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- I have no disclosures

Palomar Medical Center



Opened August 19, 2012



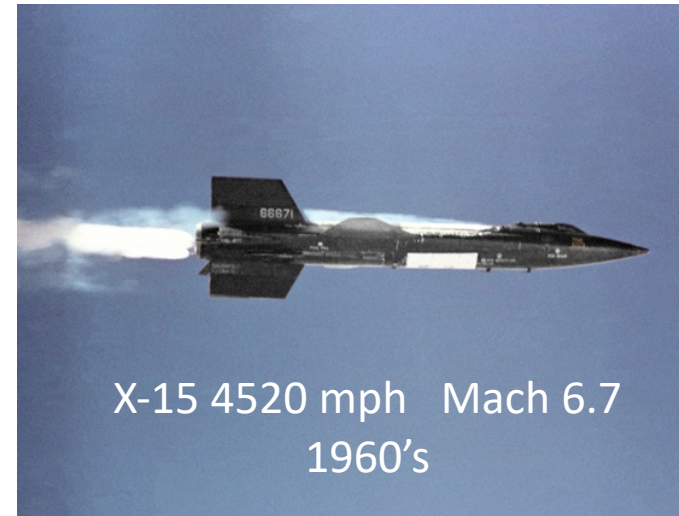
PALOMAR
HEALTH
SPECIALIZING IN YOU



push the envelope

phrase of envelope

1. *informal*
approach or extend the limits of what is possible.



The envelope here isn't the container for letters, but the mathematical envelope, which is defined as 'the locus of the ultimate intersections of consecutive curves'.

"The best known of the envelope cases is the 'flight envelope', which is in general use in this country and in the United States... The 'flight envelope' covers all probable conditions of symmetrical maneuvering flight."

