

Editors' preface

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Despite more than 50-plus years of research into resuscitative medicine, the ideal strategy remains elusive. The cover art associated with this month's supplement to the *Journal* is an attempt to expose readers to where we have been in terms of the resuscitation of the critically injured patient. The Trauma Hemostasis and Oxygenation Research (THOR) Network—an organization devoted to resuscitative medicine—held its fourth annual Remote Damage Control Resuscitation (RDCR) Conference in Bergen, Norway, June 9 to 11, 2014. The symposium brought together more than 125 international experts ranging from first responders to basic, translational, and clinical researchers who met to present and discuss the latest advances in RDCR. A particular focus of the 2014 symposium was an in-depth look at optimal prehospital resuscitation strategies and their implementation across a spectrum of civilian and military environments.

In the papers that follow, we have attempted to compile a series of peer-reviewed original and review articles derived from the 2014 meeting. From an analysis of the potential benefit of freeze and sprayed dried plasma to the use of cold-stored whole blood in austere environments, the evolving use of blood, blood products, and hemostatic adjuncts—most notably tranexamic acid and fibrinogen—was emphasized throughout the meeting.

All told, 13 articles are provided for the *Journal's* readership to examine the exciting science and clinical possibilities that have come out of the THOR Network's most recent RDCR conference. Our hope is to stimulate further discussion and ongoing research that will ensure that the critically injured patient—wherever he or she may be—will receive state-of-the-art care that provides the greatest opportunity for survival. Stay tuned.

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DOI: 10.1097/TA.0000000000000708

J Trauma Acute Care Surg
Volume 78, Number 6, Supplement 1