



COMBAT MEDIC/CORPSMAN
TACTICAL COMBAT CASUALTY CARE

MODULE 03:
CARE
UNDER FIRE
SKILL INSTRUCTIONS

08 MAR 2021



**Committee on
Tactical Combat
Casualty Care
(CoTCCC)**

ONE-HANDED (WINDLASS) TOURNIQUET APPLICATION IN CARE UNDER FIRE (CUF) INSTRUCTION

TASK:	Apply a windlass tourniquet using a one-handed technique in CUF
CONDITION:	Given a scenario in which you are in combat gear and have sustained a severely bleeding wound to your upper extremity in the CUF phase and given you have a Joint First Aid Kit (JFAK) with a windlass tourniquet
STANDARD:	Control life-threatening bleeding by applying a tourniquet with one hand within one minute
EQUIPMENT:	Committee on Tactical Combat Casualty Care-recommended windlass tourniquet

PERFORMANCE MEASURES: step-by-step instructions

NOTE: Consider body substance isolation.

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

- 01** Remove tourniquet from your JFAK and/or carrying pouch.
- 02** Insert the wounded extremity through the loop of the self-adhering band.
- 03** Position the tourniquet above the bleeding site, high on the extremity over the clothing/uniform.
- 04** Ensure all the slack in the band is pulled through the routing buckle before the band is fastened back on itself and the windlass is twisted.
 - NOTE:** Fasten the self-adhering band back on itself all the way around the limb, but not over the windlass rod clips.
- 05** Twist the rod until bleeding has stopped.
 - NOTE:** Complete steps 1–5 within 1 minute.
- 06** Lock the windlass rod in place with the windlass clip.
- 07** Route the self-adhering band around the rod and between the clips.
- 08** Secure with the windlass safety strap.
 - NOTE:** Do not document tourniquet application time until the Tactical Field Care phase.
- 09** If no other major bleeding is present, move to cover.

ONE-HANDED (RATCHET) TOURNIQUET APPLICATION IN CARE UNDER FIRE (CUF) INSTRUCTION

TASK:	Apply a ratchet tourniquet using a one-handed technique in CUF
CONDITION:	Given a scenario in which you are in combat gear and have sustained a severely bleeding wound to your upper extremity while in the CUF phase, and given you have a ratchet tourniquet in your Joint First Aid Kit (JFAK)
STANDARD:	Control life-threatening bleeding by applying a ratchet tourniquet with one hand within one minute
EQUIPMENT:	Committee on Tactical Combat Casualty Care-recommended ratchet tourniquet

PERFORMANCE MEASURES: step-by-step instructions

NOTE: Consider body substance isolation.

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

- 01** Remove the tourniquet from your JFAK and/or carrying pouch.
- 02** Insert the wounded extremity through the loop of the tourniquet band.
- 03** Position the tourniquet above the bleeding site, high on the extremity over the clothing/uniform.
- 04** Grasp the tourniquet loop with your teeth or if able, lean against a hard surface to prevent slipping when tightening.
- 05** Tighten the tourniquet strap as much as possible.
- 06** Lift the lever arm of the ratcheting buckle and tighten by ratcheting the tourniquet until bleeding has stopped.
NOTE: Complete steps 1–6 within 1 minute.
- 07** Lock the ratchet on itself (it will click into place).
NOTE: If bleeding is not controlled, continue to ratchet the maneuver device until bleeding has stopped.
NOTE: Do not document tourniquet application time until the Tactical Field Care phase.
- 08** If no other major bleeding is present, move to cover.

TWO-HANDED (RATCHET) TOURNIQUET APPLICATION IN CARE UNDER FIRE (CUF) INSTRUCTION

TASK:	Apply a ratchet tourniquet using a two-handed technique in CUF
CONDITION:	Given a scenario in which casualty and responder are in combat gear and the casualty experiences severe bleeding of an extremity while in the CUF phase and the casualty has a ratchet tourniquet in their Joint First Aid Kit (JFAK)
STANDARD:	Control life-threatening bleeding by applying a ratchet tourniquet with a two-handed technique within one minute
EQUIPMENT:	Committee on Tactical Combat Casualty Care-recommended ratchet tourniquet

PERFORMANCE MEASURES: step-by-step instructions

NOTE: Consider body substance isolation.

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

- 01** Remove the tourniquet from the casualty's JFAK and/or carrying pouch.
- 02** Insert the wounded extremity through the loop of the tourniquet strap or route the strap around the limb, pass the tip through the routing buckle, and pull it back on itself, leaving just enough slack to permit movement along the extremity.
- 03** Position the tourniquet above the bleeding site, high on the extremity over the clothing/uniform.
- 04** Pull the strap as **tightly** as possible, removing all excess slack.
- 05** Lift the lever arm of the ratcheting buckle and tighten the tourniquet until bleeding has stopped.
NOTE: Complete steps 1–5 within 1 minute.
- 06** Lock the ratchet on itself (it will click into place).
NOTE: **Do not** document tourniquet application time until the Tactical Field Care phase.
- 07** If no other major bleeding is present, move casualty to cover.

