INITIAL TRAUMA CARE IN GLOBAL HEALTH SETTINGS

Steps to take when things are falling apart

NO CONFLICTS OF INTEREST

Objectives: The attendees will learn
First steps in mass casualty;
How to set priorities in mass casualty;
Maximize resources

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INTRODUCTION

Mass casualties can be:
Trauma related
Violence related
Environment related

TRAUMA RELATED

Multiple motor vehicle accidents
Airline crash
Work related (building collapse)
Other

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VIOLENCE RELATED

Mass shooting
War/conflict shooting
Gang violence
Other

ENVIRONMENT RELATED

Flood
Forest fire
Hurricane
Earthquake
Other

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5/23/24









MASS CASUALTY INCIDENT RESPONSE TOOLKIT. GREATER NEW YORK HOSPITAL ASSOCIATION.

Trauma Care Principles

Dennis James; Andre M. Pennardt

FIRST STEPS: PREPARE

Consider most likely scenarios
Form a trauma committee

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SET PRIORITIES

Create a plan/checklist

Create a contact list

Create an inventory of supplies/equipment

Consider education

Create drills/practice

MAXIMIZE RESOURCES

Identify gaps in supplies/equipment
Promote education
Learn from drills/practice
Build your team

PRACTICE TIME

You work in a developing country
First steps in mass casualty;
Set priorities in mass casualty;
Maximize resources

THE REAL THING

Bus full of refugees

Gunmen came out of hiding

Bus didn't stop

25 made it. 2 died.

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WHAT ARE YOUR RESOURCES?

What do you do first?

MOBILIZE YOUR RESOURCES

Hospitals
Personnel
Ultrasound
Xray

Blood bank Lab

ER

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SET PRIORITIES

Who can I save?
Who do I call?
Where do I put casualties?

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INITIAL ASSESSMENTS

ABCDE1
ABCDE2
ATLS
Pocket tools

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ABCDE

Airway
Breathing
Circulation
Disability
Environment/exposure

CIRCULATION/LEVELS OF SHOCK

1 1-15% loss: normal vitals
2 16-30% loss: abnormal pulse/bp/urine
3 31-40% loss: tachypnea/urine/MS change
4 41%+ loss: thready/MS deterioration/urine

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GLASGOW COMA SCALE

Eyes 1-4
Speech 1-5
Response to pain 1-6

SECONDARY SURVEY: SAMPLE

S: signs/symptoms
A: allergies
M: medications
P: past history
L: last meal/fluids
E: events, details

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THINK ABOUT FGLMNOP

Full set of vitals

Get resuscitation adjuncts, including
Lab notification
Monitor heart
Naso/orogastric tube
Oxygen/ventilation
Pain assessment/control

SCENARIO UPDATE

2 dead, 25 wounded
Gunshot to abdomen in pain
Paralyzed waist down from a bomb
Facial trauma bleeding from eye
Child with chest gunshot
Femur and humerus gunshot
Gunshot to breast

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CHALLENGES

Blood bank Tribalism leadership

CHALLENGES COMPLICATED

Tribalism-"don't send them to us"

Leadership- no help is coming

Blood bank- no response from med

director

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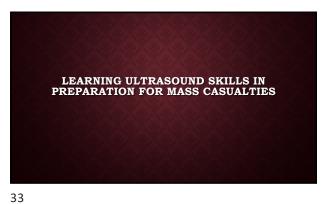
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INITIAL CARE PLAN FOR EACH

Gunshot to abdomen in pain
Paralyzed waist down from a bomb
Facial trauma bleeding from eye
Child with chest gunshot
Femur and humerus gunshot
Gunshot to breast



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TAKE/TEACH A MODIFIED ATLS CLASS Obtain some basic tools like chest tubes Foley catheters Ultrasound What else?



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FINAL THOUGHTS

Assess your community's vulnerability

Assess your resources

Develop your assets

Form a trauma team

Practice scenarios

Prepare for disaster/Work for peace

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