

0128 EFFECT OF CARE IN EMERGENCY ROOM TOWARD DEATH WITHIN 48 H OF TRAFFIC

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Background Trauma is a major problem and secondary cause of death in Thailand. The goal of trauma care has been prevent death, special in early trauma death. The first activity in hospital care is emergency room care, which occur highest error in process of care. Detect death due to process of care in Trauma patients is complex. In Thailand, there is no study which define problem of process of care and death in trauma patients.

Objectives Study effect of process of trauma care in Emergency Room toward death after 48h of Traffic injury.

Study Design Nested case control study. The sample consisted of 1981 traffic injury patients (491 case and 1490 control subjects) during 1 April 2005 to 31 December 2006, and were selected 100 subjects, 40 case and 60 control subjects. Results the processes of care in emergency room as risk factors toward patient death within 48 h were the assessment of shock (OR 5.93; 95% CI 1.13 to 31.14) and the recognition of presence or risk of abdominal injury (OR 3.58; 95% CI 1.11 to 11.50). Risk factors in inpatient care were the assessment of shock (OR 7.60; 95% CI 1.47 to 32.49), the monitoring and treatment of shock (OR 4.40; 95% CI 1.03 to 18.73) and the surgical treatment of abdominal injury (OR 6.76; 95% CI 1.73 to 26.45).

Conclusions These results suggest that trauma quality improvement should be in emergency room and ward. The important processes of care are assessment, monitoring and appropriate operation, especially in patients who have both head and abdominal injuries.