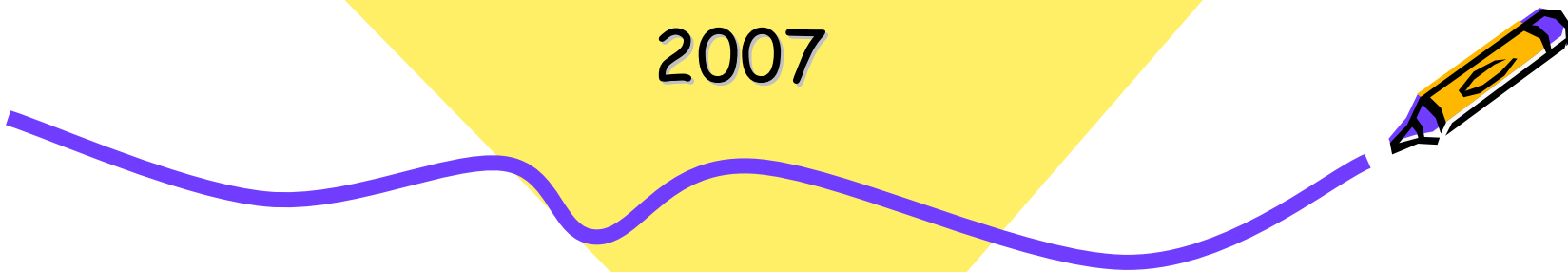




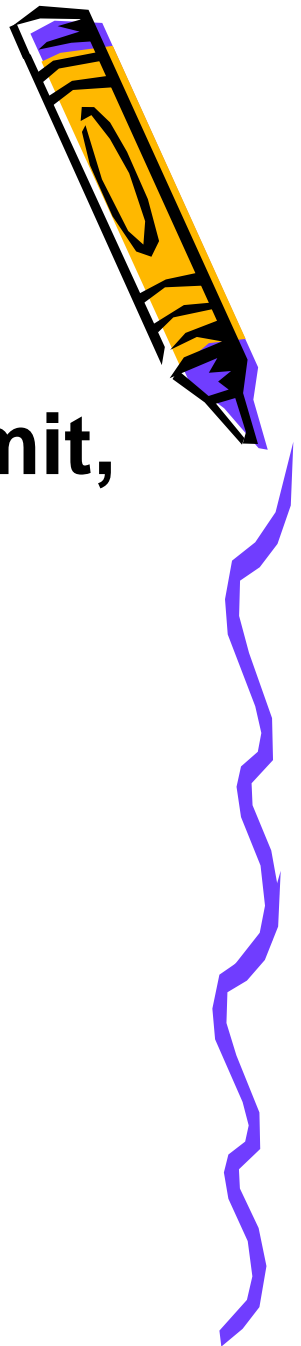
B.L.S. EXTRA ABCDE APPROACH

ROSIE DOOGAN
2007



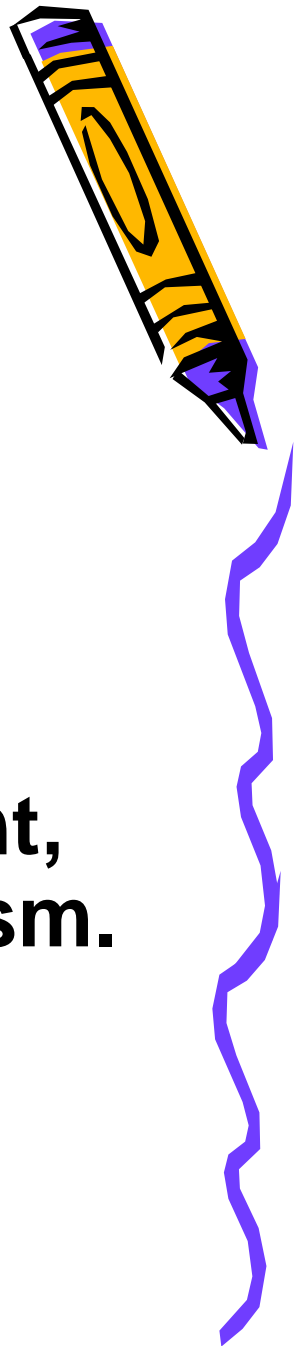
A=AIRWAY

- **Obstruction – Upper: Tongue, Vomit, Secretions, Blood, Gastric Fluid, Swelling**
- **Lower: laryngeal Oedema-Burns, inflammation, Allergy.**



