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'BEST OF' AUGUST ARTICLES

BEST OF TRAUMA ARTICLE

2021 National Guideline for the Field Triage of Injured Patients

- National guideline development
- Interdisciplinary national expert panel
- 5 systematic reviews
- 10 years of new scientific evidence
- End-user EMS feedback
- Stakeholder feedback

Newgard CD, et al. *Journal of Trauma and Acute Care Surgery*. August 2022
@JTraumaAcuteSurg

The Journal of Trauma and Acute Care Surgery

NATIONAL GUIDELINE FOR THE FIELD TRIAGE OF INJURED PATIENTS: RECOMMENDATIONS OF THE NATIONAL EXPERT PANEL ON FIELD TRIAGE, 2021
[HTTPS://JOURNALS.LWW.COM/JTRAUMA/FULLTEXT/2022/08000/NATIONAL-
GUIDELINE_FOR_THE_FIELD_TRIAGE_OF_INJURED.19.ASPX](https://journals.lww.com/jtrauma/fulltext/2022/08000/national-guideline-for-the-field-triage-of-injured.19.aspx)



**SCAN HERE TO VIEW A VIDEO
OVERVIEW OF THE ARTICLE**

<https://qr.page/g/4SD9HkEUrcT>

Analysis of Sex-Based Murine Microbiota Resilience Following Sepsis

MODEL
C57BL/6J
Young vs Old
Male vs Female

ANALYSIS
Microbiota
Sex Hormones

OUTCOME
Female Microbiota ≠ Male;
Females = Potential
Microbial Resilience

SEPSIS

SURVIVAL

Efron et al. *Journal of Trauma and Acute Care Surgery*. August 2022 [doi: 10.1097/TA.0000000000003599]
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The Journal of Trauma and Acute Care Surgery

SEX DIFFERENCES ASSOCIATE WITH LATE MICROBIOME ALTERATIONS AFTER MURINE SURGICAL SEPSIS
[HTTPS://JOURNALS.LWW.COM/JTRAUMA/FULLTEXT/2022/08000/SEX-DIFFER-
ENCES_ASSOCIATE_WITH_LATE_MICROBIOME.1.ASPX](https://journals.lww.com/jtrauma/fulltext/2022/08000/sex-differences-associate-with-late-microbiome.1.aspx)



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<https://qr.page/g/UISJc4lyw7>

BEST OF SCC ARTICLE

THE GERIATRIC NUTRITIONAL RISK INDEX (GNRI) AS A PREDICTOR OF COMPLICATIONS IN GERIATRIC TRAUMA PATIENTS

Study Population
513 trauma patients
age ≥65
Malnutrition defined by GNRI

Results
Major Risk GNRI

Conclusions
GNRI feasible to use
Malnutrition associated with worse clinical outcomes

More deaths
More infections
Longer hospital LOS
More non-home discharges

Kregel et al. *Journal of Trauma and Acute Care Surgery*. August 2022
@JTraumaAcuteSurg

The Journal of Trauma and Acute Care Surgery

THE GERIATRIC NUTRITIONAL RISK INDEX (GNRI) AS A PREDICTOR OF COMPLICATIONS IN GERIATRIC TRAUMA PATIENTS
[HTTPS://JOURNALS.LWW.COM/JTRAUMA/FULLTEXT/2022/08000/THE-GERIAT-
RIC_NUTRITIONAL_RISK_INDEX_AS_A.7.ASPX](https://journals.lww.com/jtrauma/fulltext/2022/08000/the-geriatric-nutritional-risk-index-as-a.7.aspx)



**SCAN HERE TO VIEW A VIDEO
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<https://qr.page/g/aL5p29GM9t>

Development and Implementation of an Automated Electronic Health Record-linked Registry for Emergency General Surgery

Registry embedded in the Electronic Health Record

Leverage data to support Clinical Care in Real-Time

1.86% False Positive Rate

Automated Data Collection

Support QI and Multicenter Research

Detected 85% of all EGS Encounters

Mou et al. *Journal of Trauma and Acute Care Surgery*. August 2022
@JTraumaAcuteSurg

The Journal of Trauma and Acute Care Surgery

DEVELOPMENT AND IMPLEMENTATION OF AN AUTOMATED ELECTRONIC HEALTH RECORD-LINKED REGISTRY FOR EMERGENCY GENERAL SURGERY
[HTTPS://JOURNALS.LWW.COM/JTRAUMA/FULLTEXT/2022/08000/DEVELOP-
MENT_AND_IMPLEMENTATION_OF_AN_AUTOMATED.16.ASPX](https://journals.lww.com/jtrauma/fulltext/2022/08000/development-and-implementation-of-an-automated.16.aspx)

