









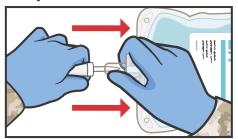




TIBIA INTRAOSSEOUS (EZ-IO®)



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



SPIKE intravenous (IV) bag and properly prepare IV tubing.

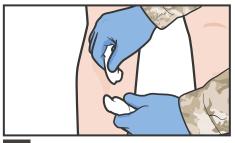


PRIME the IO extension tubing with sterile IV solution using aseptic technique.

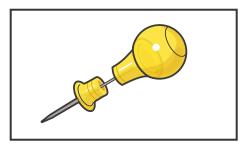




LOCATE the proper site for EZ-IO insertion, one finger width medial to the proximal tibial tuberosity (usually found 3 cm below the patella).

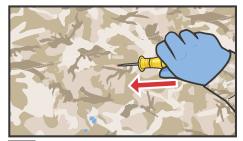


CLEAN site with alcohol or povidone-iodine pad.



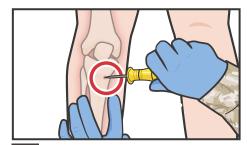
cartridge.lf using a mechanical driver, open the EZ-IO cartridge and attach the needle set to the driver; you should feel a "snap" as the small magnet connects.

NOTE: The adult-size EZ-IO cartridge is colored yellow.

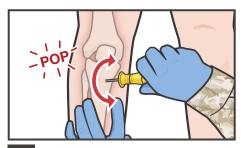


PREPARE the manual EZ-IO needle by removing the needle safety cap. If using the mechanical driver, remove the cap by momentarily powering the driver while holding the cap.

NOTE: Keep hands and fingers away from the needle.

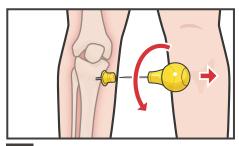


- While holding the driver or the needle set in your dominant hand, **STABILIZE** the leg near the insertion site with your nondominant hand.
- POSITION the driver or the needle set at the insertion site with the needle at a 90-degree angle to the surface of the bone.



- PIERCE the skin and advance until the needle tip touches the bone, then
- downward pressure, twist the needle set back and forth (or squeeze the driver's trigger) until you penetrate the bone cortex.

NOTE: An obvious give or pop is felt when the desired depth is obtained.



2 UNSCREW the stylet counterclockwise and remove stylet from catheter. If using a mechanical driver, gently remove the drill from the needle.

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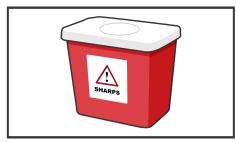






TIBIA INTRAOSSEOUS (EZ-IO®)

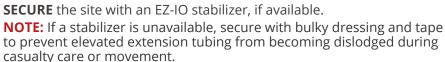
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PLACE the stylet in a sharps container.

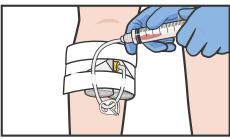


SECURE the site with an EZ-IO stabilizer, if available. 14

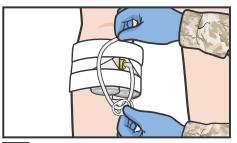




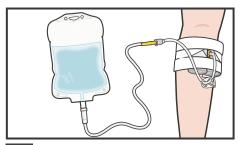
CONNECT primed extension set through the 90-degree IO tubing to the Luer lock EZ-IO hub.



ASPIRATE to confirm needle is in the marrow (should see flash of blood-tinged material) and flush catheter with 10 ml flush using a rapid infusion.



ASSESS for signs of infiltration or complications.



PREPARE for fluid or medication administration.



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