



SMBB INSTITUTE OF TRAUMA NEWSLETTER

Volume 2
Issue 1
Jan - Jun
2023



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SHAHEED MOHTARMA BENAZIR BHUTTO INSTITUTE OF TRAUMA - KARACHI
Pleased To Announce First & Exclusive Conference On Traumatology

Pak Traumacon 2023

May 25 - May 28, 2023



Conference Includes

Scientific Sessions including Pre & Post Conference Workshops, Invited Talks, Free Papers, Gala Night & Awareness Walk.

Pre & Post Conference Workshops

Learn from the experienced academicians and clinicians.
 Tutorials, procedures, standards and debriefings, live and hands-on experience of procedures.

Register Your Free Papers

Instructions: <http://smbbit.gos.pk/paktraumacon/Abstracts>
 Email: scientific.paktraumacon2023@smbbit.gos.pk



Conference Secretariat

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Memorandum of Understanding (MoU) with Jinnah Postgraduate Medical Center and Sindh Institute of Urology & Transplantation (SIUT)

SMBB Institute of Trauma established collaboration with biggest tertiary care Hospitals, of this mega city “Jinnah Postgraduate Medical Center” & “Sindh Institute of Urology & Transplantation” by signing “Memorandum of Understanding”.

This collaboration will open the doors for improvement of trauma care system, helps to enhance and promote education, research, and learning in the areas of Medicine & Surgery.

The main objectives of this collaboration include:

- Department of Vascular Surgery of SMBB Institute Trauma, Karachi is the only department in Public Sector Hospital of Sindh. SMBB-IT, which serves as the primary treatment facility, will collaborate with JPMC in vascular surgery. Now, through mutual consent, timely treatment of patients, who require vascular surgery opinion, intervention and treatment will be provided through mutual coordination and cooperation.
- To formulate a mechanism for diversion of trauma patients for definitive treatment, and to develop a trauma care system.
- Opening the ways for more such academic and clinical cooperation.
- SMBB Institute of Trauma and SIUT will provide practical work training on rotation basis in any Medical & Surgical Department of SIUT and SMBBIT for their students/ trainees to develop their practical skills.



Hemoptysis and Shortness of Breath Needle Inside Mediastinum

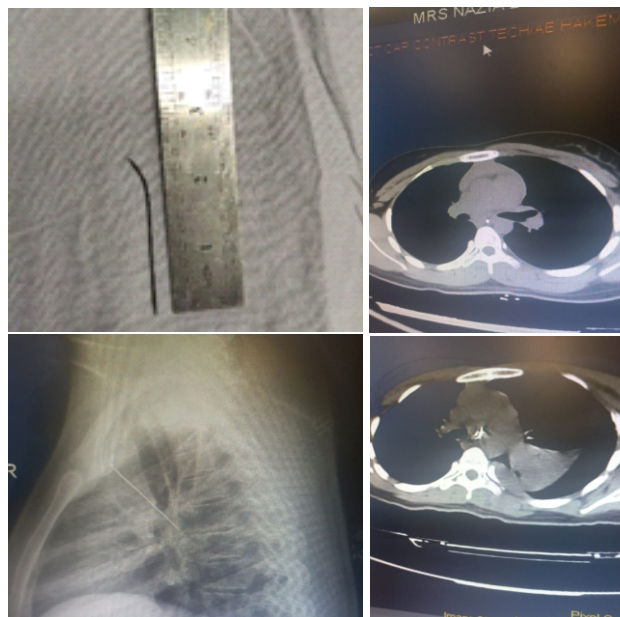
A 20 years old female known case of schizophrenia came with foreign body inside the thoracic cavity which was put by patient herself as a suicidal attempt. Patient had complaint of hemoptysis and shortness of breath. X-ray chest PA view and lateral view revealed needle inside the mediastinum and blunting of right costophrenic angle.

CT chest with I/V contrast done which revealed needle inside the right brachiocephalic artery and moderate collection in right plural cavity.

Patient put on symptomatic treatment and right chest tube thoracostomy done which drain 500 ml of collected blood. After tube lungs were expanded. Psychiatry review taken for schizophrenia and put on anti-psychotic medications.

