

Poster #: 41

Title of Shootings and Stabbings Uncensored

Abstract:

Institution: SUNY Downstate-Kings County Medical Center

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Modality: CT

Organ System: GI

Intro: N/A

Purpose: N/A

Methods Used: N/A

Results of N/A

Abstract:

Discussion: N/A

**Scientific
and/or Clinical
Significance?** N/A

**Relationship
to existing
work** N/A

Purpose: Review of the Computed Tomography (CT) findings of stab wounds and ballistic injuries to the abdomen, with common and uncommon cases. Content Organization: Case based review of abdominal and gastrointestinal tract injury secondary to penetrating ballistic fragments and stab wounds including cases of carotid esophageal fistula and active scrotal hemorrhage. Major Teaching Points: Pre-operative imaging continues to be an invaluable tool by providing a road map to the trauma surgery team as exsanguination remains the most common cause of death in the first 24 hours after trauma. Common acute findings include hemoperitoneum, active extravasation of intravenous contrast, pneumoperitoneum, devascularization, solid organ lacerations, contusions, and subcapsular hematomas. In our high volume trauma center we have found that imaging optimized during late arterial phase timing with associated administration of rectal contrast continues to be an essential tool in localizing the source of injury in patients who present with penetrating trauma to the abdomen or pelvis, in order to appropriately triage patients to the operating room versus the interventional radiology suite. We will review some novel cases illustrating the teaching points listed above with imaging findings and outcomes.