Traumatic Aortic Injury Evaluation (TAI)

Trauma Patient/ Mechanism of Injury
- MVC, MCC, ATV > 30 mph
- Falls > 20 ft
- Pedestrian vs. Auto

Wide Mediastinum
Apical pleural cap
Loss of aortic knob contour
M/P ratio > 0.6
Deviation of left mainstem bronchus
Opacification of aorto-pulmonary window

Portable CXR

Hemodynamically STABLE
- CT scan of chest with aortic protocol
- Immediate reading

Negative

Positive hemodynamically STABLE
Evaluation for endovascular repair

Medical Management
- SICU admission
- Arterial and central lines
- Type and cross 4u pRBC
- Esmolol drip (keep MAP 70 mmHg)
- Minimize IV fluids
- Consult Vascular
- SCD’s
- Foley

Positive hemodynamically UNSTABLE

Massive hemothorax Hemodynamically UNSTABLE

OR for immediate OR thoracotomy
Request cardiac OR and pump team
Consider CVT Surgery (per trauma attending discretion)
Initiate massive transfusion protocol

(Revision 02/23/2010)