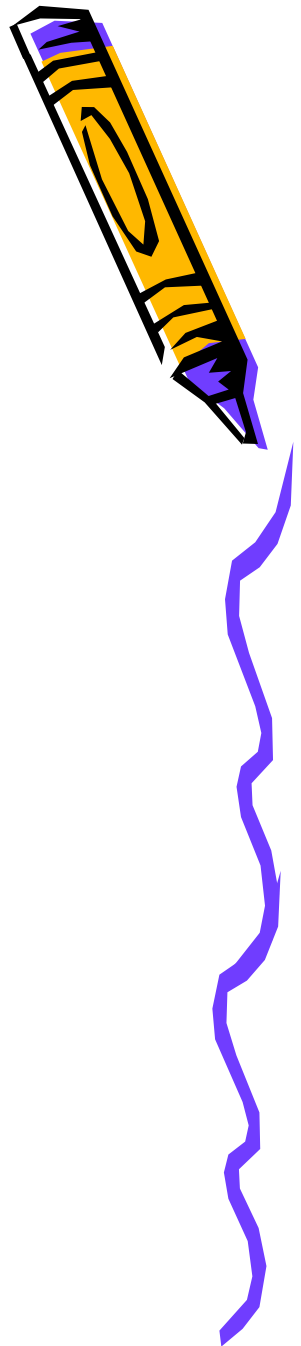
A=AIRWAY

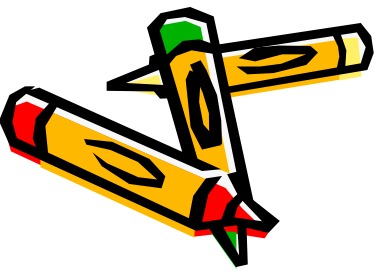
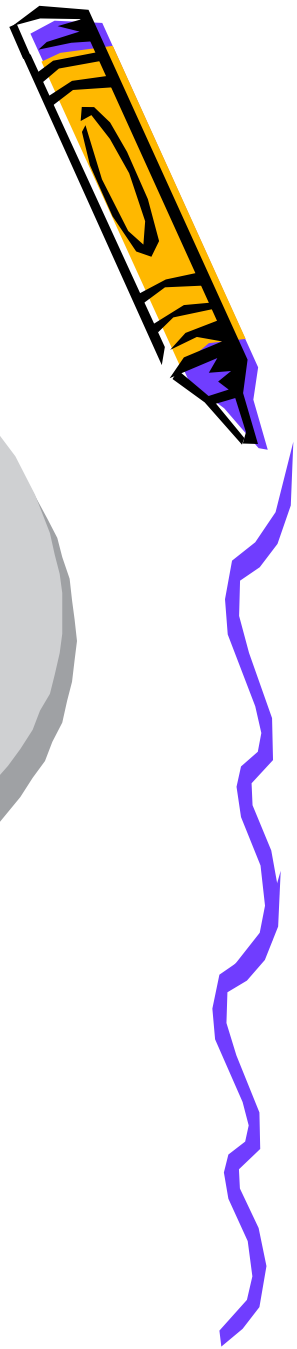
- **Laryngeal Spasm- Foreign Body, Airway Stimulation, Secretions, Blood.**
- **Trache-obronchial Obstruction: Secretions, inhaled gastric content, Pulmonary Oedema, Bronchospasm.**
- **CNS Depression**
- **Trauma**



