

INGUINAL HEMORRHAGE CONTROL

with improvised junctional pressure delivery device (PDD)



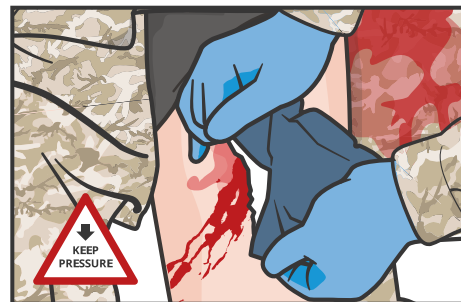
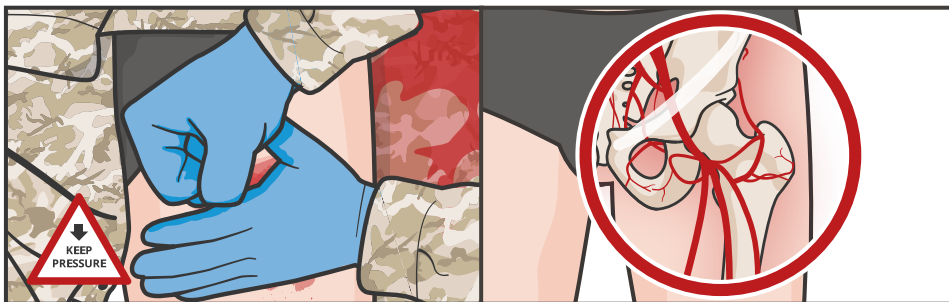
CONSIDER body substance isolation.

NOTE: If a Combat Lifesaver is available, direct them to assist.

01

EXPOSE the injury and assess the bleeding source.

NOTE: Clothing may need to be cut away to properly expose the wound.



02

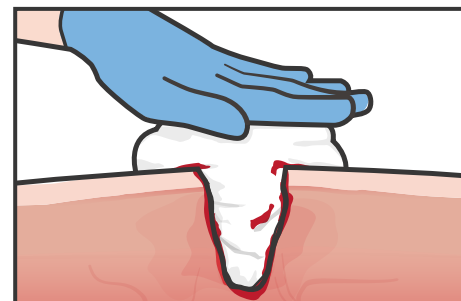
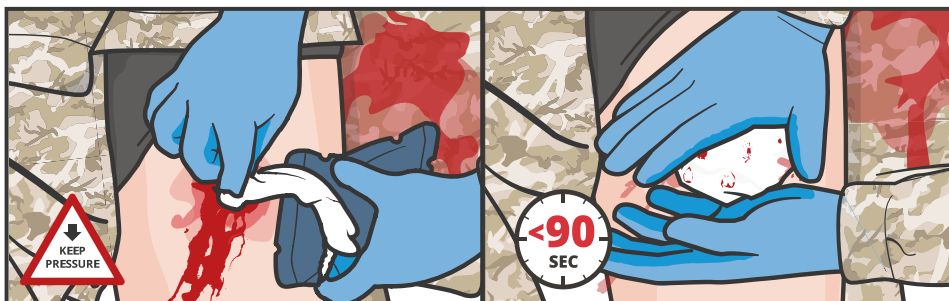
APPLY DIRECT PRESSURE to the source of most active bleeding; if not visible, **PLACE** a fist squarely in the inguinal gutter on the injured side.

NOTE: The inguinal gutter is the crevice between the top of the thigh and the lower abdomen where heavy blood flow structures are located. Location is halfway between the pubic bone and the anterior iliac spine.

03

Using the casualty's JFAK, **REMOVE** the hemostatic dressing from its sterile package.

NOTE: If hemostatic dressing is not available, use gauze or clean, dry cloth.



04

Remove fist, if used for initial bleeding control, and immediately **APPLY DIRECT PRESSURE** and **TIGHTLY PACK** the wound with hemostatic dressing until the wound cavity is filled (finishing the packing within 90 seconds).

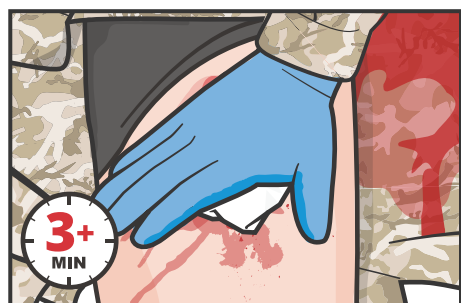
NOTE: More than one dressing/gauze may be required to stop blood flow.

