

EMERGENCY ORTHOPAEDI

EMC MUSCULOSCELETAL



EMERGENSI MUSCULOSKELETAL

Fraktur Terbuka

Dan dislokasi

Urgen :

Fraktur Tertutup

PRIMARY SURVEY

- Airway dan C Spine control
- Breathing
- Circulation with Hemorrhage Control
- Disability
- Exposure

- Lanjut Secondary Survey

From Head to Toe

Open Bone Fractures

Gustilo-Anderson Classification

Type 1	Wound length <1cm	Minimal soft tissue damage, contamination, and comminution	Periosteum intact	Adequate soft-tissue coverage	Vasculature intact
Type 2	Wound length ≥1cm	Moderate soft tissue damage, contamination, or comminution	Periosteum intact	Adequate soft-tissue coverage	Vasculature intact
Type 3a	Extensive wound	Extensive soft tissue damage, contamination, or comminution; segmental fracture	Periosteal stripping	Adequate soft-tissue coverage	Vasculature intact
Type 3b	Extensive wound	Extensive soft tissue damage, contamination, or comminution; segmental fracture	Periosteal stripping	Inadequate soft-tissue coverage	Vasculature intact
Type 3c	Extensive wound	Extensive soft tissue damage, contamination, or comminution; segmental fracture	Periosteal stripping	Inadequate soft-tissue coverage	Arterial Damage

Gustilo RB, Mendoza RM, Williams DN. Problems in management of type III (severe) open fractures: a new classification of type III open fractures. J Trauma. 1984;24:742-746.

FRAKTUR TERBUKA

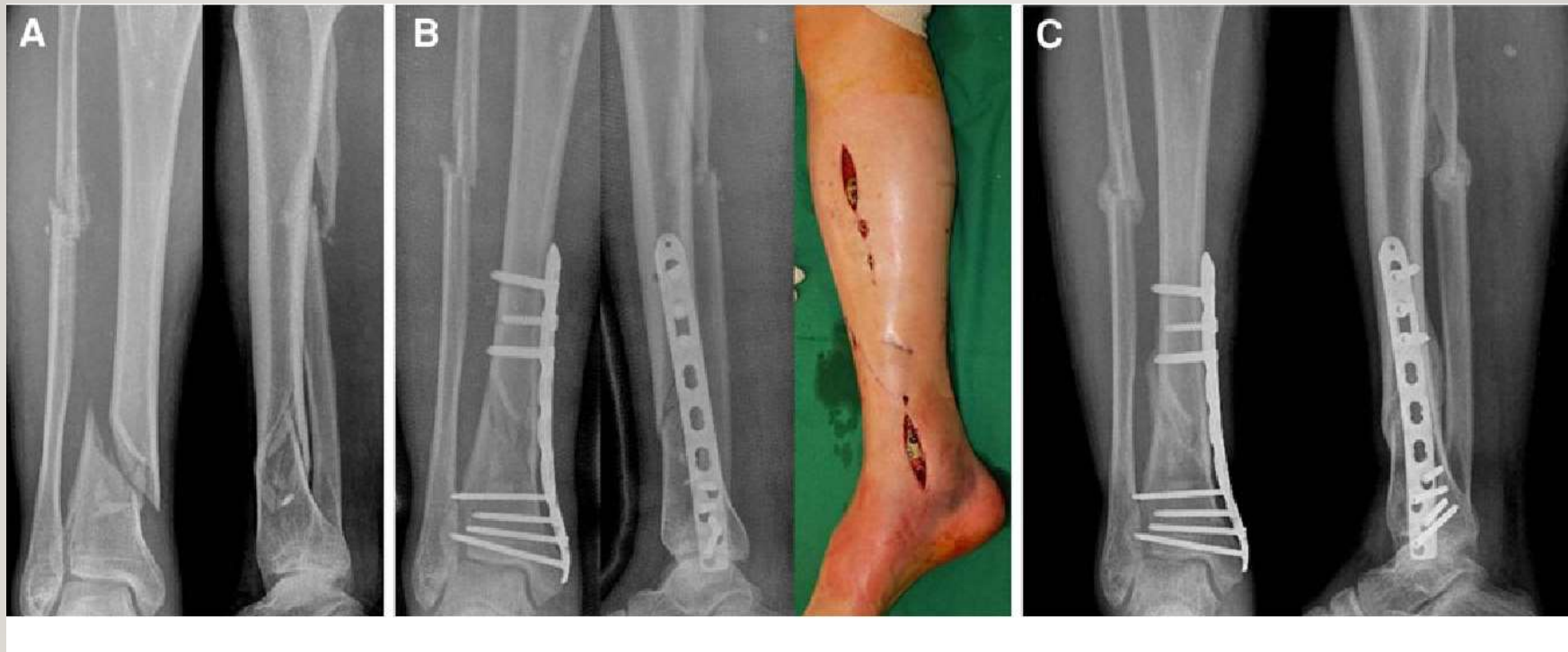


Gustilo Grade II

- Higher energy
- Laceration > 1 cm
- No flap / No contusion
- Minimal contamination

