





COMBAT MEDIC/CORPSMAN TACTICAL COMBAT CASUALTY CARE
SKILLS ASSESSMENT CHECKLIST



STUDENT NAME: _____

PERFORMANCE STEPS		1 st Attempt		2 nd Attempt	
SUBLINGUAL/TRANSLINGUAL MEDICATION ADMINISTRATION		P	F	P	F
1. Considered body substance isolation.					
2. Checked to ensure that the casualty had no known drug allergies to the medication(s) being administered (asked the casualty or located their red allergy dog tag or bracelet).	C				
3. Gathered necessary medication(s).					
4. Verified the five rights of medication administration (right patient, right medication, right dose and concentration, right time, and right route).	C				
5. If the medication(s) were in a blister pack, peeled back the foil and removed the appropriate dose of the medication; if the medication(s) were loose in a package or bottle, took out the appropriate dose.					
6. Immediately after removing the tablet, if the casualty was conscious, placed it under (sublingual) or on (translingual) the casualty's tongue.	C				
7. Allowed the medication to dissolve completely and then instructed the casualty to swallow it with saliva.					
8. Monitored the casualty for signs and/or symptoms of allergic reactions or other unusual reactions.					
9. Documented all findings and treatments on a DD Form 1380 TCCC Casualty Card and attached it to the casualty.	C				
Demonstrated TCCC Proficiency: Yes No					
Notes:					



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STUDENT NAME: _____

PERFORMANCE STEPS		1 st Attempt		2 nd Attempt	
TRANSMUCOSAL BUCCAL MEDICATION ADMINISTRATION		P	F	P	F
1. Considered body substance isolation.					
2. Checked to ensure that the casualty had no known drug allergies to the medication(s) being administered (asked the casualty or located their red allergy dog tag or bracelet).	C				
3. Gathered necessary medication(s).					
4. Verified the five rights of medication administration (right patient, right medication, right dose and concentration, right time, and right route).	C				
5. Opened or unwrapped the medication.					
6. If the medication used a lozenge-on-a-stick delivery system (lollipop), taped the handle to an uninjured hand (preferably the casualty's nondominant hand).					
7. Directed the casualty to place the medication between their cheek and gum and actively suck on the medication.	C				
8. Had the casualty move the medication around in their mouth, maintaining it along their cheeks. If a handle was present, had the casualty twirl it often, if able.					
9. Disposed the unused portion of the medication appropriately.					
10. Monitored the casualty for signs and/or symptoms of allergic reactions or other unusual reactions.					
11. Documented all findings and treatments on a DD Form 1380 TCCC Casualty Card and attached it to the casualty.	C				
Demonstrated TCCC Proficiency: Yes No					
Notes:					

STUDENT NAME: _____

PERFORMANCE STEPS		1 st Attempt		2 nd Attempt	
		P	F	P	F
INTRANASAL MEDICATION ADMINISTRATION					
1. Considered body substance isolation.					
2. Checked to ensure that the casualty had no known drug allergies to the medication(s) being administered (asked the casualty or located their red allergy dog tag or bracelet).	C				
3. Gathered necessary medication(s).					
4. Verified the five rights of medication administration (right patient, right medication, right dose and concentration, right time, and right route).	C				
5. Confirmed the nasal airway was clear of obstruction(s) and no blood or clear fluid was coming from the nose.	C				
6. Checked and prepared the nasal atomizer device.					
7. Removed the cap.					
8. Gently had the casualty blow their nose to clear the nostrils before the first use of the device only.					
9. Held the device upright between their thumb and first two fingers.					
10. Inserted the atomizer firmly into the nose and aimed it at the top of the ear on the same side of the nostril being used.	C				
11. Pressed the plunger firmly and as fast as possible to ensure that the medication was delivered in a mist, rather than drips.	C				
12. Monitored the casualty for signs and/or symptoms of allergic reactions or other unusual reactions.					
13. Documented all findings and treatments on a DD Form 1380 TCCC Casualty Card and attached it to the casualty.	C				
Demonstrated TCCC Proficiency: Yes No					
Notes:					

