

Protocol T-2

SECTION: T-2

PROTOCOL TITLE: Orthopedic Injuries

REVISED: January 27, 2010

BLS SPECIFIC CARE: See General Trauma Care Protocol T-1

General Comments

- Consider that injuries may be distracting from more subtle signs of spinal injury. Assess accordingly
- Follow Hospital Destination Protocol for major trauma
- Do not delay transport for splinting in unstable patients

Long Bone Orthopedic Injuries

- Splint, position and/or ice as needed
- Traction splints as indicated for femur fractures

Pelvic Injuries

- Consider Pelvic Wrap with Sheet, KED or similar method

Clavicle and Shoulder Injuries

- Consider Sling and/or swath
- Consider injuries to adjacent structures

ILS SPECIFIC CARE: See General Trauma Care Protocol T-1

ALS SPECIFIC CARE: See General Trauma Care Protocol T-1

Orthopedic Injuries

- All angulated long bone fracture/dislocations with neurological or vascular compromise should be reduced as soon as possible
- Patellar dislocations may be reduced following patellar reduction guidelines at the paramedic's discretion
 - All patellar reductions should be encouraged to seek X-rays and physician evaluation.

PHYSICIAN PEARLS:

**EARLY NOTIFICATION OF THE RECEIVING FACILITY IS
ESSENTIAL IN SIGNIFICANT TRAUMA CASES**

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