

BTF guidelines: DVT prophylaxis

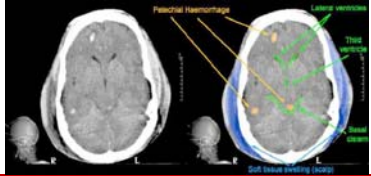
- LMWH or low-dose unfractionated heparin may be used in combination with mechanical prophylaxis. However, there is an increased risk for expansion of intracranial hemorrhage.
- In addition to compression stockings, pharmacologic prophylaxis may be considered if the brain injury is stable and the benefit is considered to outweigh the risk of increased intracranial hemorrhage.
- There is insufficient evidence to support recommendations regarding the preferred agent, dose, or timing of pharmacologic prophylaxis for deep vein thrombosis.

Case #3: Surgery in setting of TBI

11 year old boy pedestrian struck.

- GCS 10: eyes open to pain(2) inappropriate words(3) localizes pain(5)
- HR 130, ABP 145/95, R 45 S_pO₂ 95% NRB
- Rib fractures on CXR
- CT shown

Admitted to the ICU for observation

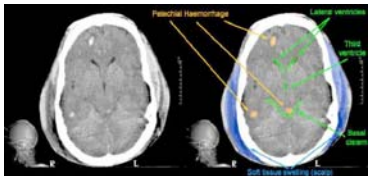


Case #3: Surgery in setting of TBI

11 year old boy pedestrian struck.

- Overnight his GCS fluctuates from 7 to 12, agitated and combative
- CXR in AM shows massive pleural effusion and mediastinal shift
- HR: 125; ABP 95/45; R 45; S_pO₂ 90% NRB

Posted for thoracotomy/hematoma evacuation



How would you rank the effectiveness of the following recommendations?

Place a chest tube at the bedside with local anesthetic and fentanyl

Provide standard general anesthesia with ETT

Provide general anesthesia with ETT after placement of an ICP monitor

Provide general anesthesia with ETT using rapidly reversible agents (remifentanyl)

What concern about this patient most influenced your decision?

Summary

- Wear a helmet when skiing