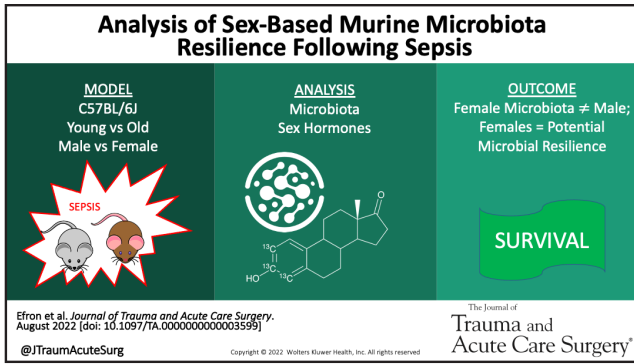


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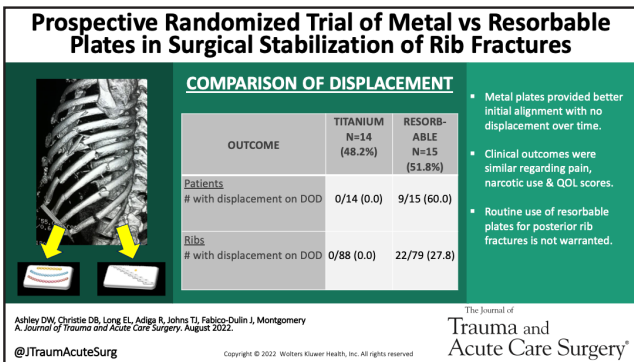
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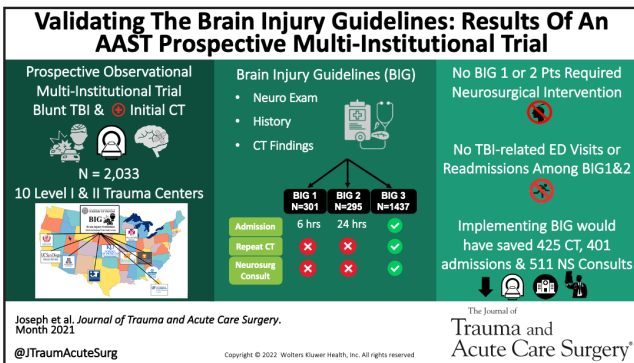
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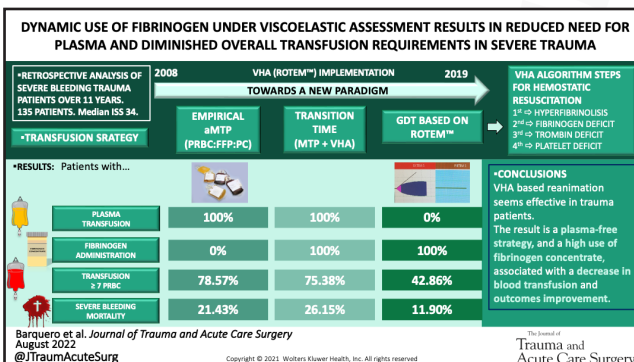
SEX DIFFERENCES ASSOCIATE WITH LATE MICROBIOME ALTERATIONS AFTER MURINE SURGICAL SEPSIS
[HTTPS://JOURNALS.LWW.COM/JTRAUMA/FULLTEXT/2022/08000/SEX_DIFFERENCES_ASSOCIATE_WITH_LATE_MICROBIOME.1.ASPX](https://journals.lww.com/jtrauma/fulltext/2022/08000/sex_differences_associate_with_late_microbiome.1.aspx)



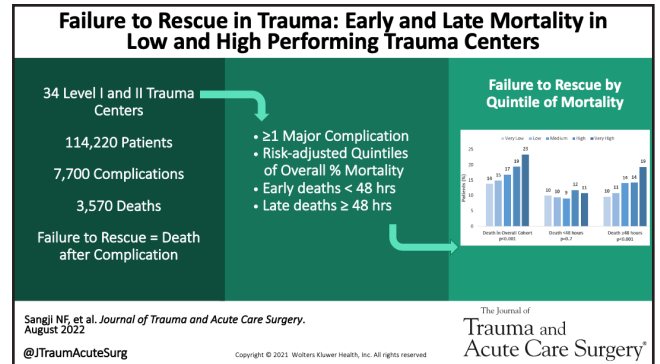
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[HTTPS://JOURNALS.LWW.COM/JTRAUMA/ABSTRACT/2022/08000/PROSPECTIVE_RANDOMIZED_TRIAL_OF_METAL_VERSUS_RESORBABLE_PLATES_IN_SURGICAL_STABILIZATION_OF_RIB_FRACTURES.2.ASPX](https://journals.lww.com/jtrauma/abstract/2022/08000/prospective_randomized_trial_of_metal_versus_resorbable_plates_in_surgical_stabilization_of_rib_fractures.2.aspx)



