

CONFERENCE GOALS



**SAVE MORE
LIVES**

RDCR

- PREHOSPITAL MANAGEMENT OF LIFE THREATENING BLEEDING
- DCR HAS CHANGED
- FROM IN HOSPITAL TO OUT OF HOSPITAL

CONFERENCE GOALS

- GET TOGETHER
- NETWORK
- PRESENT LATEST RESEARCH
- FRUITFUL DISCUSSIONS AND UPDATES
- POINT OUT SOME DIRECTIONS : RESEARCH AND BEST PRACTICE

CONFERENCE GOALS

- WHAT IS THE ROLE FOR CRYSTALLOIDS/ COLLOIDS ?
- INDICATIONS FOR FRESH WHOLE BLOOD?
- CAN WHOLE BLOOD BE RE-ENGINEERED WITH ALTERNATIVE PROSESSING OF PLASMA, PLATELETS AND RED CELLS
- IMPROVEMENT OF EFFICACY AND SAFETY
- EVALUATION OF SHOCK PREHOSPITAL

Transfusion Experience

- Historically the emphasis has been on giving blood at the surgical level; the ww 2 reminds us that blood can be given far forward , near the point where casualties are injured. In fact during the D-day invasion in June 44 , US Navy assault surgeons who landed with US army troops

HISTORY OF RDCR

Quotation at the conference of a recent letter from Maj. (later Lt. Col.) Henry K. Beecher, MC, then in North Africa, brought the discussion down to a realistic level:

One of the chief problems is concerned with supplying blood in forward areas. Somewhere along the planning line

SECOND CONFERENCE ON SHOCK 1 DES 1943

HISTORY OF RDCR

- At this second Conference on Shock, Dr. Loeb, chairman of the Subcommittee on Blood Substitutes, made the highly significant announcement that it was **the conviction of his group that the ideal treatment of shock due to hemorrhage and skeletal trauma was**

SECOND CONFERENCE ON SHOCK 1 DES
1943

HISTORY OF RDCR

- AFTER WW2 WHOLE BLOOD CONTINUED TO BE USED AS PRIMARY BLOOD PRODUCT IN BOTH KOREA AND VIETNAM
- FREEZE DRIED PLASMA DISAPPEARED DUE TO HEPATITIS
- CRYSTALLOID AND COLLOID USE INCREASED DURING THE VIETNAM

RDCR HISTORY

- CRYSTALLOIDS AND COLLOIDS BECAME STANDARD OF CARE (PREHOSPITAL)
- USE OF BLOOD PRODUCTS PREHOSPITAL FOR MANY REASONS DISCONTINUED TO BE USED
- WHOLE BLOOD BECAME SUBSTANDARD OF CARE. (EVIDENCE BASED??)

BLACK HAWK DOWN—BATTLE OF THE BLACK SEA



Black Hawk down was the birth of TCCC and the recognition that military field medical care is different from civilian urban medical care. Obvious, but military medical practice was reformed to fit the tactical situation and

Conclusion 70 years

- War Medicine in May 1941, these observers pointed out that since shock and hemorrhage are acute conditions, they must be treated at the earliest possible moment. The goal of any service supplying blood and plasma should be to make

CONCLUSION TODAY

- FORWARD DEPLOYMENT OF BLOOD COMPONENTS MAY REPRESENT THE NEXT ADDITION TO LIFESAVING INTERVENTIONS IF LOGISTICAL AND SCOPE OF PRACTICE CAN BE

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IF SALINE CAN REPLACE BLOOD CAN BLOOD OR RE-





LET THE CONFERENCE BEGIN

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