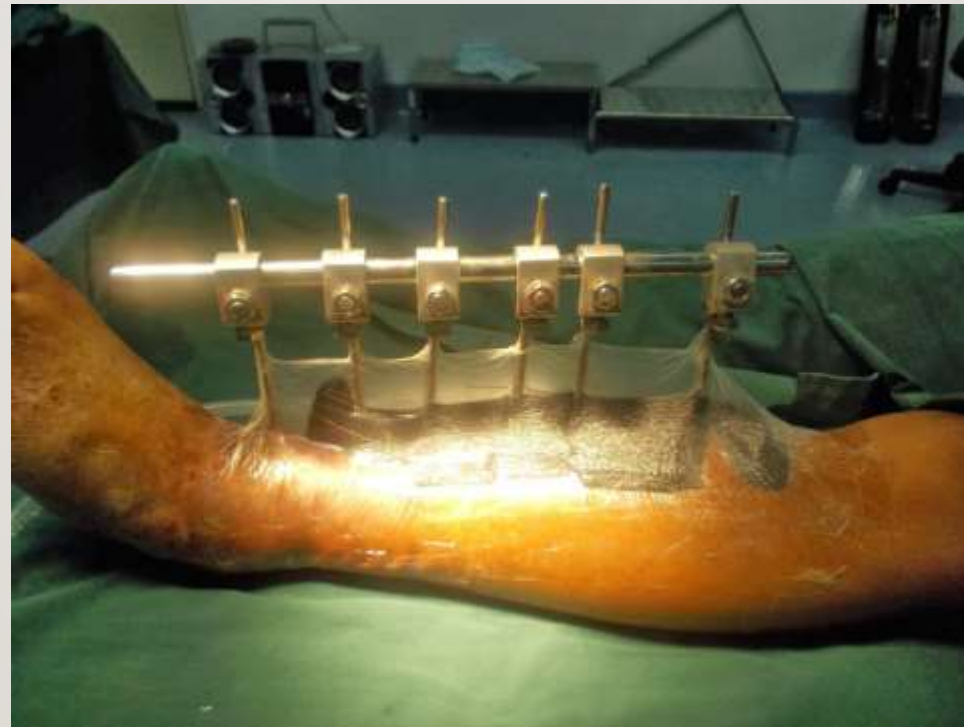


MASIH BISA INTERNAL FIKSASI





EKSTERNAL FIKSASI



KOMPLIKASI

- Early :

Bleeding

Nyeri

Swelling

Lanjut :

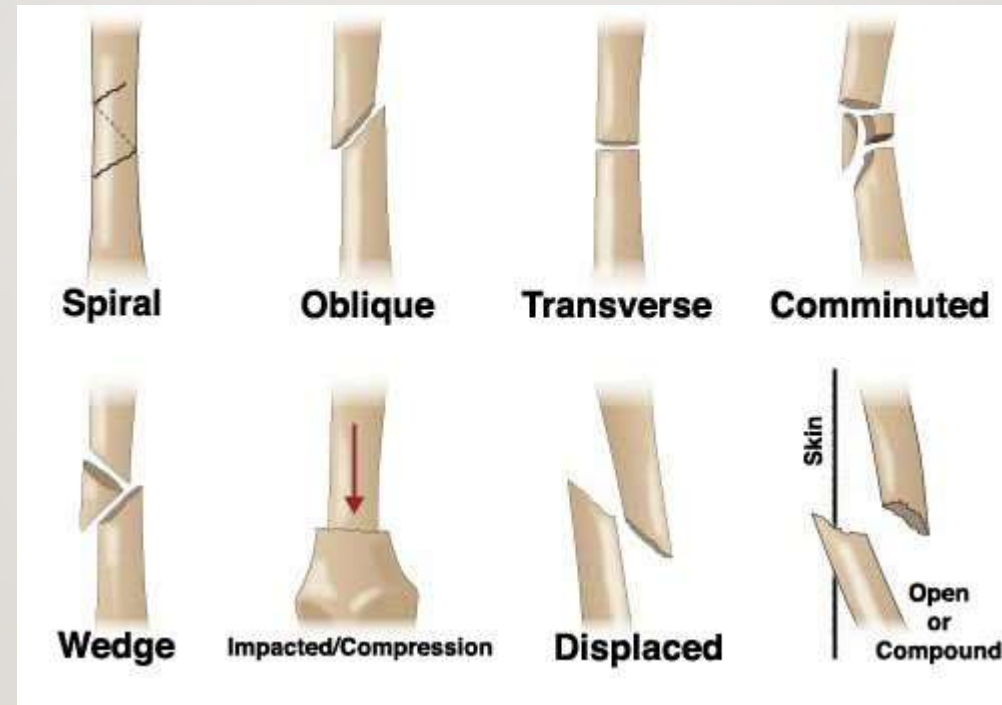
Infesi

Osteomyelitis

TERAPI

- Imobilisasi, luka tidak dijahit
- Antibiotik terapan sejak di UGD
- Analgetik adekuat
- Dipuaskan
- Dipersiapkan operasi emergensi