AIRWAY

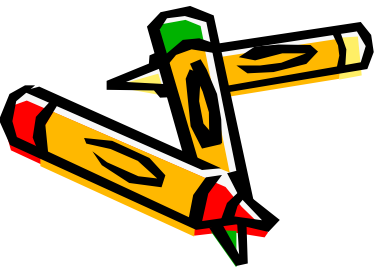
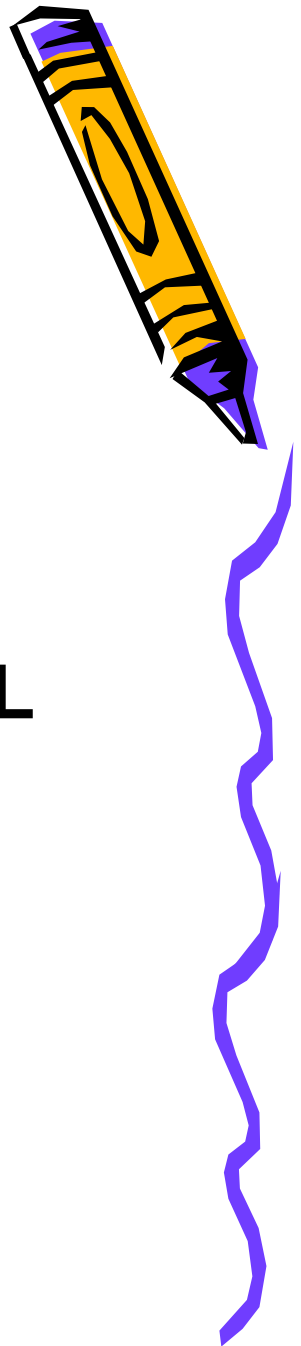
- PATENT
- CAN THEY MAINTAIN THEIR AIRWAY
- NOISES
- SEE-SAWING
- 3 THINGS
- SAFE
- AT RISK
- BLOCKED





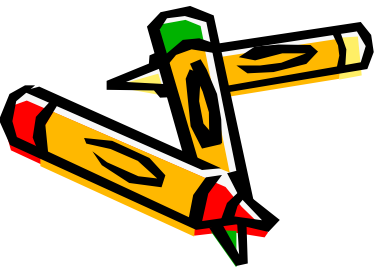
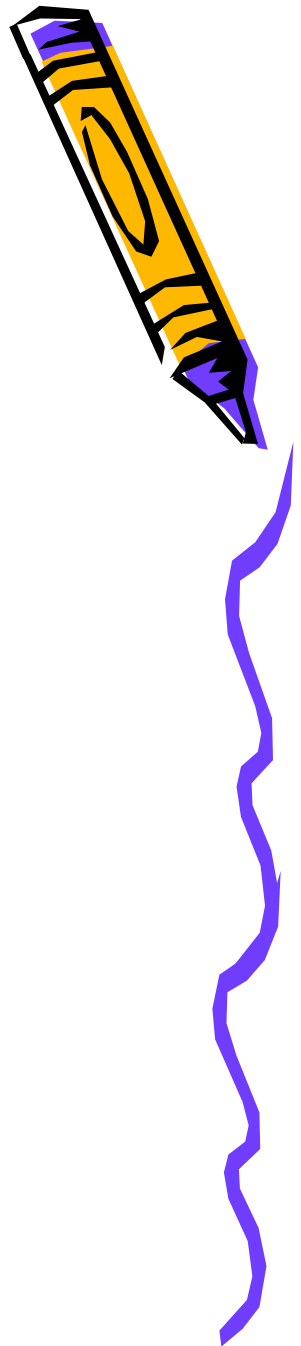
MANAGEMENT OF AIRWAY

- SUCTION
- CHIN LIFT/ HEAD TILT
- JAW THRUST
- OROPHARYNGEAL AIRWAY – GUEDEL
- NASOPHARYNGEAL AIRWAY
- TRACHEAL INTUBATION
- BVM
- OXYGEN



