

# Airway – Case 1

## Instructor Information

This skill station involves a skier who lost control while skiing. The patient's LOC is altered and he requires airway management and rapid transport. Follow the written scenario, and provide information to all team members as the scenario progresses or as the team members ask.

## Patient Information

**Moulage:** Pale and diaphoretic, cyanotic lips and nails, multiple body abrasions, blood at mouth  
**Position:** Laying on his side in a basket stretcher  
**Actions:** Eyes open to pain, incoherent moaning, and withdraws from pain

## Dispatch Information

You and your partner are called to a local ski resort for a skiing accident in a remote section of your response area. It is noontime in late winter, clear sky with 17°F (-8°C). The closest hospital with an emergency department is 40 minutes away by ground; the closest level I trauma center is a 60-minute ride by ground or 15 minutes by air ambulance.

## Scene Assessment/General impression

Resort staff direct you to the first aid building. There you find three members of the ski patrol and the patient's wife. The ski patrol packaged the patient and moved him to the aid station at the base of the hill. No interventions have occurred. The ski patrol reports the patient lost control and tumbled into trees. They arrived 5 minutes after the accident and his condition has not changed. The accident happened 20 minutes ago.

## Primary Survey

31-year-old male, approximately 270 lb (122 kg); patient dressed in heavy winter clothing and ski boots

- X:** No major external hemorrhage
- A:** Partially obstructed—gurgling
- B:** Rapid and shallow
- C:** Fast radial pulse, skin pale and clammy
- D:** 8 (E-2, V-2, M-4), PERRLA, moves all four extremities
- E:** Various small abrasions on hands, knees where the ski suit ripped, blood at mouth

## Treatments/Critical Actions

**\*Note:** ★ icon indicates a Critical Action

- Spinal motion restriction ★
- Manual opening of the airway with suctioning of the oropharynx ★
- Insert NPA and assist ventilations with high-flow oxygen and bag mask ★
- Rapid transport to trauma center, request air medical transport ★
- Maintain body heat

**Initial Patient Impression:** Critical/Rapid Transport

## Secondary Survey

Initial Vital Signs	
BP:	112/72 (MAP 85)
P:	140, weak
R:	32, shallow; lung sounds equal bilaterally
Skin:	Pale, cool, clammy
SpO <sub>2</sub> :	86%/RA; 94%/O <sub>2</sub>
CCS:	8 (E-2, V-2, M-4)
Glucose:	90 mg/dl (5 mmol/l)
ETCO <sub>2</sub> :	38 mm Hg
Pain:	Unable to obtain
Temp:	98.8°F (37.1°C)

Critical actions done		Critical actions NOT done	
BP:	126/74 (MAP 91)	BP:	92/60 (MAP 71)
P:	130, weak	P:	150, weak, rapid, irregular
R:	20, assisted	R:	8, irregular
Skin:	Pale, cool, clammy	Skin:	Cyanosed, cool, clammy
Spo <sub>2</sub> :	94%/O <sub>2</sub>	Spo <sub>2</sub> :	90%/O <sub>2</sub>
GCS:	8 (E-2, V-2, M-4)	GCS:	4 (E-1, V-1, M-3)
Glucose:	90 mg/dl (5 mmol/l)	Glucose:	90 mg/dl (5 mmol/l)
ETCO <sub>2</sub> :	38 mm Hg	ETCO <sub>2</sub> :	60 mm Hg
Pain:	Unable to obtain	Pain:	Unable to obtain
Temp:	98.8°F (37.1°C)	Temp:	98.8°F (37.1°C)

Signs/symptoms:	Reduced LOC
Allergies:	Penicillin (per wife)
Medications:	None
Past medical history:	Back surgery 8 years ago (per wife)
Last oral intake:	Breakfast, 3 hours ago
Event leading to incident:	Skiing

Head:	Obvious deformity and bleeding from jaw
Neck:	Unremarkable
Chest:	Equal, bilateral breath sounds and shallow
Abdomen:	Soft, nontender
Pelvis:	Stable
Extremities:	Abrasion of hands and knees, scant bleeding
Back:	Unremarkable

Transport Timing: Emergent/Rapid transport  
Destination: Trauma center

- What are the methods to maintain airway?
- Are there any perceived complications with the cold winter gear the patient is wearing?