

**San Joaquin County
Emergency Medical Services Agency**



BLS Head – Neck- Facial 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 problems, diabetes, or seizure disorder.

OBJECTIVE FINDINGS:

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

Signs or airway obstruction: stridor, abnormal voice, difficulty breathing.

Glasgow Coma Score.

Neurological impairment or focal deficit (paralysis, weakness).

Eyes/vision: pupil equality and reactivity, eye tracking, impaired vision (double vision, stars).

TREATMENT:

1. Primary Survey - 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. Provide spinal motion restriction if indicated by mechanism of injury and patient assessment.
5. Control external bleeding with direct pressure and hemostatic dressings as necessary.
6. Stabilize impaled objects with bulky dressings.
7. Apply cold packs to reduce pain and decrease soft tissue swelling.
8. Following specific treatment: Secondary Survey and Routine Medical Care.

Specific treatment:

9. Eye injury – Apply dressing as appropriate, loosely cover affected and unaffected eye.
10. Tooth injury – keep avulsed teeth in saline soaked gauze (or commercial tooth saver kit) and transport with patient.
11. Mandible fracture – splint with cravat or bandage.

Notes:

- 1) All patients with a period of unconsciousness should be transported to an emergency department for evaluation.
- 2) Continually monitor Glasgow Coma Score and observe for fluid drainage from ear or nose.

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Approved: Signature on file
Medical Director

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EMS Administrator