

NOTE

- Make sure you know the trauma room and the equipment
- Plan together for forthcoming actions
- Ask for help in time
- Be responsible and follow the team leader
- Distribute work tasks and use available resources
- Communicate clearly and use all available information
- Avoid unnecessary focus – keep an overview
- Double check drug doses, tube connections etc.
- Use check lists and procedures
- Summarize often and document your findings
- Be prepared in case the patient deteriorates
- Remember; lack of control of airways, ventilation and bleeding can kill instantly

Eye opening

- 4 Spontaneous
- 3 To voice
- 2 To pain
- 1 None

Verbal response (Adult)

- 5 Orientated
- 4 Disorientated
- 3 Inappropriate words
- 2 Incomprehensible sounds
- 1 No verbal response

(Children)

- 5 Smile/babbles
- 4 Irritable cry
- 3 Cries to pain
- 2 Moans to pain
- 1 No verbal resp

Best motor response

- 6 Obeys commands
- 5 Localises pain
- 4 Withdraws from pain
- 3 Flexion to pain
- 2 Extension to pain
- 1 No motor response

] pain stimuli

GLASGOW COMA SCALE

A

- Oxygen 15l/min
- Open airways/intubation
- Stabilise neck (collar/pads)

B

- Respiratory rate
- Thorax stable/chest tube
- Chest x-ray, time:

C

- 2 large bore i.v. lines
- Pelvic x-ray, time:
- US abd./peritoneal lavage
- Blood samples

D

- Glasgow Coma Score
- Sensibility/motor response
- Pupillary response

E

- Temperature
- Examine the patients back
- Urinary catheter
- Nasogastric tube
- Tetanus
- Antibiotics
- Arrival status registered