

MAJOR TRAUMA: (RTS \leq 10 or by EMT or Paramedic judgment)

Basic Philosophy:

Rapid transport to the appropriate receiving hospital, treatment enroute, and early notification of the base hospital are major pre-hospital contributions to trauma patient survival. **A maximum scene time of 10 minutes is desirable.**

1. Initial Assessment:

- a. Airway (including evaluation for and initiation of C-spine precautions).
 - i. Suctioning/clearing of airway.
 - ii. Oropharyngeal or Nasopharyngeal or Orotracheal route with Sellick maneuver and manual C-spine immobilization.
 - iii. Cricothyrotomy if other methods are unsuccessful or contraindicated.
- b. Breathing:
 - i. **Administer high flow oxygen** and assist ventilations as necessary (use Sellick maneuver).
 - ii. **Evaluate for and decompress** tension pneumothorax if hypotensive or unable to ventilate.
 - iii. **Evaluate for and appropriately dress** open or sucking chest wounds.
 - iv. Evaluate for flail chest, **consider positive pressure ventilation** by BVM or BV-ETT.
- c. Circulation:
 - i. Assess for signs of shock.
 - ii. Control external hemorrhage.
 - iii. Large bore **IV's** enroute. TKO, unless bolus is ordered by on-line Medical Control.
- d. Disability:
 - i. **Spinal Immobilization.**
 - ii. Rapid neurological exam (AVPU).
 - iii. Ongoing assessment.
- e. Consider sedation for combative patients: **Midazolam:** Draw 0.2 mg/kg up to 10mg of 5mg/ml solution for delivery by atomizer device, $\frac{1}{2}$ in each nostril, or 0.2 mg/kg up to 10mg I.M., or 0.1 mg/kg I.V up to 5 mg I.V.

2. **Contact Medical Control**

3. Medical Control Options:

- a. IV fluid bolus if tension pneumothorax or cardiac tamponade is suspected. Use fluids with caution in other hypotensive patients, as this may be harmful.
- b. Analgesics
 - a. **Fentanyl** 25-200 micrograms I.V. titrate for pain control, (25-50 micrograms every 10-15 min. up to 200 micrograms.)
 - i. **Pediatric:** 1 microgram/kg IV (75 micrograms max) or 2 micrograms/kg nasal (100 micrograms max)
 - OR**
 - b. **Morphine** 2-15 mg IV/IM titrate for pain control
 - i. **Pediatric:** 0.1mg/kg IV/IM (4mg max)
 - c. Consider pain scale documentation before and after administration.
 - a. iv. Caution: respiratory depression, hypotension.
- c. Consider sedation: **Midazolam:** Draw 0.2 mg/kg up to 10mg of 5mg/ml solution for delivery by atomizer device, $\frac{1}{2}$ in each nostril, or 0.2 mg/kg up to 10mg I.M., or 0.1 mg/kg I.V up to 5 mg I.V.