16 – WASHED OVER FALLS TENNESSEE



THE STORY:

A 25 y/o male kayaker failed to roll upright while making a move above a large waterfall and was consequently washed over the falls upside down. The crumpled kayak emerged from the hydraulic a moment later though witnesses stated it was a couple of minutes before the kayaker himself emerged from below the falls. The boater swam weakly toward an eddy below the drop while his fellow paddlers realized that the falls had ripped off his PFD, and his river shoes. At 1000hrs., the Pt stated that he thought his leg was broken. The Pt denied a loss of consciousness, or aspiration of water. On exam the Pt presented with bruises covering his body. Spine was non-tender. The Pt had a full depth laceration to his lower right leg approx. 5"(12.5cm) in length with very little bleeding. The Pt could not bear weight on the injured right leg. Vitals were: Pulse: 88, Resp. 24 and easy without coughing, B/P: UTA, Skin: pale and cool, Temp.: UTA, Pt was alert and in pain.

Put the appropriate information from the story above into the correct spaces provided in the SOAP note. Develop an Assessment for 1000hrs. with Anticipated Problems and an appropriate Treatment Plan.

The wound was dressed and the Pt was warmed and reassured, calming considerably. The Pt was able to move his foot and knee through their full range of motion although painfully and was still unable to bear weight on the injured leg. Vitals were repeated at 1030: Pulse: 80, Resp.:16 and easy without coughing, B/P: UTA, Skin: warm, Temp.: UTA, Pt was alert and calm. The paddlers found themselves on the river's left bank with the only practical evacuation route lying on the opposite side. That route involved a considerable walk downstream along an old railroad grade and a difficult 4WD road to the nearest evacuation point.

Put the appropriate information from the story above into the correct spaces provided in the SOAP note. Develop an Assessment for 1030hrs. with Anticipated Problems and an appropriate Treatment Plan. What might be some evacuation options for a group of three paddlers in hard-shell kayaks?

QUESTIONS

- 1. Is this patient's spine clearable? If so, by what criteria?
- 2. If you could not clear this patient of a spine injury, how would that effect your evacuation plan?

ASSESSMENT AND TREATMENT PLAN		
A = Assessment (Problem List)	A = Anticipated Problems	P = Treatment Plan
1000		
unable to clear spine 2° distract-	swelling	stabilize
ing injury		
unstable lower R leg injury w/ 5"	swelling/infection	clean / dress / splint / EVAC
full depth laceration		
ASR	cont. ASR	reassurance
1030		
unable to clear spine 2° distract-	swelling	spine assess. protocol
ing injury		
unstable lower R leg injury w/ 5"	swelling/infection	clean / dress / splint / EVAC
full depth laceration		
NOTES		
What Actually Happened Next		
The Pt was evacuated in an inflatable kayak that arrived with another group at the falls. The leg was splinted		
with a float bag, PFD, and throw line. The Pt was packaged in a space blanket and carried for almost 2 hrs. by		
paddlers using cam straps as handles on the kayak. Although the patient's leg was not ultimately fractured, he		
had multiple sutures to close his leg wound and did sustain injuries to several ligaments in his knee as well as		
a multitude of bruises.		