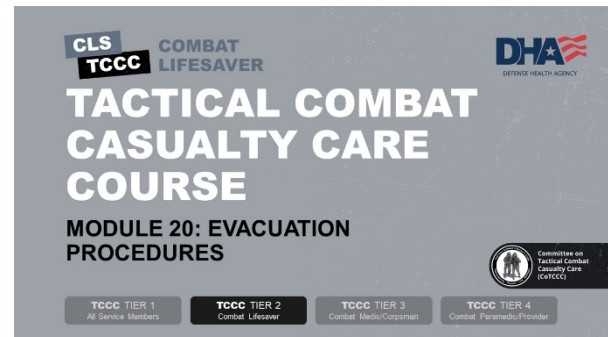


SPEAKER NOTES

MODULE 20 – EVACUATION PROCEDURES

SLIDE 1 – TITLE SLIDE



SLIDE 2 – TCCC ROLES

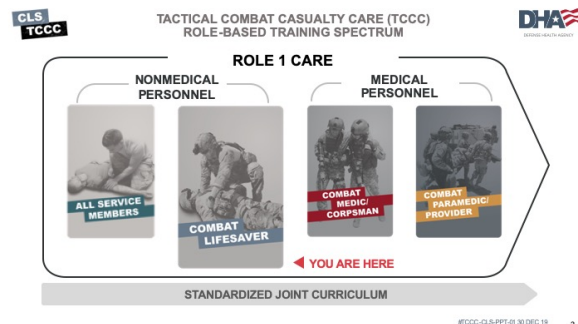
Tactical Combat Casualty Care is broken up into 4 roles of care. The most basic is taught to All Service Members (ASM), which is the absolute basics of hemorrhage control and to recognize more serious problems.

You are in the Combat Lifesaver (CLS) role. This teaches you more advanced care to treat the most common causes of death on the battlefield, and to recognize, prevent, and communicate with medical personnel the life-threatening complications of these injuries.

The Combat Medic/Corpsman role has much more advanced and invasive care requiring significantly more medical knowledge and skills.

Finally, the last role is for combat paramedics and advanced providers, to provide the most sophisticated care to keep our wounded warriors alive and get them to definitive care.

Your role as a combat lifesaver is to treat the most common causes of death on the battlefield, which are massive hemorrhage and airway/respiratory problems. In addition, you are given the skills to prevent complications and treat other associated but not immediately life-threatening injuries.



SLIDE 3 – TLO/ELO

There are seven cognitive learning objectives and one performance learning objective for the evacuation procedures module.

The cognitive learning objectives are to identify considerations and fundamental procedures for staging casualties, identify the importance of pre-mission evacuation equipment preparation, identify considerations and precautions required for evacuating casualties with suspected spinal injuries, identify critical actions and checks to prepare casualties for evacuation, identify methods of litter selection and evacuation equipment, identify considerations for evacuating ambulatory/walking wounded casualties and identify the importance and information considerations of a casualty **After Action Review (AAR)** submission.

The performance learning objective is to demonstrate the preparation of a casualty for evacuating in Tactical Field Care.

The critical aspects are to be able to recognize considerations for staging casualties, prepare equipment and litters for evacuation, prepare casualties for evacuation including suspected spinal injuries and ambulatory casualties, and understand the information needed in a casualty after-action report. Additionally, it is important to be able to perform the necessary skills in order to prepare a casualty for evacuation.

CLS
TCCC

STUDENT LEARNING OBJECTIVES

TERMINAL LEARNING OBJECTIVE

23 Given a combat or noncombat scenario, prepare casualties for evacuation during Tactical Field Care in accordance with CoTCCC Guidelines

- 97 Identify considerations and fundamental procedures for staging casualties for evacuation
- 98 Identify the importance of pre-mission evacuation equipment preparation and rehearsals
- 99 Identify considerations and precautions required for evacuating casualties with suspected spinal injuries
- 100 Identify critical actions and checks to prepare casualties for evacuation
- 101 Identify methods of litter selection and evacuation equipment in Tactical Field Care
- 102 Identify considerations for evacuating ambulatory/walking wounded casualties in Tactical Field Care
- 103 Demonstrate the preparation of a casualty for evacuating in Tactical Field Care
- 104 Identify the importance and information considerations of a casualty After Action Review (AAR) submission

08 ENABLING LEARNING OBJECTIVES (ELOs)

#TCCC-CLS-PPT-20-30 DEC 19 3

SLIDE 4 – THREE PHASES OF TCCC

Evacuation procedures are part of the Tactical Evacuation Care (TACEVAC) phase, after immediate life-threatening hemorrhage control followed by the prevention and treatment of other injuries and complications have already been addressed.

