

**URGENT MEDICAL AID TO CHILDREN
WITH POLYORGANIC AND POLYSYSTEMIC INJURIES AT THE PREHOSPITAL STAGE**

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We have analyzed the generally known standardized systems of estimating the severity of injuries and condition of the victims with trauma ISS (Injuryseverityscore), TISS (Traumainjuryseverityscore), PTS (Pediatrictraumascore), PRISM (Pediatricriskofmortality), MPM (Mortalitypredictionmodel), MOSF (MultipleOrganSystemFailure) and came to the conclusion that automatic copying and application of European standards and algorithms is impossible, what is caused by different levels of supply and imperfect regulatory and legal basis in the system of rendering first aid. There is a necessity of development of systems of standardized estimating injuries severity and the condition of the injured child at the prehospital stage.

Differential treatment tactics of the traumatized persons during acute period must include: the general complex of elimination of the crisis condition of main life function; direct measures as for restoration of anatomical structures and functions of the damaged organs and segments depending on the peculiarities of injuries combination. It is reasonable to perform the treatment of children with polyorganic and polysystemic injuries on the grounds of medical-tactical algorithm. The tactical and technical demands of traumatologic care depend on the severity of the patient's general condition, the structure of anatomical and morphological damage and should be performed with consideration of the prognosis.