

Suspected damage to the neck and spine

Overview	<p>Stop the accident What happened? Is the scene of accident safe? Emergency evacuation? Medicine / allergy?</p>
<p>Start by doing a quick ABC – if you can talk to the patient, airways and breathing are okay= stabile A and B! If there is a massive bleeding, stop it by compressing with your hands or fingers, lift the inflicted area above the heart. If no succes, apply the tourniquet</p>	
A	<p>If blocked airways / no breathing:</p> <ul style="list-style-type: none"> • Check if there is anything blocking, and if- then remove it. • Use suction, if needed • If level of consciousness is 4: Perform jaw lift and apply tongue depressor. <p>spontaneously breathing, start CPR – use the ventilation balloon and give 15 l/min oxygen</p> <p>Perform spinal stabilization : Head holder + log roll + in-line if:</p> <ul style="list-style-type: none"> • Patient describes at trauma and pain to the neck and /or spine and is not able to stand up by pulling your hand • Patient is unconscious and there is suspicion of possible trauma to neck and / or spine • Patient is erratic (alcohol, drugs,” strange” way of speaking) and have had a trauma to the neck and /or spine. <p>❖ Only apply neck collar, if prescribed by RMD</p> <p>If needed give 9 l/min of oxygen by the Hudson mask</p>
B	<p>Make a quick assessment of the breathing – OBSERVE + LISTEN + FEEL – is it normal – fast – slow – deep – shallow – wheezing – rattling – difficulty breathing? If you have difficulty breathing after an accident, check the chest for traumas.</p>
C	<p>Make a quick assessment of the circulation: Pulse: Normal – fast – slow – weak – strong – irregular – regular Capillary response: if it’s more than 2 sec then apply the vein needle and a drip with 20-30 drops/min. Color of the skin: Normal – pale – bluish – red/reddish – yellow/yellowish Temperature of the skin: Normal – warm – cold – sweaty – cold sweating</p>
<p><i>Problems concerning ABC which you cannot fix, contact RMD immediately – otherwise – continue with D and E and afterwards transport the patient to ship’s hospital</i></p>	
D	<ul style="list-style-type: none"> - Level of consciousness? 1 – 2 – 3 – 4? - Pupil reaction
E	<ul style="list-style-type: none"> - Top-to-toe examination - Let the patient decide in which position he is most comfortable. <p>Fixation in stretcher and spineboard, if immobilization is necessary, otherwise the patient walks with support</p>
<p>On arrival to ship’s hospital:</p> <p>If the patient is on a spine board, unstrap and log roll to the bed.</p> <p>Fixate head with blankets and duct tape. Also support the body with blankets and fixate to the bed with duct tape.</p> <p>Spineboard –ONLY for transportation</p> <p>Reassess ABCDE and measure vitals, contact Radio Medical for further treatment</p>	