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- 1. Perform evaluation.
 - 1.1 Evaluate respiration.

For labored, painful, shallow or rapid breathing

If breathing is rapid and respiratory distress is present, consider collapsed lung and follow {COLLAPSED LUNG/TENSION PNEUMOTHORAX - EMERGENCY} (SODF: ISS MED: EMERGENCY).

If no pulse or respiration, perform {CARDIOPULMONARY RESUSCITATION: CPR - EMERGENCY} (SODF: ISS MED: EMERGENCY).

If unconscious, provide airway and ventilatory support every 5 minutes.

Refer to {CARDIOPULMONARY RESUSCITATION: CPR - VENTILATORY SUPPORT - EMERGENCY} (SODF: ISS MED: EMERGENCY).

2. Monitor and record vital signs every 5 minutes.

	Time (minutes)	0	5	10	15	20	25	30
ALSP	Blood Presssure (ALSP-4)							
	Pulse							
	Respiratory Rate							
ALSP	Temperature (Assessment-4)							
ALSP	Pulse Oximeter (Assessment-1)							

WOUND ASSESSMENT

- 3. After initial evaluation, assess location and description of any surface wounds.
 - 3.1 If superficial injury (laceration, non-penetrating into chest cavity), refer to {LACERATION REPAIR} (SODF: ISS MED: WOUND CARE).

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- 3.2 If penetrating injury (sucking, chest wound), cover with Telfa Pad (Bandages-6), taping down only 3 sides and call Surgeon.
- 3.3 If impaled object, go to step 4.

WARNING

If subsequent respirations become impaired or labored, remove Telfa Pad immediately.

IMPALED OBJECT

WARNING

Do not remove an impaled object from chest. Bandage around object and stabilize object to minimize movement.

ALSP (red)

4. If impaled object, unstow:

Gauze Pads (Bandages-1,2)

Kling Dressing (Bandages-4)

Kerlix Dressing (Bandages-3)

Telfa Pads (Bandages-6)

Tape (Emergency Surgery-3)

Scissors (Emergency Surgery-1)

Stethoscope (ALSP-1)

- 5. Bandage as follows
 - 5.1 Cut two Telfa Pads from one side to center of Pad. Repeat with two Gauze Pads.
 - 5.2 Position object in center of Telfa Pads. Position Gauze Pad on top of Telfa Pads.
 - 5.3 Secure Pads, Gauze with Tape.
 - 5.4 Wrap Kling over dressing and around torso.
 - 5.5 Wrap and secure Kerlix Dressing around Kling Dressing.

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6. Use Stethoscope to listen to lungs. For equal breath sounds (in both lungs)

NOTE

Absence or decrease in breath sounds on one side may indicate lung collapse. Refer to {COLLAPSED LUNG/TENSION PENUMOTHORAX - EMERGENCY} (SODF: ISS MED: EMERGENCY).

7. Contact Surgeon.