

Table 5. Assessment at the Dirty CCP (Warm Zone)– (M A R C H E)²

Assessment at the Dirty CCP (Warm Zone)– (M A R C H E)² Treat life-threats ONLY	
TCCC	CBRN
Reassess: Are immediate life threats addressed?	
M.A.R. Reassessment (Massive hemorrhage, Airway, Respirations) <ul style="list-style-type: none"> • Stop all external hemorrhage • Advanced airway as indicated • Treat tension pneumothorax • Ventilator support (positive end expiratory pressure support, pressure monitoring) 	M.A.R. Reassessment (Mask, Antidote, Rapid spot decon) <ul style="list-style-type: none"> • Check mask seal • Assess response to antidote and reassess CRESS • Reassess need for rapid spot decon
Circulation	Countermeasures
<ul style="list-style-type: none"> • Pulse Check • Skin Check • Assess for Shock • Fluid resuscitation per TCCC guidelines only if absent radial pulse • IV/IO access if needed immediately 	<ul style="list-style-type: none"> • Nebulized or inhaler-administered medications such as albuterol or corticosteroid (hand-held inhaler for conscious casualty and in-line options for unconscious casualty) • IV/IO Drips (hydroxocobalamin, atropine, naloxone, etc.) • Suction the airway (bulb syringe likely not adequate, recommend mechanical suction) • Treat life-threats ONLY • Specific countermeasures may be found in CBRN CPG Part II.
Hypothermia	
<ul style="list-style-type: none"> • Package the casualty. • Protect from lethal triad: Hypothermia, acidosis, and coagulopathy 	
Head Wounds (Altered Mental Status)	
Determine whether casualty's altered mental status is due to chemical agent or trauma	
Evacuation	
<ul style="list-style-type: none"> • Determine Evacuation Priority • Fill out Casualty Card • Move patient for further decontamination or to evacuation platform. • The Dirty CCP may be far from the point of injury, necessitating exhausting casualty carries and exposing rescuers to heat injury from the burdens of PPE. 	