



- a. Place eye shield for any significant eye trauma
  - b. If globe is avulsed or enucleated, do not put back into socket. Cover eye socket with moist saline dressings and then place eye shield over it
6. Mandible unstable:
  - a. Expect patient cannot spit/swallow effectively and have suction readily available
  - b. Preferentially transport sitting up with emesis basin/suction available (in the absence of a suspected spinal injury.) [See [Spinal Care Guideline](#)]
7. Epistaxis: squeeze nose (or have patient do so) for 10–15 minutes continuously
8. Nose/ear avulsion:
  - a. Recover tissue, if possible
  - b. Transport with tissue wrapped in dry sterile gauze in a plastic bag placed on ice
  - c. Severe ear and nose lacerations can be addressed with a protective moist sterile dressing

#### **Patient Safety Considerations**

1. Frequent reassessment of airway
2. Maintenance of a patent airway is the highest priority; therefore, conduct cervical spine assessment for field clearance (per [Spinal Care Guideline](#)) to enable transport sitting up for difficulty with bleeding, swallowing, or handling secretions

#### **Notes/Educational Pearls**

##### **Key Considerations**

1. Airway may be compromised because of fractures or bleeding
2. Lost teeth not recovered on scene may be in the airway
3. After nasal fractures, epistaxis may be posterior and may not respond to direct pressure over the nares with bleeding running down posterior pharynx, potentially compromising airway
4. Protect avulsed tissue and teeth
  - a. Avulsed teeth may be successfully re-implanted if done so in a very short period after injury
  - b. Use moist sterile dressing for ear and nose cartilage
5. For penetrating eye injuries, do not remove foreign bodies. Splint in place. Cover uninjured eye or ask patient to close eye to prevent conjugate movement of injured eye
6. Consider administration of antiemetics to prevent increases in intraocular pressure due to nausea and vomiting in penetrating and blunt trauma to the eye [See [Nausea - Vomiting Guideline](#)]

##### **Pertinent Assessment Findings**

1. Unstable facial fractures that can abruptly compromise airway
2. Loose teeth and retro-pharynx bleeding

#### **Quality Improvement**

**Associated NEMSIS Protocol(s) (eProtocol.01)** (for additional information, go to [www.nemsis.org](http://www.nemsis.org))

- 9914057 – Injury - Facial Trauma
- 9914099 – Injury - Eye
- 9914205 – General - Dental Problems