STUDENT NAME: _____

PERFORMANCE STEPS		1 st Attempt		2 nd Attempt	
INTRAMUSCULAR (IM) MEDICATION ADMINISTRATION		P	F	P	F
1. Considered body substance isolation.					
2. Checked to ensure that the casualty had no known drug allergies to the medication(s) being administered (asked the casualty or located their red allergy dog tag or bracelet).	C				
3. Gathered all needed supplies and necessary medication(s).					
4. Directed the Combat Lifesaver or another first responder to assist, if available (cleared and exposed possible IM injection site, if appropriate).					
5. Verified the five rights of medication administration (right patient, right medication, right dose and concentration, right time, and right route).	C				
6. Selected the injection site for the IM injection. (a) Upper arm deltoid muscle (b) Buttock/gluteus maximus (c) Outer thigh	C				
7. Selected an appropriate needle length and gauge. (a) 22-gauge, 1-inch for deltoid (b) 22-gauge, 1½-inches for gluteus maximus or thigh					
8. Selected an appropriate syringe.					
9. Connected the needle and syringe and inspected the needle and syringe for any defects.					
10. Selected and prepared the IM medication.	C				
11. Popped off the plastic cap on the top of the medication vial.					
12. Wiped the top of the vial with an alcohol or povidone-iodine pad.					
13. Removed the cap from the needle and pulled back on the plunger and drew air into the syringe equivalent to the recommended amount of medication to be administered.					
14. With their nondominant hand, held the medication vial and inserted the needle into the soft rubber portion of the reconstituted medication vial. (a) Started at a 45-degree angle with the needle bevel up. (b) Changed the angle to a 90-degree angle as the needle pushed through the rubber.					
15. Held the vial and the syringe together, inverted them and brought them to eye level.					
16. Injected the air into the medication vial.					
17. Drew medication from the vial. Adjusted the needle tip to remain below the level of the fluid and withdrew the fluid until the desired volume was reached.					

18. Checked the syringe for air bubbles. (a) If air bubbles were present, tapped/flicked the syringe with their finger to release the air bubbles and then ejected the air. (b) Adjusted needle tip to below the level of the fluid and withdrew more fluid until the desired volume was reached.					
19. Withdrew the needle from the vial, took care not to contaminate the needle tip.					
20. Cleaned the injection site with an alcohol or povidone-iodine pad, or if unavailable, clean water.					
21. Prepared the skin for the injection. Firmed up the tissue at the injection site by pinching the skin gently between the thumb and index finger of the nondominant hand.					
22. Inserted the needle with their dominant hand. (a) Positioned the needle, bevel up, at a 90-degree angle to the skin surface. (b) Plunged the needle firmly and quickly into the muscle to the depth of the needle.	C				
23. Released the hold on the skin.					
24. Aspirated the syringe.					
25. If no blood appeared in the syringe, injected the medication by pushing the plunger into the syringe barrel with a slow, continuous movement as far as the plunger would go.	C				
26. Withdrew the needle quickly and applied direct pressure to the injection site.					
27. Covered the injection site with an adhesive bandage or gauze and tape.					
28. Disposed of the expended needle and syringe appropriately (in a sharps container).					
29. Monitored the casualty for signs and/or symptoms of allergic reactions or other unusual reactions.					
30. Documented all findings and treatments on a DD Form 1380 TCCC Casualty Card and attached it to the casualty.	C				
Demonstrated TCCC Proficiency: Yes No					
Notes:					

STUDENT NAME: _____

RANK:

TRAINER NAME: _____

ROSTER#:

