

APPLY A PRESSURE DRESSING TO AN OPEN WOUND

For use of this form see TC 8-800; the proponent agency is TRADOC.

TABLE: I
REFERENCE: STP 8-68W13-SM-TG, Task: 081-833-0212, Apply a Pressure Dressing to an Open Wound.

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. § 3013 Secretary of the Army; AR 350-1, Army Training Leadership and Development.
PRINCIPAL PURPOSE: To ensure that accomplishment of training is properly credited to the correct individual for NREMT certification IAW AR 40-68, AR 220-1 and AR 350-1.
ROUTINE USES: Used by Unit personnel to monitor training. The DOD "Blanket Routine uses" set forth at the beginning of the Army's compilation of system of records notices may apply to this system.
DISCLOSURE: Voluntary. Failure to provide your name may result in a loss of credit for accomplishing the training or error in processing applicable favorable personnel actions. For Official Use Only.

1. **Soldier** (Last Name, First Name, MI) _____ 2. **Date** (YYYYMMDD) _____

SCENARIO:

An infantryman moving through a built-up area has the point on your patrol. An artillery round impacts approximately 25 meters from where he is standing. Once counter-battery fire is initiated, you move forward to his position. The patient is alert and oriented, and has significant bleeding coming from his left forearm. Following your initial and rapid trauma assessment you determine that this is his only significant injury. You must apply a pressure dressing to the open wound.

GRADING SHEET

TASK	COMPLETED					
	1ST		2ND		3RD	
	P	F	P	F	P	F
3. Performance Measures						
a. Took body substance isolation precautions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Exposed the injury by cutting away the patient's clothing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Packed the wound with Kerlix® or Combat Gauze® (if Combat Gauze® is used, verbalized holding pressure for 3 minutes.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Applied the emergency bandage to the extremity; applied the white portion directly over the wound.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Wrapped the elastic portion of the emergency bandage around the extremity, and inserted the elastic wrap completely into the pressure bar.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Pulled the emergency bandage tight and reversed it back over the top of the pressure bar forcing the bar down onto the wound pad.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Continued to wrap the elastic bandage tightly over the pressure bar and wound pad; ensuring the edges of the wound pad were completely covered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Secured the hooking ends of the closure bar onto the last wrap of the bandage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Evaluated pulse, motor, sensory distal to injury.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Secured the bandage with tape.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Documented the treatment on the appropriate medical form.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Demonstrated Proficiency Yes No

5. Start Time	6. Stop Time	7. Initial Evaluator
8. Start Time	9. Stop Time	10. Retest Evaluator
11. Start Time	12. Stop Time	13. Final Evaluator

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**CONTROL BLEEDING USING AN EMERGENCY BANDAGE
GRADING SHEET (cont'd)**

14. Comments