



**COMBAT MEDIC/CORPSMAN**  
**TACTICAL COMBAT CASUALTY CARE**

**MODULE 17:**  
**WOUND**  
**MANAGEMENT**  
**SKILL INSTRUCTIONS**

**MAR 2022**



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

## OPEN ABDOMINAL WOUND INSTRUCTION

<b>TASK:</b>	Dress an open abdominal wound
<b>CONDITION:</b>	Given a casualty who has an open abdominal wound in the Tactical Field Care phase, and the necessary materials to treat the casualty
<b>STANDARD:</b>	Dress the open abdominal wound, performing all steps and performance measures without causing further injury to the casualty
<b>EQUIPMENT:</b>	Sterile abdominal dressing(s) or other clean dressing materials, water-impermeable covering, cravats, or material to secure the dressings, and Sterile or clean fluid

## PERFORMANCE MEASURES: step-by-step instructions

**CAUTION:** The size of the external wound is not a safe guideline for judging its severity.

**NOTE:** Consider body substance isolation.

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

- 01** Place the casualty in the supine position, with knees flexed.
- 02** Expose the wound, inspecting for deformities, contusions, abrasions, penetrations, burns, lacerations, and swelling, and most importantly, tenderness, rigidity, distention, and pulsating masses.
- 03** Rinse the wound with clean (and warm if possible) fluid to reduce gross contamination.  
**NOTE:** Apply CoTCCC-recommended hemostatic dressing or hemostatic agent to any uncontrolled bleeding.
- 04** If no evidence of bowel leakage and hemorrhage is visibly controlled, a single brief attempt (<60 seconds) may be made to replace/reduce the eviscerated abdominal contents.  
**CAUTION:** Do NOT attempt if there is evidence of ruptured bowel (gastric/intestinal fluid or stool leakage) or active bleeding.  
**CAUTION:** Do NOT FORCE contents back into abdomen or actively bleeding viscera or remove foreign objects.
- 05** If reduction attempt is successful, re-approximate the skin using available material, preferably an adhesive dressing (chest seal, for example) or with staples, sutures or a wound closure device.
- 06** Stabilize any protruding objects (see Impaled Object Instruction).
- 07** Cover exposed bowel with moist, sterile abdominal dressings, if available.  
**NOTE:** Protruding abdominal organs should be kept moist to prevent the tissue from drying out.
  - (a) Ensure that the dressing is large enough to cover the entire mass of protruding organs or area of the wound.
  - (b) Using the sterile side of the dressing, or other clean, damp material, gather or keep any protruding organs near the wound and cover the wound.  
**NOTE:** Do not touch exposed organs with bare hands.
  - (c) If using a dressing with tails, tie loosely and do not tie directly over the wound.
- 08** Cover the dressed, eviscerated organs with water impermeable non-adhesive material (preferably transparent to allow re-assessment for ongoing bleeding). Examples include the sterile side of a plastic wrapper, IV bag, clear food wrap, etc.  
**CAUTION:** Do not apply pressure on the wound or further expose internal organs.
- 09** Secure the impermeable dressing to the patient using adhesive bandage (examples: medical tape, chest seal, etc.).  
**NOTE:** If an adhesive bandage isn't available, loosely cover the dressing with cravats and tie them on the side of the casualty opposite that of the dressing ties (if present).  
**NOTE:** Use multiple dressings and cravats, if needed, to cover a large wound, ensuring tails of additional dressings are not tied over each other.
- 10** Assess and treat the casualty for shock and continue to reassess periodically.  
**NOTE:** The most important concern in the initial management of abdominal injuries is shock.  
**CAUTION:** Shock may be present initially or may develop later.

- 11** Prevent hypothermia as exposed abdominal contents will result in more rapid heat loss.
- 12** Document all findings and treatments on a DD Form 1380 TCCC Casualty Card and attach it to the casualty.

