



The Responder

“Progress Saves Lives...”

Edition 56 | May 2023

From the Editor's Desk

Greetings all and a warm welcome to the May 2023 edition of The Responder.

Winter has certainly arrived in all its splendour. This past weekend was the first time in ages where I needed to crank up our fireplace. I forgot just how comfy one can get in front of the telly with a fire crackling away in the background. The only problem is it does not take too long before my eyes start drooping and off to dreamland I go. I hope you all had a fantastic long weekend. Fortunately, the weather did seem to play along and it was a surprisingly pleasant couple of days away from the office. I must admit, although I enjoy the odd day off, I do miss being at the office. I bet most of you are rolling your eyes and saying pffttt to that statement. Truth is, there is always something happening at the offices and I do really enjoy interacting with our many clients daily. It almost feels a little abnormal when I am away from the office for longer than just a weekend, but that is just me. 😊

We have just finished with and passed both our yearly ISO audits. It is a pretty intense couple of days for us each year and I'll tell you what, our auditor does not miss a thing. The great thing about audits is that there are always recommendations that assist us in improving on how we do things. Continuous improvement is key to keeping our clients happy, thereby keeping ourselves happy and ultimately, in helping us improve the health of patients across Africa. It is an uncomplicated philosophy, but one that has helped us achieve amazing goals and numerous milestones. We also recently had our Medical Device Manufacturers Establishment License renewed by SAHPRA for Be Safe Paramedical CC as well as had a new license approved for Be Safe Paramedical Gauteng (Pty) Ltd. Probably a good time to remind you to check your licenses to ensure they are still valid and if they are coming up for renewal, please make sure you submit your application to SAHPRA at least 3 months before your license expires. If you don't, you will be forced to submit a new license application, which is more costly and where they have become far stricter with requirements around Medical Device Quality Management. If your organisation is involved in the sale of any type of medical device, please make sure you hold a valid SAHPRA license to manufacture or import and distribute or wholesale medical devices in South Africa.

In this edition's article, I'll be doing a short overview of Open Pneumothorax. It is a relatively easy read and I hope you enjoy the refresher. If you have anything to add or query, feel free to drop me a line at responder@be-safe.co.za. If there is something you would like me to write about in a future article, likewise, feel free to drop me an email. I am always interested in hearing new ideas

Well, now that I have said all that, let me finish off by saying that as always, we have some great specials lined up for you in this edition of The Responder. Remember, they are while stocks last or only until the date indicated below the product.

Happy reading!

Yours in Healthcare

Gavin Sutton

Editor – The Responder

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Health Focus

Open Pneumothorax – Definition, Recognition and Care

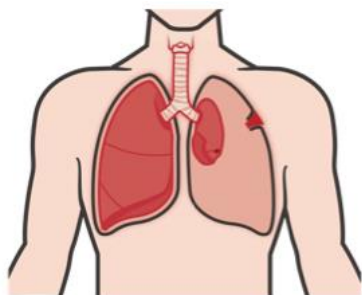
Introduction

Open pneumothorax (or sucking chest wound) can be life-threatening when not recognised and treated appropriately. The chest cavity needs to be intact for ventilation to be effective. As such, standard field care focusses on sealing the chest wound with an occlusive dressing and supporting respiration as required.

This article is aimed at gaining an understanding of the basics of diagnosing and caring for a patient with open pneumothorax in the field. Please note, this article is not a protocol for care, and providers should always follow clinical practice guidelines relevant to their qualification and experience levels.

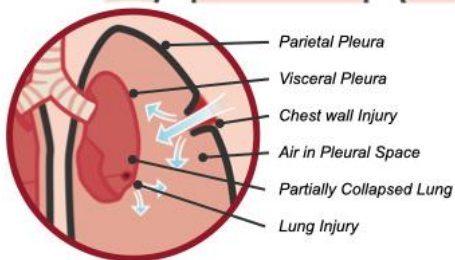
Definition of Open Pneumothorax

Open pneumothorax occurs when penetrating trauma causes a break in the integrity of the chest wall. It's often stated that if the hole in the chest wall is greater than two thirds the diameter of the trachea, air will preferentially enter through the hole in the chest cavity during inspiration rather than through the trachea and into the lungs. This occurs because the hole in the chest wall is far shorter than the trachea and therefore offers less resistance to flow.



This results in a collapsed lung, inadequate ventilation and oxygenation and a progressive build-up of air in the affected pleural space.

If the hole in the chest cavity has a flap associated with it, the open pneumothorax may lead to a tension pneumothorax requiring needle thoracostomy.



Recognition

A clinical diagnosis should be made during the primary survey. During visual inspection of the chest, a wound may be seen that appears to be ‘sucking’ air (sometimes audible) into the chest cavity

during inspiration and may produce bubbling blood during exhalation.

In addition to this, the patient may have rapid, shallow, and laboured respirations which usually become progressively worse as lung expansion decreases in the affected hemithorax. Patients who are hypoxic can be extremely combative. This is often misinterpreted as a ‘difficult’ patient and the results of this oversight may be disastrous for the patient if the provider does not recognise it as hypoxia. Furthermore, poor air entry will be detected in the affected hemithorax during auscultation and hyperresonance may be likely on percussion.

