

4.05 EXTREMITY TRAUMA

BLS Treatment
<ul style="list-style-type: none">• Apply tourniquet proximal to the injury when:<ul style="list-style-type: none">○ Direct pressure does not control bleeding.○ Amputation or near amputation of the limb.○ Severe bleeding from a site which is not accessible (example: entrapment).○ Severe bleeding from an impaled object.○ During a mass casualty.○ Limb with the tourniquet should remain exposed.• Splint injured extremities. Elevate the limb and apply cold packs. Cover open wounds with sterile dressing. Re-check neurological function/circulation every 5 minutes.• Place amputated extremity in dry sterile dressing. Place in a plastic bag and on top of an ice/cold pack.• If deformed extremity is pulseless, use gentle in line traction to restore anatomical position.• Oxygen as indicated.• Provide Spinal Motion Restriction as indicated or position of comfort as indicated.• Appropriately splint suspected fractures/instability as indicated.• Bandage wounds/control bleeding as indicated.
ALS Treatment
<ul style="list-style-type: none">• Hemostatic dressings, as indicated.• IV/ IO Normal Saline at TKO.• If SBP <90, administer Normal Saline fluid bolus.• For pain, if no evidence of head injury, or signs of hypoperfusion, and SBP > 90: may administer Morphine Sulfate.• For nausea/vomiting: may administer Ondansetron.
Comments
<p>Must communicate time when tourniquet was applied to receiving hospital staff.</p>
Base Hospital Contact Criteria
<ul style="list-style-type: none">• If there is any question with the hemodynamic status of the patient following administration of pain or nausea medications.