

THE ART OF WAR

WARRIOR TASKS

PERFORM FIRST AID FOR BLEEDING OF AN EXTREMITY



Master Sgt. Luis Rodriguez
School of Combat Medicine, 101st Airborne

“It is a must that you know your CTTs and Warrior Tasks. It is a must. You have to start with the mentality that you have to understand and believe that the taskings are paramount. Because when you are scared, the one thing that is going to kick in is your training. So you have to train good, train hard and believe in that training.”

Staff Sgt. Joshua Forbess
320th Field Artillery Regiment, Ft. Campbell, Ky

“You need to learn your skills and do your skills, because if it weren’t for the combat medics that went to the crash site and began treatment that ultimately got me to the field hospital and then to Ft. Sam Houston, I wouldn’t be here today.”

Capt. Brad Tibbetts
School of Combat Medicine, 101st Airborne

“In the civilian world we look at the Golden Hour, for us [in the military] it’s the Platinum five minutes -- you can bleed to death in five minutes. The point of injury care, what happens immediately on the ground, affects survivability in combat.”



Photo by Michael E. Duker

Actor Tom Hanks jokes with 82nd Airborne soldier Staff Sgt. Maurice Craft in Walter Reed Army Medical Center’s Physical Therapy Clinic Feb. 5. Among other injuries, Craft lost his left leg in Iraq when he was wounded from an improvised explosive device last year.

081-831-1032 (SL1) from Soldiers Manual of Common Tasks Skill Level 1 STP 21-1-SMCT August 2003

Conditions: You have a casualty who has a bleeding wound of the arm or leg. The casualty is breathing. Necessary equipment and materials: casualty’s first aid packet, materials to improvise a pressure dressing (wadding and cravat or strip of cloth), materials to elevate the extremity (blanket, shelter half, poncho, log, or any available material), rigid object (stick, tent peg, or similar object), and a strip of cloth.

Standards: Controlled bleeding from the wound following the correct sequence. Placed a field dressing over the wound with the sides of the dressing sealed so it did not slip. Checked to ensure the field and pressure dressing did not have a tourniquet-like effect. Applied a tourniquet to stop profuse bleeding not stopped by the dressings, or for missing arms and legs.

Performance Measures

1. Uncovered the wound.
2. Applied a field dressing.
3. Applied manual pressure and elevated the arm or leg, if necessary.
4. Applied a pressure dressing, if necessary.
5. Applied a tourniquet, if necessary.
6. Performed steps 1 through 5, as necessary, in sequence.

Go	No-Go
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

TASK 081-831-1032

PASS FAIL

Perform first aid for bleeding of an extremity.

Performance Steps

1. Uncover the wound unless clothing is stuck to the wound or in a chemical environment.

WARNING: Do not remove protective clothing in a chemical environment. Apply dressings over the protective clothing. **Note.** If an arm or leg has been cut off, go to step 5.

2. Apply the casualty's field dressing.

a. Apply the dressing, white side down, directly over the wound.

b. Wrap each tail, one at a time, in opposite directions around the wound so the dressing is covered and both sides are sealed.

c. Tie the tails into a nonslip knot over the outer edge of the dressing, not over the wound.

d. Check the dressing to make sure it is tied firmly enough to prevent slipping without causing a tourniquet-like effect.

WARNING: Field and pressure dressings should not have a tourniquet-like effect. The dressing must be loosened if the skin beyond the injury becomes cool, blue, or numb

3. Apply manual pressure and elevate the arm or leg to reduce bleeding, if necessary.

a. Apply firm manual pressure over the dressing for 5 to 10 minutes.

b. Elevate the injured part above the level of the heart unless a fracture is suspected and has not been splinted.

4. Apply a pressure dressing if the bleeding continues.

a. Keep the arm or leg elevated.

b. Place a wad of padding directly over the wound.

c. Place an improvised dressing over the wad of padding and wrap it tightly around the limb.

d. Tie the ends in a nonslip knot directly over the wound.

e. Check the dressing to make sure it does not have a tourniquet-like effect.

Note. If the bleeding stops, watch the casualty closely, and check for other injuries. If heavy bleeding continues, apply a tourniquet. **WARNING:** The only time a tourniquet should be applied is when an arm or leg has been cut off or when heavy bleeding cannot be stopped by a pressure dressing. If only part of a hand or foot has been cut off, the bleeding should be stopped using a pressure dressing.

5. Apply a tourniquet.

a. Make a tourniquet at least two inches wide.

b. Position the tourniquet.

(1) Place the tourniquet over the smoothed sleeve or trouser leg if possible.

(2) Place the tourniquet around the limb two to four inches above the wound between the wound and the heart but not on a joint or directly over a wound or a fracture.

(3) Place the tourniquet just above, and as close to the joint as possible, when wounds are just below a joint.

c. Put on the tourniquet.

(1) Tie a half knot.

(2) Place a stick (or similar object) on top of the half knot.

(3) Tie a full knot over the stick.

(4) Twist the stick until the tourniquet is tight around the limb and bright red bleeding has stopped.

Note. In case of an amputation, dark oozing blood may continue for a short time.

d. Secure the tourniquet. The tourniquet can be secured using the ends of the tourniquet band or with another piece of cloth as long as the stick does not unwind.

Note. If a limb is completely amputated, the stump should be padded and bandaged (do not cover the tourniquet). If possible, severed limbs or body parts should be saved and transported with, but out of sight of, the casualty. The body parts should be wrapped in dry, sterile dressing and placed in a dry, plastic bag and in turn placed in a cool container (do not soak in water or saline or allow to freeze). It is entirely possible that your location in the field/combat may not allow for the correct preserving of parts; do what you can. **WARNING:** Do not loosen or release a tourniquet once it has been applied

e. Mark the casualty's forehead with a letter T using a pen, mud, the casualty's blood, or whatever is available.

6. Watch the casualty closely for life-threatening conditions, check for other injuries, if necessary, and treat for shock.