

BTLS PRIMARY SURVEY

Terminology:

BTLS – Basic Trauma Life Support

BSI – Body substance isolation

TIC – Tenderness, Instability, Crepitation

SAMPLE – Symptoms, Allergies, Medicines, Past Medical History, Last meal, Events preceding the injury (mechanism of injury)

CRITICAL INFORMATION-BTLS PRIMARY SURVEY

If you ask the right questions, you will get the information you need to make the critical decisions necessary in the management of your patient. The following questions are presented in the order in which you should ask them to yourself as you perform patient assessment. This is the minimum information that you will need as you perform each step of the Initial Assessment.

Scene Size-Up

Which BSI precautions do I need to take?
Do I see, hear, smell or sense anything dangerous?
Are there any other patients?
Are additional personnel or resources needed?
Do we need special equipment?
What is the mechanism of injury here?
Is it generalized or focused?
Is it potentially life-threatening?

Initial Assessment

What is my general impression of the patient as I approach?
Level of Consciousness (AVPU)
Introduce yourself and say: “We are here to help you, “can you tell us what happened?”
Airway
Is the airway open and clear?
Breathing
Is the patient breathing?
What is the rate and quality of respiration?
Ventilation Instructions
Order oxygen for any patient with abnormal respiration, altered mental status, shock, or major injuries.
Delegate assisted ventilation if the patient is hypoventilating (<12 per minute)
Or if there is inadequate movement of air.
Hyperventilate only those head injury patients who are unresponsive and show

signs of cerebral herniation.

Circulation

What is the rate and quality of the pulse at the wrist (and at the neck if not palpable at the wrist)?

Is major external bleeding present?

What is the skin color, condition, and temperature?

Decision

Is this a critical situation?

Are there interventions that I must make now?

Rapid Trauma Survey

Head and Neck

Are there obvious wounds of the head or neck?

Are the neck veins distended?

Does the trachea look and feel midline or deviated?

Is there deformity or tenderness of the neck?

Chest

Is the chest symmetrical? Is there paradoxical movement? Is there any obvious blunt or penetrating trauma?

Are there any open wounds or paradoxical movement?

Is there TIC of the ribs?

Are the breath sounds present and equal?

If breath sounds are not equal, is the chest hyperresonant or dull?

Are heart sounds normal or decreased?

Abdomen

Are there obvious wounds?

Is the abdomen soft, rigid, or distended?

Is there tenderness?

Pelvis

Are there obvious wounds or deformity?

Is there TIC

Upper Legs

Are there obvious wounds, swelling, or deformity?

Is there TIC?

Scan of Lower Legs and Arms

Are there obvious wounds, swelling, or deformity?

Is there TIC?

Can the patient feel/move fingers and toes?

Exam of the Posterior (done during transfer to the backboard)

Is there any deformity, contusions, abrasions, penetrations, burns, tenderness,

Lacerations, or swelling (DCAP-BTLS) of the patient's posterior side?

Decision

Is there a critical situation?

Are there interventions that I must make now?

History

What is the SAMPLE history? (may have been obtained during the exam).

Vital Signs

Are the vital signs abnormal?

Disability (Perform this exam now if there is altered mental status. Otherwise, postpone this exam until you perform the Detailed Exam.)

Are the pupils equal and reactive?

What is the Glasgow Coma Score?

Are there signs of cerebral herniation (unconscious, dilated pupil(s), hypertension, bradycardia, posturing)?

Does the patient have a medical identification device?