CLS
TCCC

TACTICAL EVACUATION CARE

Three PHASES of TCCC

1 CARE UNDER FIRE

RETURN FIRE AND TAKE COVER

Quick decision-making:

- Consider scene safety
- Identify and control life-threatening bleeding
- Move casualty to safety

2 TACTICAL FIELD CARE

COVER AND CONCEALMENT

Basic Management Plan:

- Maintain tactical situational awareness
- Triage casualties as required
- MARCH-PAWS assessment

3 TACTICAL EVACUATION CARE

More deliberate assessment and treatment of unrecognized life-threatening injuries

- Pre-evacuation procedures
- Continuation of documentation

YOU ARE HERE ►

NOTE: This is covered in more advanced TCCC training!

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SLIDE 5 – IMPORTANT ACTIONS (IN THIS MODULE)

Along with requesting medical evacuation, several actions must be taken to better prepare the casualty for evacuation.

These include **securing the casualty's weapons and equipment** in accordance with unit standard operating procedure (SOP) or mission requirements, selecting a litter that meets the casualty's needs and mission profile, preparing any equipment that might need to go with the casualty during their evacuation, and then actually preparing the casualty for evacuation.

CLS
TCCC

EVACUATION PROCEDURES

IMPORTANT ACTIONS (IN THIS MODULE)

SECURE ITEMS

CHOOSE AND PREP LITTER

PREP EVAC EQUIPMENT

PACKAGE CASUALTY FOR EVACUATION

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SLIDE 6 – SECURE CASUALTY'S EQUIPMENT

Casualties are often unable to secure their own weapons because of the nature of their injuries or an altered mental status, and it is important to secure their weapon and equipment in accordance with unit SOP or mission requirements.

The weapon should be evacuated with the casualty. Be sure to **clear it** and render it safe when preparing for movement.


DO NOT evacuate explosives with the casualty.

Keep in mind that the medical personnel receiving the casualty may not be familiar with the equipment or have a way of securing it.

CLS TCCC

EVACUATION PROCEDURES

SECURE CASUALTY'S EQUIPMENT



- Secure the casualty's weapon and equipment in accordance with unit SOP or mission requirements
- Clear and render safe any weapons evacuated with the casualty
- Do not evacuate explosives with the casualty if possible

Keep in mind that receiving medical personnel may not be familiar with the equipment or have a way to secure it

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SLIDE 7 – EVAC EQUIPMENT

Essential evacuation equipment (e.g., litters, packaging materials, Bag Valve Masks) should be prepared by other unit personnel while treatment continues, coordinating with the casualty treatment team to save time.


For example, other unit members can prepare litters while treatment is being provided.

Do not delay getting casualties onto litters. You can better prevent hypothermia by getting casualties off the ground.

CLS TCCC

EVACUATION PROCEDURES

EVAC EQUIPMENT



- Prepped by unit personnel while treatment continues
- Coordinate other EVAC activities
- Do not delay getting casualties onto litters
- Hypothermia is better prevented off the ground
- Easier to move casualty on litter
- Keep necessary medical equipment with the casualty. Example: BVM

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SLIDE 8 – LITTERS

Casualty movement in TFC may be better accomplished using litters due to the tactical situation and the need to move casualties rapidly. The litter exists only to facilitate casualty movement, and the casualty can be placed in the best position that facilitates their care and comfort.

Casualties **DO NOT** have to be placed on their backs on a litter.

It is easier to move them if they're already on litter however, they must be secured to the litter before movement.

Litters are also usually better for moving casualties' long distances.


All unit members should know how to open and set up litters and rehearse their use during pre-mission training.

All unit members should know who will carry litters and/or where litters are located on vehicles.

CLS TCCC

EVACUATION PROCEDURES

LITTERS



- Casualty movement is easier using litters
- Use best position for care and comfort
- You DO NOT have to place casualty on back
- For casualties with spinal injuries, keep spinal column as straight as possible
- CASUALTY MUST BE SECURED prior to movement**
- Selection of litter should be based on mission or unit
- Consider and train according to operating environment:
 - Equipment
 - Movement
 - Rehearse litter open / setup / carry

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SLIDE 9 – LITTER SELECTION

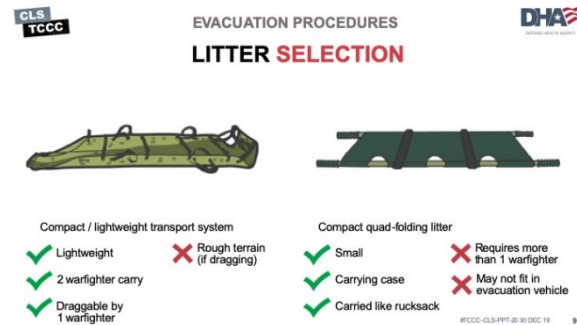
Selecting the proper litter is dependent on several different factors – 1) the evacuation platform, 2) the terrain at the location of pick-up, 3) the casualty's injuries, and 4) the availability of different types of litters.