Patient prepared for surgery, median sternotomy was done. Per operatively C-Arm was used to locate foreign body which was found on right side.

Further dissection was done and needle was found inside the right brachiocephalic artery.



Needle was retrieved and primary repair of artery was done. Patient extubated on table and shifted to ICU for next 24 hours. Post-op recovery was uneventful and patient was discharged after taken psychiatry opinion on anti-psychotic medications.

Multiple Degloving Wounds in Upper and Lower Limbs

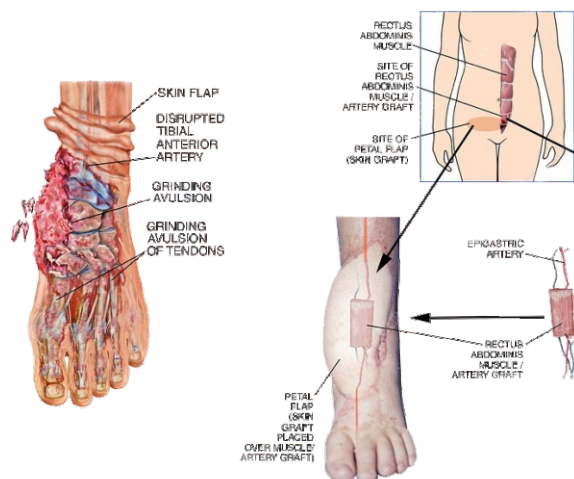
55 years old male patient came to ER with history of road traffic accident with degloving wound on right upper and lower limb Department of Orthopaedics took care.

X ray findings:

1. Right inferior pubic rami fracture.
2. Right femur shaft fracture.
3. Right proximal tibia fracture.
4. Right distal tibia/fibula fracture.
5. Right distal radius fracture.
6. Right ulna segmental fracture.

Wound debridement was done, open reduction and Proximal Femoral Nail Antirotation (PFNA) was applied, Ilizarov was applied in proximal tibia, split skin graft done by department of plastic surgery. Open Reduction and Internal Fixation (ORIF) of radius, ulna and scaphoid was done with 2.0mm screws. Perforator flap and split skin graft was done by Department of Plastic Surgery and Ilizarov adjustment was done again.

Over 50 days of hospitalization, multiple surgeries, intense wound care, full support by the Department of Plastic Surgery and nursing care has resulted in successful management and rehabilitation of this patient. He was discharged and followed up to check his general health and healing of the wound.



Reconstructive and Aesthetic Work by Plastic Surgery Department

As Harry Houdini said, "What the eyes see and the ears hear, the mind believes." Sight is the greatest miracle and most important of all senses. Any injury to eyes or any detriment to the sight can have unfathomable effects on one's quality of life.

One such patient, an elderly female while crossing road as a pedestrian, her daily activities suffered a hit and run accident which led to her fall on the road and her head hit the pavement with trauma to left side of temple and left eye.

She was brought to emergency department of Shaheed Mohtarma Benazir Bhutto Institute of Trauma where our highly qualified and enthusiastic team provided emergency treatment and Ophthalmology department was taken on board who after accessing vision, they did cleaning of left lower eye wound and repaired it primarily and then referred her to plastic surgery department for temporal wound coverage.

These patients need expert and highly skilled care as they have injury to multiple and highly sensitive parts of the face with limited reconstructive option and wide array of aesthetic concerns. Patient was kept on daily dressing and intravenous antibiotics until the wound



was clean and then she was taken to our state-of-the-art operating room for temple wound closures. Post operative recovery was uneventful but she developed ectropion of the lower eyelid due to poor scarring related to her advance age. Keeping in mind the risk associated with prolong exposure of ocular surfaces, and urgency to provide reliable coverage with good aesthetic outcomes, she was planned for a nasojugal flap and buccal mucosa skin graft to provide inner lining of lower eyelid.

She is extremely satisfied with her postoperative result as scars are well hidden and she has good eye function.

