TRAUMA EMERGENCIES
GENERAL TREATMENT

PRIORITIES: ➢ ABC's; ➢ Spinal immobilization as determined by protocol t-3; may require careful advanced airway management; ➢ Minimize scene time; ➢ **SEE TRAUMA TRIAGE PROTOCOL FOR LOCAL VS. TRAUMA CENTER DESTINATION;** ➢ **EARLY CONTACT OF RECEIVING HOSPITAL.**	**APPROVED** **Effective 11/30/10**

Initial Care:

- Stabilize airway, airway management with simplest effective method, in-line stabilization if C-spine injury is suspected;
- OXYGEN therapy if indicated;
- Implement spinal precautions when indicated;
- **For critical trauma patients, contact the transporting agency to ascertain trauma center destination as soon as possible.**

Multi-systems Trauma Patient (MOI w/ Chief Complaint):

- Cardiac Monitor;
- IV ACCESS – two large bore (14 - 18 gauge), Use boluses of 500ml normal saline to maintain Systolic BP > 90 mmHg;
- Pulse Oximeter, (if appropriate);
- Treat specific injuries using guidelines on the following pages;
- Consider the use of **MORPHINE SULFATE** for relief of pain for traumatic injuries:
  - 2 – 10mg IV titrated to maintain systolic BP > 100,
  - Contact Solano County base physician for additional pain medication dose orders if needed.

Trauma Patient (Isolated extremity trauma w/out MOI):

- Cardiac Monitor if indicated;
- IV ACCESS – Smaller Bore (18 to 22g) if indicated;
- Pulse Oximeter, (if appropriate);
- Treat specific injuries using guidelines on the following pages;
- Consider the use of **MORPHINE SULFATE** for relief of pain for traumatic injuries:
  - 2 – 10mg IV titrated to maintain systolic BP > 100;
  - Contact Solano County base physician for additional pain medication dose orders if needed.

DISRUPTED COMMUNICATIONS

In the event of a "disrupted communications" situation, the EMT-P in Solano County may utilize all portions of this treatment protocol without Base Hospital contact as is needed to stabilize an immediate patient.