



COMBAT MEDIC/CORPSMAN TACTICAL COMBAT CASUALTY CARE
SKILLS ASSESSMENT CHECKLIST



INDIVIDUAL SKILLS ASSESSMENT

MODULE 22: Cardiopulmonary Resuscitation (CPR) in Tactical Field Care

DATE: _____

STUDENT NAME: _____

RANK: _____

TRAINER NAME: _____

ROSTER#: _____

INSTRUCTION: This Skills Assessment Checklist should be used by a trainer to grade a student's ability to perform the individual SKILLS for the TCCC Combat Medic/Corpsman (TCCC-CMC) Course. A trainer should use this form when performing the optional individual skills assessment associated with completing a skills station. To successfully demonstrate proficiency, the student should "PASS (P)" all the critical tasks (marked as "C") on the checklist.

This checklist may also be used as a teaching tool at the skills station if the trainer chooses to grade students only during the culminating exercise tactical trauma assessment. Grading during the culminating exercise is mandatory for successful course completion, while grading individual skills during the skill stations is optional.

PERFORMANCE STEPS		1 st Attempt		2 nd Attempt	
		P	F	P	F
BILATERAL NEEDLE DECOMPRESSION OF THE CHEST (NDC)					
1. Considered body substance isolation.					
2. Assessed the casualty for signs of torso trauma or polytrauma with no pulse or respirations.	C				
3. Identified insertion sites for bilateral NDC and selected the site that was more accessible: (a) Fifth intercostal space (ICS) in the interior axillary line. (OR) (b) Second ICS at the midclavicular line (MCL). NOTE: If the MCL site was used, did not insert the needle medial to the nipple line.	C				
4. Secured a 14-gauge or a 10-gauge, 3.25 inch needle/catheter unit.					
5. Cleaned the site with an antiseptic solution or a pad, if available.					
6. Inserted needle/catheter just over the top of the lower rib at the insertion site, at a 90-degree angle (perpendicular) to the chest wall, advanced it to the hub.	C				
7. Left the needle/catheter in place for 5–10 seconds to allow for decompression; removed the needle and left the catheter in place.	C				
8. Assessed for successful NDC: (a) Verbalized an obvious hissing sound was heard as air escaped from the chest when NDC was performed. (This might have been difficult to appreciate in high-noise environments.) (AND/OR) (b) Verbalized that a casualty with no vital signs had returned to consciousness and/or had pulses. (c) Hemoglobin oxygen saturation increased to 90% or greater.	C				



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Evaluator states "Pulse is present" – proceed to step 10 (OR) Evaluator states "Pulse is NOT present" – proceed to step 9					
9. If the first NDC was unsuccessful, then performed a second NDC on the opposite side of the chest and used a new 14-gauge or 10-gauge, 3.25 inch needle/catheter unit, repeated steps 3–8.	C				
Evaluator states "Pulse is present" – proceed to step 10 (OR) Evaluator states "Pulse is NOT present" – proceed to step 11					
10. If casualty was responsive to NDC, with a return of vital signs, placed the casualty in a position of comfort or in the recovery position with injured side down and continued MARCH-PAWS trauma assessment and treatment.					
11. If bilateral NDC was not successful, considered discontinuing care.					
12. 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: _____

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