

Vascular injury

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Rationale

Vascular injuries are relatively common and may be limb, organ or life threatening.

Causal Conditions

(list not exhaustive)

- Penetrating trauma (e.g., laceration)
- Blunt trauma (e.g., contusion, spasm, compression)

Key Objectives

Given a patient with vascular injury, the candidate will diagnose the cause, severity and complications, and will initiate an appropriate management plan. In particular, the candidate will act quickly to ensure revascularization.

Enabling Objectives

Given a patient with potential vascular injury, the candidate will

- list and interpret critical clinical findings, including
 - a. history and physical examination data focused on vascular injury (e.g., acute limb ischemia, compartment syndrome);
 - b. consider blood loss that is not apparent on clinical examination (e.g., retroperitoneal hemorrhage);
- list and interpret critical investigations, including
 - a. assessment of pulses using Doppler probe, if appropriate;
 - b. imaging studies to assess vessel integrity, if appropriate;

- c. assessment of compartment pressure, if required;
- construct an effective initial management plan, including
 - a. initiate resuscitation assess the patient's response to resuscitation;
 - b. control external bleeding, if required;
 - c. ensure timely referral of the patient for specialized care, if required.