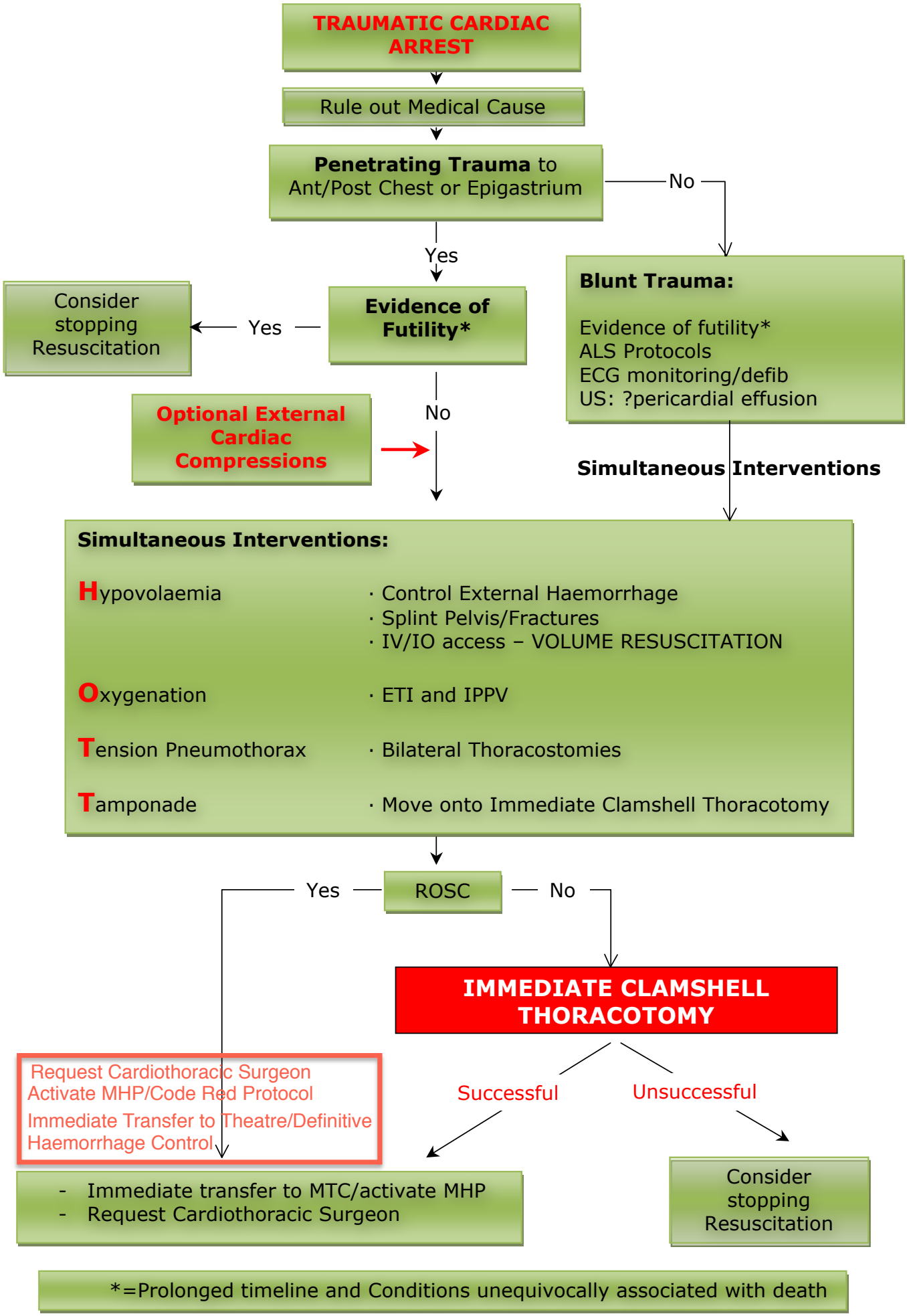
TRAUMATIC CARDIAC ARREST
Rule out Medical Cause
Penetrating Trauma to Ant/Post Chest or Epigastrium
No
Yes
Evidence of Futility*
Yes
Consider stopping Resuscitation
No
Optional External Cardiac Compressions
Blunt Trauma:
Evidence of futility*
ALS Protocols
ECG monitoring/defib
US: ?pericardial effusion
Simultaneous Interventions
Simultaneous Interventions:
Hypovolaemia
· Control External Haemorrhage
· Splint Pelvis/Fractures
· IV/IO access – VOLUME RESUSCITATION
Oxygenation
· ETI and IPPV
Tension Pneumothorax
· Bilateral Thoracostomies
Tamponade
· Move onto Immediate Clamshell Thoracotomy
ROSC
Yes
No
IMMEDIATE CLAMSHELL THORACOTOMY
Request Cardiothoracic Surgeon
Activate MHP/Code Red Protocol
Immediate Transfer to Theatre/Definitive Haemorrhage Control
Successful
Unsuccessful
- Immediate transfer to MTC/activate MHP
- Request Cardiothoracic Surgeon
Consider stopping Resuscitation
*=Prolonged timeline and Conditions unequivocally associated with death