Activities of Nursing Department

Workshops Arranged:

Name of workshop	Total no. of workshop
Basic critical care workshop (3 days workshop)	11
Medication Administration Workshop (2 days workshop)	10
Research Methodology & Synopsis Writing (1 day workshop)	01
Importance of Research in Nursing (1 day workshop)	01
Improving Patient Safety Culture (1 day workshop)	01
IV Cannulation Workshop (1 day workshop)	01

Sessions Conducted:

143 different topics

Nursing Orientation Program

6 programs were conducted over the period of one year.

Topic covered: Introduction to the department, professionalism at work place, handing & taking over, nursing documentation, standard precaution, fall assessment & prevention, head to toe assessment, IPSG.

Nursing orientation plays a pivotal role in the competency and retention of newly hired registered nurses. They spent the most time with the patients and it is crucial for the patients' well-being that the nurses of our hospital are skilled, qualified and motivated. In keeping with the SMBB Institute of Trauma vision, mission, values and goals, the objectives of nursing orientation are geared towards creatively using existing resources to meet the new demands of a constantly changing health-care environment. Besides this it provides a platform to the nurses to ask questions and clarify doubts, thus preparing them for the tasks before they join wards and begin hands-on care for patients.

Zygomaticomaxillary Complex and Maxillary Le Fort I & II Fractures

We are sharing an interesting case of a 13-year-old female child who met an RTA in July 2022. She was travelling towards her home sitting along with her family on roof top cover of a van due to lack of space inside van. Suddenly on the way, a weak bridge pillar fall on her face while van was crossing under bridge. She was conscious at that time and bleeding from mouth, nose and face so was brought to nearby govt. hospital where first aid given and referred her directly to Shaheed Mohtarma Benazir Bhutto Institute of Trauma (SMBBIT) Karachi for further management. As, she was received in our emergency department, the trauma team rushed in to manage her and provided further care.



She was referred to OMFS department for further management, we found that she had having disturbed occlusal plane, dropped left side of eye level along with drooping of upper eye lid. She was diagnosed with facial fractures zygomaticomaxillary complex and maxillary Lefort-I & II fractures bilaterally. We as an OMFS planned to reposition her dropped face into correct position under GA to improve her quality of life and also involved ophthalmology department to manage her drooped upper eyelid. Eye department cleared (this case) on eye drops & suggested no intervention.



After proper assessment, optimizing patient and taking written informed consent she was operated

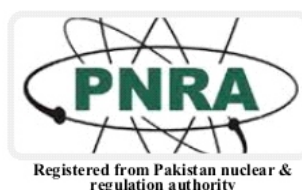
under GA, as we repositioned her dropped face into normal position, fixed all facial fractures with trans-osseous wiring in spite of titanium plating in order to prevent her from growth disturbance of facial skeleton and closed her mouth for 02 weeks to let her maxilla heal. As upper lid tarsal plate was also suspended with pericranium and crepe bandage was tied for 10-days to correct the drooped upper eyelid.

The patient was continuously assessed on follow up patient and her parents were satisfied with facial symmetry but only having ptosis, still so we had referred this case to ophthalmology for this issue.

Bronchial Artery Embolization in Idiopathic Haemoptysis

A 40 year old male with no known comorbidity presented with hemoptysis for 1 month. No past history of tuberculosis on CT scan no sign of bleeder was seen. Massive hemoptysis could not be controlled with conservative and bronchoscopic methods and were sent to the digital subtraction angiography unit. The patient was treated safely and successfully with transcatheter embolization of the bronchial arteries using embolizing agent (PVA Particles) by Interventional Radiology team with kind support of Thoracic Surgery team. Hemoptysis was controlled and the case was followed with no recurrence of bleeding.

Quality Improvement Activities - Licensing & Registrations



SMBBIT Clinical Departments:

Accident & Emergency, Neurosurgery, Orthopaedics, Vascular Surgery, Interventional Radiology, Ophthalmology, Infectious Diseases, Anaesthesia & ICU, Operation Theatre, Diagnostic Radiology, Oral & Maxillofacial Surgery, Thoracic Surgery and Plastic Surgery.

