Regional Trauma Network Newsle

South West LHIN

Trauma Chest Tube Tricks!

- Insertion should be between the 4th and 5th intercostal space, mid-axillary line BUT if in doubt, go higher!
- The average adult chest tube will be inserted until all holes are in the chest and at approx. 14-16 cm in depth. Size 28-32 Fr.
- Peds: Smaller chest tube warranted! Try a pig tail 14 - 16 Fr. in kids 5 - 17 and 12 Fr. in kids age < 5.
- It does not matter what direction you guide the chest tube once through the pleura. Up or down.
- Suture: Try using 0 Prolene instead of 3.0 Prolene. 0 Prolene is much stronger and has a better chance of holding your tube through the transport. Tape connections well!
- Suction: Dial up the suction until the orange float pops up in your window of the chest drainage system. Do not ever clamp the tubing during transport of any kind. High risk of tension pneumothorax.
- Assessment: FOCA (assess on insertion) & DOPE

Fluctuation	Fluid level going up & down. Assess q hour	Dislodged?	Check the tube depth and con- nections.
Output	How much? Assess q hour	Obstructed?	Tubing kinked or caught up?
Colour	Bright red or dark.	Pneumo?	Listen to breath sounds/ CXR
Air Leak	Present or not? Assess q hour	Equipment problem	New drainage system?

**Patients putting out more than 200cc of blood per hour may need thoracic surgery!

To insert or not to insert, that is the question!

Pediatrics Chest Tubes in trauma: Not all pneumo's need a chest tube! If you are not sure, call the TTL and discuss it over the phone anytime!

We want to come meet your team!

We are booking fall and winter **Regional Trauma Team** Development Courses now! This course has two LHSC TTL's and the Trauma Coordinator come to your site to meet your team, learn about your trauma management and practice some simulation in your trauma room!

Let's book it! Call or email Alison anytime!

OCTAPLEX in Trauma

Also called Prothrombin Complex Concentrate (PCC), Octaplex contains coagulation factors II, VII, IX and X & proteins C and S.

- Use: We use it in trauma to <u>urgently</u> reverse the effects of Warfarin and prevent further bleeding!
- Where is it? Typically kept in your blood bank.
- Octaplex may be used in conjunction with blood transfusion.
- Mix diluent and PCC following manufacturer instructions





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**Did you know

ORNGE will pick up Octaplex from your lab to use on your anticoagulated patient during transport?

******Pediatric Intubations in Trauma******

To prevent dislodgement of the tube, the pediatric trauma team suggest using a cuffed tube in all pediatric trauma patients in order to transport safely.

Who called ORNGE? -MODIFIED SCENE-

Land medics/dispatch can call ORNGE directly from the scene if it meets Field Trauma Triage Guidelines but ORNGE may not be able to get to the scene in time. Land medics must transport to hospital if ORNGE has not arrived yet. ORNGE is notified and instead they meet the patient at your hospital in your trauma room. This is called a MODIFIED SCENE. In your trauma bay, there is a "Shared Model of Care" whereby the ED & ORNGE crew work together to assess and prepare for the injured patient for

