ABCDE of Trauma

The management of severe multiple injury requires clear recognition of management priorities and the goal is to determine in the initial assessment those injuries that threaten the patient’s life. This first survey, the ‘primary’ survey, if done correctly should identify such life-threatening injuries such as:

- airway obstruction
- chest injuries with breathing difficulties
- severe external or internal haemorrhage
- abdominal injuries.

If there is more than one injured patient then treat patients in order of priority (Triage). This depends on experience and resources (Discussed in the practical sessions).

The ABCDE survey (Airway, Breathing, Circulation, Disability and Exposure) is undertaken. This primary survey must be performed in no more than 2–5 minutes. Simultaneous treatment of injuries can occur when more than one life-threatening state exists. It includes:

- **Airway**
  Assess the airway. Can patient talk and breathe freely? If obstructed, the steps to be considered are:
  - chin lift/jaw thrust (tongue is attached to the jaw)
  - suction (if available)
  - guedel airway/nasopharyngeal airway
  - intubation. NB keep the neck immobilised in neutral position.

- **Breathing**
  Breathing is assessed as airway patency and breathing adequacy are re-checked. If inadequate, the steps to be considered are:
  - decompression and drainage of tension pneumothorax/haemothorax
  - closure of open chest injury
  - artificial ventilation.
  Give oxygen if available.

*Reassessment of ABC’s must be undertaken if patient is unstable*
• **Circulation**
Assess circulation, as oxygen supply, airway patency and breathing adequacy are re-checked. If inadequate, the steps to be considered are:
• stop external haemorrhage
• establish 2 large-bore IV lines (14 or 16 G) if possible
• administer fluid if available.

• **Disability**
Rapid neurological assessment (is patient awake, vocally responsive to pain or unconscious). There is no time to do the Glasgow Coma Scale so a
• awake A
• verbal response V
• painful response P
• unresponsive U
system at this stage is clear and quick.

• **Exposure**
Undress patient and look for injury. If the patient is suspected of having a neck or spinal injury, in-line immobilization is important. This will be discussed in the practical sessions.