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Emergency Care

Provide the patient with high flow oxygen via a face mask. Monitor the patient’s EtCO₂ and SpO₂.

Perform a thorough chest exam. Look, listen and feel.

Control any visible external bleeding by direct pressure. Most bleeding will likely occur into the chest cavity. For this reason, it is near impossible to determine the severity of the injury based on visible external blood loss. Rather use the mechanism of injury and the potential energy transferred to guide you in assessing potential severity.

Apply a non-porous occlusive dressing over the wound (such as plastic, or foil from space blanket) and tape it down on 3 sides.

Ensure that the patient is monitored very carefully as there is a potential that the open side of the 3-sided tape may stick to the chest wall and be ineffective.



Using a purpose-designed Chest Wound Seal to cover a chest wound

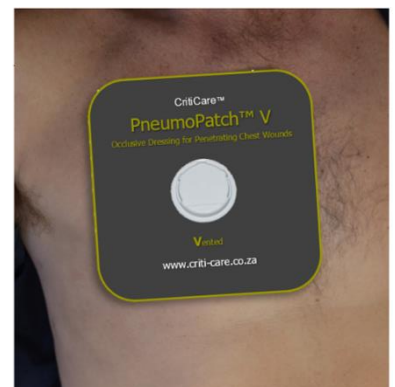


Although the traditional 3-sided dressing has been around forever, there are far better options available on the South African market. Our CritiSeal Chest Wound Seal was launched around 9 years ago. It’s an effective and cost-effective option to quickly seal a penetrating chest wound.

Simply remove the CritiSeal from its foil packaging. Use the 100x100 trauma pad (included in the pack) to wipe away excess blood or fluid from the chest wall. Hold the tab on the CritiSeal and peel away protective backing. Centre the one-way valve directly over the hole in the chest and apply firm downward pressure to secure the CritiSeal in place. Continuously

monitor the patient for improvement. It is as easy as that.

In addition, Be Safe Paramedical is just about ready to launch our latest generation Chest Wound Seal, the PneumoPatch™ V (Vented) and PneumoPatch™ NV (Non-vented). The PneumoPatch™ has a dual pressure sensitive adhesive layer as well as a centre gel adhesive layer. This effectively means much better chest wall adhesion, even on a damp chest. The PneumoPatch™ range will be lower in mass and more compact than the CritiSeal, and of course, at a very competitive price. The PneumoPatch™ will be the first Chest Wound Seal developed and manufactured in South Africa, a first for Africa. Something we are extremely proud of. The PneumoPatch™ V is set for a mid-July launch. Keep an eye on our Social Media pages for updates.



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Specials

Burn-Eaz® Combo Pack

Product Code: REF:BE.PP.CP



R130.00 Inclusive of Vat per pack

Offer valid until 31 May 2023 or while stocks last

[Buy Now](#)

CritiCare® CritiBand MkII Trauma Bandage

Product Code: B.CRIT.H.100



R105.00 Inclusive of Vat each

Offer valid until 31 May 2023 or while stocks last

[Buy Now](#)

CritiCare® Chest Decompression Needle (14g x 8.2cm)

Product Code: NDL.DC.14G.I



R195.00 Inclusive of Vat each

Offer valid until 31 May 2023 or while stocks last

[Buy Now](#)

CritiCare® CritiSeal Chest Wound Seal

Product Code: CRITI.SEAL



R145.00 Inclusive of Vat each

Offer valid until 31 May 2023 or while stocks last

[Buy Now](#)

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C2 Pulse Oximeter

Product Code: PO.F.C2



R200.00 Inclusive of Vat each

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[Buy Now](#)

CritiCare® MediPAC EMS Jump Bag

Product Code: REF:BAG.MEDIPAC.CC



R1 450.00 Inclusive of Vat each

Offer valid until 31 May 2023 or while stocks last

[Buy Now](#)

CritiCare® ResponderPAC EMS Jump Bag

Product Code: REF:BAG.RP.CC



R1 150.00 Inclusive of Vat each

Offer valid until 31 May 2023 or while stocks last

[Buy Now](#)

CritiCare® RapidPAC EMS Jump Bag

Product Code: REF:BAG.RAPIDPAC.CC



R780.00 Inclusive of Vat each

Offer valid until 31 May 2023 or while stocks last

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CritiCare® Classic Paediatric Stethoscope

Product Code: STETH.CLASSIC.P



R330.00 Inclusive of Vat each

Offer valid until 31 May 2023 or while stocks last

[Buy Now](#)

Jumper® FR-202 Infrared Thermometer

Product Code: THERM.INF.JPD.FR202



R230.00 Inclusive of Vat each

Offer valid until 31 May 2023 or while stocks last

[Buy Now](#)

CritiCare® Rechargeable LED Torch

Product Code: TOR.RE.LED



R210.00 Inclusive of Vat each

Offer valid until 31 May 2023 or while stocks last

[Buy Now](#)

Burn-Eaz® Personal Kit

Product Code: REF:BAG.140.BE.PVC.N + REF:BK.SR



R240.00 Inclusive of Vat each

Offer valid until 31 May 2023 or while stocks last

[Buy Now](#)