



Quality Improvement

Associated NEMSIS Protocol(s) (eProtocol.01) (for additional information, go to www.nemsis.org)

- 9914089 – Injury - Crush Syndrome

Key Documentation Elements

- Time of tourniquet application, if applied
- Neurovascular status of any crushed extremity
- EKG findings consistent with hyperkalemia
- Amount of IV fluid administered

Performance Measures

- Initiation of fluid resuscitation prior to extrication
- EKG/monitor to monitor for dysrhythmias or changes related to hyperkalemia
- Treatment of hyperkalemia if evidence is noted on EKG

References

1. Better OS. The crush syndrome revisited (1940–1990). *Nephron*. 1990; 55:97–103
2. Jagodzinski N, Weerasinghe C, Porter K. Crush injuries and crush syndrome – a review. *Trauma*. 2010; 12:69–88
3. Sever MS, Vanholder R, Lameire N. Management of crush-related injuries after disasters. *N Engl J Med*. 2006;354(10):1052–63
4. Smith J, Greaves I. Crush injury and crush syndrome: a review. *J Trauma*. 2003;54(5): S226–30

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