TWO-HANDED (WINDLASS) TOURNIQUET APPLICATION IN CARE UNDER FIRE (CUF) INSTRUCTION

TASK:	Apply a windlass tourniquet using a two-handed technique in CUF
CONDITION:	Given a scenario in which casualty and responder are in combat gear and the casualty experiences severe bleeding of an extremity while in the CUF phase, and given they have a windlass tourniquet in their Joint First Aid Kit (JFAK)
STANDARD:	Control life-threatening bleeding by applying a windlass tourniquet using a two-handed technique within one minute
EQUIPMENT:	Committee on Tactical Combat Casualty Care-recommended windlass tourniquet

PERFORMANCE MEASURES: step-by-step instructions

NOTE: Consider body substance isolation.

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

- 01** Remove the tourniquet from the casualty's JFAK and/or carrying pouch.
- 02** Insert the wounded extremity through the loop of the self-adhering band (looped) **or** route the band around the limb and pass the tip through the slit of the routing buckle.
- 03** Position the tourniquet above the bleeding site, high on the extremity over the clothing/uniform.
- 04** Ensure all the slack in the self-adhering band is pulled through the routing buckle before the band is fastened back on itself and the windlass is twisted.

NOTE: Fasten the self-adhering band back on itself all the way around the limb, but not over the windlass rod clips.
- 05** Twist the windlass rod until the bleeding has stopped.

NOTE: Complete steps 1–5 within 1 minute.
- 06** Lock the windlass rod in place with the windlass clip.
- 07** Route the self-adhering band around the rod and between the clips.
- 08** Secure with the windlass safety strap.

NOTE: **Do not** document tourniquet application time until the Tactical Field Care phase.
- 09** If no other major bleeding is present, move casualty to cover.

ONE-PERSON DRAG/CARRY INSTRUCTION

TASK:	Perform a one-person drag/carry
CONDITION:	Given a combat scenario in which casualty and responders are in combat gear and the unit has sustained a casualty that must be moved to safety
STANDARD:	Rapidly move a conscious or unconscious casualty from point of injury to a covered position or position of safety, without causing further harm to the casualty
EQUIPMENT:	N/A

PERFORMANCE MEASURES: step-by-step instructions

NOTE: Consider body substance isolation.

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

KIT OR ARM DRAG

NOTE: While the kit or arm drag may be a means of dragging a casualty to cover or safety, it is not efficient for longer distances and increases the chance of causing further harm to the casualty.

NOTE: Use only when hostile fire gives the rescuer no other option.

01 Grab the casualty by their equipment (e.g., drag handle strap) or arm.

NOTE: Some body armor is equipped with a drag handle. Make sure that the equipment is fully strapped and secured onto the casualty.

02 While walking backwards (in quick, short bursts), drag the casualty toward cover.

NOTE: Injury can occur to either the rescuer or the casualty during training drills; keep safety in mind.

NECK DRAG

NOTE: The neck drag is useful in combat because it minimizes casualty and rescuer exposure to enemy fire.

01 Have the casualty hold their hands together or tie the casualty's hands together at the wrist.

NOTE: A **conscious** casualty may clasp their hands together around the bearer's neck.

NOTE: May be time consuming if the casualty is **unconscious** and cannot hold their hands together. In this case, tie or strap the casualty's hands together to keep them around the rescuer's neck.

02 Straddle the casualty in a kneeling face-to-face position.

03 Have the casualty wrap their hands behind your neck (**conscious**).

(OR)

Loop the casualty's tied hands over your neck (**unconscious**).

04 Crawl forward, dragging the casualty with you.

05 Keep the casualty on their back.

NOTE: This method can be tiring for the first responder if the patient is heavy or wearing a lot of gear.

NOTE: This method cannot be used if the casualty has a serious arm injury or amputation.

NOTE: If the casualty is **unconscious**, their head must be protected from the ground.

CRADLE-DROP DRAG

NOTE: The cradle-drop drag is effective in moving a casualty up or down stairs, steps, or short distances.

01 Kneel at the casualty's head (with the casualty lying on their back).

02 Slide your hands, with palms up, under the casualty's shoulders, and get a firm hold under their axillae.

03 Partially rise, supporting the casualty's head on one of your forearms.

NOTE: You may bring your elbows together and let the casualty's head rest on both of your forearms.

04 Rise and drag the casualty backwards.

NOTE: The casualty is in a semi-sitting position.

05 If you are backing down steps, support the casualty's head and body while letting their hips and legs drop from step to step.

NOTE: If the casualty needs to be moved up steps, use the same procedure.

PACK-STRAP CARRY

NOTE: In the pack-strap carry (the casualty must be conscious), the casualty's weight rests high on the rescuer's back.

NOTE: Carrying the casualty high on the rescuer's back makes it easier to carry the casualty a moderate distance (50–300 meters).