FRAKTUR TERTUTUP



Closed Fracture



FRAKTUR TERTUTUP COLLUM HUMERUS DEXTRA



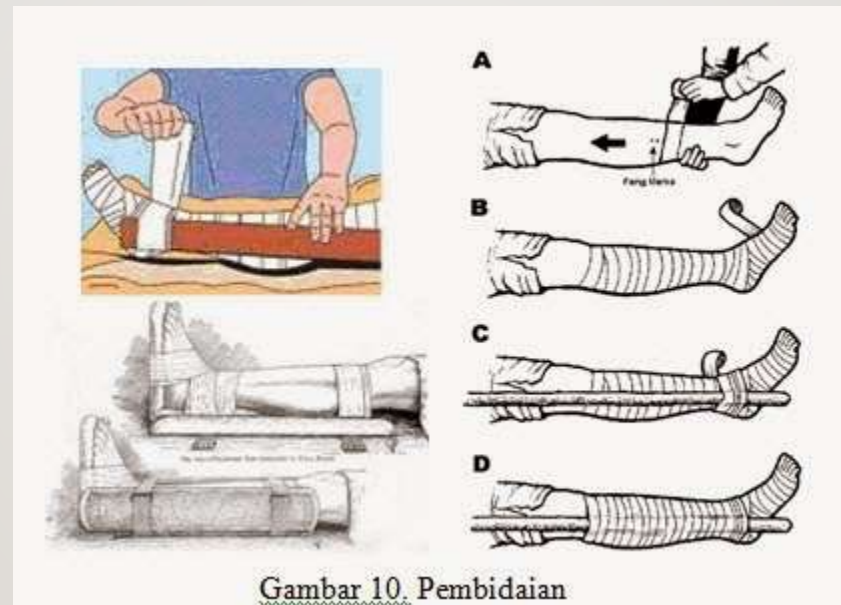
FRAKTUR TERTURUP HUMERUS SINISTRA 1/3 MEDIAL



FRAKTUR TERTURUP (CF) RADIUS ULNA SINISTRA 1/3 MEDIAL



IMMOBILISASI



PRINSIP IMMOBILISASI

- Mencakup 2 sendi , kecuali pada posisi yang tidak memungkinkan 2 sendi
- Padding pada penonjolan tulang
- Balutan tidak boleh kencang
- Cek paska pemasangan spalk

DISLOKASI

Definition

- It is complete and persistent displacement of a joint in which at least part of the supporting joint capsule and some of its ligaments are disrupted.

TANDA

- Nyeri
- Deformitas
- Gerakan terkunci

DISLOKASI INTERPHALANG JOINT PROXIMAL



DISLOKASI ARTIKULATIO CUBITI



DISLOKASI ANTERIOR SHOULDER JOINT SINISTRA

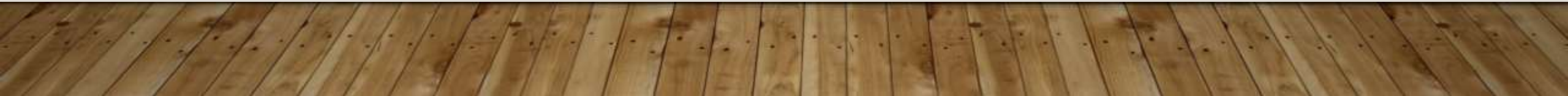


MENGAPA KEADAAN EMERGENSI

- Terlambat, tidak bisa dengan reposisi tertutup, harus reposisi terbuka
- Tidak tereposisi akan merusak kartilago
- Unreduced persistent
- Nerve injury
-

DI UGD

- Imobilisasi dengan posisi yang paling nyaman bagi pasien
- Dipersiapkan untuk Tindakan emergensi



COMPARTEMENT SYNDROME

Increased pressure in a muscle compartment (grouping of muscles, nerves and blood vessels) causing muscle and nerve damage along with pain

PRINSIP

1. Volume Berkurang
2. Isi Bertambah

VOLUME BERKURANG



ISI BERTAMBAH



NEUROVASCULAR ASSESSMENT

5-Ps

PAIN



PULSE



PALLOR



PARESTHESIA



PARALYSIS



TERAPI : FASCIOTOMI

