

Thoracotomy - Necessity for OR in Blunt Trauma?

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Patch

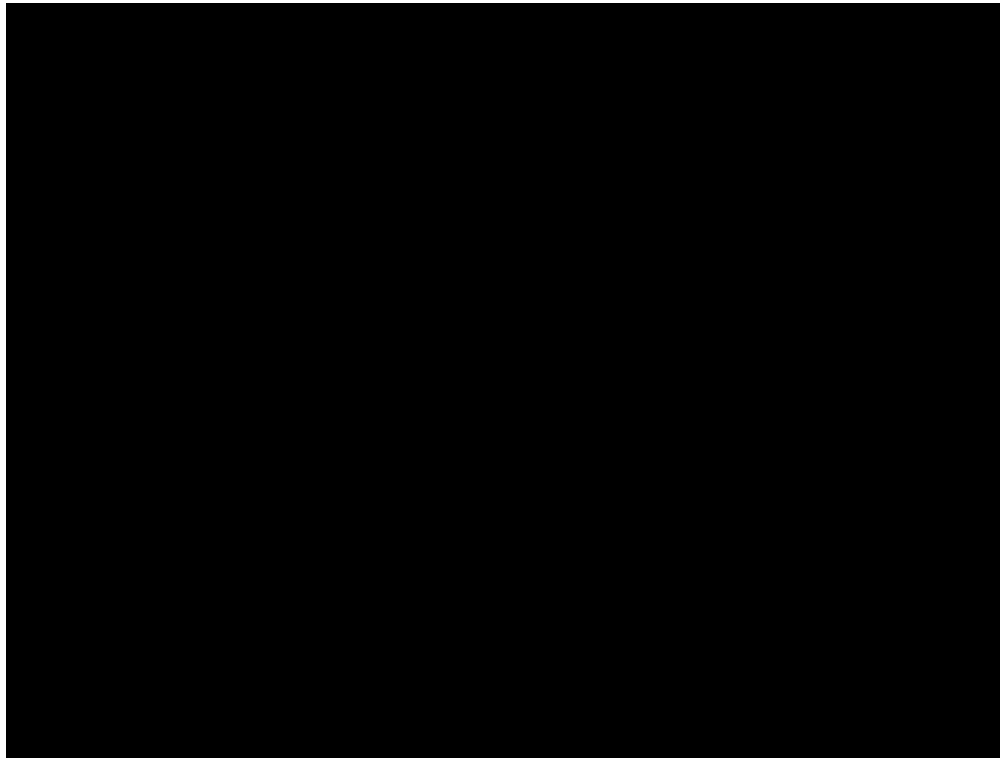
- Modified Trauma
- 68 F who jumped out of a window with a 15-20 foot drop
- Found on ground, “unresponsive”
- Combative and uncouperable in trauma bay
- Diminished R breath sounds



CXR



CT chest



Tube thoracostomy

Placement of 32 French surgical chest tube yielding approximately 2000cc of sanguinous output

Given 2U pRBC, vitals stable, taken to OR

Operative Intervention

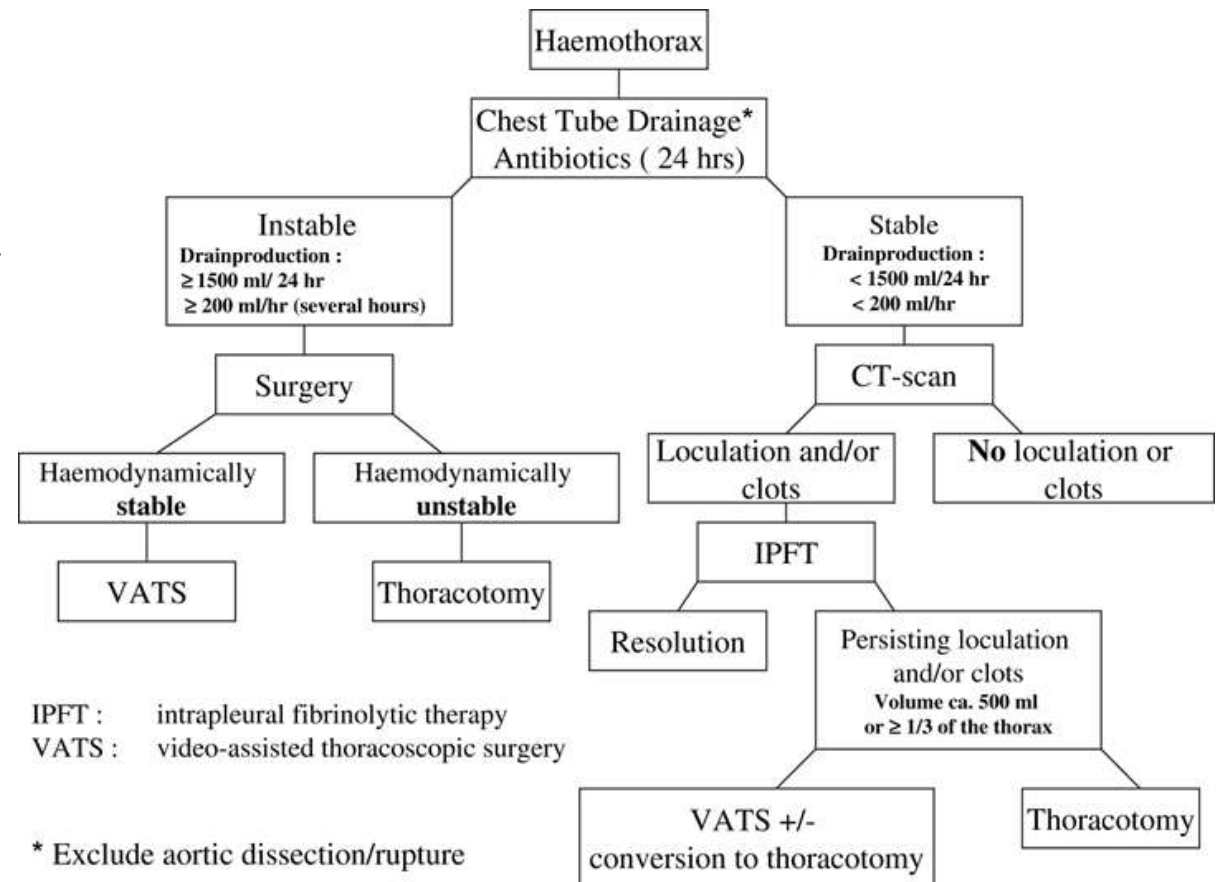
OR Emergently for exploration for
Right Anterolateral thoracotomy

Injury identified??



Did this patient need the OR?

- 8% of all blunt thoracic trauma patient need intervention
- Emergent thoracotomy rare in <1% of patients



Internal Mammary Artery injury

- IMA injury is less <1% of all operative thoracic trauma cases
- Left > Right in reported cases
 - Often underdiagnosed given rarity of presentation
- Gold standard for imaging is CTA
- Gold standard for intervention is angioembolization
- If massive hemothorax present, needs thoroscopic examination

