

Emergency Management of Polytrauma

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Polytrauma is a big menace world over, both in developed and developing world. It is a major cause of morbidity & mortality; and remains the leading cause of death and disability especially in children and young adults. Trauma is the third most frequent cause of death, after cardiovascular diseases and cancer. Management takes place at prehospital level and at trauma center (ATLS). The identification of the injuries at the site helps to categorize and manage patients efficiently; limiting any aggravation of the injury and identifying the place for transfer. Polytrauma is sustained in different ways like fall from heights, road traffic accidents, gun shots, various blasts etc. In fact it varies from region to region. It offers a major challenge to the medical fraternity at different levels, starting from the site of polytrauma.

Golden hour of trauma has been highlighted for decades and needs no explanation. Most of the morbidity and mortality results during this time; that can be tremendously reduced with proper and disciplined management; more so if it starts at the site of trauma with paramedics. The mode of transport also plays an important role in reducing the morbidity and mortality. 80% of trauma deaths occur within first few hours; due to bleeding and traumatic brain injury. Multiorgan failure and septicemia usually lead to late deaths.

Management requires a standardized universal protocol, the Advanced Trauma Life Support (ATLS). The primary survey identifies and treats immediately life-threatening conditions; using the ABCDE approach. Airway Management, cervical spine protection, Glasgow coma scale (GCS) less than 8, hemorrhage all need urgent attention.

The trauma team should have the right people that can look after polytrauma patients in the right place with right equipment. All members of the team must be familiar with their own roles.

Lastly, as the patient arrives in a trauma center, the survey and management should go on hand in hand to limit the extent of injury.

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