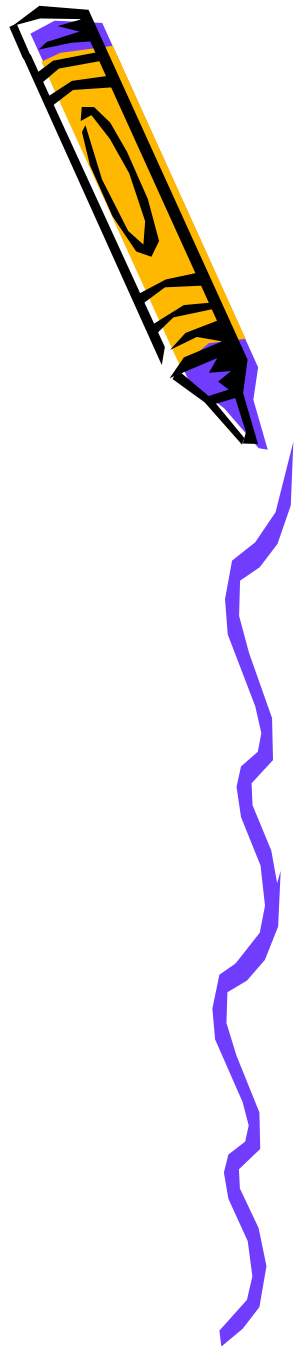
BREATHING LOOK

- SWEATING
- CENTRAL CYANOSIS
- ACCESSORY MUSCLES
- ABDOMINAL BREATHING
- DEPTH OF BREATH
- EQUALITY OF CHEST MOVEMENTS
- RATE AND RHYTHM



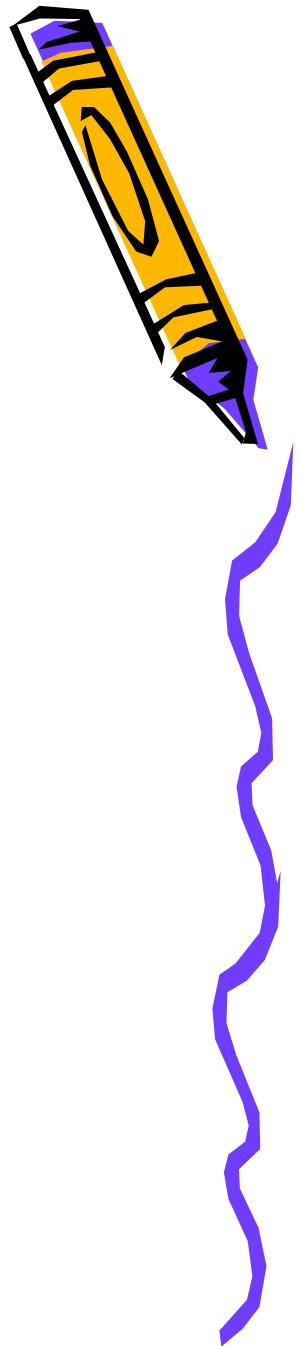
BREATHING LOOK

- CHEST DEFORMITY
- RAISED JVP- ASTHMA TENSION
PNEUMOTHORAX
- CHEST DRAIN ? PATENT
- ABDOMINAL DISTENTION LIMITS
DIAPHRAGM MOVEMENTS



BREATHING: LISTEN

- RATTLING
- STIDOR/WHEEZE
- AUSCULTATION
- QUALITY OF BREATH SOUND
- BRONCHIAL BREATHING
- ABSENT/REDUCED SOUNDS

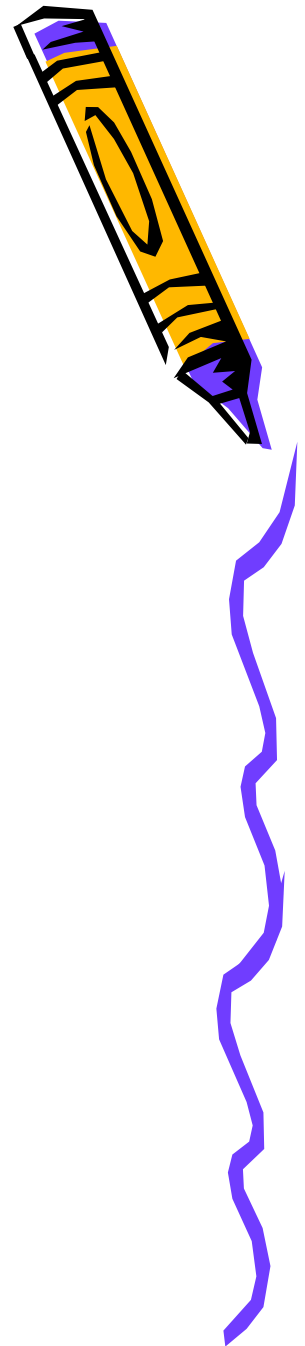


BREATHING - FEEL

- POSITION OF TRACHEA ?
MEDIASTINAL SHIFT SURGICAL
EMPHYSEMA
- PRECUSSION: HYPER-
RESONANCE, PNEUMOTHORAX,
DULLNESS-CONSOLIDATION OR
PLEURAL FLUID