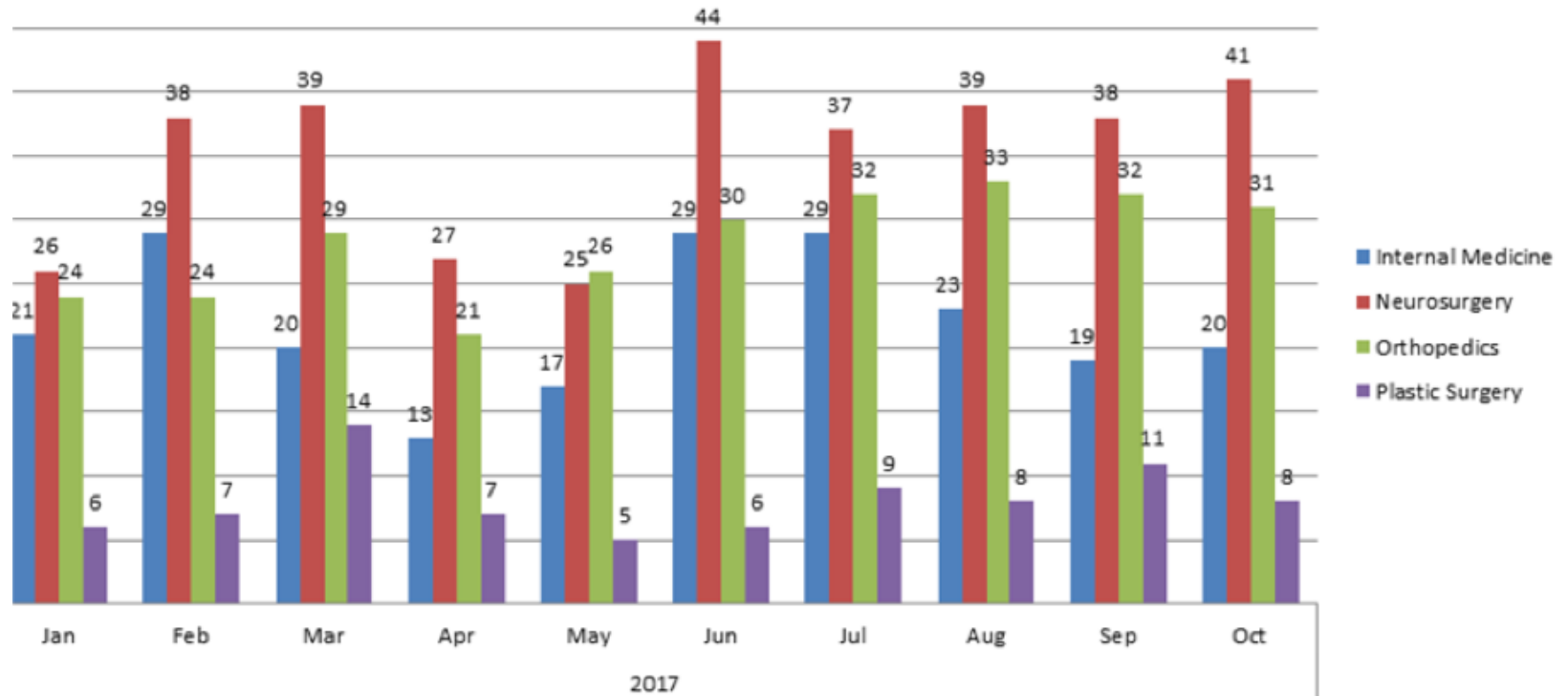


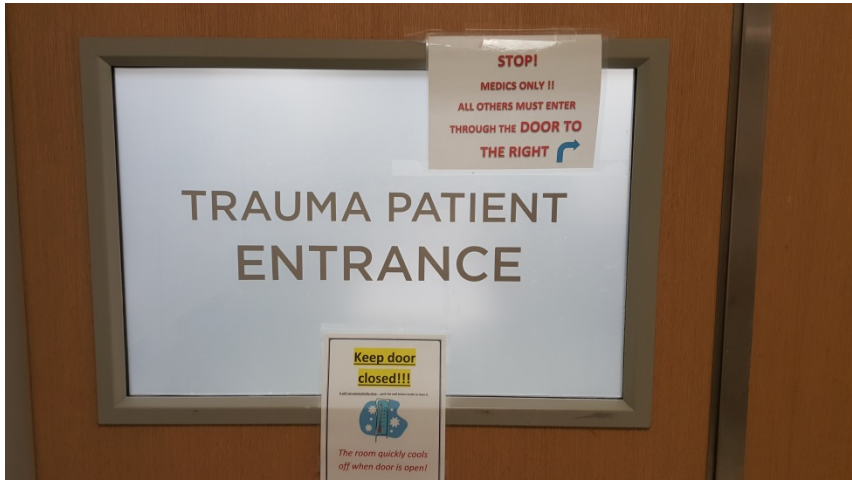
"In this laboratory we're always pushing the envelope to the Max."

Our Volume and Consult tendencies

Row Labels	Total Count	Percentage of Count
DC Dates from 01/01/17 to 10/31/17	1197	100.00%
Cardiology	34	2.84%
Cardiothoracic Surgery	7	0.58%
Critical Care	17	1.42%
ENT	4	0.33%
Family Medicine	2	0.17%
Infectious Disease	14	1.17%
* Internal Medicine	220	18.38%
Nephrology	18	1.50%
Neurology	43	3.59%
* Neurosurgery	354	29.57%
OB/GYN	6	0.50%
Oncology	1	0.08%
Ophthalmology	18	1.50%
* Orthopedics	282	23.56%
Other	8	0.67%
* Palliative Care	5	0.42%
Plastic Surgery	81	6.77%
Psychiatry	40	3.34%
Pulmonary	28	2.34%
Rehab Medicine	2	0.17%
Urology	11	0.92%
Vascular Surgery	2	0.17%
Grand Total	1197	100.00%

Top 4 Consult Groups for DC Dates 01-01-17 to 10-31-2017 Showing Actual Frequency







Coordinated efforts win the race



It takes a "Crew"



Mechanism of Injury—Age Groups

Top Five Trauma Mechanisms by Age Group					
Age	1	2	3	4	5
0 - 4	Falls	MV Traffic	Pedestrian	Struck By	Oth Trans
	205	36	26	19	4
5 - 14	Falls	MV Traffic	Pedestrian	Pedalcycle	Struck By
	203	96	67	59	44
15 - 24	MV Traffic	Motorcycle	Falls	Struck By	Stabbing
	608	322	321	246	165
25 - 34	MV Traffic	Motorcycle	Falls	Struck By	Stabbing
	467	313	287	234	155
35 - 44	Falls	MV Traffic	Motorcycle	Struck By	Stabbing
	278	241	159	133	88
45 - 54	Falls	MV Traffic	Motorcycle	Struck By	Pedalcycle
	449	244	175	171	104
55 - 64	Falls	MV Traffic	Pedalcycle	Struck By	Motorcycle
	630	241	104	102	97
65 - 74	Falls	MV Traffic	Pedalcycle	Pedestrian	Motorcycle
	603	146	55	49	44
75 - 84	Falls	MV Traffic	Pedestrian	Oth Trans	Pedalcycle
	797	94	34	22	15
85+	Falls	MV Traffic	Oth Trans	Pedestrian	Struck By
	931	47	19	13	10
Total	Falls	MV Traffic	Motorcycle	Struck By	Pedestrian
	4704	2220	1163	990	638

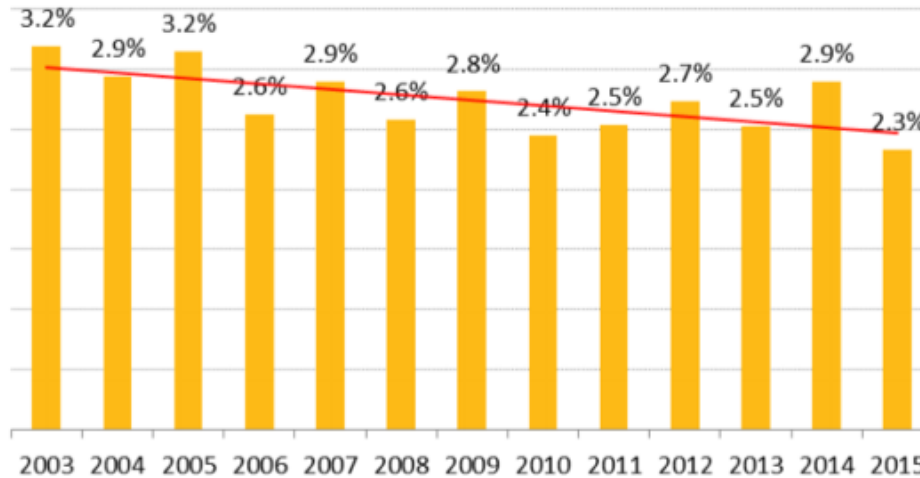
In 2015, falls accounted for 39% of all causes of injury in the San Diego County Trauma System. Additionally, falls are the number one cause of injury in each age group, other than those aged 15 to 34 years.