STUDENT NAME: _____

PERFORMANCE STEPS		1 st Attempt		2 nd Attempt	
		P	F	P	F
AUTO-INJECTOR INTRAMUSCULAR (IM) MEDICATION ADMINISTRATION					
1. Considered body substance isolation.					
2. Checked to ensure that the casualty had no known drug allergies to the medication(s) being administered (asked the casualty or located their red allergy dog tag or bracelet).	C				
3. Gathered all needed supplies and necessary medication(s).					
4. Directed the Combat Lifesaver or another first responder to assist, if available (cleared and exposed possible IM injection site).					
5. Verified the five rights of medication administration (right patient, right medication, right dose and concentration, right time, and right route).	C				
6. Selected the injection site for the IM injection. (a) Outer thigh (b) Buttock/gluteus maximus	C				
7. Cleaned the injection site with the alcohol or povidone-iodine pad, or if unavailable, clean water.					
8. Grasped the auto-injector with their dominant hand and removed safety cap.					
9. Placed the tip at the injection site.					
10. Applied firm, even pressure until the auto-injector pushed the needle into the injection site and it began firing.	C				
11. Held the auto-injector firmly in place for at least 10 seconds.	C				
12. Carefully removed the auto-injector from the injection site and applied direct pressure to the injection site.					
13. Disposed of the expended auto-injector appropriately (in a sharps container).					
14. Covered the injection site with an adhesive bandage or gauze and tape.					
15. Monitored the casualty for signs and/or symptoms of allergic reactions or other unusual reactions.					
16. Documented all findings and treatments on a DD Form 1380 TCCC Casualty Card and attached it to the casualty.	C				
Demonstrated TCCC Proficiency: Yes No					
Notes: 					

STUDENT NAME: _____

PERFORMANCE STEPS		1 st Attempt		2 nd Attempt	
INTRAVENOUS (IV) MEDICATION ADMINISTRATION		P	F	P	F
1. Considered body substance isolation.					
2. Checked to ensure that the casualty had no known drug allergies to the medication(s) being administered (asked the casualty or located their red allergy dog tag or bracelet).	C				
3. Gathered all needed supplies and necessary medication(s).					
4. Checked the IV line or saline lock for patency.					
5. Assessed the IV insertion site for redness, swelling, increased or decreased temperature, or bleeding.					
6. Verified the five rights of medication administration (right patient, right medication, right dose and concentration, right time, and right route).	C				
7. Selected an appropriate needle length.					
8. Selected an appropriate syringe.					
9. Connected the needle and syringe and inspected the needle and syringe for any defects.					
10. Selected and prepared the medication for IV injection.	C				
11. Popped off the plastic cap on the top of the medication vial.					
12. Wiped the top of the medication vial with an alcohol or povidone-iodine pad.					
13. Removed the cap from the needle and pulled back on the plunger and drew air into the syringe equivalent to the recommended amount of medication to be administered.					
14. With their nondominant hand, held the medication vial and inserted the needle into the soft rubber portion of the medication vial. (a) Started at a 45-degree angle with the needle bevel up. (b) Changed the angle to 90-degree angle as the needle pushed through the rubber.					
15. Held the vial and the syringe together, inverted them and brought them to eye level.					
16. Injected the air into the medication vial.					
17. Withdrew the appropriate amount of fluid from the vial by drawing back slowly on the syringe plunger until the correct medication volume was obtained.					
18. Checked the syringe for air bubbles. (a) If air bubbles were present, tapped/flicked the syringe with their finger to release the air bubbles and then ejected the air. (b) Adjusted needle tip to below the level of the fluid and withdrew more fluid until the desired volume was reached.					
19. Withdrew the needle from the vial, took care not to contaminate the needle tip.					



