

8th International Congress on Trauma, Critical Care and Emergency Medicine September 15-16, 2022 | Webinar

Volume: 11

Cardiovascular Reserve Index Versus Shock Index Prediction of Early Trauma Deaths: Trauma-Registry Based Study

Uri Gabbay

Department of Epidemiology and Preventive Medicine, Israel

Evaluation of trauma injuries is challenging as an apparently stable casualty may be eventually hemodynamically deteriorated but compensated. Shock index (SI) is bi-vital sign index proposed in 1967 for detecting severe hemodynamic deterioration. The cardio-vascular reserve index (CVRI) is a multi-vital sign index which previous studies revealed promising associations along the entire hemodynamic spectrum. Methods: A historical prospective study was conducted utilizing the Israeli National Trauma Registry of 2015. Entry point was emergency department (ED) admission, and end point was either in-hospital death or survival to discharge. Both SI and CVRI were computed from the retrieved vital signs (on ED admission). Predictability of death was evaluated by Receiver Operating Characteristics area under the curve (AUC). The study aimed to evaluate SI and CVRI predictability of early trauma death as an add-on to the existing trauma death predictors such as Glasgow Coma Score (GCS) and Revised Trauma Score (RTS).

Biography

Uri Gabbay, Department of Epidemiology and Preventive Medicine, The School of Public Health, Sackler Faculty of Medicine, Tel Aviv University, Ramat Aviv, Tel Aviv 6997801, Israel, Tel: 97239372779;

1 Sackler Faculty of Medicine, Tel Aviv University, Tel Aviv, Israel 2Quality and Safety Division, Rabin Medical Center, Petach Tikva, Israel 3 Trauma Unit, General Surgery Division, Sheba Medical Center, Ramat Gan, Israel 4 Trauma Unit, General Surgery Division, Rabin Medical Center, Petach Tikva, Israel

ugabai@post.tau.ac.il