





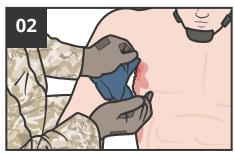




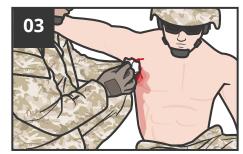
AXILLARY (ARMPIT) JUNCTIONAL HEMORRHAGE CONTROL



Cut away any clothing (to **EXPOSE** injury) and lift the arm to assess the bleeding source.



APPLY direct pressure to the most active bleed. **PREPARE** hemostatic dressing.



EXTEND the casualty's arm at a 90-degree angle by placing it on your shoulder.



PACK the wound tightly with hemostatic gauze until the wound cavity is filled.



ENSURE the gauze extends 1-2 in above the skin.



HOLD pressure for a minimum of 3 min.



REASSESS to ensure bleeding has been controlled while maintaining pressure.

IF BLEEDING HAS NOT BEEN CONTROLLED:

O8a If packed with hemostatic dressing, **REMOVE** and **REPACK** starting at **STEP 03.**



18b If packed with gauze, apply additional gauze and pressure (for 3 min) until bleeding stops.

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

NOTE: The best position to treat the casualty is the seated position. If the casualty cannot be treated in the seated position, you will need to sit the casualty up as much as possible to apply the elastic bandage.





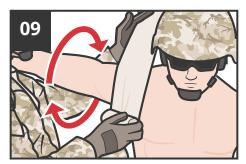




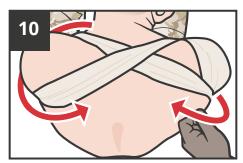


AXILLARY (ARMPIT) JUNCTIONAL HEMORRHAGE CONTROL

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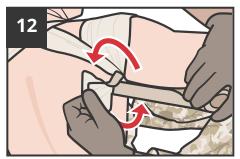
While maintaining pressure on the dressing/gauze, **WRAP** the pressure (or elastic) bandage around injured shoulder twice ensuring the gauze underneath is completely covered.



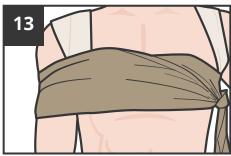
WRAP elastic bandage across, back and under the opposite armpit, anchoring around the opposite shoulder in a "figure 8" pattern.



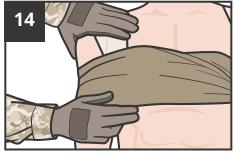
Depending on the bandage used, **SECURE** with the closure bar or tie tails of elastic bandage with a nonslip knot.



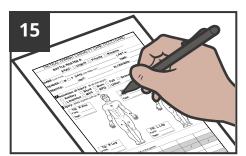
SECURE pressure (elastic) bandage tails and knot using tape, wrapping a minimum of 1½ times around the knot.



SWATH the upper arm to the side of the chest using a cravat.



CONTINUE TO ASSESS wound for further bleeding.



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

STEP 09 NOTE: If using an elastic bandage without a closure bar, leave a tail on the posterior side of the casualty.











INGUINAL (GROIN) HEMORRHAGE CONTROL

with improvised junctional pressure device



EXPOSE the injury and assess the bleeding source.



APPLY DIRECT PRESSURE to the wound using a hand, fist or elbow and open the hemostatic gauze package.



TIGHTLY PACK wound with hemostatic gauze until wound cavity is filled (finishing the packing within 90 seconds).



HOLD pressure for minimum of 3 minutes.



REASSESS to ensure bleeding has been controlled while maintaining pressure.

IF BLEEDING HAS NOT BEEN CONTROLLED:

06a

If packed with hemostatic dressing, remove and repack starting at **STEP 03.**

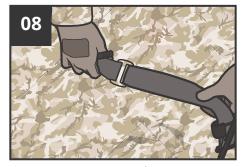




If packed with gauze, apply additional gauze and pressure (for 3 min) until bleeding stops.



SELECT and POSITION a PDD into the inguinal gutter while maintaining pressure.



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





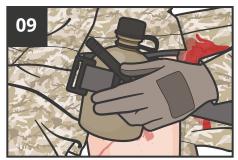






INGUINAL (GROIN) HEMORRHAGE CONTROL

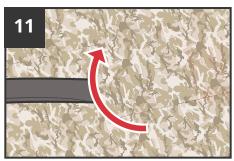
with improvised junctional pressure device *Continued...*



PLACE windlass or ratchet tourniquet directly over the middle of the PDD; ensure routing buckle is located towards middle of the body.



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



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



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



DOCUMENT all findings and treatments on the DD1380 TCCC Casualty Card.

STEP 11 NOTE: If bleeding is not controlled and/or distal pulse (a 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/or a distal pulse is absent.