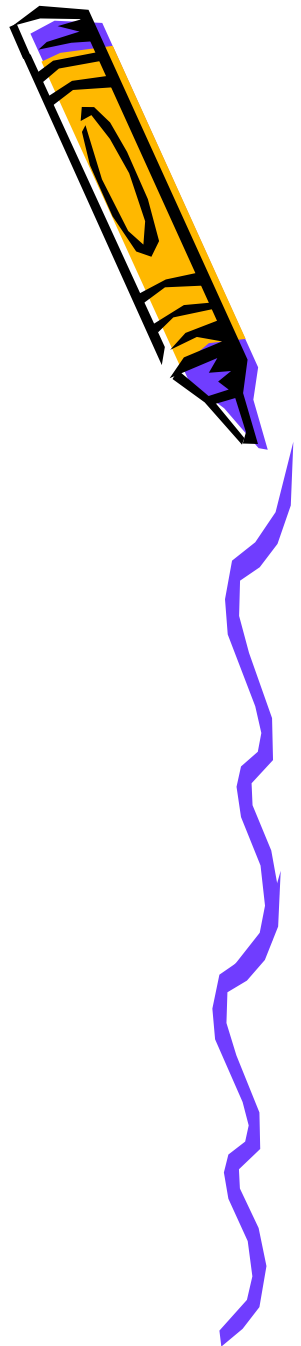
- 3 THINGS

- RATE RHYTHM QUALITY



MANAGEMENT OF BREATHING

- POSITIONING
- HIGH FLOW OXYGEN 12-15litres
- PHYSIO
- NEBULISERS
- CHEST DRAIN
- BVM
- COPD- WEAN OFF



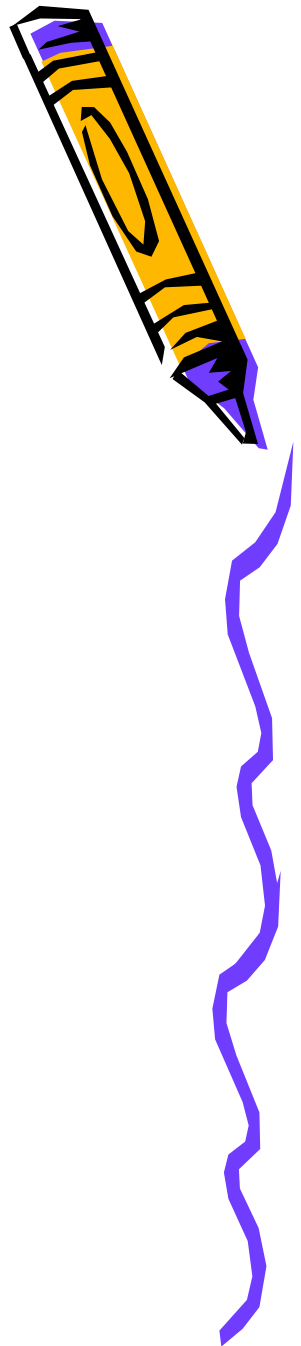
CIRCULATION LOOK

- **CARDIOVASCULAR COMPROMISE**
- **CAPILLARY REFIL**
- **POOR PERIPHERAL CIRCULATION**
- **OLIGURIA**
- **WOUNDS/DRAIN/GUT**
- **TEMPERATURE**



