



National Association of
Emergency Medical Technicians

Title: [Trauma patient outcome after the prehospital trauma life support program.](#)

Authors: Ali J . Adam RU . Gana TJ . Williams JI . McSwain NE Jr .

Institution: Dr. J. Ali, Department of Surgery, University of Toronto, 311-100 College Street, Toronto, Ont. M5G 1L5; Canada.

Source: Journal of Trauma-Injury Infection & Critical Care. Vol 42(6) (pp 1018-1022), 1997.

Abstract

Background: We have previously demonstrated a significant improvement in trauma patient outcome after the Advanced Trauma Life Support (ATLS) program in Trinidad and Tobago. In January of 1992, a Prehospital Trauma Life Support (PHTLS) program was also instituted. This study assessed trauma patient outcome after the PHTLS program.

Methods: Morbidity (length of stay and degree of disability), mortality, injury severity score, mechanism of injury, age, and sex among all adult trauma patients transported by ambulance to the major trauma hospital were assessed between July of 1990 to December of 1991 (pre-PHTLS, n = 332) and January of 1994 to June of 1995 (post-PHTLS , n = 350).

Results: Age, sex distribution, percentage blunt injury, and injury severity score were similar for both groups. Mortality pre-PHTLS (15.7%) was greater than post-PHTLS (10.6%). Length of stay and disability were statistically significantly decreased post-PHTLS . Age, injury severity score, and mechanism of injury were positively correlated with mortality in both periods. The previously reported post-ATLS mortality was similar to the pre- PHTLS mortality.

Conclusions: Post-PHTLS mortality and morbidity were significantly decreased, suggesting a positive impact of the PHTLS program on trauma patient outcome.

[References: 19]

COPYRIGHT ELSEVIER SCIENCE B.V. 2002 - ALL RIGHTS RESERVED