



PEDIATRIC CHEST INJURIES



Escambia County, Florida - ALS/BLS Medical Protocol

This protocol covers both blunt and penetrating chest trauma and should be part of initial resuscitation if breathing is compromised.

Supportive Care

1. [Trauma Supportive Care Protocol](#).
2. Penetrating injuries to the chest or upper back should be covered immediately with an occlusive dressing (e.g. Vaseline gauze).
3. Do not attempt to remove an impaled object (stabilize with bulky dressing, etc.). If impaled object is very large or unwieldy, attempt to cut object to no less than six inches from chest.

ALS Level 1

1. For [tension-pneumothorax](#), with evidence of respiratory and circulatory compromise, decompress chest **on affected side**.
2. For massive flail chest with severe respiratory compromise, [intubate](#) and ventilate @ 20/minute for child and 30/minute for infan. If flail chest does not cause severe respiratory compromise, stabilize externally using ipsilateral arm in sling and swathe.
3. For crush injury, establish two large bore IVs. If crushing object is still on patient, infuse a minimum of 20 ml/kg of fluid before attempting to lift object off of patient.

ALS Level 2 (*Physician Authorization Required*)

None



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