
- Pulse and BP
- CRT and skin perfusion
- Level of consciousness

Bleeding control and fluid replacement – IV access 2 large bore cannulae or Intraosseous access



D – Disability and neurological status

- GCS is quick, simple and objective to determine conscious level in Trauma patient
- Reduced GCS may indicate <O2 and/or brain perfusion, or cerebral injury
- Drugs, alcohol and hypoglycaemia affect conscious level: these may be present in conjunction with TRI



E – Exposure/environmental control

- Hypothermia is potential problem for trauma patients: can lead to coagulopathy, pool haemorrhage control and death
- Cover patient, use warming devices
- Use fluid warmers



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Secondary Survey:

Head to toe examination of trauma patient covering all areas of the body – taking into account Mechanism of Injury (MoI) and patient history (AMPLE: Allergies, Medication, Previous illness/Pregnancy, Last food/drink, Events/ environment surrounding injury)

Secondary Survey

Mol is important for potential injury patterns to be established

Broadly divided into blunt trauma and penetrating trauma

Thermal trauma may be present.
Environmental history is important to establish exposure to hazardous substances

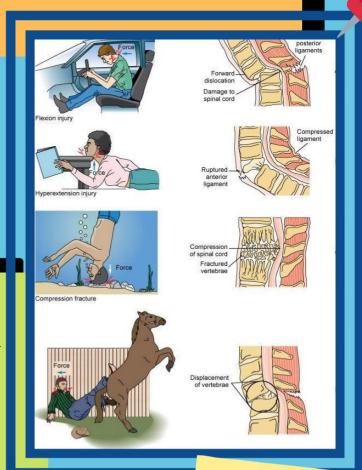


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