For example, two of the more common litters often used are the quad-folding litter and lightweight flexible stretchers (like the Skedco).

Each of them has advantages and disadvantages, and may be the proper litter depending on the situation.

For example, the flexible litters can be moved using a one-person drag (terrain permitting) but are more difficult to carry longer distances than a quad-folding litter.

Each unit will have litters that have been proven to support their mission profile, and it is important to be aware of the limitations and advantages of each litter at your disposal before being deployed in a situation where you will require them.



SLIDE 10 – PACKAGE THE CASUALTY

Remember, when preparing a casualty for evacuation, you need to anticipate the environmental factors that could prevent them from remaining stable, like extreme noises, vibrations, high winds from propeller wash, and exposure to cold environments from either altitude or low ambient temperatures.

Develop a plan to mitigate each of those potential threats when preparing your casualty.

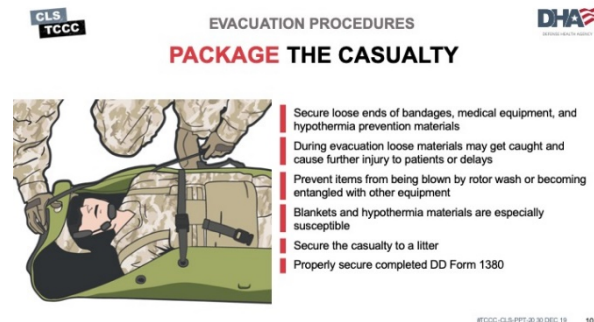
Secure all loose ends of bandages, medical equipment, and hypothermia prevention materials.

You need to prevent dressings and other medical items from being blown around by rotor wash or becoming entangled with other equipment.

Loose materials can catch on everything, from tree limbs to body armor of litter bearers to parts of aircraft or vehicles. Any snag like this can cause delays in evacuation or even further injury to patients or providers. Blankets and foil-based hypothermia materials are especially susceptible to being caught in the wind.

Package the casualty. Hypothermia prevention equipment should be tucked and secured beneath the casualty and litter straps. Loose edges can be caught up in wind or rotor wash or snagged on objects in the helicopter as the casualty is loaded aboard.

Remember, **DO NOT** cover a tourniquet. Keep the DD Form 1380 attached to the casualty.



SLIDE 11 – EVACUATION CONSIDERATIONS FOR SUSPECTED SPINAL INJURIES

As previously mentioned, you should expect a spinal injury in certain situations, like fast-roping falls or being near a significant blast.

In those cases, when tactically feasible, ensure the C-spine is immobilized and the casualty is kept straight during evacuation.

Keep the litter type and evacuation platform in mind and ensure the evacuation ground/air vehicle can accommodate the selected litter.



EVACUATION PROCEDURES



EVACUATION CONSIDERATIONS FOR SUSPECTED SPINAL INJURIES



- Events to consider for neck or back injuries: falls, motor vehicle accidents, IEDs, fast-roping injuries, etc.
- Ensure cervical (neck) spine (C-spine) immobilization when spinal cord injury is suspected, if possible
- Note:** Spine board is requested during 9-Line (Special Equipment)
- When considering selection of litter (such as standard litters) based on mission and unit, realize that the selected litter may not fit in the given evacuation ground/air vehicle
- Examples:** M1114 or M1151 up armored HMMWV)

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SLIDE 12 – WALKING WOUNDED

Not all casualties require a litter for evacuation.

For those casualties who are still ambulatory, provide instructions or assistance as needed. Depending on the nature of their injuries, they may be able to assist with carrying litters or providing security.

It is best to guide disoriented or visually impaired casualties by having them place their hand on the shoulder of the casualty in front of them or a nonmedical attendant as they move to the evacuation platform.

Instruct them on repeatedly checking their own wounds and dressings to ensure that bleeding remains controlled throughout the evacuation process.



EVACUATION PROCEDURES



WALKING WOUNDED



- Provide instructions / assistance as needed
- If possible, casualty may assist as a litter bearer / provides security



- Guide disoriented / visually impaired casualty's hand-to-shoulder to evac platform

SELF-CARE:

- Instruct casualty on repeatedly checking own wounds and dressings to ensure bleeding remains controlled

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SLIDE 13 – STAGE CASUALTIES

Of particular importance when moving more than one casualty is the process of staging the casualties.

Based on the guidance from the medical evacuation personnel, certain casualties have priority and may need to be loaded last, so that they are the first ones off-loaded at the destination.

