

# Injuries diagnosed post initial admission

## Frequently asked questions (FAQ)

**This information has been developed to explain the reason for, and management of, delayed diagnoses in patients with significant trauma**

### What is the process for identifying all injuries in patients with significant trauma?

When you first arrive to the emergency department, an initial assessment is performed by the treating medical team. This is called a Primary Survey and is conducted to identify any life-threatening injuries you might have, so that treatment can be initiated promptly.

Once these injuries have been stabilised – or excluded – a more comprehensive survey known as the Secondary Survey, is then performed to identify lesser injuries that may also require early intervention.

### Will all of my injuries get identified during the primary and secondary surveys?

Although our staff will assess you to gather as much information about your injuries as possible during your primary and secondary survey, there may be times where injuries that are identified in the Primary Survey need urgent investigation and/or treatment and you may find yourself transferred to another, more appropriate, area of the hospital (e.g. CT scanner, operating theatres).

### How then will any other injuries get identified?

Within the first couple of days, once everything has settled down, the trauma doctor will go through all of your investigation reports and then examine you in a controlled manner from top to toe. This is called the Tertiary Survey.

### How can I contribute to my Tertiary Survey?

Whilst you have this exclusive, one-on-one time with your trauma doctor, this is the perfect time to ask any questions regarding your known injuries, and to raise any concerns regarding pain or mobility, which you feel may not have been addressed previously.

Remember, you may also discuss your treatment plan at any time with the medical, nursing and allied health staff on the ward.

### So what happens next?

Depending on the urgency of these injuries and in the context of your other injuries, treatment (if required) may start immediately, or a management plan may be developed as part of your discharge plan, for outpatient or specialist follow-up.

