Trauma 2007: The Debate

Proposing the motion:

“The Role of the Intensivist in Trauma Resuscitation is to take the Patient away at the End”

Dr Tim Parke
Emergency Department ACH
Airway Skills

- Rapid sequence intubation is now training requirement for ED specialists at “expert” level
  - ref: ACEM training guidelines

- Complication rates comparing ED physician intubations to anaesthetists are similar, and the ED group tend to be more urgent
  - ref: EMJ 2003
Leadership skills

- Wyatt study Injury 1999
  - Improved trauma survival with ED consultant
ED Working as a Team
Intensivists Working as a Team
Mixing up teams - does it work?

ALL BLACKS vs BRITISH & IRISH LIONS

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Role of Intensivist IS to Take the Patient Away at the End

- Complex therapies later
  - ventilator
  - feeding
  - timing of surgery
  - fluid balance
  - ICP therapies
Destination after A&E Resuscitation

Ward

ITU

Theatre

Excess Survivors per 100 Patients

UK Average Performance
Campaign for a Geek-free Resus
The Case for No Intensivist

- Trauma resuscitation should be:
  - fast & simple: 30 minutes
  - delivered by a team who:
    - are used to working together
    - are familiar with the environment
    - have leader with clear lines of command and control
    - have the requisite skills and competencies
No Intensivists.......

Mad techno boffins

Too clever by half
....More ED Docs

Sign: Dr. Juma can treat solve many problems such as:
- Sickness
- Family problems
- Infertility
- Grief
- Malaria
- To make money
- Pregnancy problems
- Vomiting all the time
- Misfortunes
- Demand debts
- Repecting misunderstanding
- Court cases
- Casino specialist
- Bad luck
- Customer attraction
- Etc......
Trauma Resus should be Fast and Simple

- Evidence based time critical treatments:
  - avoidance of secondary insult in head trauma
  - rapid triage to theatre in shock trauma
  - rapid identification of expanding intracranial haematomas
ED Resus Algorithm 1

- Put tubes in mouth and chest to help patient breathe if they can’t do it themselves... enough
ED Resus Algorithm 2

- Put in lines. Find bleeding. Press & splint. Find the right surgeon and move out.
HIV +ve Resus
(high intensivist visibility)

Hold bag mask on, and take charge of resus regardless of seniority

Interview both paramedics (separately)

Check last 15 years of medical records for co-morbidities

Assess exercise tolerance by 10 minute treadmill test

Take detailed social history from both parents and parish priest

Review all literature relating to injuries using Medline, Ovid and Google

Institute case conference by cell phone involving at least 2 ICU consultants

Consider resuscitative measures
Delegate tasks by thorough review of CV’s of all attending team members
What Might ED Team Gain from an Intensivist?

- Skills?
- Leadership?