

**San Joaquin County
Emergency Medical Services Agency**

BLS Extremity Trauma

AUTHORITY: Health and Safety Code, Division 2.5, Sections 1797.60, 1797.80, 1797.197, 1797.197a, 1797.204, 1797.220, 1798; California Code of Regulations, Title 22, Chapter 2, Sections 100062, 100063, 100064

INFORMATION NEEDED:

Mechanism of injury.

Medical history: cardiovascular, respiratory problems, and medications.

OBJECTIVE FINDINGS:

Check for DCAP-BTLS (Deformity, Contusion/Crepitus, Abrasion, Puncture, Bleeding, Tenderness, Laceration, Swelling).

Range of motion, distal pulses, sensation, and skin color.

Associated injuries.

TREATMENT:

1. Primary Survey – ensure ABC's.
2. Monitor SpO₂.
3. Administer oxygen for shortness of breath or signs of hypoxia: Oxygen 10-15 L/min via non-rebreathing mask. Patients with ineffective respirations: support ventilations with BVM and appropriate airway adjunct.
4. Control external bleeding with direct pressure, hemostatic dressings or SOF or CAT tourniquet as necessary.
5. Stabilize impaled objects with bulky dressings.
6. Elevate extremity and apply cold packs to reduce pain and decrease soft tissue swelling.
7. Following specific treatment: Secondary Survey and Routine Medical Care.

Specific treatments:

8. Splint injured extremity in position found unless precluded by extrication consideration, no palpable pulses or patient discomfort.
9. Amputation – place/cover amputated part in/with dry sterile dressing, place in sealed plastic bag or wrap with plastic, place dressed and wrapped part on top of ice or cold pack.
10. Cover open wounds with sterile dressings.

Note:

- 1) Pad all splinted extremities and recheck distal pulses and neurological function every 5 minutes.
- 2) Do not apply traction or attempt to reduce an open extremity fracture.