



LONDON'S
AIR AMBULANCE
roadside intensive care



Pre-hospital Care Standard Operating Procedure

Extrication

REVIEW:	June 2008	
APPROVAL/ ADOPTED:	PHC Policy Board	
DISTRIBUTION:	PHC Doctors PHC Paramedics Fire Crew Pilots	
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Aims:

- Describe extrication training.
- Identify associated reading material.
- Describe some of the principles of on scene management.

Background:

Fire Services throughout Great Britain send officers to the Fire Service Training College at Morton-in-Marsh, Gloucestershire to train in extrication skills. These officers go back to local stations and set up extrication training based on the Morton model. The course varies in length from 1- 2 weeks depending on whether it is for retained or full time fire fighters. HEMS personnel join the course for 1 or 2 days of practical extrication exercises. During the course one member of the HEMS team is expected to give the generic HEMS talk for about 30 minutes. This should include a brief overview of HEMS with special emphasis on team working. No emergency group has the statutory responsibility to extricate personnel from trapped wreckage, however it has naturally defaulted to the Fire service. This lack of central direction means a huge variation in the training and equipment directed at the issue. Not all Fire Services will send personnel to Morton to undertake the RTA module - standards of extrication therefore vary enormously. There are 5 fire stations with rescue tenders: Euston, Battersea, East Ham, Finchley and Croydon. Rescue Tender crews have extended training and carry specialised equipment for use in such circumstances.

This SOP should be read in conjunction with the following:

- Morton course text – resource file
- Resource file on the HEMS server.
- Clothing operational guide.

Principle Donors:



Policy:

Training

- The HEMS registrar responsible for the rota should co-ordinate who undertakes the course after checking with the Pre-hospital Care Consultant.
- All HEMS Registrars and Paramedics will undertake extrication training at the Fire Training College, Morton-in-Marsh. It may not always be possible to provide every Registrar or Paramedic with a course in their individual training month, as the courses are sporadic. There is space for 3-4 personnel on each course (2 doctors/1-2 paramedics).
- Accommodation should be confirmed using the contact details in the resource file.
- Lists of dates are sent to Andrew Houghton.
- Courses at Paddington Fire Station have recently started, consisting of extrication, confined space and "one under" training. There is space for 2 people only on these courses (1 doctor/1 paramedic). Dates are organised through Andrew Houghton.
- When a course is not available in-house training (theoretical only) will take place in the form of a tutorial from the Consultant in Pre-hospital Care.
- For both these courses staff should take their own PPE (suits, helmets, goggles and debris gloves).
- Maps to get to Moreton-in-Marsh are in a file on the server. Liase with Paul Smith if one of the fleet cars is needed for travel (currently DA55).

On Scene

- Safety is paramount - helmets and eye protection should be worn at all times.
- On approach to the accident site it is important to quickly assess the scene safety (vehicle stability and potential hazards).
- Introduce yourself to the ambulance crew member who is treating the patient and with the lead fire fighter concerning scene safety.
- Establish the clinical needs of the patient.
- Discuss the proposed method of extrication.
- Remember: The fire officer leading the extrication is not always the highest-ranking officer on scene. It is often a sub officer with yellow helmet and 2 black bands. The most senior officer, usually a station officer with a white helmet, will take an overview of the whole situation and not the specifics of what is being cut and where.
- Minimise medical interventions – only carry out what is absolutely necessary. To do this you must have a clear idea of the likely release time. For example, a foot well entrapment is likely to be released in 4 -5 minutes with a simple dash roll.
- Ensure oxygen is well clear when the fire fighters are making "hot" cuts.

Further Information:

There are 2 types of entrapment:

Clinical: where a patient is not physically trapped by metalwork but by their clinical state.e.g. Possible spinal fracture.

Physical: where the patient is physically trapped by metalwork etc. There are 2 methods of release:

1. Immediate - Involves quite literally dragging the patient out of the car making an effort to keep the spine straight. This should only be considered if patient demise is imminent.
2. Controlled - Full spinal precautions are adhered to. The exact method of removal depends on vehicle configuration and damage.

NB. For difficult or unusual extrications contact the PHC consultant on call for advice.

Performance Standard

- As a performance standard to expect from the extrication team: patient trapped in a car that is on all 4 wheels with 360 degrees access should not be in the car for more than 15 minutes once extrication equipment is on scene. (Note: for limb entrapments in machinery the time to release can be difficult to estimate).