

Frontline Trauma

RTN Newsletter February 2019

Stop The Bleed Launched!!

The Trauma Program at LHSC has started delivering the "Stop the Bleed" course to our region!! This course is designed to increase survivability of life-threatening bleeding by teaching the public to identify it and use proper techniques to stop uncontrolled bleeding in an emergency situation.



The course is free of charge and takes about 90 minutes. We are offering free monthly courses at the hospital and going out to workplaces to teach groups!

Interested in teaching it in your region? Reach out to us for an instructor course!

trauma@lhsc.on.ca

Upcoming TRAUMA Education

ENPC @ St. Joe's —April 25 & 26

Contact <https://pedspulse.simplesignup.ca>

TNCC @ The Factory—April 11 & 12

Contact fred.allen@lhsc.on.ca

TNCC @ St. Thomas— March 30 & 31

Contact tnccclondon@yahoo.ca

ATLS @ UH CSTAR—April 12 & 13

Contact tammy.mills@lhsc.on.ca

ASSET (Advanced Surgical Skills for Exposure in Trauma) @ UH—April 26th. Contact tammy.mills@lhsc.on.ca

Adult Talk Trauma 2019 @ Best Western April 17

"And just Like That, Everything Was Different"

Brain Trauma theme with talks like Resident Rumble, Terrific TBI Tidbits, "Is He Going to Live?", a LIVE recording of the SGEM with Dr. Ken Milne and more!!

Peds Talk Trauma 2019 @ Best Western April 18

Pediatric Mass Casualty focus featuring guest speakers from Lady Dunn Health Centre in Wawa, On. who managed a pediatric mass casualty last summer. Afternoon focus on ATV's and children—Injuries & Implications!!

Register @ www.talktrauma2019.eventbrite.ca

Backboard Use in Hospital

Informed by mounting evidence against the traditional use of spinal boards, beginning Dec 11th, 2018 every paramedic in the province is no longer using back boards to transport patients to the ER.

In hospital, the current Advanced Trauma Life Support (ATLS) guidelines recommend removal of a spine board (if one is present) after the primary survey is complete (within 20 minutes of arrival). There is no available evidence that the spine board makes any difference to outcomes (according to a recent Cochrane review), but there is growing evidence that a backboard can contribute to patient discomfort and harm.

With the lack of evidence supporting the use of spinal immobilization boards in the pre-hospital setting and mounting evidence of complications related to the use of spinal boards, the RTN would not support using a spinal immobilization board for any care in hospital other than to help lift a fallen pt. off the floor who has potentially injured their neck during their fall. Questions? Call or email us!

Pediatric Trauma Rounds March 18th

Join us in person or conference call in on our WebEx from 1-2pm. VH B2-119

"Free fluid LUQ"

Pediatric Splenic Injury Management

Guest presenter: Dr. Stewart Kribs

Trauma Association of Canada Conference

Feb 27– Mar 1 Look for our summary of all the fantastic trauma research next month!



Paramedic & Regional Hospital Trauma Feedback Program—Coming Soon!!!

This new initiative will provide paramedics and regional ED's with more timely feedback on the trauma patient you sent to London. The goal is that this information provides

- 1) the ability to confirm your clinical suspicion,
- 2) an opportunity to determine whether this patient received the right care and
- 3) closure on the case

The ultimate goal is to have the feedback to your center within a week of trauma transfer!

Need trauma education? Skills fairs, RTTDC, job shadows in London, Call or email us!! We would love to help!!

"Amateurs practice until they get it right. Professionals practice until they can't get it wrong!" H. Craxton