

Trauma

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Rationale

Trauma is common. Physicians must be capable of assessing and treating patients with life-threatening traumatic injuries.

Causal Conditions

(list not exhaustive)

- Blunt trauma (e.g., blast injuries, deceleration injuries)
- Penetrating trauma (e.g., stabbing, shooting)

Key Objectives

Given a patient who has sustained trauma, the candidate will diagnose the cause, severity, and complications of the injury, and will initiate an appropriate management plan.

Enabling Objectives

Given a patient with trauma, the candidate will

- list and interpret critical clinical findings, including those derived from:
 - a. an appropriate history taken from patient or collateral;
 - b. an appropriate examination performed according to Advanced Trauma Life Support (ATLS) guidelines, completing primary and secondary surveys in order to ensure that all external evidence of injury is assessed;
- construct an effective initial management plan:
 - a. initiate resuscitation of the injured patient and assess the patient's response to resuscitation;

- b. prevent secondary injury of the injured patient (e.g., hypoxia, hypovolemia, spinal injury);
 - c. determine whether the patient needs to be referred for specialized care;
- list and interpret investigations useful in the management of the injury (e.g., imaging, electrocardiogram), keeping in mind that such tests should be deferred if the patient is unstable.