

Subject: General Trauma Patient Adult and Pediatric Treatment Policy
ALL PROVIDER LEVELS

I. Purpose

- A. Provide standardized guidelines for the assessment, stabilization, and management of adult and pediatric trauma patients in the prehospital environment.
- B. This policy establishes a systematic approach to trauma patient care and prioritizes rapid identification and treatment of life-threatening injuries.

II. Policy

- A. All trauma patients shall receive a systematic trauma assessment and appropriate treatment based on patient condition, mechanism of injury, and clinical findings.
- B. Providers shall prioritize rapid identification and treatment of life-threatening conditions and transport to the most appropriate trauma receiving facility when indicated.

III. Primary Trauma Assessment (Primary Survey)

- A. Providers shall perform a rapid primary survey to identify and treat life-threatening injuries.
 - 1. Look for and control any life-threatening external hemorrhage.
 - a. Immediate control of life-threatening bleeding is a priority.
 - b. See Hemorrhage Control Policy # 5922
 - 2. Airway with cervical spine protection
 - a. Maintain airway patency
 - b. Advanced airway management per ALS protocol
 - 3. Breathing and ventilation use airway adjuncts (OPA/NPA) when indicated. Assist ventilation with a BVM when respirations are inadequate.
 - 4. Circulation and hemorrhage control
 - 5. Disability (neurological status / GCS) protect cervical spine during primary assessment
 - 6. Exposure and environmental control

IV. BLS Trauma Treatment:

- A. Scene safety and body substance isolation
- B. Manual cervical spine stabilization
- C. Control external bleeding per Hemorrhage Control Policy # 5862
- D. Oxygen therapy when indicated
- E. Rapid trauma assessment
- F. Splint suspected fractures
- G. Maintain body temperature

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V. ALS Trauma Treatment:

- A. Cardiac monitoring when indicated
- B. Establish IV/IO access
- C. Fluid administration for suspected shock per protocol
- D. Advanced airway management when indicated
- E. Pain management per protocol
- F. Continuous reassessment of patient status

VI. Secondary Survey - ALL PROVIDERS

- A. After life-threatening conditions are addressed, perform a secondary assessment.
- B. This will include:
 - 1. Head-to-toe examination
 - 2. Vital signs
 - 3. Detailed history (SAMPLE)
 - 4. Identification of additional injuries
 - 5. Spinal motion restriction per Spinal Motion Restriction Policy # 5865

VII. Transport Considerations

- A. BLS providers on scene should anticipate a rapid transport by ALS.
- B. ALS should limit scene time to 10 minutes or less.
- C. Utilize Trauma Triage and Destination Determination Policy #7000 to determine transport destination.

VIII. Documentation

Patient care documentation should include:

- A. Mechanism of injury
- B. Primary and secondary assessment findings
- C. Vital signs and neurological status
- D. Treatments performed
- E. Patient response to treatment
- F. Destination decision