

PENETRATING OR BLUNT INJURIES OF NECK

BLUNT INJURY:

1. Administer high flow O₂.
2. Take spinal precautions.
3. Establish a large bore IV of NS at TKO rate, unless shock is present.
4. If shock is present, run fluids wide open and titrate to maintain a systolic BP of 90.
5. If stridor is present, consider ET intubation or **needle cricothyrotomy**.

PENETRATING INJURY:

1. Administer high flow O₂.
2. Take spinal precautions that will still allow for appropriate treatment of the wound.
3. Establish a large bore IV of NS at TKO rate, unless shock is present.
4. If shock is present, run fluids wide open and titrate to maintain a systolic BP of 90.
5. If stridor is present, consider ET intubation or needle cricothyrotomy.
6. Apply an occlusive dressing.
7. Control the blood loss by using a dressing and gloved fingers to apply direct pressure to the source of bleeding.
8. Transport patient with head down, if possible.