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The Primary Conference Pelvic Injuries Workshop



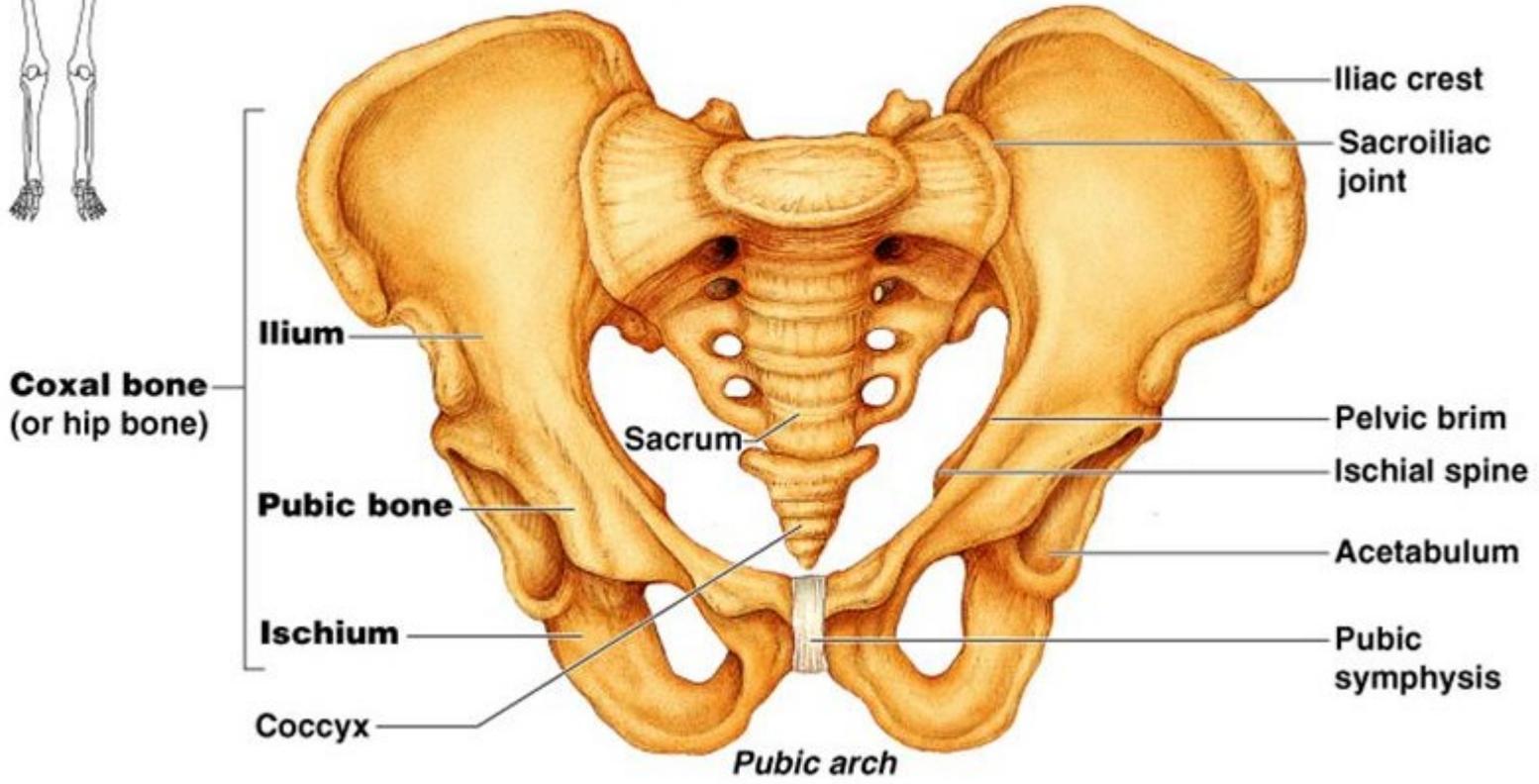
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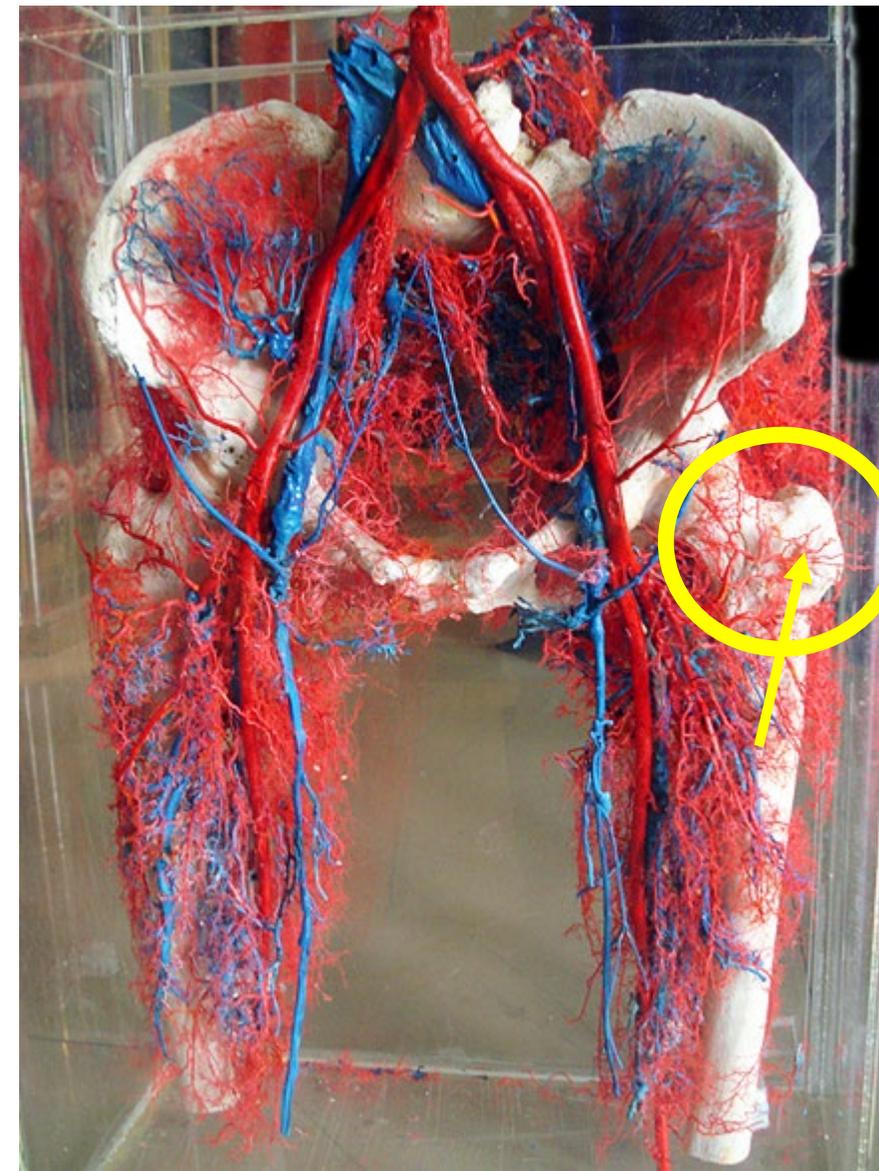
- What is the most important function of the pelvis? **Bearing weight** (Marieb, 2015)
- How much blood can the true pelvis hold in an adult patient? **1.5L** (Suzuki et al, 2008)
- What are the two most significant types of pelvic fractures? **Anterior/Posterior and Lateral Shear** (Marieb, 2015)