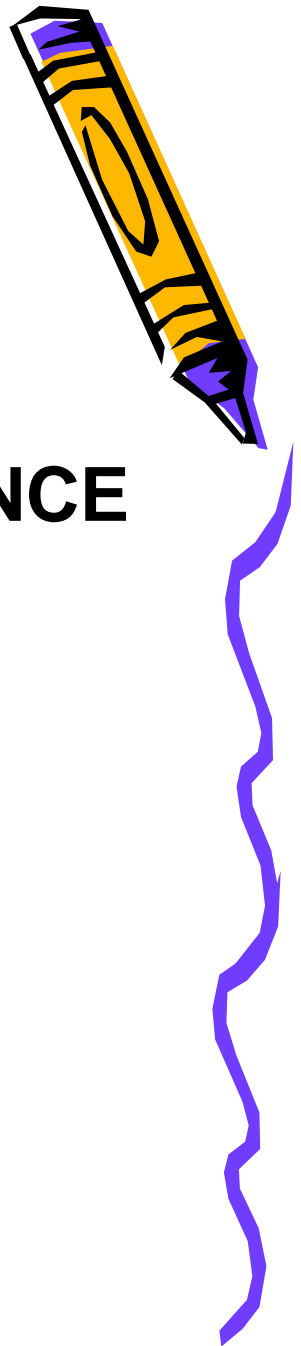
CIRCULATION LISTEN

- NORMAL BP
- LOW DIASTOLIC
- NARROWED PULSE PRESENT
- MANUAL BP



CIRCULATION FEEL

- PALPATION OF PERIPHERAL AND CENTRAL PULSE TO ASSESS PRESENCE
- RATE
- QUALITY
- REGULARITY
- EQUALITY
- THRADY
- BOUNDING



CIRCULATION

- BLOOD PRESSURE MAY BE NORMAL EVEN IN THE PRESENCE OF SHOCK
- 3 THINGS
- BP PULSE CAPILLARY REFIL



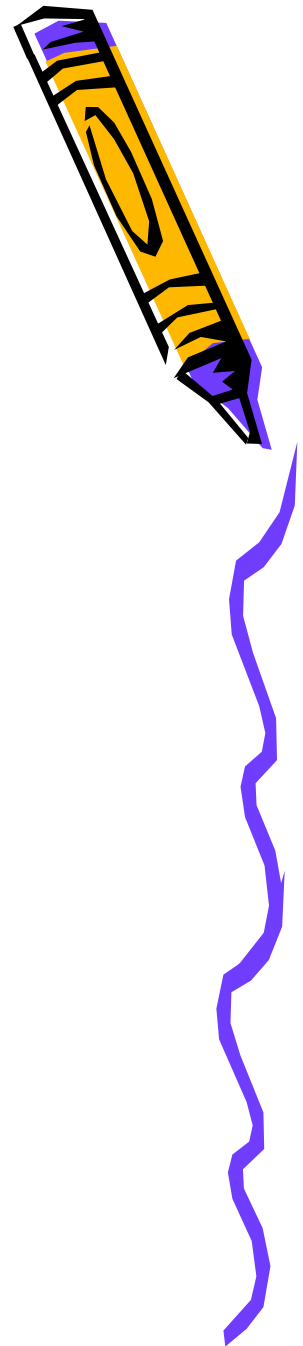
MANAGEMENT OF CIRCULATION

- FLUID REPLACEMENT
- HAEMORRHAGE CONTROL
- RESTORATION OF TISSUE PERFUSION
- 1V ACCESS
- 500MLS IV SALINE OVER 5-10mins
- 250MLS SALINE IF IN CARDIAC FAILURE
- REASSESS EVERY 5mins



