

CASE FILES: EMERGENCY MEDICINE

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CASE 7

A 23-year-old man is transported to your emergency department (ED) from the scene of a rollover motor vehicle collision (MVC). He was found approximately 1 hour after the accident had occurred. At the scene, the patient was awake and complained of pain in his back and legs. In the ED, he is awake, his speech is clear and appropriate, and he has normal breath sounds over bilateral lung fields. He has palpable, equal bilateral femoral pulses. His temperature is 35.6°C (96.1°F) (rectally), pulse rate is 106 beats per minute, blood pressure is 110/88 mm Hg, respiratory rate is 24 breaths per minute, and Glasgow coma scale is 15. Multiple abrasions are noted over the neck, shoulders, abdomen, and legs. His chest wall is nontender. His abdomen is mildly tender. The pelvis is stable, but he has extensive swelling and tenderness of the right thigh. He has a deep scalp laceration over his right temporal area that continues to ooze. A focused abdominal sonographic examination trauma (FAST) is performed revealing free fluid in Morison pouch and no other abnormalities. The patient's initial complete blood count (CBC) reveals a white blood cell count (WBC) of 14,800 cells/mm³, hemoglobin of 11.2 g/dL, and hematocrit of 34.4%.

- ▶ What is the next step in the evaluation of this patient?
- ▶ If this patient becomes hypotensive, what is the most likely cause?