If not given specific guidance, place the casualty that seems to be the most serious in a position where they are loaded last, and have casualties who may be less severely injured loaded prior to them.

You may also need to assist in marking the landing zone, providing security or assisting in marshalling the aircraft or litter bearer teams.



EVACUATION PROCEDURES



STAGE CASUALTY



- Be prepared for the arrival of the evacuation platform
- Stage the casualties in the loading sequence of the evacuation platform

- Many units use tagging or color-coded chemlights to identify casualty evacuation categories

- Maintain security at the evacuation point in accordance with SOP

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SLIDE 14 – AFTER-ACTION REVIEW (AAR)

Documentation of TCCC is critically important.

TCCC documentation should be accomplished using the DD 1380 (found in the JFAK) at the time treatment is rendered whenever possible

If care cannot be documented using the DD Form 1380 at the point of care by the first responder or CLS, it should be documented using the TCCC AAR (found on the JTS website) as soon as possible (within 72 hours) after treatment.

The nonmedic first responder or CLS should follow up with supporting unit medical personnel to complete and submit the TCCC AAR.

MEDICAL AFTER ACTION REVIEW (AAR)

What is an AAR?

- Retrospective documentation of TCCC
- Used when care is NOT documented on DD Form 1380
- Captures casualty care lessons learned
- Submitted to Joint Trauma System
- AAR Form can be found on Joint Trauma System website



AAR documentation ensures capture of casualty care lessons learned and enables TCCC process improvement!

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SLIDE 15 – SKILL STATION

In the skill station on Evacuation Procedures, you will be given scenarios that require you to make some decisions on preparing your casualties for evacuation, allow you to call in the evacuation assets, and then stage and load the casualties onto an evacuation platform, using all of the information you just learned.

CLS
TCCC

DHA
DEFENSE HEALTH AGENCY

SKILL STATION

Evacuation Procedures - Concepts (skills)

- Staging for evacuation
- Pre-mission evacuation equipment preparation and rehearsal
- Evacuating casualties with suspected spinal cord injuries
- Preparing casualties for evacuation
- Litter selection and evacuation equipment in TFC
- Evacuation of ambulatory casualties in TFC
- AAR submission
- *9-Line Report Note: Lines 6-9

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SLIDE 16 – SUMMARY

In this module, we reviewed preparing a casualty for evacuation in Tactical Field Care. We discussed considerations and fundamental procedures for staging casualties, the importance of preparing pre-mission evacuation equipment, considerations and precautions for evacuating casualties with suspected spinal injuries, critical actions and checks to prepare casualties for evacuation, methods of litter selection and evacuation equipment, considerations for evacuating ambulatory or walking wounded casualties, and considerations for submitting a casualty After Action Review.

CLS
TCCC

DHA
DEFENSE HEALTH AGENCY

SUMMARY

- We identified important actions
- We discussed securing casualty equipment
- We discussed evacuation equipment
- We identified litter selections
- We discussed casualty packaging
- We identified spinal injury considerations
- We discussed walking wounded
- We identified staging
- We identified considerations for casualty AAR

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SLIDE 17 – CHECK ON LEARNING

Ask questions of the learners referring to key concepts from the module.

Now for a check on learning.

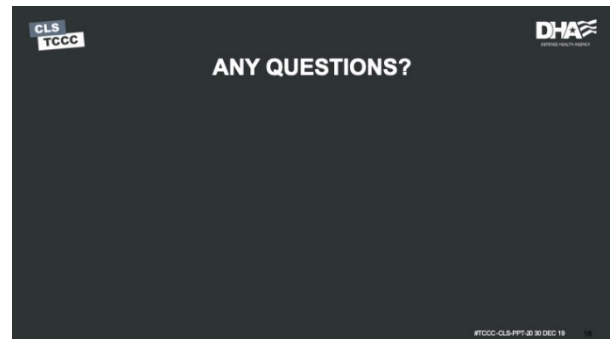
1. What actions are needed to prepare for evacuation?

SPEAKER NOTES

- Secure casualty's equipment
- Prepare evacuation equipment
- Select and prepare a litter
- Package the casualty for evacuation
- 2. What does casualty staging involve?
 - Be prepared for the arrival of the evacuation platform
 - Stage the casualties in the loading sequence of the evacuation platform
 - Use unit-specific tagging or color-coded chemlights to identify casualty evacuation categories
 - Maintain security at the evacuation point in accordance with SOP



SLIDE 18 – QUESTIONS



SLIDE 19 – TACTICAL TRAUMA ASSESSMENT – STUDENT PRACTICE

At this time, we will break into our skill stations for the Tactical Trauma Assessment - Student Practice.

