FIELD MEDICAL ASSISTANT COURSE (FMAC)

MODULE 15:
WOUND MANAGEMENT

TACTICAL FIELD MEDICAL AID (TFMA)

ROLE-BASED TRAINING SPECTRUM

ROLE 1 CARE

NONMEDICAL PERSONNEL

- Buddy First Aid
- Field Medical Assistant

You are HERE

MEDICAL PERSONNEL

- Paramedic
- Nurse
- Doctor

STUDENT LEARNING OBJECTIVES

TERMINAL LEARNING OBJECTIVE

T17 Given a combat or noncombat scenario, perform assessment and initial management of wounds during Tactical Field Care in accordance with TFMA Guidelines

EO79 Identify wound management considerations in Tactical Field Care

EO80 Demonstrate application of wound dressings on a trauma casualty in Tactical Field Care

Three PHASES of TFMA

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

YOU ARE HERE

3 TACTICAL EVACUATION CARE (TACEVAC)

More deliberate assessment and treatment of unrecognized life-threatening injuries:

- Pre-evacuation procedures
- Continuation of documentation

NOTE: This is covered in more advanced TFMA training!

TACTICAL FIELD CARE

MARCH PAWS

DURING LIFE-THREATENING	*AFTER* LIFE-THREATENING
MASSIVE BLEEDING **#1 Priority**	**P**AIN
AIRWAY	**A**NTIBIOTICS
RESPIRATION	**W**OUNDS
CIRCULATION	**S**PLINTING
HYPOTHERMIA / **H**EAD INJURIES	

WOUND MANAGEMENT

CONTINUED REASSESSMENT

Once applied, continue to check the casualty's hemorrhage control interventions and wound management; do not apply and forget about it!

All wounds must be **FREQUENTLY REASSESSED**
to ensure continued hemorrhage control

BLEEDING IS THE #1 CAUSE OF PREVENTABLE DEATH ON THE BATTLEFIELD

WOUND MANAGEMENT

CONFIRM ALL WOUNDS ARE ACCOUNTED FOR

Observe for blood flowing around or under:

- TQs, bandages, and dressings

If bleeding has not been controlled:

- Tighten the TQ
- Tighten the pressure bandages
- Redress the wounds

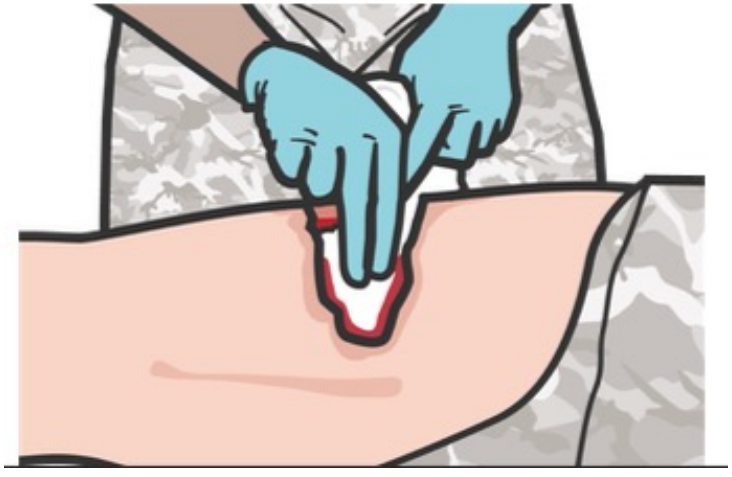
- Reassess prior life-threatening wounds to ensure bleeding is still controlled

WATCH FOR REBLEEDING!

WOUND MANAGEMENT

TREAT FOR RE-BLEEDING

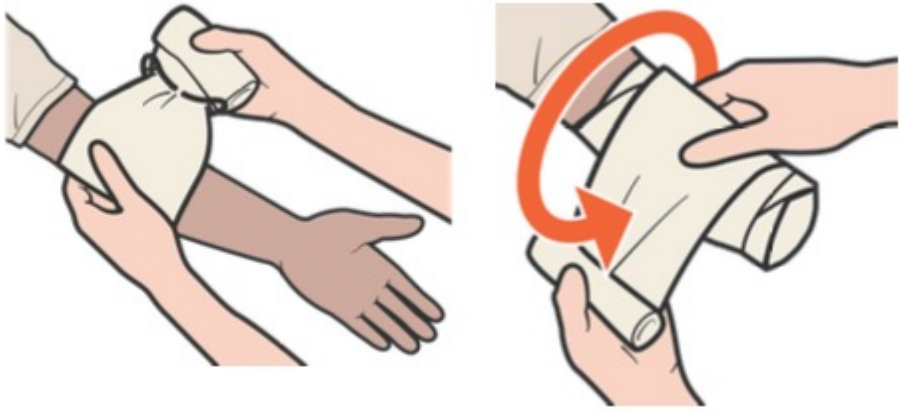
- Pack any wounds that continue to bleed with hemostatic dressing
- Once applied (with pressure for 3 minutes), carefully **observe** for blood continuing to flow from under the gauze to determine if bleeding has been controlled
- Once you are sure the bleeding has stopped, apply a **pressure bandage** over the hemostatic dressing



ALWAYS REASSESS TREATMENT!

WOUND MANAGEMENT

DRESSINGS AND BANDAGES FOR MINOR WOUNDS



Dress any previously untreated wounds by applying (or packing) gauze with direct pressure

- Non-life-threatening bleeding usually does
- not need hemostatic dressings
- If no dressings or gauze are available, use
- clean dry cloth (torn clothing, cravats, etc.)

Minor wounds include:

- Minor lacerations
- Abrasions (road rash)

This includes major wounds that are no longer bleeding, such as:

- Amputation stumps
- Gunshot wounds that required TQ
- Major lacerations
- Shrapnel wounds (still in place)
- Impaled objects

WOUND MANAGEMENT

REASSESS APPLIED BANDAGES

Assess all applied bandages for:

- **Increased** pain
- Pale or bluish **skin**
- **Pulse**

This might indicate an emergency!

Ensure the applied bandage **isn't too tight**; loosen as needed while keeping the bleeding controlled

DO NOT EVER APPLY IT AND FORGET IT!

MARCH PAWS

SKILL STATION

Wound Management (Skill)

- Wound dressing

SUMMARY

- We defined **reassessment**
- We discussed **re-bleeding**
- We discussed treatment for **minor wounds**
- We discussed **reassessing** bandages

CHECK ON LEARNING

- Why should all dressed wounds be continuously reassessed?
- When should minor wounds be addressed?

ANY QUESTIONS?