THE POSSIBILITY OF USING FAST PROTOCOL IN CASES OF MULTIPLE TRAUMA BASED ON THE EXPERIENCE OF TERNOPIL UNIVERSITY HOSPITAL

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Patients with trauma often arrive in critical condition and unconscious. Clinical examination cannot exclude traumatic injuries of the abdominal cavity and chest. Despite the low sensitivity of ultrasonography in diagnosing injuries at trauma, it has a relatively high sensitivity of indirect confirmation of internal organs damage. The purpose of the study. To prove the possibility of applying FAST protocol (Focused Assessment with Sonography for Trauma) for sorting out multiple trauma patients.

During the years 2011-2015 in the ultrasound diagnostics department there were conducted FAST studies of 56 patients with damage of the spleen, liver, abdominal cavity trauma.

Patients with unstable hemodynamics and positive FAST were immediately sent to the operating room for emergency laparotomy and were regarded as severe cases - "red". Patients with questionable FAST were classified as "yellow" and were subject to follow-up observation in dynamics and repeated study in 2 hours. With an increase of symptomatology they were classified as "red" and subject to laparotomy.

Conclusion. The clinical value of positive FAST research of patients with multiple trauma is that it provides possibility to quickly sort out patients, requiring urgent surgical interference at unstable hemodynamics. This is especially important in the cases of mass trauma, such as traffic accidents.

If the result of FAST protocol in patient with unstable hemodynamics is negative but there is clinical suspicion on internal bleeding, then after stabilizing the patient's condition it is needed to immediately begin CT scans and other diagnostic tests for determining the sources of damage. If condition of the patient remains unstable despite intensive therapeutic measures conducted then the patient is subjected to immediate laparotomy without CT scans study.