

## **eFAST**

# EXTENDED FOCUSED ASSESSMENT WITH SONOGRAPHY IN TRAUMA

#### **TRANSDUCERS:**

Phased array P21 using Abdominal exam type\*

#### **CLINICAL INDICATIONS:**

- · Blunt Trauma
- · Unexplained Hypotension
- · Penetrating Trauma
- · Trauma in Pregnancy

#### **CLINICAL APPLICATIONS:**

- Pericardial Effusion
- Hemothorax
- · Abdominal and/or Pelvic Free Fluid
- · Sliding Lung



SonoSite Technology Mobilizes High Performance Ultrasound for:

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#### **Probe Placements**

#### Clinical images





#### **CARDIAC SUBCOSTAL VIEW:**

Identify the liver and cardiac structures, including RV, LV, RA, LA and pericardial sac. Aim the transducer towards the patient's left shoulder, keeping the orientation marker to the operator's right side. Look for free fluid in the pericardial space. Parasternal Long Axis view is used if the subcostal view is not optimal.





#### **RUQ LONGITUDINAL VIEW:**

Identify the liver, kidney and diaphragm. Place the transducer along the mid-axillary line at approximately the 10th to 12th rib space, keeping the orientation marker towards the patient's head. Sweep the transducer anterior and posterior making sure to see all potential spaces. Look for free fluid in the abdomen within Morison's pouch, paracolic gutter and around both poles of the kidney. Look for free fluid in the pleural cavity above the diaphragm.





#### **LUQ LONGITUDINAL VIEW:**

Identify the spleen, kidney and diaphragm. Place the transducer along the posterior-axillary line at approximately the 9th or 10th rib space, keeping the orientation marker towards the patient's head. Sweep the transducer anterior and posterior making sure to see all potential spaces. Look for free fluid in the abdomen between the spleen and kidney, paracolic gutter and around both poles of the kidney. Particularly look for fluid above the spleen and in the pleural cavity above the diaphragm.

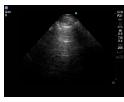




### PELVIC VIEW LONGITUDINAL AND TRANSVERSE:

Identify the bladder wall and surrounding bowel. Sweep thorough the bladder lateral to medial and inferior to superior looking for free fluid anterior, posterior and lateral to the bladder.





## PLEURAL VIEW LONGITUDINAL VIEW, MID-CLAVICULAR OR MID-AXILLARY LINE:

\*For improved frame rate and resolution consider switching to a Cardiac or Lung exam type. Starting at first rib space with orientation marker towards the patients head. Look for motion between Parietal and Visceral Pleural surfaces and associated comet tails artifacts. Scan through multiple rib spaces, evaluate bilaterally.

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