Case 1: History

- Unidentified school-age boy
- Extricated by firefighters from an auto that was hit from the rear and later burst into flames
- At the scene he is unresponsive, with labored respiration
- Mask ventilated by paramedics
- Unable to obtain venous access
- 30 minute transport by ground ambulance to the ED of the 70 bed community hospital
- You are the Emergency Services director

9/25/17
ABLS Case Study
Describe in Detail Your Primary Survey

- Is cervical spine immobilization required?
- How would you clear and evaluate the airway?
- What findings would convince you to intubate this child?
- How would you do it?
- What would you do if you could not intubate him?

- How would you secure an endotracheal tube?
- How would you assess the status of the circulating volume?
Describe in Detail Your Secondary Survey

- What trauma issues should be evaluated and how?

- If the child suddenly desaturated, what would you do?
Case 1: Secondary Survey

- How would you evaluate the eyes?
- How would you control pain and temperature?
- What would you do for tetanus and ulcer prophylaxis?
Describe in Detail the Sequence of Efforts you Would Use to Obtain Vascular Access

- In which patients is an intraocceous line indicated?
- How do you place one?
- How do you do a cut down?
- How do you place an internal jugular, subclavian, and femoral line?
Case 1: Fluid Resuscitation

- You obtain a femoral line.
- How will you estimate burn size and depth?

The child weighs 35 kg. & has a 72% TBSA. Vascular access is achieved 1 hour after injury.

- What fluid would you use and at what rate would you start?
- If the child was 12 months old and weighed 10 kg., what would you do differently?
- To assess resuscitation, what will you monitor and how often?
Case 1: Fluid Resuscitation

A Small Amount of Red Urine is Passed at Two Hours

• What do you do?

One Hour Later There is No Urine Output

• What do you do?
Case 1: Airway Assessment & Management

- Is it necessary to make a definitive diagnosis of inhalation injury and, if so, how would you do it?
  - What is the typical course of inhalation injury?
  - How does it influence transfer decisions?

This child had black material in his mouth and ET tube.

- How would you ventilate him?
Case 1: Airway Assessment & Management

At two hours
- UOP improves,
- HR comes down, and
- The patient becomes agitated & fights the ventilator.

- What would you do?
Case 1: Circumferential Burns

There are Circumferential Burns of Both Arms, the Thighs and the Torso.

• What is the concern?

• What will you monitor to determine if escharotomies are needed?

• In what time frame is escharotomy usually needed?

• Can it usually wait until transfer to definitive care has been completed?

• Do patients with deep burns sometimes need fasciotomies?

• How is this need detected?
Case 1: Escharotomies

- In the unusual circumstance that extremity or chest escharotomies are needed before transport to definitive care has occurred, how are they done?

- What are the risks of the procedure?
Case 1: Transfer Decisions

- What are important considerations in planning transportation for this child?
- What level of training should the transporting personnel have?
- What equipment is required for the transporting personnel?
- How should the transporting vehicle be equipped?
- How would you dress the wounds?
- What should the destination be?