# CLS COMBAT TCCC LIFESAVER TACTICAL COMBAT CASUALTY CARE COURSE

### MODULE 20: EVACUATION PROCEDURES



DEFENSE HEALTH AGENCY

Committee on Tactical Combat Casualty Care (CoTCCC)

**TCCC** TIER 1 All Service Members **TCCC** TIER 2 Combat Lifesaver **TCCC** TIER 3 Medic/Corpsman **TCCC** TIER 4 Combat Paramedic/Provider



TACTICAL COMBAT CASUALTY CARE (TCCC) ROLE-BASED TRAINING SPECTRUM





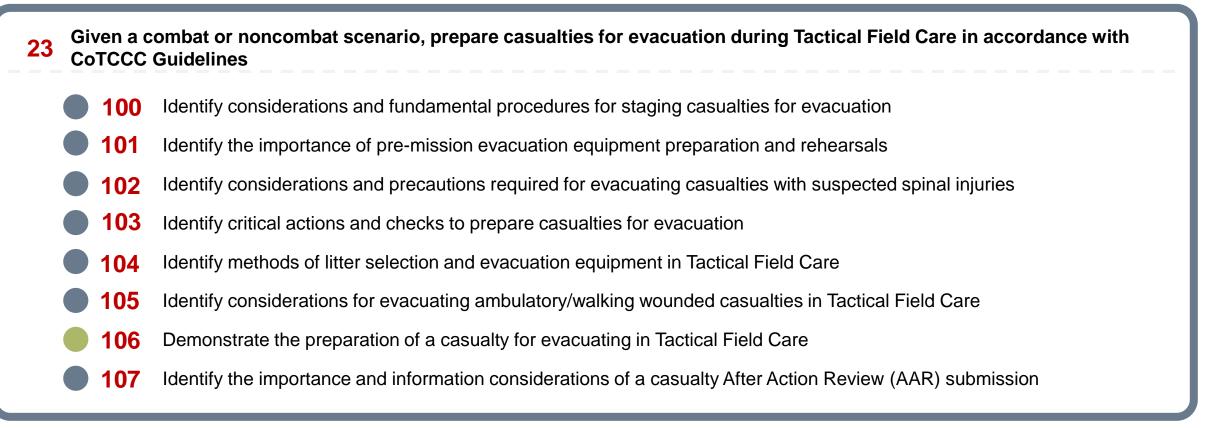
STANDARDIZED JOINT CURRICULUM



### **STUDENT LEARNING OBJECTIVES**



### **TERMINAL LEARNING OBJECTIVE**



#### **OB ENABLING LEARNING** = Cognitive ELOs = Performance ELOs OBJECTIVES (ELOS) #TCCC-CLS-PPT-20 30 JUN 20 3



TACTICAL FIELD CARE



# **Three PHASES of TCCC**

### 1 CARE UNDER FIRE

#### RETURN FIRE AND TAKE COVER

Quick decision-making:

- Consider scene safety
- Identify and control lifethreatening bleeding
- Move casualty to safety

### TACTICAL FIELD CARE

COVER AND CONCEALMENT

Basic management plan:

- Maintain tactical situational awareness
- Triage casualties as required
- Conduct MARCH PAWS assessment



3 TACTICAL EVACUATION CARE

> More deliberate assessment and treatment of unrecognized life-threatening injuries

