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 aims for this session is to provide management of chest penetrating trauma and the management of traumatic cardiac arrest in this context.

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 1 call of a individual who has been stabbed.

Police are on scene and report the attacker is under arrest."

Expected Progression



To provide rapid assessment and packaging.



Recognise peri-arrest state and requirement for resuscitative thoracotomy.



Perform a simulated prehospital resuscitative thoracotomy.

PRU Sim 9

Case title	Chest stabbing			Sim no.	PRU 9
Setting	Street	Patient age	17	Patient sex	М
Diagnosis	Right ventricle single stab wound and cardiac tamponade Curriculum code				
Injuries	 Single stab wound to the left side of the sternum at the 4th ICS Cardiac Tamponade leading to TCA 				
Staff required	1 x PRU Paramedic, 1 x PRU Doctor, 2 x Ambulance staff, Police				
Learning objectives	 To gain familiarity with dynamic risk assessments Understand the need for RAPID transfer to hospital Recognise indication and perform a resuscitative thoracotomy 				

INITIAL SETUP

Observations		Arrival route	N/A			
HR	160		E 4 V 3 M 5 = 12/15	Carers?	None	
RR	38	GCS		Visible external findings: Single stab wound to the left of the sternum. Progression: Will quickly deteriorate over the first 5 minutes during packaging to TCA.		
SpO2	93%	Pupils	4mm			
ВР	79/55	Temp	36.7°C			
CRT	>5 secs	Note: mlat	70 kg			
Glucose	6.1	Weight				
Equipment on arrival	Standard response bags	Additional info		dult mannequin. Poracotomy trainer.		

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		
	Monitoring applied		
	O2 applied		
Interventions	Dressing to wound		
	IV access		
	Fluid bolus		
	Intubation		
	Thoracostomy		
	Tranexamic Acid (TXA)		
	Thoracotomy		
	Sedation/Paralysis/IV Abx		
Decision-Making	Decision on appropriate physiological targets		
	Plan for rapid transfer		
	Destination for thoracotomy		