TheCase .Report Approach to RTC MANAGEMENT



RTC Pre-Alert - Start your Zero Point Survey - STEP UP



PRE-RESUS

Self - physical (I'M SAFE) and mental readiness Team - communication within team and with other specialties, meds and equipment ready Environment - safety, space (resus bay), heat, noise, light, crowd control

Life over limb:

Beware distracting injuries

Listen up!

The handover is for the whole team. Listen out for red flags, including in the mechanism of injury, extent of vehicle damage, duration of extraction, and vital signs. Pre-hospital medications are also vital.



ReSUS

Patient:

Primary Survey

Vitals

catastrophic haemorrhage

Airway - safe/support needed

Breathing - look, feel, listen, eFAST (haemo/pneumothorax)

Circulation - perfusion and haemorrhage

- Pelvis (binder) - Scalp, occiput Long bones
- Abdomen: tenderness, bruising (seatbelt sign!)
- eFAST (abdomen/pericardium)

Disability - GCS, power and sensation, log roll

Exposure – temperature, injuries

Don't Ever Forget Glucose

Patient Care

Patient factors: pregnant, child, high BMI, infection risk etc Manage injuries and symptoms

NExt Steps

Update: communicate the assessment with your team Priorities: set team goals, plan ahead for necessary

investigation/imaging and treatment, serial exam

What does the patient need

Who needs to be involved - contact them e.g. radiology, surgeons, anaesthetics

Where does this patient need to go e.g. HDU/ICU/OT/Tertiary Centre



