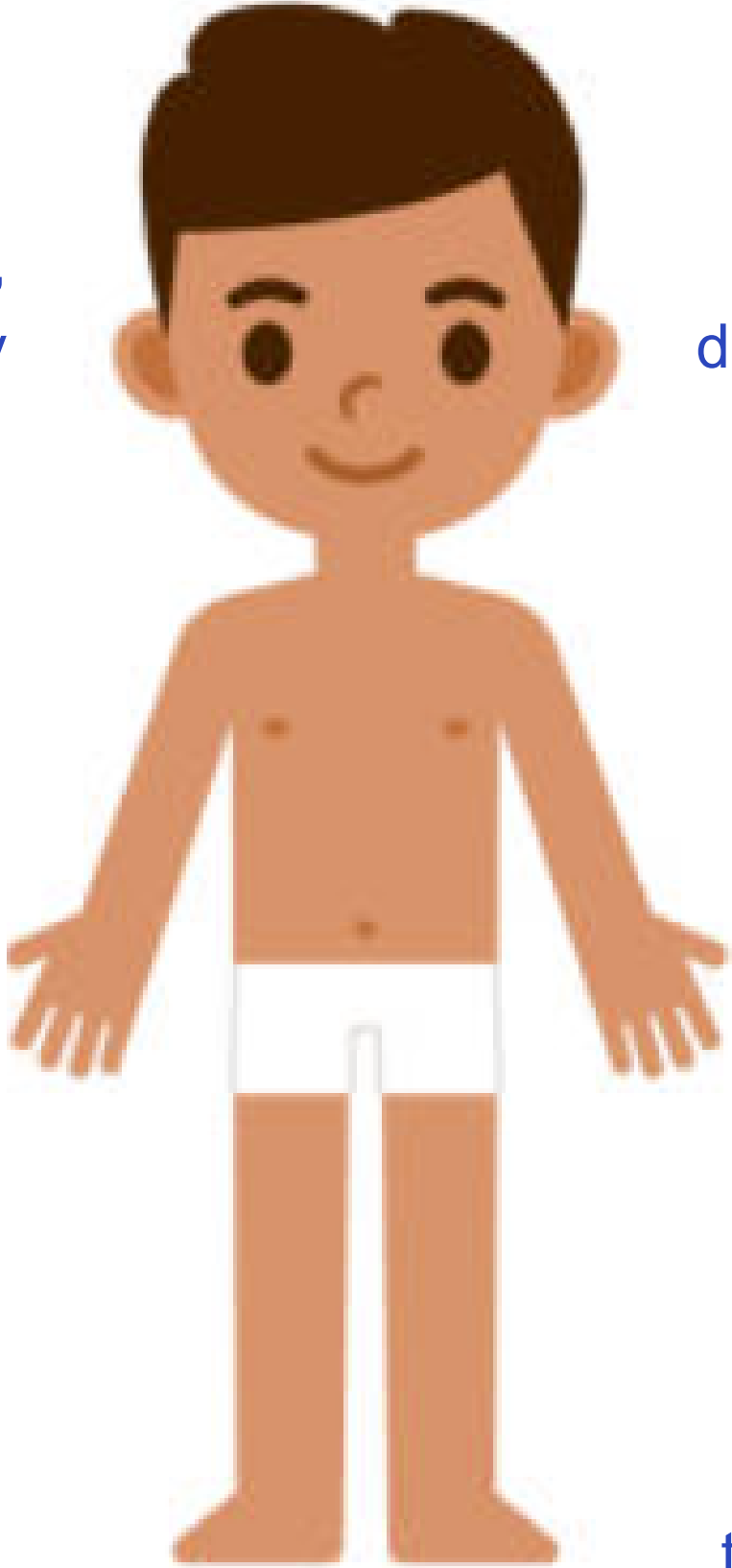


Does your paediatric patient have any of the injuries below?

All Brain and Skull Injuries



Thoracic injuries:
including inhalation injury,
asphyxia with brain injury

Spinal injury:
cord, fractures,
dislocation, nerve root

Vessel injury:
cranial, facial, neck,
thoracic, abdominal,
major disruption to
any other vessel

Abdominal injury:
spleen, liver, kidney,
pancreas

Pelvic injuries

Hand:
amputation, total crush

Lower limb:
open fractures

Foot:
amputation,
total foot crush injury

If so, THINK Major Trauma!

**Discuss with a senior member of staff, and call your designated MTC:
Royal Manchester Children's Hospital
0161 701 9191**



North West Major Trauma Children's Network Pathway for Transferring a Major Trauma Child into a Major Trauma Centre

DO

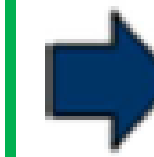
1. Stabilise patient

- Stabilise airway
- Support breathing
- Stop catastrophic haemorrhage



2. Make calls to:

- Designated Children's Major Trauma Centre
- Speak to the ED consultant and agree transfer
- Use ASHICE Report to provide information (Age, Sex, History, Injuries, Condition, Estimated Time of arrival)
- NWS to arrange 'Category 2 - Trauma transfer'



3. Ensure:

- Transfer with local team
- NWTS call for advice on stabilisation and transfer where needed.
- Documentation sent with patient
- Inform MTC when the child leaves your hospital.
- Inform ED Consultant at MTC if there are safeguarding concerns



NWTS

08000 848382

Royal Manchester

Children's Hospital

0161 701 9191

Alder Hey

Children's Hospital

0151 252 5401

NWAS

For Healthcare profs.

0345 140 0144

DON'T

- Delay Transfer.
- Contact individual specialist/check bed availability (this will be done by the ED consultant at the MTC).
- Perform unnecessary procedures.
- Perform CT unless advised by MTC.