













## **CHEST SEAL**



**CONSIDER** body substance isolation. **NOTE:** If a Combat Lifesaver is available, direct them to assist.



**EXPOSE** and uncover any anterior, posterior or axillary chest wounds.

**NOTE:** If multiple wounds are found, treat them in the order in which you found them.



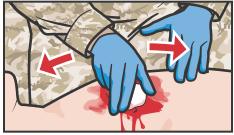
Fully **OPEN** the outer wrapper of the commercial vented chest seal or other airtight material from the casualty's IFAK.

**NOTE:** If a vented chest seal is not available, use a non-vented chest seal.



**CHECK** for signs of an open and/or sucking chest wound.

NOTE: If you are not sure if the wound has penetrated the chest wall completely, treat the wound as though it were an open chest wound.



**REMOVE** gauze from vented 05 chest seal package (or other gauze) to wipe away any dirt, blood, or other fluid.



**PLACE** hand or back of hand over open chest wound to create a temporary seal.



**PEEL OFF** the protective liner, 06 exposing the adhesive portion of the vented chest seal.



**PLACE** adhesive side directly over hole as casualty exhales, pressing firmly to vented chest seal. **NOTE:** Ensure edge of vented chest seal extends 2" beyond edges of the wound.



**ENSURE** the adhesive surface of the vented chest seal is adhering to the skin.

**NOTE:** Tape may be used to secure the edges of the vented chest seal if needed.



**ASSESS** the effectiveness of the vented chest seal when the casualty breathes.

**STEP 9 NOTE:** When the casualty inhales, the plastic should be sucked against the wound, preventing air entry. STEP 9 NOTE: When the casualty exhales, trapped air should be able to escape from the wound and out the commercial chest seal valve.







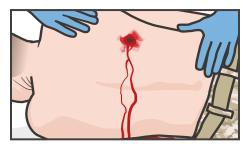








## **CHEST SEAL**



**CHECK/FEEL** for additional open wounds (anterior, posterior, and axillary). Treat any additional wounds with vented chest seals if needed.



**PLACE** conscious casualty into a sitting position or an unconscious casualty in the recovery position (with their injured side down).



**MONITOR** for signs of a tension pneumothorax.

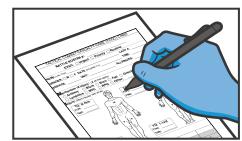


If signs of a tension pneumothorax develop, **LIFT** one edge of the vented chest seal to allow decompression ("burping" the seal)

**NOTE:** Alternatively, remove the chest seal for a few seconds to decompress and then reapply or replace it with a new commercial vented chest seal.



If signs of a tension pneumothorax persist despite burping the seal, **PERFORM** a needle decompression of the chest (see Needle Decompression of the Chest Instruction).



**DOCUMENT** all findings and 15 treatments on a DD Form 1380 TCCC Casualty Card and attach it to the casualty.