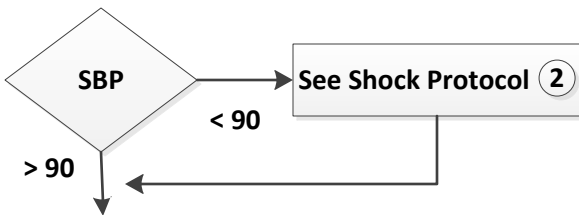


# Abdominal Trauma

- ABCs
- Oxygen 100%
- Transport ASAP

Detailed Assessment ①

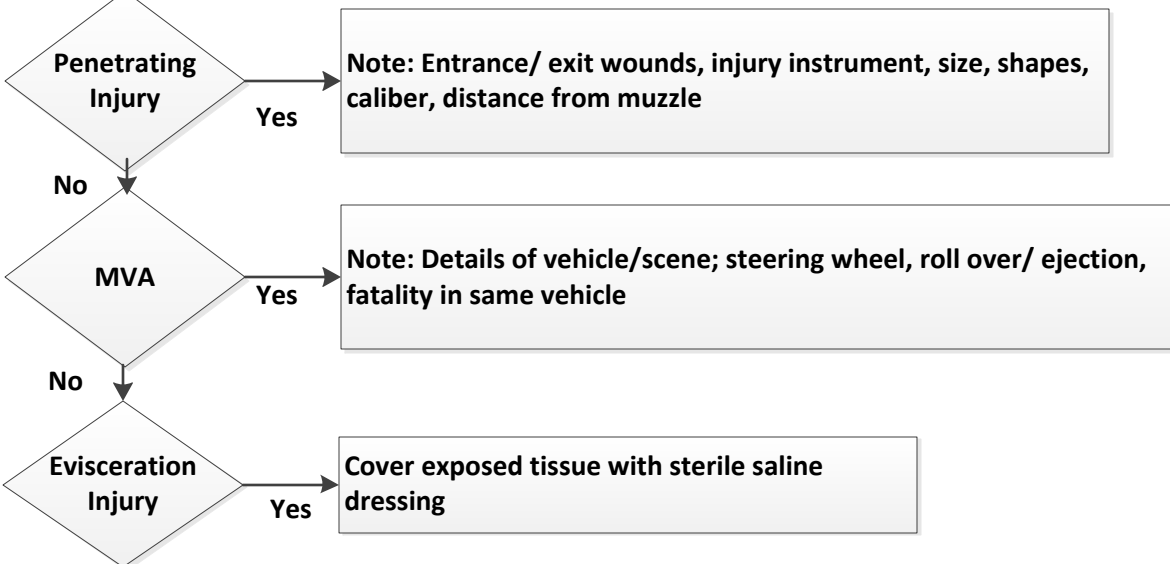
IV x 2 NS TKO



- Frequent Vital Signs
- Monitor Cardiac Rhythm, SPO2

Assess abdomen

- \* Visualize for obvious injury
- \* Auscultate 4 quadrants
- \* Palpate, note guarding, pain, masses, distention



History to obtain with vehicular crashes:

- \* Fatality at the scene
- \* Vehicle type and velocity
- \* Whether the vehicle rolled over
- \* Patient's location within the vehicle
- \* Extent of intrusion into the passenger compartment
- \* Extent of damage to the vehicle
- \* Steering wheel deformity
- \* Whether seat belts were used and, if so, what type
- \* Whether front or side air bags were deployed

Document:

- \* Trauma Band Number
- \* Trauma Criteria

1. Assessment: associate injury site with underlying anatomy. The spleen is the most commonly injured organ. The liver and kidney can also be injured. Less commonly, hollow viscus injury may occur. Shearing forces created by sudden deceleration can cause lacerations of both solid and hollow organs at their points of attachment to the peritoneum.

2. Consider controlled hypotension: (SBP of 90 to 100) with hemorrhagic shock due to torso injuries from penetrating trauma.

3. Do not reduce or attempt to reinsert abdominal contents.