

An Ongoing Series

In the Neck and Not Out of the Woods

Christopher Dare, SOIDC¹; Katarzyna (Kasia) Hampton, MD^{2*}

After a strenuous 3-day mission in a remote location, one of your teammates approaches you about his left-sided neck pain, which has been worsening for the past 2 days. Feeling quite exhausted yourself, you suspect musculoskeletal neck strain and offer him a dose of acetaminophen. Unfortunately, 2 hours later, your patient returns with vomiting and rapidly progressive orthopnea.

Now you decide to obtain a thorough clinical assessment and find the following: heart rate 125 beats/min, blood pressure 100/70mmHg, respiratory rate 30/min, SpO₂ 99% on room air, and temperature 37.5°C (99.5°F).

You observe a 33-year-old uncomfortable-appearing man. Inspection and palpation of the neck are unremarkable, which speaks against your initial suspicion of neck strain. The

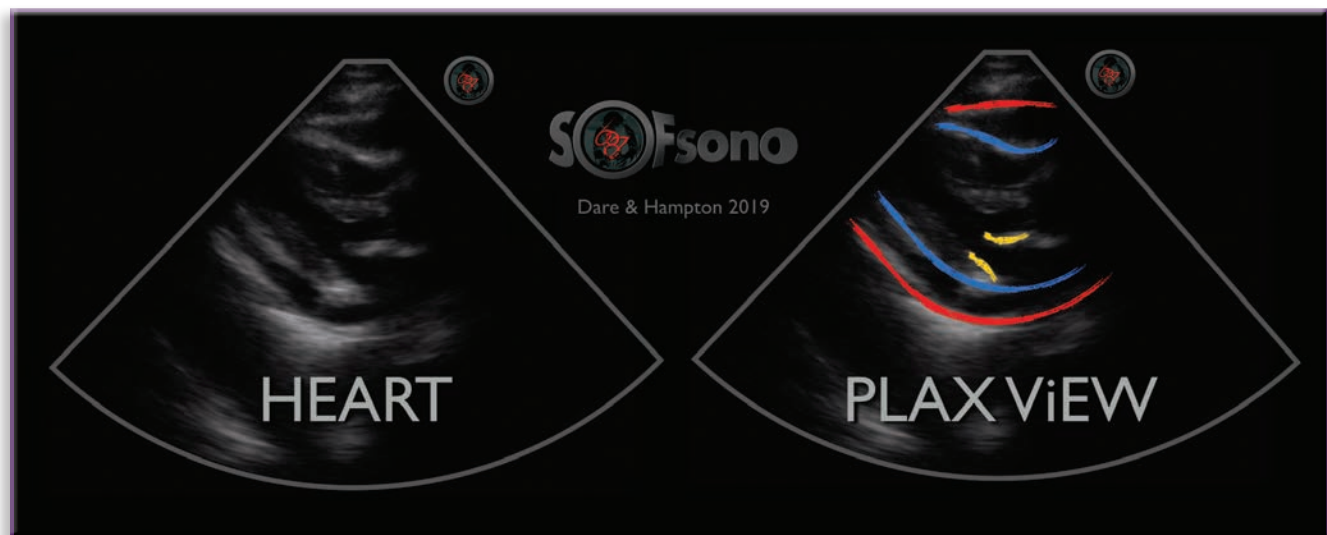
reminder of his examination is notable only for perceived difficulty in auscultation of cardiac sounds, so you obtain a focused echocardiogram.

1. What findings are present in Figure 1, and would you anticipate the possibility of rapid hemodynamic deterioration based on those findings?
2. What technical trick could you apply if having difficulty assessing for the finding in Figure 1?

Join us at SOFsono.org for further case discussion.

We acknowledge the kind case suggestion from CAPT Ryan C. Maves, MD (US Navy).

FIGURE 1 Heart – PLAX (parasternal long axis) view.



*Correspondence to sofsono.org@gmail.com

¹CPO Dare is a Special Operations Independent Duty Corpsman (SOIDC) and is currently the Navy Senior Enlisted Leader at 1st Reconnaissance Battalion. ²Dr Hampton is an emergency physician and a volunteer SME ultrasound instructor for the military medical community. She is currently practicing at the Landstuhl Regional Medical Center, Germany (US Army Medical Department).



Spring 2019
Volume 19, Edition 1

JSOM

JOURNAL of SPECIAL OPERATIONS MEDICINE™



THE JOURNAL FOR OPERATIONAL MEDICINE AND TACTICAL CASUALTY CARE



Inside this Issue:

- › CASE REPORTS: Case Report of *Acinetobacter junii* Wound Infection
- › Unstable Pelvic Fracture Reduction Under Ultrasonographic Control
- › Successful Resuscitative Thoracotomy in an HH-60 Black Hawk
- › Testicular Cancer: Case Report in SOF
- › SPECIAL ARTICLES: NATO Military Medical Exercise Vigorous Warrior 2017
- › Quality of Life Plus Program (QL+)
- › FEATURE ARTICLES: Tourniquet Configuration › Tourniquet Effectiveness Monitoring
- › Improvised Ground Casualty Evacuation Platforms
- › PHTR Experience With Intraosseous Access
- › Comparison of Postexercise Cooling Methods in Working Dogs
- › Psychological Strategies in Navy Explosive Ordnance Disposal Training
- › Integrating PFC Into the Mountain Critical Care Course
- › Battlefield Analgesia and TCCC Guidelines Adherence › EpiNATO-2: 2016 Q Fever Outbreak in Kosovo Force
- › Low-Resource TCCC Training in Remote Areas of Kurdistan › Effect of Marine Exposure on Hemostatic Gauze Efficacy
- › Ranger Athlete Warrior Assessment Performance
- › Ongoing Series: Canine Medicine, Human Performance Optimization, Injury Prevention, SOFsono Ultrasound, Special Talk, Book Review, TCCC Updates, and more!

*Dedicated to the
Indomitable Spirit
and Sacrifices of
the SOF Medic*

A Peer-Reviewed Journal That Brings Together the Global Interests of Special Operations' First Responders