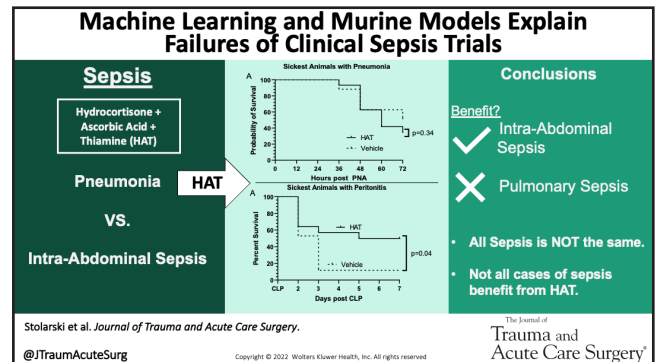
VALIDATING THE BRAIN INJURY GUIDELINES (BIG): RESULTS OF AN AAST PROSPECTIVE MULTI-INSTITUTIONAL TRIAL
[HTTPS://JOURNALS.LWW.COM/JTRAUMA/ABSTRACT/2022/08000/VALIDATING_THE_BRAIN_INJURY_GUIDELINES_RESULTS_OF.3.ASPX](https://journals.lww.com/jtrauma/abstract/2022/08000/validating_the_brain_injury_guidelines_results_of.3.aspx)



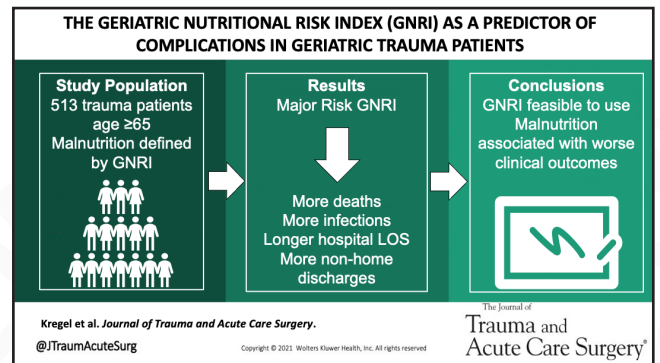
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[HTTPS://JOURNALS.LWW.COM/JTRAUMA/ABSTRACT/2022/08000/DYNAMIC_USE_OF_FIBRINOGEN_UNDER_VISCOELASTIC.4.ASPX](https://journals.lww.com/jtrauma/abstract/2022/08000/dynamic_use_of_fibrinogen_under_viscoelastic_assessment_results_in_reduced_need_for_plasma_and_diminished_overall_transfusion_requirements_in_severe_trauma.4.aspx)



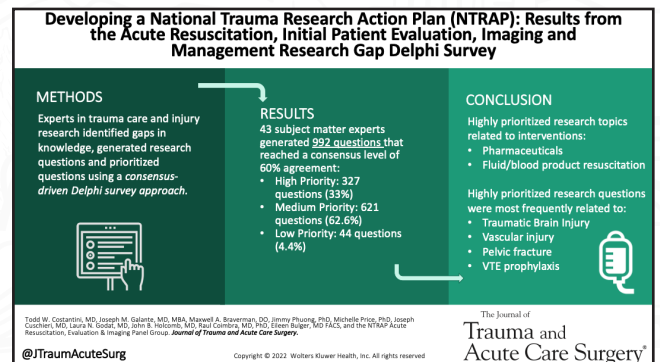
FAILURE TO RESCUE IN TRAUMA: EARLY AND LATE MORTALITY IN LOW AND HIGH PERFORMING TRAUMA CENTERS
[HTTPS://JOURNALS.LWW.COM/JTRAUMA/ABSTRACT/2022/08000/FAILURE_TO_RES_CUE_IN_TRAUMA_EARLY_AND_LATE.5.ASPX](https://journals.lww.com/jtrauma/abstract/2022/08000/failure_to_rescue_in_trauma_early_and_late_mortality_in_low_and_high_performing_trauma_centers.5.aspx)