Essential Medicines Donated for Earth Quake Victims of Syria and Turkey

A devastating earthquake of 7.8 on the richter scale hit southern Turkey in the early hours of 6 February (4:17 am), affecting regions in Turkey and Syria are home to around 23 million people including 1.4 million children. In the aftershock of terrible earthquake that shook the major cities of brethren Islamic countries i.e. Turkey and Syria in which thousands of people have lost their lives and thousands have been injured very seriously.

Health department, Government of Pakistan advised all the public sector institutions to donate essential medicines generously specially required for emergency use to help our muslim brethren in this time of distress. Donations of medication can alleviate peoples' suffering and international relief efforts benefit enormously from donations by private individuals, groups and organizations. SMBBIT also extended helping hand to the earthquake victims of Turkey and Syria by donating essential medicines and surgical disposables in the face of disaster the natural impulse in order to reach out and help our muslim brethren in need.

SMBBIT is Accredited in Following Disciplines for Postgraduate Trainings of FCPS & MCPS by CPSP:



- ❖ Anesthesiology
- ❖ Diagnostic Radiology
- ❖ Infectious Diseases
- ❖ Vascular Surgery
- ❖ Oral & Maxillofacial Surgery
- ❖ Trauma Orthopedics
- ❖ Thoracic Surgery
- ❖ Emergency Medicine
- ❖ Plastic Surgery

Patient Safety - Implementation of Ham and Lasa Policy at SMBBIT

In the light of the guidelines on high alert medication management by the Drug Regulatory Authority of Pakistan (DRAP), Department of Pharmacy Services, SMBBIT under the guidance of the In-charge Pharmacy Services and Store Department Dr. Zarnab has implemented high alert medications and look alike and sound alike medications policy for safe prescribing, dispensing, administration and monitoring of high alert medications at the Institute.

One of the AHRQ; Agency for Healthcare Research and Quality; National Quality Forum's (NQF) 30 safe practices for better healthcare is to "identify all high-alert drugs, and establish policies and processes to minimize the risks associated with the use of these drugs.

These 30 safe practices can work to reduce or prevent adverse events and medication errors. These practices are universally adopted by all applicable health care settings to reduce the risk of harm to patients.

High Alert Medication (HAM) bear a heightened risk of causing significant patient harm due to error in storage, prescribing, dispensing, administration and use. Thus, its implementation will allow all healthcare professionals to safely manage high alert medication and prevent risks of medication errors during all stages of high alert medication management and improved patient safety and health at the institute.

SMBBIT had treated more than 630,000 other surgical cases since its inception. Last year alone SMBBIT had successfully managed over 135,000 such cases.

OUR VISION

Aspires to be Southeast Asia's primary Level-I specialized healthcare facility, providing timely emergency care and trauma management with patient centered focus"

Employee of the Month Recognition Program

The employee of the month ceremony was held on 11th March 2023 to acknowledge and reward the employees for their hard work and dedication. Employee of the month recognition award which was given to the outstanding employees who met the defined criteria on monthly basis and their performance was beyond the expectation in their assigned roles. The employee of the month award serves as a motivational tool for employees to perform their best and strive for excellence. It also helps to create a positive work culture by boosting morale and increasing employee engagement. SMBBIT believes that employee of the month award is a great way to give appreciation to our valuable employees and motivate them to excel in their roles and create a positive work environment. The honorable Executive Director Dr. Sabir Memon and HODs / In-charges distributed the certificates to the monthly best performers.

Employee of the Month of August & September 2022



Employee of the Month of October & November 2022



Employee of the Month of December 2022



Employee of the Month of January 2023




Early Warning Score - EWS and Code Blue Implementation

Introduction

Recently, the Head of Emergency Department - Dr Azer Shaikh took initiatives to introduce patient's safety tool in ER as 'Early Warning Score' (EWS). After successful pilot project of EWS in ER, higher management decided to implement early warning score system all over the Institute. Multiple teaching sessions were delivered by ER team to all HODs, Physicians, specialists, nursing staff and paramedics. which also included 'Code Blue' training lectures.

The objective for these lectures for 'EWS' and 'Code Blue' was to provide the best, safe and timely care to our patients and at the same time to ensure protection our staff as well.

