FACULTY
Course Director Christine Gaarder (Oslo, Norway)
Course Co-Director Hayato Kurihara (Rozzano, Italy)

International Faculty
Pål Aksel Naess, Surgery (Oslo, Norway)
Peep Talving, Surgery (Tartu, Estonia)
Frank Piani, Surgery (Johannesburg, South Africa)
Anders Holtan, Anaesthesia (Oslo, Norway)

National Faculty
Pietro Padalino, Surgery (Monza, Italy)
Mauro Zago, Surgery (Bergamo, Italy)
Tiberio Canini, Surgery (Milan, Italy)
Diego Mariani, Surgery (Legnano, Italy)
Lucio Bucci, Anaesthesia (Milan, Italy)
Elena Costantini, Anaesthesia (Rozzano, Italy)

Coordinator
Fabiana Cambiaghi (Rozzano, Italy)

REGISTRATION How to register online www.formazione-trauma.it
Registration FEES
SURGEONS / ANESTHESIA DSTC COURSE: Theory + hands on training Course - € 1,500,00 + VAT 22%
NURSE: Theory - € 300,00 + VAT 22%
How to pay: Bank transfer - NET OF BANK CHARGES - to Materia Prima Srl
C/o - Bank name: UBI BANCA - BANCA POPOLARE DI BERGAMO
IT 53 A 05428 11101 000000008533
Please make reference to DSTC COURSE 2017
Definitive SURGICAL TRAUMA CARE - DSTCTM Course & Definitive ANAESTHETIC TRAUMA CARE - DATC Course

The Advanced Trauma Life Support (ATLS®) Course of the American College of Surgeons has had a dramatic effect in improving outcome of patients by standardizing their resuscitation and initial assessment, and providing one safe simple way for the initial care of such patients. However, ATLS® makes very little provision for care beyond the “Golden Hour”, and often the surgical care that the patient receives after resuscitation is performed by those inexperienced in the surgical management of the trauma patient.

“Standard” general surgical training received in the management of trauma is often deficient, partly because traditional surgical training is more and more organ specific, concentrating on “superspecialties” and partly because in most developed training programs, there is limited exposure to the range of injured patients.

It is not enough to be a good operator. The effective practitioner is part of a multidisciplinary team that plans for, and is trained to provide, the essential resuscitative and surgical response required in the management of the injured patient.

Planning the response requires an understanding of:

• The causation of injuries produced in the local population. An urban population with motorways will have a different spectrum of injury to an armed inner-city population.
• The emergency, pre-hospital and emergency room care of the patient. The condition in which the patient is delivered to the hospital and subsequently to the operating room will be determined by the emergency response, and in many respects will determine outcome.
• The resources, both physical and intellectual within the hospital, and the ability to anticipate the specific problems associated with the patient with multiple injuries.

The International Association for Trauma Surgery and Intensive Care (IATSIC) is a founding component of the Société International de Chirurgie (International Society of Surgery) – iSS/SIC. Under the patronage and supervision of IATSIC, the Definitive Surgical Trauma Care (DSTCTM) course has been developed for surgeons who may be faced with the definitive care of a patient with multiple injuries. Since best possible in-hospital care needs a coordinated multimodal approach by an informed and trained team and in most settings the in-hospital team of acute trauma care will consist of nursing staff, surgeons, anaesthetists and intensivists, the Definitive Anaesthetic Trauma Care (DATC) course has been developed in order to help anaesthetists and intensivists to develop trauma related competencies focusing on Damage Control Resuscitation. The DATC course covers the Damage Control period until re-operation for definitive treatment and is always given together with the DSTCTM.

The position within iATSIC and the integrated organizational structure of both DSTCTM and DATC reflects the will for a close cooperation between the surgical, anaesthetic and intensive care teams; mutual understanding of the concepts and procedures specific to each specialty will in fact ultimately lead to an improved patient outcome.

The course focuses on:

• Surgical decision making in complex scenarios
• Peroperative anaesthesia and Damage Control Resuscitation
• Operative techniques in critically ill trauma patients
• Hands-on practical experience with experienced instructors (both national and international)
• Insight into difficult trauma situations with learned techniques of haemorrhage control and the ability to handle major thoracic, cardiac and abdominal injuries
• Animal laboratory training.
• Multidisciplinary team approach

The combined DSTCTM and DATC course is an intensive 3-day course that consists of key note lecturers, multidisciplinary case presentations, fireside discussions and workshops. During the course surgeons, anaesthesiologists and operating room nurses work together as real trauma teams.

1st day
WEDNESDAY
October 11th (8.00 - 18.00)

- Surgical Decision making
- Damage control resuscitation
- The trauma laparotomy
- Abdominal injuries - overview
- Liver injuries

SEPARATE SESSIONS
SURGEONS
- Pelvic injury
- Case discussions
- FAST
- Trauma anaesthesia
- Fluid resuscitation

ANAESTHESIOLOGISTS AND INTENSIVISTS
- Practical conduct of trauma anaesthesia
- Introduction to the facilities, equipment & expectations

SCRUB NURSES
- The trauma laparotomy – operating room nursing aspects

2nd day
THURSDAY
October 12th (8.00 - 18.00)

SKILLS PRACTICAL SESSION 1
- Defusng after practical skills
- Chest injuries
- Case discussion
- Massive transfusions
- Neck injuries and mediastinum

3rd day
FRIDAY
October 13th (8.00 - 15.00)

SKILLS PRACTICAL SESSION 2
- Urological injuries
- Extremity injuries and fasciotomy
- Endpoints in resuscitation
- Group discussion
- Complex cases, closure & evaluation