Pre-evacuation procedures

Continuation of documentation

## NOTE: This is covered in more advanced TCCC training!

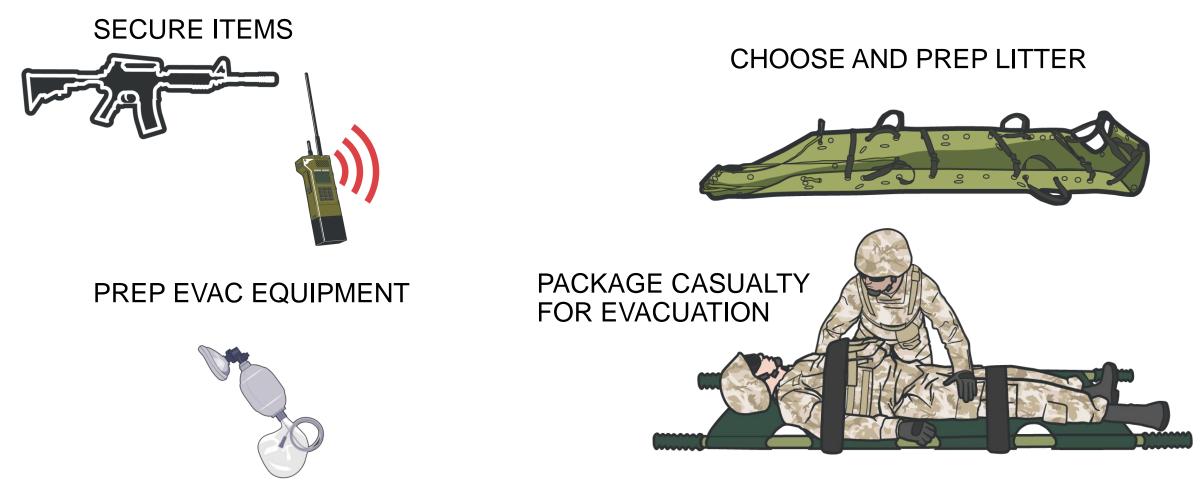






### **IMPORTANT ACTIONS**

### (IN THIS MODULE)









### **SECURE CASUALTY'S EQUIPMENT**







Secure the casualty's weapon and equipment in accordance with unit SOP or mission requirements Clear and render safe any weapons evacuated with the casualty

Do not evacuate explosives with the casualty if possible



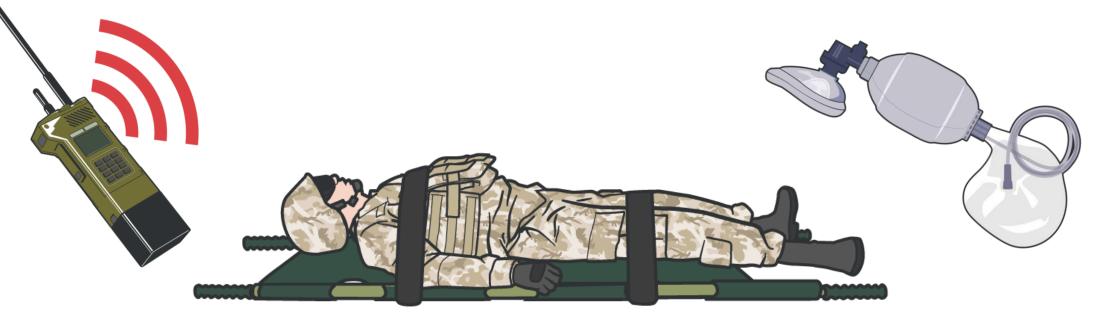
Keep in mind that receiving medical personnel may not be familiar with the equipment or have a way to secure it





### **EVACUATION PROCEDURES**

### **EVAC EQUIPMENT**



Prepped by unit personnel while treatment continues

Coordinate other EVAC activities

Do not delay getting casualties onto litters

Hypothermia is better prevented off the ground

Easier to move casualty on litter

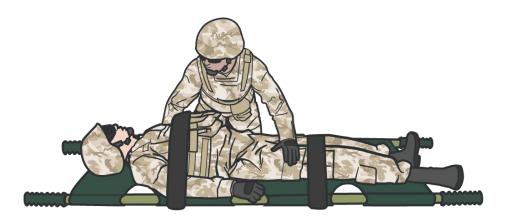
Keep necessary medical equipment with the casualty (Ex: BVM)



### **EVACUATION PROCEDURES**



## LITTERS



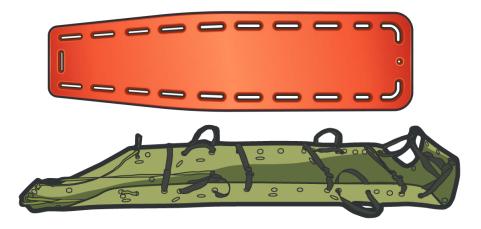
Casualty movement is easier using litters

Use best position for care and comfort

You **DO NOT** have to place casualty on back

For casualties with spinal injuries, keep spinal column as straight as possible

#### **CASUALTY MUST BE SECURED** before movement



Select litter based on mission or unit

Consider and train according to operating environment:

