Driver with Fractured Femur

Information for facilitators

This teaching session is designed to be delivered by the roadside to a small group. It generally runs for 20 minutes followed by a debrief of approximately 20-25 minutes (40-45 mins total).

Aim

The aim for this session is to provide management to a driver trapped in a car – resulting in an open femur fracture and abdominal injury.

What you will need

There are **THREE** components to this session:

Page 2 contains background information that can be read to the group and an expected sim progression.

Page 3 contains details of the scenario with expected progression for the sim technician.

Page 4 contains the checklist for facilitators to fill out during the scenario and a list of equipment required.

Introduction

"You are responding to a Category 2 call of a RTC. The driver is reported to be trapped."

Expected Progression



To fully assess and identify potential injury.



Recognise the need for sedation to facilitate extrication.



Extricate from the vehicle and safely complete the patient packaging.

Case title	Driver with a fractured femur		Sim no.	PRU 23	
Setting	Car	Patient age	34	Patient sex	М
Diagnosis	·			Curriculum code	
Injuries	 Open fracture right femur Liver laceration Multiple right sided rib fractures 				
Staff required	1 x PRU Paramedic, 1 x PRU Doctor, 2 x Ambulance staff, FRS				
Learning objectives		n familiarity with car e dural sedation	extrications		

INITIAL SETUP

Observations				Arrival route	N/A	
HR	116		E 4 V 5 M 6 = 15/15	Carers?	None	
RR	32	GCS		Visible external findings: Open fracture to the right femur. Bruising over the abdemon		
SpO2	95%	Pupils	4mm			
ВР	108/45	Temp	36.0°C	Bruising over the abdomen. Progression:		
CRT	<2 secs 6.9	Weight	70 kg	Trapped in the vehicle by a dashboard with an open fracture to the femur. Sedation to allow for extrication, manipulation and packaging. Clinically significant injuries but stable throughout.		
Equipment on arrival	Standard response bags	Additional info	Live actor			

DOMAIN	TASK	TIME	DONE
Preparation	Role allocations		
	Disposition discussions		
Initial Actions	Scene safety		
	Information gathering		
	Introductions to individuals on scene		
	Early update to control		
Assessment	A-E assessment		
	Neurovascular assessment of limb		
	Monitoring applied		
	Focused history		
Interventions	Rapid analgesia plan		
	IV access		
	Sedation		
	Appropriate monitoring		
	Dressing		
	Splint		
	IV antibiotics		
Decision-Making	Plan for extrication		
	Sedation/analgesia		
	Destination selection		