Source of all data: County of San Diego, Health and Human Services Agency, Emergency Medical Services, Trauma Registry, 2015.

Trauma System Overview
Mortality Rate Trends

Mortality rates have continually decreased as the San Diego County Trauma System has matured, and the 2015 mortality rate of 2.3% represents the best single year survival achievement in 30-year history of the system.

Mortality Rates, 2003 - 2015



Source of all data: County of San Diego, Health and Human Services Agency, Emergency Medical Services, Trauma Registry, 2015.

Challenges

- Non-engaged consultant
 - Too focused on their own area
 - Unwilling to “wait their turn”
 - Communicates poorly the “Plan”
 - Fails to follow the accepted standards for charting
 - Failure to do an immediate postop note
 - Writes orders without considering other issues
 - May use medications that are contraindicated (Lovenox)
 - Fails to provide follow up in the hospital and beyond

The Prime Directive

- “right patient to the right place at the right time”

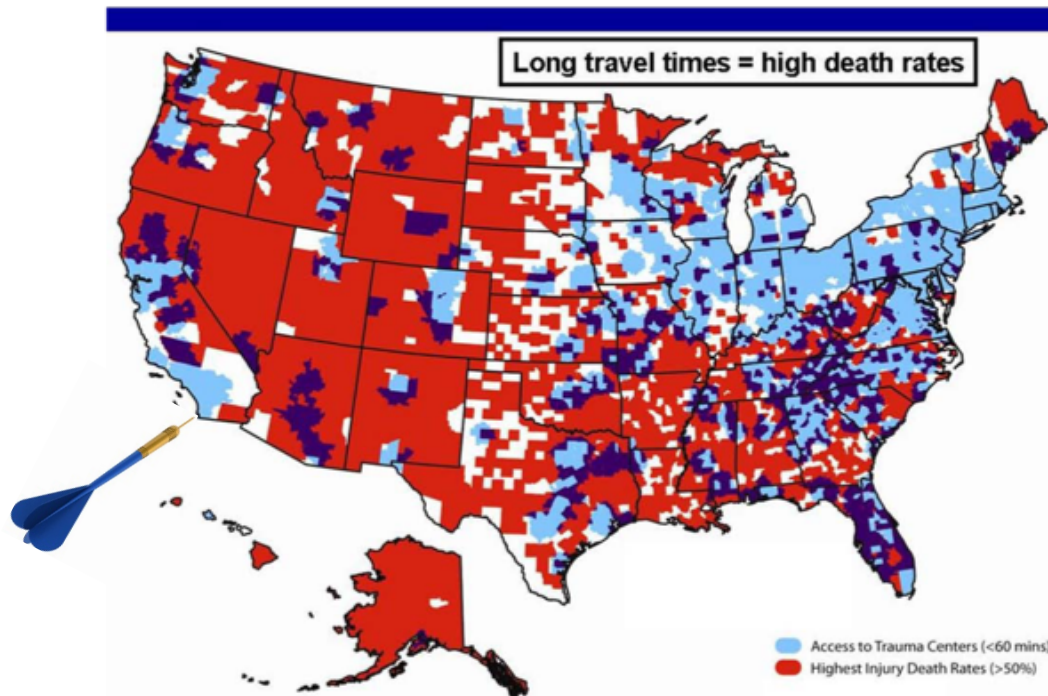


Figure 11. Access to trauma centers. (Courtesy of Charles Branas, PhD, Cartographic Modeling Laboratory, University of Pennsylvania, 2009).

The Worst must be First!

- We approach multiply injured patients with the ABC's because that is the sequence of deterioration; hypoxemia from an inadequate airway, hypoxemia from inadequate ventilation, exsanguination, intracranial compression.....
- There are commonly competing priorities
- The final disability is often reflective of how well the musculoskeletal injuries were managed acutely

What happens first, second, third?

- Young male, fall from a height, unconscious and hypotensive
- Intubated
- Good BS's, CXR rib fx's and contusion, ETT OK
- Hypotensive, O+ prbc's and MTP
- FAST +; Bilat femur fxs splinted
- OR within 15 min for splenectomy, responding to balanced resus
- GCS 3T, CT head postop with moderate findings

The answers

- Communication is Key
- Consideration of time requirements
- Consideration of consultant and OR availability
- Recognition that there may be more than one way to proceed