

# E-FAST

E-FAST is a limited trauma ultrasound that only aims to detect:

- Intra abdominal free fluid
- Pericardial effusion
- Major haemothorax
- Pneumothorax

A normal E-FAST does not exclude significant intra abdominal injury

Patient details

Mechanism of Trauma	Pulse	BP	RR	Sats
Examination Findings				

Probe Position	Views	Notes	Findings			Optional Information		
	1 RUQ	<p><b>RUQ</b> Fluid collects in Morison's Pouch Look above diaphragm for HTX 5° head down tilt will increase RUQ fluid</p>	Right Upper Quadrant	Normal	Inadequate	Positive	< 2mm maximal depth	
								> 10 mm maximal depth
	2 LUQ	<p><b>LUQ</b> Fluid can collect around the entire spleen Look above the diaphragm for HTX</p>	Right Haemothorax	Normal	Inadequate	Positive		
	3 Subcostal	<p><b>Subcostal</b> Tamponade is a clinical diagnosis Look for fluid in the pericardial space Intra-abdominal fluid above the liver can simulate fluid in front of the right ventricle - although it is on the other side of the diaphragm Pericardial fat pads may give the appearance of pericardial fluid Fluid must have a depth of &gt;5mm; traces of pericardial fluid are normal</p>	Left Upper Quadrant	Normal	Inadequate	Positive	< 2mm maximal depth	
							2 - 10mm maximal depth	
							> 10 mm maximal depth	
4 Male Pelvis LS	<p><b>Pelvis</b> Look for free fluid behind and above the bladder In the female, fluid collects initially in the Pouch of Douglas A small amount of pelvis free fluid is normal in women</p>	Left Haemothorax	Normal	Inadequate	Positive			
5 Female Pelvis TS		Subcostal	Normal	Inadequate	Positive	Maximal depth ____ mm		
							< 2mm maximal depth	
							2-10mm maximal depth	
							> 10 mm maximal depth	
6 & 7 Lung LS	<p><b>Lung</b> Sliding sign and comet tail artefact are normal; loss of these indicate PTX Pleuradhesions, large bullae, COPD and non-ventilation (eg endobronchial intubation) can simulate PTX</p>	Right Lung Pneumothorax	Normal	Inadequate	Positive	Detected anteriorly		
							Anteriorly and laterally	
			Left Lung Pneumothorax	Normal	Inadequate	Positive	Detected anteriorly	
							Anteriorly and laterally	

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<b>Conclusions</b> (Note: E-FAST findings must be consistent with clinical suspicion; integrate history, examination, investigations and EFAST findings to reach a conclusion)

Clinician	Signature	Date	Time	<b>EMERGENCY CLINICAL ULTRASOUND</b>
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