

STAB-5



Scene / safety

Ten Second Triage / full stab check

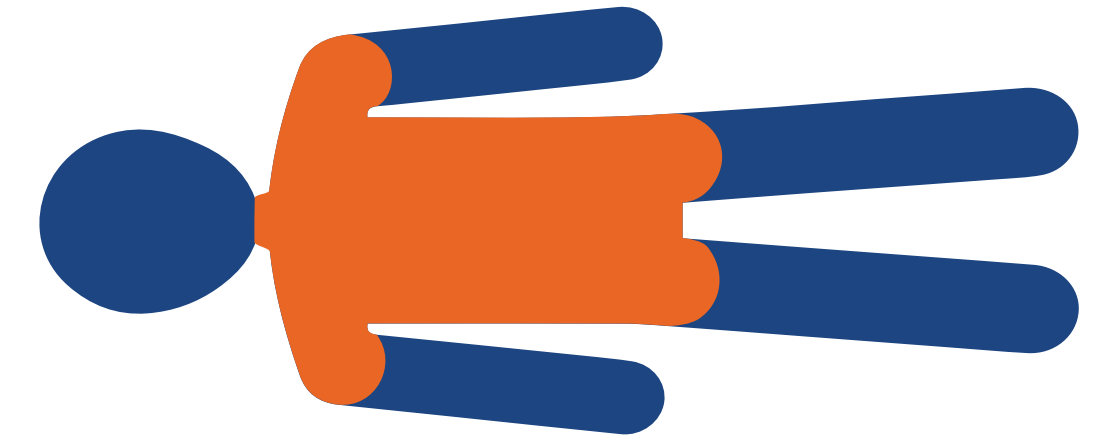
Assertive management

Bleeding control (major)

5 minutes max on scene



Penetrating injury Front or back



In a central stabbing prioritise:

- 1. Rapid catastrophic haemorrhage control**
 - Direct pressure
 - Haemostatic packing
 - Tourniquets
- 2. Early Critical Care request**
 - Can discuss via Channel **302**
 - But don't wait on scene - can RV
- 3. Scene time < 5 mins**
 - If the patient is ambulatory, let them walk to Ambulance.
 - If unable to walk, rapid but gentle handling onto the trolley either with scoop or multiple people assisting lift
 - At all times ask "What is stopping us leaving the scene?"
- 4. En route to hospital**
 - Early pre-alert, Obs, IV access, TXA, Analgesia
 - Bypass to nearest MTC, unless cardiac arrest appears imminent, in which case, divert to nearest Trauma Unit

Penetrating torso injury is a time critical situation. You will not be criticised for only documenting visual and palpable Obs en route.