| P-391 | MEDICAL MANAGEMENT OF RADIOCONTAMINATED WOUNDED BY THE FRENCH MILITARY HEALTH SERVICE CASTAGNET X ¹ , AMABILE JC ¹ , PENNACINO A ² , DE CARBONNIÈRES H ¹ , LAROCHE P ¹ (1) Service de Protection Radiologique des Armées, Clamart, France (2) Direction Centrale du Service de Santé des Armées, Paris, France |
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| Presentation preference: Poster Only Major scientific thematic areas: TA8 - Incidents and Accidents | The French armed forces health service has set up in France specialized installation only designed and used to take care of radio contaminated patients. These installations can be used for the military and for the civilians, e.g. in case of an accident in a civilian nuclear installation or in case of terroris attack with a few injured. |
| | The main principles of the medical management of a radiocontaminate wounded are: - Trauma care is the first priority, - External decontamination has to be treated as fast and reasonnably a possible, - Medical treatment for internal contamination is more efficiency that is given earlier (stable iodine, DTPA). |
| | Three type of installations have been developed to take charge of contaminated patient or with a suspicion of contamination: The hasty decontamination post, to take into account the involved victims physically fit, The advance post for radio-contaminated wounded (PABRC), for the relative emergency whom evacuation can be delayed after medical examination, The center for the treatment of radio-contaminated wounded (CTBRC), in an hospital area, for the absolute emergencies (needding some resuscitation and emergency surgery for saving life, like stopping an hemorrhage). Each military hospital in France has is own CTBRC. |
| | These structures are dedicated to the decontamination, that means that all type of decontamination would be conducted here: skin decontamination, internal decontamination by specific decontaminant if needed, and decontamination of a contaminated wound by surgical means. This type of surgery might be associated with a precise detection. At his arrival, in a first time, the victim is examined by an emergency physician who is in charge of the structure. Secondly, he makes a triage concerning the medical emergency to identify the type of emergency, life threatening emergency or not. — If the patient is a critical case then the medical treatment take precedence over contamination |

 If the patient is not a critical case then the decontamination sequence is conducted before the medical treatment.