NCRTAC’s Position Statement for ED Providers on Initial Open Fractures Guidance.

Both Level II Trauma Centers in the NCRTAC region agree that any open or suspected open fractures should receive early antibiotic administration (when possible) prior to transfer to a referring hospital to improve patient outcomes. Do not delay transfer to administer antibiotics prior to transfer to the referring hospital.

- Antibiotic selection
  - 1st generation cephalosporin unless heavily contaminated, then PCN-G.
  - If cephalosporin or PCN allergies, then Vancomycin can be substituted.
- Tetanus needed if more than 5 years or history is unknown.
- Apply a saline soaked gauze without an additive (i.e. no betadine).

Supported by the following:

Ministry St. Joseph’s Hospital Level II Trauma Center and Level II Pediatric Trauma Center
- Dr. Ivan Maldonado, Trauma Medical Director
- Dr. Jennifer Roberts, Pediatric Trauma Medical Director

Aspirus Wausau Hospital Level II Trauma Center
- Dr. Jennine Larson, Trauma Medical Director

Approved by the NCRTAC General Membership July 28, 2016