### IMPALED OBJECT INSTRUCTION

<b>TASK:</b>	Bandage and/or splint an impaled object
<b>CONDITION:</b>	Given a casualty who has an impaled object in the Tactical Field Care phase
<b>STANDARD:</b>	Control possible life-threatening impalement by bandaging and/or splinting with improvised equipment without causing further harm to the casualty
<b>EQUIPMENT:</b>	Dressing materials (sterile pads, kerlix roll, or field dressings) and securing materials (tape, bandages, and/or cravats)

### PERFORMANCE MEASURES: step-by-step instructions

**NOTE:** Consider body substance isolation.

**NOTE:** If a Combat Lifesaver (CLS) is available, direct them to assist.

**CAUTION:** Do not remove, manipulate, or exert force on the impaled object or on the tissue directly adjacent to the impaled object.

- 01** Gently expose the impaled object by cutting or removing clothing to expose the wound site.
- 02** If the impaled object is protruding from an extremity, check the pulse distal to the wound to determine if circulation is impaired.  
**NOTE:** If circulation is impaired, prioritize the casualty for evacuation.
- 03** Assess the wound, and if serious bleeding is present, apply direct pressure to control bleeding, ensuring that you do not apply pressure to the impaled object.  
**NOTE:** Reassess tourniquet, if applicable.
- 04** Direct the CLS or another first responder to manually stabilize the impaled object while you dress the wound.
- 05** Apply a dressing to the wound and stabilize the impaled object using sterile pads, kerlix roll, or field dressing to prevent motion.  
**NOTE:** As an alternate method of stabilization, secure using a chest seal.
- 06** Apply additional dressings, if needed, by building up the area around the impaled object to further protect and stabilize the impaled object.
- 07** Secure all dressings using tape, bandages, and/or cravats to hold bulky dressings in place.
- 08** If the wound is on an extremity, immobilize the extremity using a splint.  
**NOTE:** Reassess pulse, motor, sensory upon splinting.
- 09** Reassess dressing for hemorrhage control.
- 10** Reassess casualty for shock.
- 11** Document all findings and treatments on a DD Form 1380 TCCC Casualty Card and attach it to the casualty.

## AMPUTATION BANDAGING INSTRUCTION

<b>TASK:</b>	Dress and bandage an amputation
<b>CONDITION:</b>	Given a casualty who has a traumatic amputation with or without the amputated limb recovered in the Tactical Field Care phase
<b>STANDARD:</b>	Dress the amputation and care for an amputated part without causing further harm to the casualty
<b>EQUIPMENT:</b>	Gauze, other dressing materials, elastic bandages, and cravats

### PERFORMANCE MEASURES: step-by-step instructions

**NOTE:** Consider body substance isolation.

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

- 01** Expose the injury and assess the bleeding source.
- 02** Apply gauze or other dressing materials and wrap the casualty's stump, ensuring all areas are covered.
- 03** Apply elastic wrap or cravats over the gauze, extending 4 inches above the wound.  
**NOTE:** You may need to use more than one package of gauze and elastic wraps.
- 04** Place and loosely wrap the amputated body part, if found, in saline-moistened sterile gauze.
- 05** Seal the amputated body part inside a plastic bag or wrap it in a cravat.  
**NOTE:** Place in container with ice, if available.  
**CAUTION:** Avoid further injury to the amputated body part by:
  - (a) Never warming an amputated body part.
  - (b) Never placing an amputated body part directly in water.
  - (c) Never placing an amputated body part directly on ice.
  - (d) Never using dry ice to cool an amputated body part.
- 06** Transport the body part with the casualty to the hospital for possible reimplantation or skin graft.  
**CAUTION:** Do not delay transport of a patient in order to locate and care for an amputated body part.
- 07** Document all findings and treatments on a DD Form 1380 TCCC Casualty Card and attach it to the casualty.

Developed by the

# **JOINT TRAUMA SYSTEM**

A Combat Support Division of the



DEFENSE HEALTH AGENCY