- Two thirds of pelvic injuries are due to? **RTCs** (Chesters, 2017)
- True ‘open book’ pelvic injuries have a mortality rate up to? **50%** (Gerecht, Larrimore & Steuerwald 2014).
- Why should we not log roll trauma patients? (Moss et al, 2013)
To avoid aggravation of pelvic Injuries and dislodging clots
- Should clinicians ‘spring’ a pelvis to assess for a injury? **NO!** (AACE, 2016; AACE, 2017)

Anatomy and Physiology



(a)



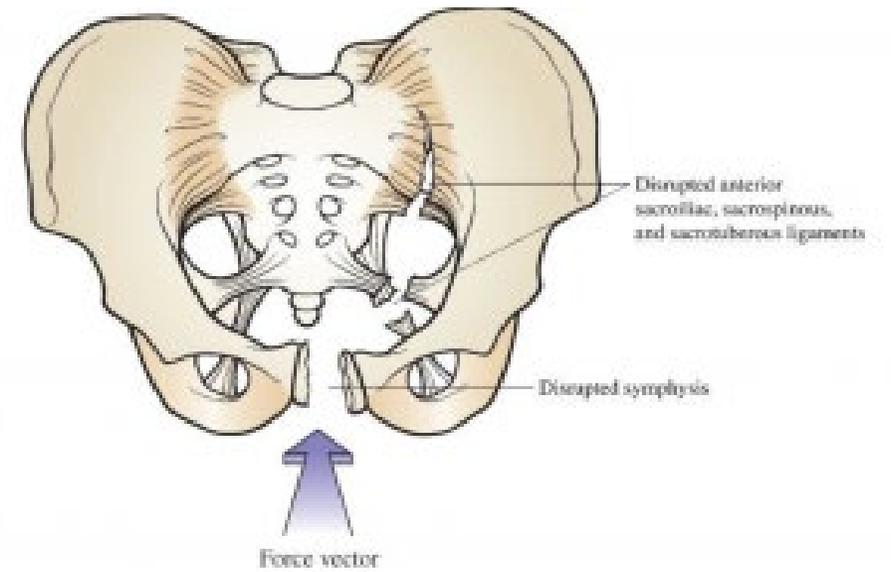
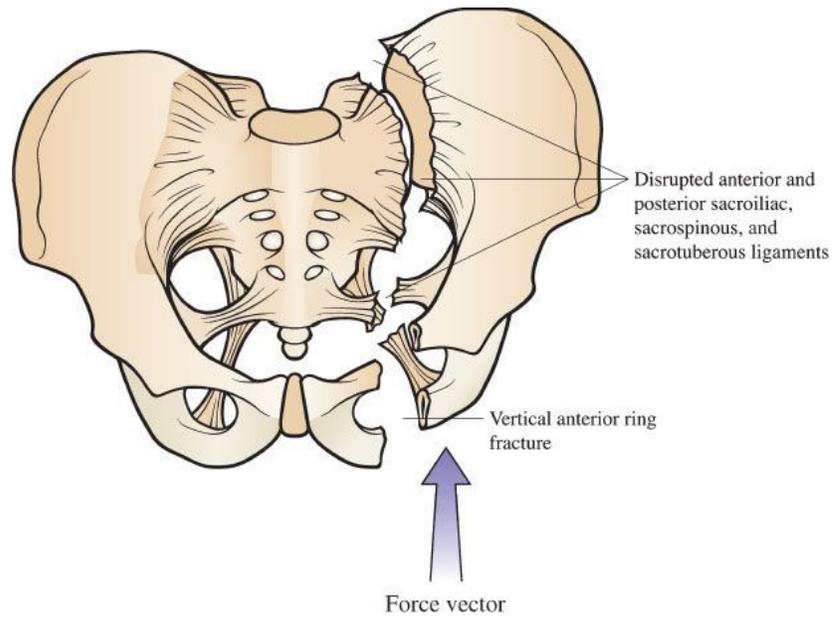


