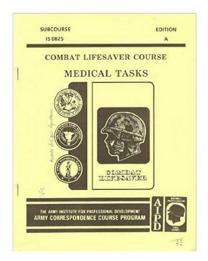
#### combat lifesaver course manual



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Initiating an intravenous infusion will help to control shock caused by blood loss, severe burns, or severe heat injury. This will create a problem for the Army Medical Department as well as the rest of the Army. The name given to this nonmedical provider of farforward emergency care is the combat lifesaver. You are to provide emergency care as a secondary mission when your primary mission allows. You may also be asked to assist the combat medic in providing care and preparing casualties for evacuation when you have no combat duties to perform. The aid bag weighs a little over nine pounds and takes up about 0.44 cubic feet. The aid bag consists of the following items Administered for headache, common cold, and minor pain. Used to secure the I.V. catheter and tubing to the casualty's arm. Used to keep the airway of an unconscious casualty open. Used to administer additional antidote to nerve agent casualties. Used to protect minor wounds. While the combat lifesaver does not bandage sprains, this bandage can be useful as a reinforcement bandage and as padding for a splint. Used to secure splints and used as tourniquet bands, slings, and swathes. The case has three zippered compartments for storing supplies and a shoulder strap. Used in administering intravenous infusion. Used to alleviate convulsions in nerve agent casualties. Used to control bleeding and protect wounds. Used when initiating I.V.s for the protection of both casualty and combat lifesaver. Connects the I.V. bag to the needle and catheter unit. The clamp controls the rate at which the fluid flows from the bag. Used to cleanse skin, especially before performing the I.V. puncture. Used to protect minor wounds from infection. Used to cut the casualty's clothing to expose wounds, cut muslin bandages into triangular bandages, and cut tape. Used as a constricting band when performing the I.V. task. This lesson is tested in the written multiplechoice examination.

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Join the Army Reserve Officer Training Corps 1st Arctic Battalion at Michigan TechnologicalThe United States Department of Defense does not exercise. Get started with a FREE account. The surprise is the only way to new discoveries. Be playful! "Gordana Biernat Unit Strengths Statistics Get books you want. To add our email address, visit the Personal Document Settings under Preferences tab on Amazon. Groups Discussions Quotes Ask the Author It is through this concerted effort of providing ongoing, meaningful training that has enabled us to reduce the number of battlefield fatalities to a level unparalleled in our nation's history. The course you will be attending will certify you as a trainer. Only experienced and highly skilled 8404 Corpsmen should apply for attendance. A TCCC test will be administered at the beginning of class on day one. You must pass this written test with an 80% or above to remain in training. The test is based upon the most recently approved CoTCCC developed TCCC Guidelines. In lieu of the test, incoming students have the option of taking the Expeditionary Medicine web based training NM10EMTCCC2.0, found on NKO. Students will need to provide a certificate that shows passing of the course when checking into class. You will not be taught any medical skills in this course as most of the class will concentrate on teaching you to provide quality instruction. You will be required to perform multiple oral presentations, including teach backs of medical topics. This is to provide you with the knowledge, skills and abilities, and ultimately the confidence needed to effectively deliver the material. One of the topics covered will be the Combat Lifesaver Program. Although this concept has been in the operating forces for some time, it was formalized in 2006 and the curriculum will be available to you on a disc we provide upon completion of the course.

Since the principles of Tactical Combat Casualty Care are being practiced now in every facet of military medical care, this course will provide a brief review of the three phases of care. The updates covered in the most recent Committee on Tactical Combat Casualty Care CoTCCC meeting will be covered and you will be responsible for providing instruction on this topic to all Corpsmen in your unit. This represents the most formalized sustainment training for Hospital Corpsmen in recent memory. During this time of conflict, these courses are more relevant than ever. Quality instruction leads directly to more men and women surviving combat injuries. We look forward to seeing you on the first day of training! To see what your friends thought of this book, This book is not yet featured on Listopia. There are no discussion topics on this book yet. It is one of seven uniformed services of the United States. In the civilian leadership structure of the United States military, the Marine Corps is a component of the United States Dep It is one of seven uniformed services of the United States.

In the civilian leadership structure of the United States military, the Marine Corps is a component of the United States Department of the Navy, often working closely with U.S. naval forces for training, transportation, and logistic purposes; however, in the military leadership structure the Marine Corps is a separate branch. Some of these are available to nonCILEx Law School students. New editions are released every summer. You can find tables of contents TOC and sample pages Sample for each manual on the individual pages. These include course summaries or revision guides written to complement the course manual for your subject and facetoface revision courses led by experienced tutors. Some of these cookies are essential, while others help us to improve your experience by providing insights into how the site is being used. Find out more. Accept recommended settings.

