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Management Vasc Trauma

Management of Vascular Trauma. Paul R. G. Cunningham and Mary Cushman.

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Despite a nationwide

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55 mph speed limit, and amid rising interpersonal violence, vascular injuries exact a great toll in morbidity and mortality. The identification, anatomic diagnosis, and repair of civilian traumatic vascular injuries still present a challenge.

Management of Vascular Trauma

Any victim of trauma can be at risk for vascular injury and

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must be evaluated if the mechanism warrants a high suspicion 1,2,3
Vascular injuries to the extremities are relatively low (5%) in civilian populations but much more common in warfare conditions 1 , 2 , 3

Vascular Trauma of Extremities - Emergency Management

Management of

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peripheral vascular injuries with endovascular techniques has increased in frequency during the last decade as trauma surgeons have become more familiar with endovascular capabilities and operating rooms (ORs) have been adapted to permit endovascular interventions in acute trauma patients.

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Endovascular Management of Peripheral Vascular Trauma

The role of the vascular or trauma surgeon is to communicate the need for and treatment length of any medical management to the primary care physician as well as the planned follow-up intervals. Signs of treatment failure must be described to colleagues who will see these

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patients more frequently to prompt earlier follow-up or admission.

From Trauma to Treatment: Optimizing Vascular Trauma ...

Some common symptoms of vascular trauma are bleeding, bruising, and fractured bones. The experts in the UPMC Division of Vascular Surgery provide the latest

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treatments for vascular trauma, from minor injuries to emergencies. Vascular trauma can go away on its own, but severe instances may require surgery.

Vascular Trauma Symptoms and Treatment | UPMC Heart and ...

Endovascular techniques in trauma surgery are becoming increasingly important

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in patient
management.

Procedures such as pelvic and splenic angioembolization have become the standard of care for several conditions and an endovascular capability is considered essential for any hospital that manages major trauma.

**Safety and efficacy
of radial access in
trauma in 65 ...**

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The Society for Vascular Surgery® pursued development of clinical practice guidelines for the management of traumatic thoracic aortic injuries with thoracic endovascular aortic repair. In formulating clinical practice guidelines, the Society selected a panel of experts and conducted a systematic review and meta-analysis of the

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literature. They used
the Grading of
Recommendations
Assessment ...

Endovascular repair of traumatic thoracic aortic injury ...

J Vasc Surg. 2010; 51
(3): 565-571. Kasirajan
K, Heffernan D,
Langsfeld M. Acute
thoracic aortic trauma:
a comparison of
endoluminal stent
grafts with open repair
and nonoperative

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management. Ann
Vasc Surg. 2003; 17
(6): 589-595. Kauvar
DS, White JM, Johnson
CA, Jones WT,
Rasmussen TE, Clouse
WD.

Blunt Aortic Injury, Evaluation and Management of ...

The Eastern
Association for the
Surgery of Trauma's,
"Utilizing Evidence
Based Outcome
Measures to Develop

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Practice Management Guidelines: A Primer” was used as the quality assessment instrument applied in the development of this protocol. [5]

Blunt Cerebrovascular Injury - Practice Management Guideline

All patients underwent full physical examination and resuscitation according

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to the principles of the advanced trauma and life support guidelines of trauma management.

Depending on the mode of presentation, patients were either taken immediately to the operating room for vascular or orthopedic/vascular management or were assessed by preoperative computed tomography (CT) angiography.

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Management of Vascular Trauma: A Single Center Experience ...

Traumatic vascular injury is caused by explosions and projectiles (bullets and shrapnel); it may affect the arteries and veins of the limbs, and is common in wartime, triggering bleeding, and ischemia. The increasing use of high-energy weapons in

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modern warfare is associated with severe vascular injuries.

Diagnosis and treatment of traumatic vascular injury of ...

Further management of spinal trauma Give analgesia for pain e.g. morphine 1-10 mg IV For agitated patients who are unable to cope with immobilisation, every effort should be made to relieve the

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cause of agitation e.g.
analgesia for pain;
sedation with or
without intubation and
ventilation may be
necessary

Spinal trauma - Imaging and management - Oxford Medical ...

Management of
vascular injuries,
especially when they
occur in combination
with fractures, soft
tissue loss, and nerve

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damage, is extremely challenging. Successful approach requires setting clear priorities, a logical plan of interventions, and close coordination between various subspecialty services.

Management of Lower Extremity Vascular Trauma | SpringerLink

Management of vascular trauma begins with the initial triage,

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evaluation, and resuscitation of the trauma patient. Appropriate attention must be paid to the airway, ventilation, and external hemorrhage control, and circulating blood volume should be restored.

Management of Civilian and Military Vascular Trauma ...

Background. According to the surgical and trauma literature,

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prompt repair of arterial injuries to the extremities improves outcome in terms of limb function and mortality related to blood loss (, 1-, 4). Conventional arteriography was developed in the 1970s, allowing for accurate diagnosis of arterial injury with a less invasive procedure than open surgical exploration of the vessels.

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Diagnosing Traumatic Arterial Injury in the Extremities ...

Evaluation and
Management of Blunt
Solid Organ Trauma
Trauma is a leading
cause of death in
patients under the age
of 45 and generally
associated with a high
kinetic energy event
such as a motor
vehicle accident or fall
from extreme

Download Free Management Vasc Trauma elevations.

Evaluation and Management of Blunt Solid Organ Trauma

MANAGEMENT

ADJUVANT

TECHNIQUES FOR LIMB

SALVAGE •

Intraluminal shunts

during orthopaedic

stabilization •

Extraanatomic bypass

around associated soft

tissue injury •

Intraarterial

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vasodilators, such as papaverine or tolazoline, to reverse spasm • Intravenous low molecular weight dextran, 500 mL every 12 hours

REASONS FOR DIAGNOSTIC STUDIES

Do not apply clamps or hemostats to vascular structures, since this may make definitive repair more difficult and damage

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surrounding tissues. A vascular surgeon must be consulted whenever a major...

Peripheral Vascular Injury Management in the Emergency ...

Patients with blunt thoracic trauma within the highest injury severity score (ISS) range (61-75) had a significant survival advantage when observation was compared with

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endovascular
management ($P < .05$).
In the carotid trauma
cohort, those with the
highest ISS range
(61-75) had a
significant survival
advantage with open
surgery compared with
...

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