Figure 5. AP Compression Fracture⁶

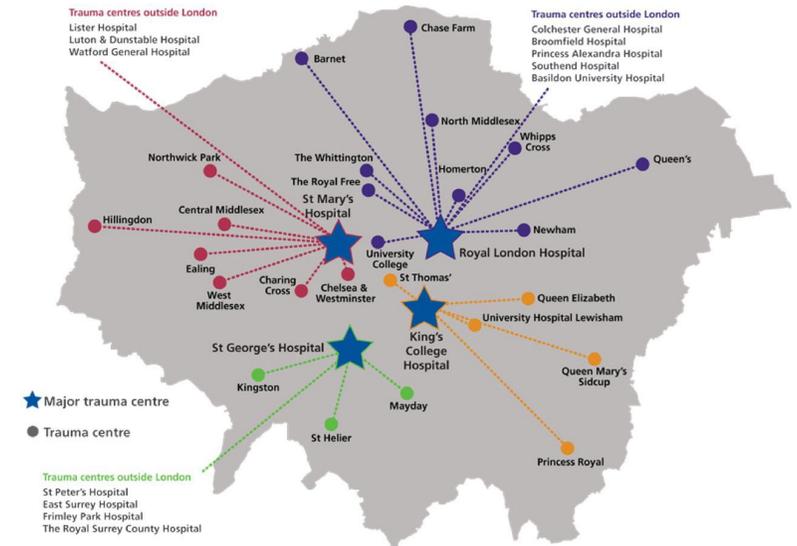
Assessment and Management

When to consider a Pelvic Injury?

- High MOI
- Bruising
- Bleeding
- Deformity
- Urge to urinate
- Pain when mobilising
- Tachycardia
- Unable to raise legs
- Iliac crest symmetry
- Swelling
- Shortening of limb
- <90 SBP (+MOI)
- Pain – pelvis, groin, hip, lower back
- Inability to mobilise
- ‘Splaid’Legs
- # Femur

DR@ABCD E

- ❖ Establish MOI – Poly-Trauma?
- ❖ Time critical! – Hypovolemia!!
- ❖ Advanced Teams Early (REBOA/Blood)
- ❖ Oxygen if hypoxic*
- ❖ Splint the pelvis on scene
- ❖ An improvised splint (binder) can be used if the purpose made splint does not fit
- ❖ IV/IO Tranexamic acid
- ❖ Pain relief – IV/IO Paracetamol -> **Morphine** -> Ketamine
- ❖ Fluids?
- ❖ Major Trauma Centre



PELVIC Splints/Slings/Binders



- Low-friction
- Auto buckle
- Allows access to abdomen/groin
- X-Ray & CT
- 3 sizes

(SAM Medical, 2018)



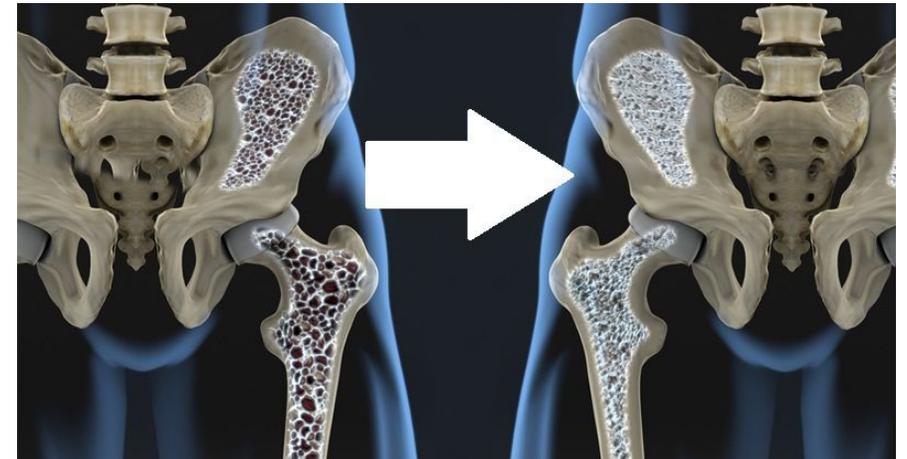
- One size fits all
- Cut to size
- Allows access to abdomen/groin
- Soft material

(Prometheus Medical, 2018)