CAUTION: If a penetrating object is lodged in the casualty's body, bandage it in place. **DO NOT** remove the object.

05

ENSURE hemostatic dressing or gauze fills the entire wound cavity and extends 1–2" above the skin.

NOTE: If the hemostatic dressing or gauze does not extend 1–2 inches above the skin, place additional hemostatic dressing or gauze.



06

HOLD pressure for minimum of 3 minutes.



07

REASSESS to ensure bleeding has been controlled while maintaining pressure.

IF BLEEDING HAS NOT BEEN CONTROLLED:

08a If packed with hemostatic dressing, remove and repack starting at **STEP 3**.

OR

08b If packed with gauze, apply additional gauze and pressure (for 3 min) until bleeding stops.

STEP 7 NOTE: Ensure blood is not seeping through or around the hemostatic dressing. If bleeding has stopped, leave the hemostatic dressing in place while still maintaining pressure.

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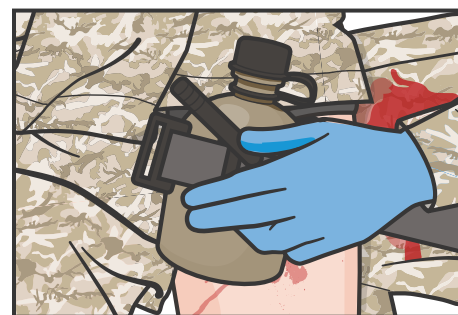
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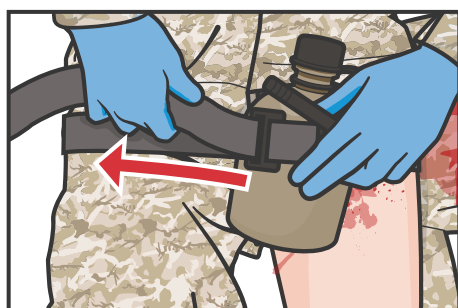
09 SELECT a cylindrical or spherical PDD and position into the inguinal gutter while continuously maintaining pressure to the hemostatic dressing. (PDD examples: shoe/boot, full water bottle, canteen.)



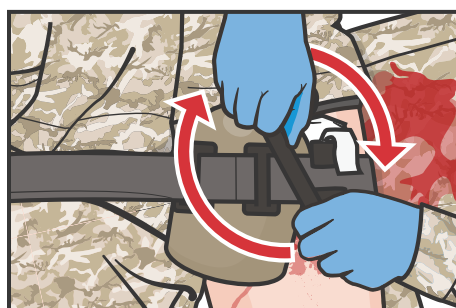
10 SELECT a tourniquet that can wrap around the casualty's waist/hip area or connect two tourniquets.



11 PLACE the windlass or ratchet tourniquet directly over the middle of the PDD; ensure that the routing buckle is located toward the medial aspect of the body.



12 REMOVE all slack from the self-adhering band or strap using a pushing motion across the casualty's body before tightening the tourniquet.

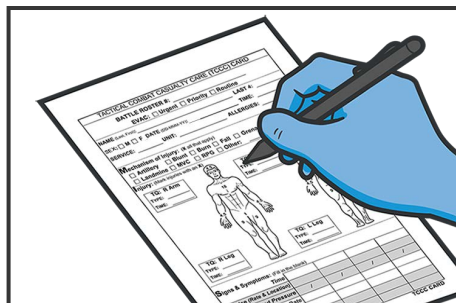


13 TIGHTEN the tourniquet until bleeding has stopped and the distal pulse has been checked and is absent.

STEP 13 NOTE: If bleeding is not controlled and a distal pulse below the tourniquet is present, remove any remaining slack in the strapping (if possible) and twist or ratchet the tourniquet device until bleeding is controlled and the distal pulse is absent.



14 Visually INSPECT placement of equipment, ensuring the PDD is in place and the windlass/ratchet is properly positioned over the device.



15 DOCUMENT all findings and treatments on a DD Form 1380 TCCC Casualty Card and attach it to the casualty.