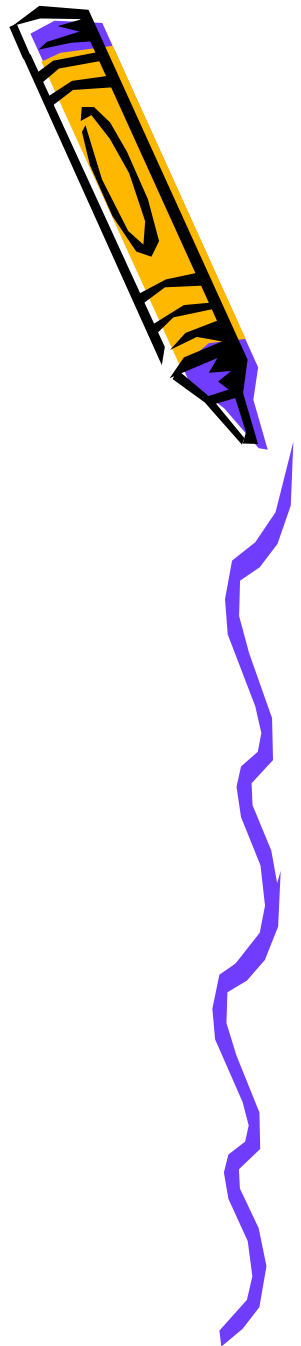
DISABILITY NEUROLOGICAL AVPU

- **A – ALERT**
- **V – VOICE**
- **P – PAIN**
- **U – UNRESPONSIVE**
- **BM STICK**
- **PUPIL REACTION**



CAUSES OF UNCONSCIOUSNESS

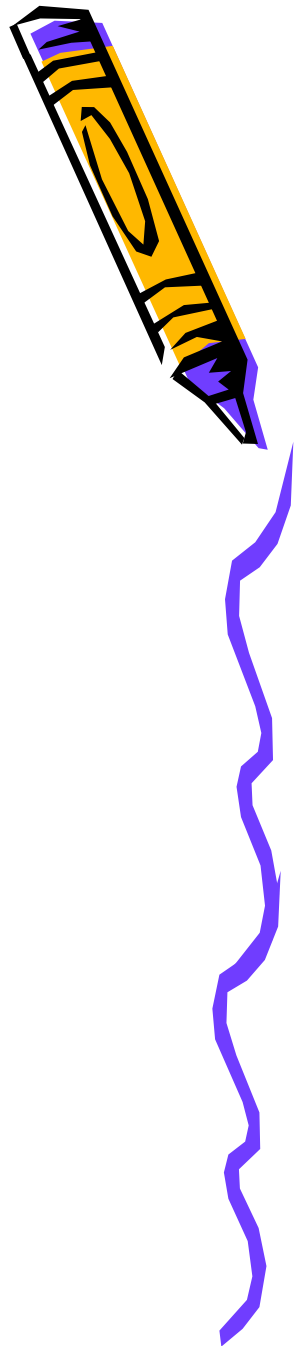
- HYPOXAEMIA, HYPERCAPNIA
- CERBRAL HYPOFUSION
- DRUGS
- BRAIN COMPRESSION LESION
- EPILEPSY
- INFECTION
- 3 THINGS
- AVPU, PUPILS, BLOOD SUGAR



DIABILTY TREATMENT

- RECOVERY POSTION MAINTAIN AIRWAY
- BM <3 mmols 500mls IV 50% GLUCOSE
- BLOOD BRAIN BARRIER – 90 SYSTOLIC
- CT SCAN

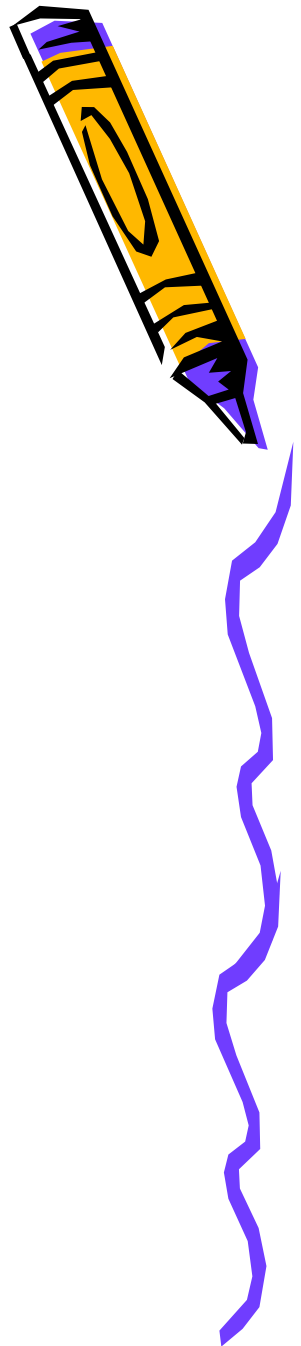
NEUROLOGIST



EXPOSURE - EXAMINATION

- **3 THINGS**
- **BLOOD LOSS**
- **FLUID DRAINAGE**
- **ABDOMINAL DISTENTION**

- **ALSO RASHES AND CALF SWELLING**



ABCDE



- **REMEMBER!**
- DO NOT GO ON TO THE NEXT ASSESSMENT UNTIL YOU HAVE SORTED OUT THE PROBLEM BEFORE.