Practical Demonstration

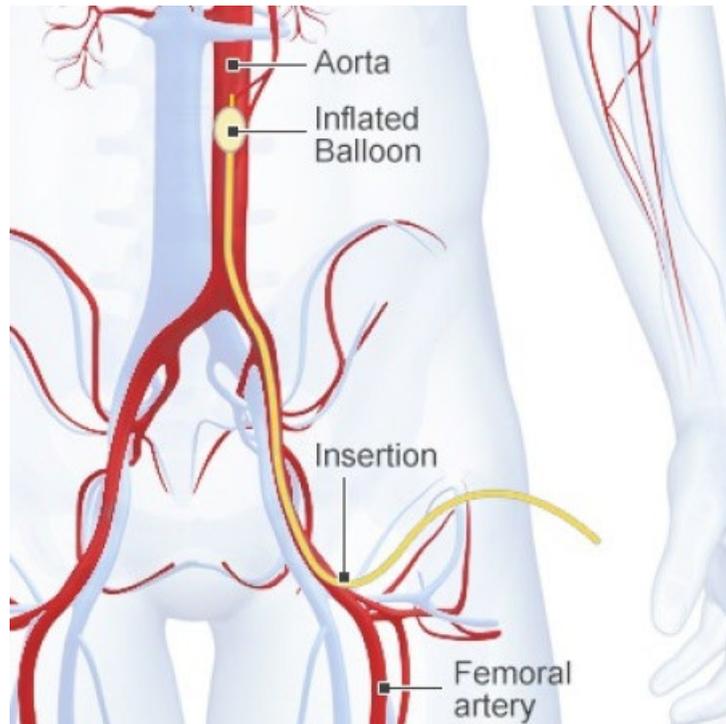
High Risk Patients?

- Over 60 years of age
- Chemotherapy
- Long term steroid use
- Osteoporosis
- Paediatrics? – Lower Incidence



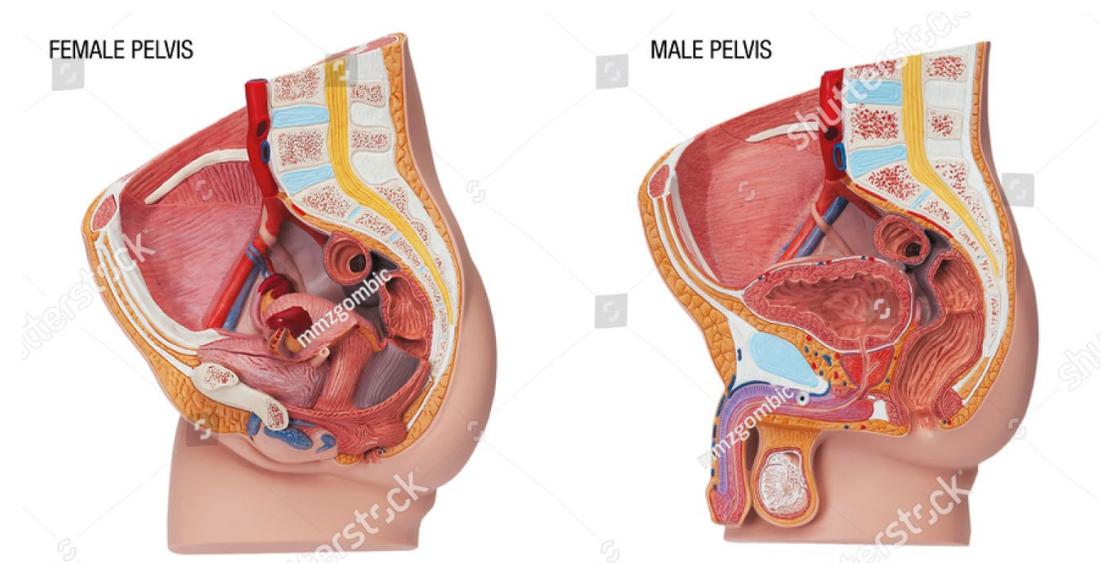
PELVIS

- Resuscitative Endovascular Balloon Occlusion of the Aorta (**REBOA**)



Associated Injuries

- Often associated with polytrauma (Thoracic/Abdo/Femur)
- Vaginal lacerations
- Injuries to Anus, Cervix, Uterus and Ovaries are rare
- Bladder rupture occurs in 10% of pelvic fractures



Any Questions?

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