



Trauma

General Trauma Management

Aliases

None noted

Patient Care Goals

1. Rapid assessment and management of life-threatening injuries
2. Recognition of when to rapidly transport
3. Transport to the appropriate level of trauma care
4. Safe movement of patient to prevent worsening injury severity

Patient Presentation

Inclusion Criteria

1. Patients of all ages who have sustained an injury due to mechanical trauma, including:
 - a. Blunt injury
 - b. Penetrating injury
 - c. Blast
 - d. Burns

Exclusion Criteria

Not an acute traumatic injury

Patient Management

Initial Assessment

1. Primary survey (Use “**MARCH**” algorithm)
 - a. **Massive Hemorrhage**
 - i. Initial visual and body sweep to assess for penetrating wounds and severe life-threatening hemorrhage [See [Extremity Trauma/External Hemorrhage Management Guideline](#)]
 - b. **Airway**
 - i. Assess airway patency by asking the patient basic questions to assess for stridor and ease of air movement
 - ii. Look for injuries that may lead to airway obstruction including unstable facial fractures, expanding neck hematoma, blood or vomitus in the airway, facial burns/inhalation injury
 - iii. Evaluate mental status for ability to protect airway (patients with a Glasgow Coma Score (GCS) less than or equal to “8” are more likely to require airway protection)
 - c. **Respiratory/Breathing**
 - i. Assess respiratory rate and pattern
 - ii. Assess for tracheal deviation
 - iii. Assess symmetry of chest wall movement
 - iv. Listen bilaterally on lateral chest wall for breath sounds
 - d. **Circulation**
 - i. Assess blood pressure and heart rate