NOTE: To eliminate the possibility of injury to the casualty's arms, hold the arms in a natural position around your neck.

01 Squat in front of the casualty facing in the same direction; have the casualty wrap their arms around your neck.

NOTE: It is best if one of the casualty's arms is routed under one of the rescuer's arms and up toward the neck.

02 Grasp the casualty's wrist and ensure their arm is over your shoulder.

03 Lift the casualty off the ground to a standing position using your leg muscles.

04 Bend forward and raise or hoist the casualty as high on your back as possible so that the casualty's weight is resting on your back.

05 Once the casualty is positioned on your back, remain as upright as possible to prevent straining or injuring your back.

SUPPORT CARRY

NOTE: This procedure should be used for a **conscious** casualty only.

01 Assist the casualty from the ground to a standing position.

02 With your dominant hand, grasp the casualty's corresponding wrist and draw it around behind your neck.

03 Place your other arm around the casualty's waist, grabbing the casualty's belt or clothing where the belt loop is positioned.

04 While using yourself as a crutch, walk with the casualty.

BELT DRAG CARRY

01 Extend two belts to their full length and join them together to make one large loop.

NOTE: Other materials such as a rifle sling or two cravats can be used if belts are not available.

NOTE: In some cases, three belts may be needed.

02 Position the casualty on their back.

03 Slip the bottom of the loop across the casualty's chest threading under their axillae (behind their back and shoulders).

NOTE: The top of the loop should be above the casualty's head.

04 Twist the remainder of the loop to form a figure 8.

05 Adjust the loops so that the buckles cross in the center of the figure 8.

06 Lie down on either side of the casualty while facing them.

NOTE: You should be lying in the same direction as the casualty.

07 Support yourself on the elbow touching the ground.

08 Slip the arm on which you are not supporting yourself through the top loop of the figure 8 and bring the loop over your shoulder.

09 Turn over into a prone position, lying on your abdomen.

NOTE: The sling is now across your chest and the loop is on the shoulder away from the casualty.

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NOTE: The nonsupporting arm/shoulder will support the casualty's weight.

NOTE: The sling under your chest will help to keep the casualty from slipping out of the loop.

- 10** Crawl, dragging the casualty with you to cover.

TWO-PERSON DRAG/CARRY INSTRUCTION

TASK:	Perform a two-person drag/carry
CONDITION:	Given a combat scenario in which casualty and responders are in combat gear and the unit has sustained a casualty who must be moved to a cover/safety and a second person is present to assist
STANDARD:	Rapidly move a conscious or unconscious casualty from point of injury to cover/security without causing further injury
EQUIPMENT:	N/A

PERFORMANCE MEASURES: step-by-step instructions

NOTE: Consider body substance isolation.

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

NOTE: Injury can occur to either the rescuer or casualty during training drills; keep safety in mind.

KIT OR ARM DRAG

NOTE: Some body armor is equipped with a drag handle. The equipment must be fully strapped and secured onto the casualty.

NOTE: While the kit or arm drag may be a means of dragging a casualty short distances to cover or safety, it is not efficient for longer distances and increases the chance of causing further harm to the casualty.

NOTE: This allows the rescuers to maintain a “weapons-up” posture while executing the drag.

- 01** Align yourselves alongside the casualty.
- 02** Each of you grab the casualty by their equipment (e.g., drag handle strap) or arms.
- 03** Drag the casualty behind you, going forward as quickly as possible in short bursts of movement.

SUPPORTING CARRY

NOTE: The two-person supporting carry can be used in transporting **conscious** and **unconscious** casualties.

Conscious

- 01** If the casualty is **conscious**, move the casualty to their feet and support them by putting your arms around their waist. Both of you should grasp the casualty’s closest wrist and draw that arm around your necks. (If **conscious** and able, the casualty should use their arms to hold both of you.)
- 02** Put your other arm around the casualty’s waist and grab the casualty’s web belt (if worn) or clothing/equipment, if possible.
- 03** Lift and support the casualty while moving forward in unison.

Unconscious

- 01** For an **unconscious** casualty, kneel next to the casualty and raise them to a seated position facing the same direction as you. Both of you should grasp the casualty’s closest wrist and draw that arm around your necks.
- 02** If the casualty is **unconscious** or taller than both of you, place your arms closest to the casualty under their thighs for support; this keeps the casualty’s feet from dragging.
- 03** Lift and support the casualty while moving forward in unison.

FORE-AND-AFT CARRY

- 01** Position the casualty on their back with arms by their side.
- 02** The taller of the two rescuers kneels at the casualty’s head and faces the casualty’s feet.
- 03** That same rescuer (taller one) slides their hands under the casualty’s arms and locks their hands

together over the casualty's chest.

- 04** The second rescuer spreads the casualty's legs and kneels between them, with rescuer's back toward the casualty.
- 05** Then, the second rescuer grasps the casualty's legs, placing their hands underneath their knees.
- 06** Rise together and lift the casualty. Then, walk forward in unison.

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