What do you do Sure you could pull the movie routine and rip your shirt in slow motion, or you could pull out your kit and apply just the right bandage for the moment. Maybe you are up high in the mountains doing some back country skiing, at any moment you should have the skills and understanding on how to fix any situation. NAEMT conducts TCCC courses as specified by the CoTCCC's guidelines and curriculum. Two types of TCCC courses are offered TCCC, as offered by NAEMT, is the only TCCC course endorsed by the Joint Trauma System and the American College of Surgeons. NAEMT's TCCC courses are accredited by CAPCE and recognized by NREMT. To support training centers, instructors and students, NAEMT maintains a network of tactical affiliate faculty both in the U.S. and internationally, and staff at its Headquarters Office. NAEMT also offers Tactical Emergency Casualty Care TECC for civilian tactical EMS. It looks like your browser needs updating. For the best experience on Quizlet, please update your browser. Learn More. Bleeding hemorrhaging from an extremity limb. Why should you push away any loose clothing near a casualtys open wound before applying a dressing. To see the extent of the wound. A casualty is bleeding from a leg wound. Part of the trouser material next to the wound is stuck to the wound. You should Cut around the stuck material so as not to pull the material from the wound. What part of the Emergency Bandage should be applied directly over an open wound. The dressing pad. You have just applied a pressure dressing to a wound on the casualtys arm. Under what circumstance would you loosen the cravat. There is no pulse in the limb below distal to the bandage. You have applied a field dressing to a bleeding wound on the casualtys forearm. What else should you do to help control the bleeding. Apply manual pressure You have applied a field dressing and manual pressure to a wound on the casualtys thigh, but blood is still leaking from the dressing.

What should you do now. The portion of the limb below the pressure dressing is cool to the touch and the nail beds on the limb are bluish. Loosened, retied or reapplied evacuate You are going to apply digital pressure to help control severe bleeding from an open wound on the thigh. The heel of your hand or your knee. The steps of applying the Emergency Bandage are given in correct sequence. 1. Place the dressing pad on the wound. 2. Wrap the elastic bandage around the wounded limb. 3. Insert the elastic bandage completely into the pressure bar. 4. Pull the elastic bandage back over the top of the pressure bar, forcing the bar down onto the pad. 5. Wrap the elastic bandage tightly over the pressure bar. 6. Continue to wrap the elastic bandage around the limb so that all edges of the pad are covered. 7. Secure the hooking end of the closing bar into the elastic bandage. The Combat Gauze bandage is used for Serious arterial bleeding. After you apply the Combat Gauze bandage to a wound, you should immediately Apply manual pressure to the Combat Gauze. The Combat Gauze bandage works by A chemical reaction that promotes blood clotting. Which of the following is applied with the intent of stopping blood circulation Tourniquet. Both you and the casualty are in a place of safety and you have sufficient time to treat the casualty. In which of the following situations, if any, would you apply a tourniquet without first trying to control the bleeding with a pressure dressing. Amputation of the forearm four inches below the elbow. Arm upper extremity; thigh. Which one of the following would be preferred for an improvised tourniquet band. A square of cloth one yard on each side cut diagonally and folded into a cravat. You are going to apply an improvised tourniquet band made from a muslin bandage. Which of the following is an

appropriate site for the tourniquet band. A little above the elbow. A soldier has just had his forearm amputated slightly above the wrist.

The bleeding from the amputation site is not severe. What should you do first. Apply a tourniquet two inches above the amputation site. Which one of the following statements gives a proper rule for tightening a tourniquet. A tourniquet is to be tightened until the bright red bleeding has stopped and the distal pulse is gone; darker blood oozing from the wound can be ignored. Once you have tightened an improvised tourniquet, you must Secure the windlass so that the tourniquet will not unwind. The lower part of the casualtys arm has been amputated. You have applied a tourniquet. How is the stump treated. The stump is dressed and bandaged. You have applied an improvised tourniquet to a casualtys left leg. Which one of the following is a proper method of marking the casualty. What type of preventable condition do more soldiers die from during ground combat before reaching a medical treatment facility. Yes You applied a torniquet to a solders wounded leg before dragging him to a safe location.

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