 SHAHEED MOHTARMA BENAZIR BHUTTO INSTITUTE OF TRAUMA KARACHI							
ADULT EARLY WARNING SCORE							
Physiological parameter	3	2	1	Score	1	2	3
Respiration rate (per minute)	≤ 8		9-11	12-20		21-24	≥ 25
SpO2 Scale 1 (%)	≤ 91	92-93	94-95	≥ 96			
Air or oxygen?		Oxygen		Air			
SpO2 Scale 2 (%) (copd, Type 2 RF)	≤ 83	84-85	86-87	88-92 ≥ 93 on air	93-94 on oxygen	95-96 on oxygen	≥ 97 on oxygen
Systolic blood pressure (mmHg)	≤ 90	91-100	101-110	111-219			≥ 220
Pulse (per minute)	≤ 40		41-50	51-90	91-110	111-130	≥ 131
Consciousness(*ACVPU)				Alert			*CVPU
Temperature (°F)	95		95.18-96.8	96.98-100.4	100.58-102.2	102.38	
*A- alert, C- new onset confusion, V- verbal response, P-painful stimuli, U- unresponsive Clinical response to the EWS triggers thresholds							
EW score	Frequency of monitoring		Clinical response				
0	Continue Routine Vitals		<ul style="list-style-type: none"> Continue routine EWS monitoring 				
Total 1-4 (Low risk)	Minimum 4-6 hourly		<ul style="list-style-type: none"> Inform nursing team leader, who will assess the patient Team leader decides whether increased frequency of monitoring and/or escalation of care is required 				
3 in single parameter (Low to medium risk)	Minimum 1 hourly		<ul style="list-style-type: none"> Nurse to inform medical officer caring for the patient, who will review, determine the cause and decide whether escalation of care is necessary 				
Total 5-6 Urgent response Threshold (Medium risk)	Minimum 1 hourly		<ul style="list-style-type: none"> Nurse to immediately inform the medical officer caring for the patient Medical officer to review the pt: & consider to request urgent assessment by a primary team or HDU Provide clinical care in an environment with monitoring facilities 				
Total 7 or more Emergency response Threshold (High risk)	Continuous monitoring of vital sign		<ul style="list-style-type: none"> Nurse to immediately inform the senior medical officer on ward caring for the patient Emergency assessment by primary & ICU team Consider transfer patient to higher-dependency unit or ICU Provide clinical care in an environment with monitoring facilities 				
SMBBIT/EWS/037		2023			Revision No. 00		

Ophthalmology & Visual Science Session


The Department of Ophthalmology and Visual Sciences, at SMBB Institute of Trauma conducted a successful program on “ Interactive session on DSAEK/DMEK followed by Live Surgery “ on 14 February 2023. The international speaker, Dr. Mujtaba Qazi who is a renowned Cornea & Refractive Surgeon and Director of Clinical Studies at Pepose Vision Institute, Saint-Louis, USA.

The program was attended by eminent Cornea & Refractive Surgeons & Ophthalmologists from all over Karachi.

In the beginning of the session, there was a comprehensive discussion on the basic surgical techniques of Lamellar Keratoplasty (DSAEK/DMEK) followed by demonstration of Live Surgery by Dr Qazi & Dr Asad. There were more than 100 participants for the program.

In conclusion it was a highly informative and enlightening session for both budding Ophthalmologists and experienced surgeon and we plan on executing similar programs in future.




INTERACTIVE SESSION ON DSAEK /DMEK + LIVE SURGERY



Renowned Cornea & Refractive Surgeon
Dr. Mujtaba Qazi
 Director Pepose Vision Institute
 St. Louis, USA

14th February 2023 Time: 09:00 am to 1:00 pm

Venue: Seminar Hall
 Department of Ophthalmology & Visual Sciences
 Trauma Center, Civil Hospital, Karachi

Talk on DSAEK/DMEK
 10:15am -11:15am
Live Surgery
 11:30am-1:00pm

Prof. Dr. Mazhar-ul-Hasan
 Chairperson
 Department of Ophthalmology & Visual Sciences
 Civil Hospital Karachi

Program Coordinator:
Dr. Asad Azeem Mirza
 Assistant Professor DMC/DUHS



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