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20. Cleaned the IV injection port with an alcohol or povidone-iodine pad.					
21. Pinched the IV line to stop the flow of IV fluid if fluids were being infused.					
22. Inserted the needle into the IV port.	C				
23. Administered the medication.	C				
24. Withdrew the needle.					
25. Opened the IV line to flush the line or flushed with 10 ml of an appropriate fluid if infused through an IV lock.	C				
26. Disposed of the expended needle and syringe appropriately (in a sharps container).					
27. Monitored the casualty for signs and/or symptoms of allergic reactions or other unusual reactions.					
28. Documented all findings and treatments on a DD Form 1380 TCCC Casualty Card and attached it to the casualty.	C				
Demonstrated TCCC Proficiency: Yes No					
Notes:					

STUDENT NAME: _____

RANK: _____

TRAINER NAME: _____

ROSTER#: _____

STUDENT NAME: _____

PERFORMANCE STEPS		1 st Attempt		2 nd Attempt	
INTRAOSSEOUS (IO) MEDICATION ADMINISTRATION		P	F	P	F
1. Considered body substance isolation.					
2. Checked to ensure that the casualty had no known drug allergies to the medication(s) being administered (asked the casualty or located their red allergy dog tag or bracelet).	C				
3. Gathered all needed supplies and necessary medication(s).					
4. Checked the IO line or saline lock for patency.					
5. Assessed the IO site for redness, swelling, increased or decreased temperature, or bleeding.					
6. Verified the five rights of medication administration (right patient, right medication, right dose and concentration, right time, and right route).	C				
7. Selected an appropriate needle length.					
8. Selected an appropriate syringe.					
9. Connected the needle and syringe and inspected the needle and syringe for any defects.					
10. Selected and prepared the medication for IO injection.	C				
11. Popped off the plastic cap on the top of the medication vial.					
12. Wiped the top of the medication vial with an alcohol or povidone-iodine pad.					
13. Removed the cap from the needle and pulled back on the plunger and drew air into the syringe equivalent to the recommended amount of medication to be administered.					
14. With their nondominant hand, held the medication vial and inserted the needle into the soft rubber portion of the medication vial. (a) Started at a 45-degree angle with the needle bevel up. (b) Changed the angle to 90-degree angle as the needle pushed through the rubber.					
15. Held the vial and the syringe together, inverted them and brought them to eye level.					
16. Injected the air into the medication vial.					
17. Withdrew the appropriate amount of fluid from the vial by drawing back slowly on the syringe plunger until the correct medication volume was obtained.					
18. Checked the syringe for air bubbles. (a) If air bubbles were present, tapped/flicked the syringe with their finger to release the air bubbles and then ejected the air. (b) Adjusted needle tip to below the level of the fluid and withdrew more fluid until the desired volume was reached.					

19. Withdrew the needle from the vial, took care not to contaminate the needle tip.					
20. If an IO connector tube was used <i>without</i> fluids or if fluids were infused through an IV tubing set that did not have an injection port, used the following steps: (a) Removed the needle from the syringe and placed in a sharps container (if available). (b) Clamped the IO connector tube and IV fluid line, then removed the end cap or disconnected IV fluids if they were infusing. (c) Attached the syringe with medication to the proximal end of the IO connector tube. (d) Unclamped the IO connector tube clamp. (e) Administered the medication according to manufacturer's guidelines. (f) Reclamped the IO connector tube. (g) Detached the syringe. (h) Reattached IV tubing if it was used, released the IO connector tube clamp and the IV tubing clamp, and bolused 20 ml to flush the site. (i) If fluids were not being infused, drew up 20 ml of saline in a syringe and flushed the IO line.	C				
21. If an IO connector tube was used with fluids infused through an IV tubing set with an injection port, used the following steps: (a) Kept the needle and syringe attached. (b) Cleaned the IV injection port with alcohol or povidone-iodine pad. (c) Pinched the IV line to stop the flow of IV fluids. (d) Inserted the needle into the IV port. (e) Administered the medication according to manufacturer's guidelines. (f) Withdrew the needle. (g) Released the IV line and flushed with 20 ml before returning to desired flow rate.	C				
22. Disposed of the expended needle and syringe appropriately (in a sharps container).					
23. Monitored the casualty for signs and/or symptoms of allergic reactions or other unusual reactions.					
24. Documented all findings and treatments on a DD Form 1380 TCCC Casualty Card and attached it to the casualty.	C				
Demonstrated TCCC Proficiency: Yes No					
Notes:					

STUDENT NAME: _____

RANK: _____

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ROSTER#: _____