A Battle Between Life And Death

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Abstract
Sir,

A patient, who was a worker of medufushi island resort, a 30 years old male was brought to the mulee regional hospitals with a history of being hit by a sharp wheel, which was a part of cutting machine that used to cut a iron plate. The incident took place at about 2pm on 19/12/08, and reported to the hospital at about 3pm, on the same day, he was received at tracer from ambulance and taken to the ER, by the anesthetist, and quick history from attendant, survey of ABCDE done along with primary and secondary survey of wound, initially his GCS was about 13/15, BP vitals were stable and pupil was 1+, h/o vomiting but no LOC, Inj TT, Antiemetics (Ondansatrone) and H2 inhibitors, diclofenac inj were given, surgeon was called and seen the case, the wound was 10cm obliquely placed over left temporomandibular region, laceration, brain deep, bleeds severely, compound in nature, brain matter was seen coming out in lumps, allowing no resistance and about 2 fingers inside the cranium, there was also laceration below lower eyelid, B/L periorbital ecchymosis seen, Surgeon treated with wound irrigation, debridement, haemostasis, approximation of skins, other wound sutured in layers, In the mean time his pupil becomes N/R to light, dilated, GCS falls to E1V3M2, BP falls, Spo2 starts falling, Fluid resuscitation started with large bore cannula in both hand, Dopamine was started at usual dose, Foley’s catheterization done, oxygen through mask started at 8l/min, and patient was brought to ICU by anesthetist, in the ICU GCS falls to E1V2M1, AND Spo2 starts falling below 85, intubation done immediately under Direct laryngoscopy and was connected ventilator at VC mode at TV 500ML RR 16/MIN MV 8.0, Patients Spo2 improves to 100, pt shows some fighting with ventilator and BP stabilized, Blood transfusion A-ve started and Midazolam IV given titrating to pts response. In the mean time D/W neurosurgeon IGMH was going on, transportation arranged, patient was transported with Monitor, Oxygen, on ambu bagging by 4 hour sea journey to IGMH safely with accompanying doctor as well as sisters from mulee regional hospitals and case was handed over to neurosurgeon and critical care team there.

References