



## Emergency Anaesthesia in Trauma

<b>AUTHOR</b>	Dave Bramley
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<b>RELATED INFORMATION</b>	Royal College of Anaesthesia

### Indications

Requires clinical judgement: includes but not restricted to:

- Threatened or actual airway loss secondary to airway trauma (consider difficult intubation) or conscious level.
- Threatened or actual respiratory failure associated with chest/lung/ pleural injury
- Shocked state requiring organ support
- Impending traumatic cardio-respiratory arrest
- GCS  $\leq 8$  associated with traumatic brain injury or other cause of reduced conscious level
- Multi-system polytrauma
- To facilitate immediate operative or other management of an injury or injuries
- To facilitate immediate investigation of an injury or injuries (eg CT)

### General principles

1. Checklist should always be used (see below)
2. Never try to intubate with a cervical collar in place
3. Consider likely haemodynamic consequence of anaesthesia, intubation and positive pressure ventilation in a hypovolaemic patient
4. The anaesthetist should choose a drug regime with which they are confident and which is appropriate to the patient. Senior help should be sought where the anaesthetist is not familiar with a technique thought necessary (eg use of ketamine).

<b>Pre-oxygenation taking place</b>
<b>Baseline obs (ECG, SpO<sub>2</sub>, BP)</b>
<b>2x IV access 1 connected to fluid and runs easily</b>
<b>Suction working</b>
<b>Airway adjuncts (OP/ NP)</b>
<b>Endotracheal tube size chosen, Cuff tested</b>
<b>Syringe 10mls for cuff</b>
<b>Tape or tie</b>
<b>Elastic bougie</b>
<b>Laryngoscopes: Two working</b>
<b>Alternative laryngoscope blades available</b>
<b>Heat and Moisture Exchange Filter (HMEF)</b>
<b>Catheter mount</b>
<b>Supraglottic Airway Device and Emergency cricothyroidotomy kit available</b>
<b>Induction &amp; paralysing agents prepared Maintenance of paralysis &amp; sedation agents prepared Drug giver briefed</b>
<b>Ventilator and BVM connected to oxygen</b>
<b>Monitoring, including ECG, NIBP, SpO<sub>2</sub>, ETCO<sub>2</sub></b>
<b>Stethoscope</b>
<b>Premedication if required</b>
<b>In-line immobiliser briefed</b>
<b>Cricoid pressure person briefed</b>