MACHINE LEARNING AND MURINE MODELS EXPLAIN FAILURES OF CLINICAL SEPSIS TRIALS
[HTTPS://JOURNALS.LWW.COM/JTRAUMA/ABSTRACT/2022/08000/MACHINE_LEARNING_AND_MURINE_MODELS_EXPLAIN_FAILURES_OF_CLINICAL_SEPSIS_TRIALS.6.ASPX](https://journals.lww.com/jtrauma/abstract/2022/08000/machine_learning_and_murine_models_explain_failures_of_clinical_sepsis_trials.6.aspx)




THE GERIATRIC NUTRITIONAL RISK INDEX (GNRI) AS A PREDICTOR OF COMPLICATIONS IN GERIATRIC TRAUMA PATIENTS
[HTTPS://JOURNALS.LWW.COM/JTRAUMA/FULLTEXT/2022/08000/THE_GERIATRIC_NUTRITIONAL_RISK_INDEX_AS_A.7.ASPX](https://journals.lww.com/jtrauma/fulltext/2022/08000/the_geriatric_nutritional_risk_index_as_a_predictor_of_complications_in_geriatric_trauma_patients.7.aspx)




DEVELOPING A NATIONAL TRAUMA RESEARCH ACTION PLAN (NTRAP): RESULTS FROM THE ACUTE RESUSCITATION, INITIAL PATIENT EVALUATION, IMAGING, AND MANAGEMENT RESEARCH GAP DELPHI SURVEY
[HTTPS://JOURNALS.LWW.COM/JTRAUMA/ABSTRACT/2022/08000/DEVELOPING_A_NATIONAL_TRAUMA_RESEARCH_ACTION_PLAN.8.ASPX](https://journals.lww.com/jtrauma/abstract/2022/08000/developing_a_national_trauma_research_action_plan.8.aspx)

2021 National Guideline for the Field Triage of Injured Patients

- National guideline development
- Interdisciplinary national expert panel
- 5 systematic reviews



- 10 years of new scientific evidence
- End-user EMS feedback
- Stakeholder feedback



Evidence-based, restructured guideline for field triage based on flow of information to EMS (left-to-right) and risk (top-to-bottom)

Newgard CD, et al. *Journal of Trauma and Acute Care Surgery*. August 2022
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NATIONAL GUIDELINE FOR THE FIELD TRIAGE OF INJURED PATIENTS: RECOMMENDATIONS OF THE NATIONAL EXPERT PANEL ON FIELD TRIAGE, 2021

[HTTPS://JOURNALS.LWW.COM/JTRAUMA/FULLTEXT/2022/08000/NATIONAL_GUIDE-LINE_FOR_THE_FIELD_TRIAGE_OF_INJURED.19.ASPX](https://journals.lww.com/jtrauma/fulltext/2022/08000/national_guideline_for_the_field_triage_of_injured.19.aspx)

THE EFFICACY OF WEIGHT-BASED ENOXAPARIN DOSING FOR VTE PROPHYLAXIS IN TRAUMA PATIENTS: A SYSTEMATIC REVIEW AND META-ANALYSIS

Study Population	Intervention	Outcomes
Patients admitted to a Trauma Service receiving VTE prophylaxis with Enoxaparin	Weight Based Dosing (N= 319) vs. Standard Dosing (N=445)	MORE prophylactic range AFx levels FEWER sub-prophylactic AFx levels NO DIFFERENCE VTE or bleeding Events

Ebeid, A., Stallwood-Hall, C., Cole, E. *Journal of Trauma and Acute Care Surgery*. August 2022
@JTraumaAcuteSurg

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**NO VISUAL ABSTRACT PROVIDED
RELATIONSHIP BETWEEN ANTI-XA LEVEL ACHIEVED WITH PROPHYLACTIC LOW-MOLECULAR WEIGHT HEPARIN AND VENOUS THROMBOEMBOLISM IN TRAUMA PATIENTS: A SYSTEMATIC REVIEW AND META-ANALYSIS**

[HTTPS://JOURNALS.LWW.COM/JTRAUMA/ABSTRACT/2022/08000/RELATIONSHIP_BE-TWEEN_ANTI_XA_LEVEL_ACHIEVED_WITH.20.ASPX](https://journals.lww.com/jtrauma/abstract/2022/08000/relationship_between_anti_xa_level_achieved_with.20.aspx)

