## From Revved Up to Banged Up

approximan, mately 60 years old, is brought to your facility as a trauma code following a vehicular accident. He was riding a motorcycle when he crashed into another vehicle and was thrown off. Emergency medical personnel report that the patient has obvious head, facial, and extremity trauma. Due to decreased level of consciousness, he was intubated en route. History is otherwise unknown.

Upon arrival, he has two large-bore IVs in

place, with fluids going wide open. Despite that, his systolic blood pressure is 90 mm Hg and his heart rate is in the range of 150-160 beats/min. The massive transfusion protocol has been initiated to aid in the aggres-



sive resuscitation efforts.

Portable radiographs of the chest and pelvis are obtained; the latter is shown. What is your impression?

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## **ANSWER**

There is significant diastasis of the pubic symphysis, measuring nearly 4 cm. No obvious fractures of the hip or pelvis are seen, but there is malalignment of the rami. There is also evidence of a proximal right femur fracture, although this area is not fully imaged.

Such radiographic findings are typically referred to as an open book pelvic fracture. Usually the result of a shear in-

jury, these fractures are not uncommon and carry an increased risk for pelvic vascular injury.

Emergent orthopedic and vascular con-



sults were obtained, and the patient was placed in a pelvic binder to help reduce the distraction and tamponade any potential vascular injuries.