Equipment

Movement

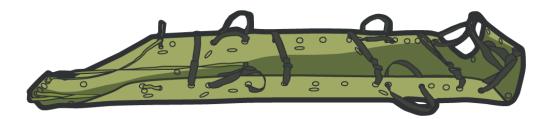
Rehearse litter open/setup/carry

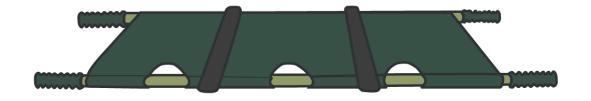






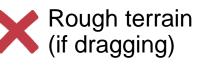
## LITTER SELECTION





#### Compact/lightweight transport system





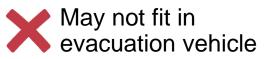


Draggable by one warfighter

#### **Compact quad-folding litter**



Requires more than one warfighter







# PACKAGE THE CASUALTY

**EVACUATION PROCEDURES** 



Secure loose ends of bandages, medical equipment, and hypothermia prevention materials

During evacuation, loose materials may get caught and cause further injury to casualties or delays

Prevent items from being blown by rotor wash or becoming entangled with other equipment

Blankets and hypothermia materials are especially susceptible to becoming entangled

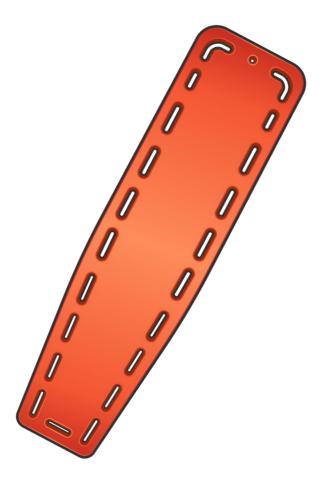
Secure the casualty to a litter

Properly secure completed DD Form 1380





# EVACUATION CONSIDERATIONS FOR SUSPECTED SPINAL INJURIES



Events to consider for neck or back injuries; falls, motor vehicle accidents, IEDs, fast-roping injuries, etc.

Ensure cervical (neck) spine (C-spine) immobilization when spinal cord injury is suspected, if possible

**NOTE:** Spine board is requested during 9-Line (special equipment)

When considering selection of litter (such as standard litters) based on mission and unit, realize that the selected litter may not fit in the given evacuation ground/air vehicle

**Ex:** M1114 or M1151 Up-armored High Mobility Multipurpose Wheeled Vehicle (HMMWV-Humvee)





## WALKING WOUNDED

**EVACUATION PROCEDURES** 



#### Provide instructions/ assistance as needed

If possible, casualty may assist as a litter bearer/ provides security



#### Guide disoriented/visually impaired casualty's hand-toshoulder to evacuation platform

### **SELF-CARE**

Instruct casualty to repeatedly check their own wounds and dressings to ensure bleeding remains controlled



**EVACUATION PROCEDURES** 



### **STAGE CASUALTY**



Be prepared for the arrival of the evacuation platform

Stage the casualties in the loading sequence of the evacuation platform

Many units use tagging or color-coded chemlights to identify casualty evacuation categories Maintain security at the evacuation point in accordance with SOP





# **MEDICAL AFTER ACTION REVIEW (AAR)**

### The AAR covers the following

- What went right?
- What went wrong?
- What can we do better?
- Lessons learned on the casualties and injuries
- Treatment of casualties and effectiveness during mission



Capturing a good AAR ensures up-to-date medical information, types of casualties, and injury patterns that units might encounter and can train for





### **SKILL STATION**

Evacuation Procedures - Concepts (Skills)

Staging for evacuation

Preparing pre-mission evacuation equipment and rehearsing

Evacuating casualties with suspected spinal cord injuries

**Preparing casualties for evacuation** 

Selecting litter and evacuation equipment in TFC

**Evacuation ambulatory casualties in TFC** 

Submitting the AAR

Submitting/handing off the \*9-Line Report Note: lines 6-9







# **SUMMARY**

We identified important actions We discussed securing casualty equipment We discussed evacuation equipment We identified litter selections We discussed casualty packaging We identified spinal injury considerations We discussed walking wounded We identified staging We identified considerations for casualty AAR





### **CHECK ON LEARNING**

What actions are needed to prepare for evacuation? What does casualty staging involve?





### ANY QUESTIONS?





# TACTICAL TRAUMA ASSESSMENT STUDENT PRACTICE