**NO VISUAL ABSTRACT PROVIDED
MANAGING GRADE 4 AND 5 PANCREATIC INJURIES—ALL HANDS ON DECK!**

[HTTPS://JOURNALS.LWW.COM/JTRAUMA/CITATION/2022/08000/MANAGING_GRADES-IV_AND_V_PANCREATIC_INJURIES_ALL.24.ASPX](https://journals.lww.com/jtrauma/citation/2022/08000/managing_grades_iv_and_v_pancreatic_injuries_all.24.aspx)

**NO VISUAL ABSTRACT PROVIDED
THE NUANCED NATURE OF GRADING PANCREAS INJURIES: RESPONSE TO LETTER TO THE EDITOR.**

[HTTPS://JOURNALS.LWW.COM/JTRAUMA/CITATION/2022/08000/THE_NUANCED_NATURE_OF_GRADING_PANCREAS_INJURIES.25.ASPX](https://journals.lww.com/jtrauma/citation/2022/08000/the_nuanced_nature_of_grading_pancreas_injuries.25.aspx) NO VISUAL ABSTRACT PROVIDED




**NO VISUAL ABSTRACT PROVIDED
DELAYED SPLENIC PSEUDOANEURYSM WHO NEEDS SURVEILLANCE IMAGING AND HOW SHOULD WE MANAGE IT?**

[HTTPS://JOURNALS.LWW.COM/JTRAUMA/CITATION/2022/08000/DELAYED_SPLENIC_PSEUDOANEURYSM_WHO_NEEDS.26.ASPX](https://journals.lww.com/jtrauma/citation/2022/08000/delayed_splenic_pseudoaneurysm_who_needs.26.aspx)

**NO VISUAL ABSTRACT PROVIDED
RESPONSE TO: DELAYED SPLENIC PSEUDOANEURYSM: WHO NEEDS SURVEILLANCE IMAGING AND HOW SHOULD WE MANAGE IT?**

[HTTPS://JOURNALS.LWW.COM/JTRAUMA/CITATION/2022/08000/RESPONSE_TO_DE-LAYED_SPLENIC_PSEUDOANEURYSM_WHO.27.ASPX](https://journals.lww.com/jtrauma/citation/2022/08000/response_to_delayed_splenic_pseudoaneurysm_who.27.aspx)

THE SPECIALTY OF SURGICAL CRITICAL CARE: WHITE PAPER FROM THE AAST CRITICAL CARE COMMITTEE

Anatomy	Physiology	Surgical expertise
		

Surgical Critical Care Specialist

- Broad expertise
- Training specifics
- Practice outside ICU walls
- Care of complex surgical conditions
- Surgical source control
- Procedural expertise
- Bedside surgery
- Hemorrhage control & resuscitation
- Disaster management

Michetti CP et al. *Journal of Trauma and Acute Care Surgery*. August 2022
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THE SPECIALTY OF SURGICAL CRITICAL CARE: A WHITE PAPER FROM THE AMERICAN ASSOCIATION FOR THE SURGERY OF TRAUMA CRITICAL CARE COMMITTEE

[HTTPS://JOURNALS.LWW.COM/JTRAUMA/FULLTEXT/2022/08000/THE_SPECIALTY_OF_SURGICAL_CRITICAL_CARE_A_WHITE.22.ASPX](https://journals.lww.com/jtrauma/fulltext/2022/08000/the_specialty_of_surgical_critical_care_a_white.22.aspx)

A Team Approach to Peripartum Hemorrhage Control Incorporating Resuscitative Endovascular Balloon Occlusion of the Aorta (REBOA)

The highest risk of bleeding for women with placenta accreta occurs at the time of delivery, when as many as 90% require blood transfusion	REBOA placed by acute care surgeons is a safe and effective strategy to control major bleeding during high-risk obstetric surgeries and peripartum emergencies	We describe a protocolized, multidisciplinary approach to obstetric hemorrhage, including patient selection, operating room procedures, and REBOA techniques
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Russo RM et al. *Journal of Trauma and Acute Care Surgery*. Mar 2022
@JTraumaAcuteSurg

The Journal of Trauma and Acute Care Surgery®

A TEAM APPROACH TO PERIPARTUM HEMORRHAGE CONTROL INCORPORATING RESUSCITATIVE ENDOVASCULAR BALLOON OCCLUSION OF THE AORTA

[HTTPS://JOURNALS.LWW.COM/JTRAUMA/CITATION/2022/08000/A_TEAM_APPROACH-TO_PERIPARTUM_HEMORRHAGE_CONTROL.23.ASPX](https://journals.lww.com/jtrauma/citation/2022/08000/a_team_approach_to_peripartum_hemorrhage_control.23.aspx)