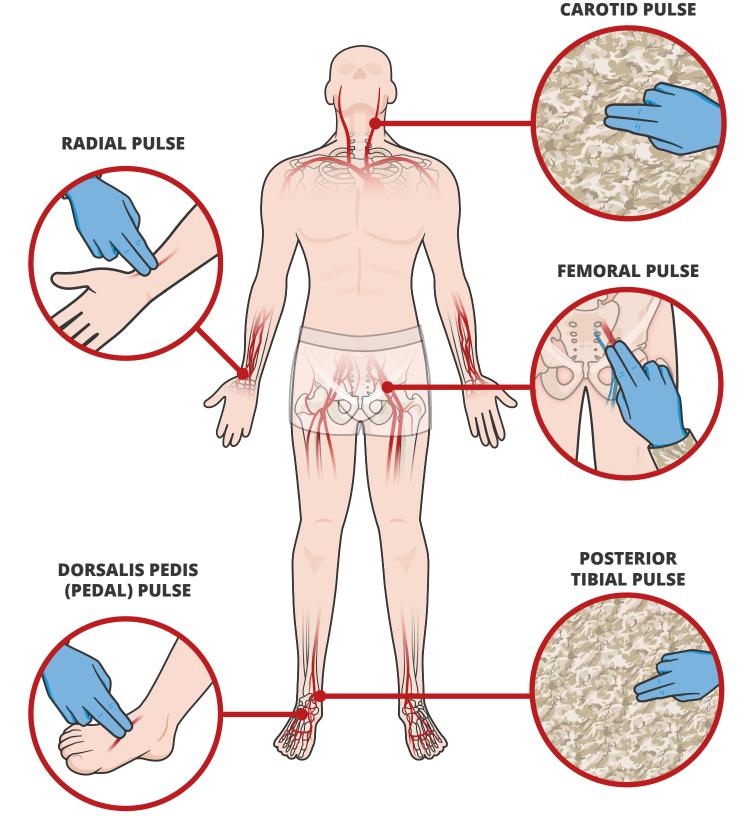






PULSE ASSESSMENT

CCC



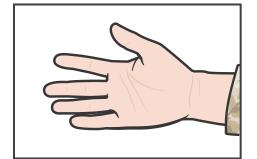




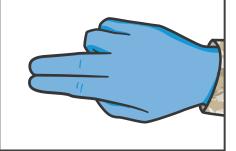
RADIAL PULSE ASSESSMENT

CONSIDER body substance isolation.

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



POSITION the casualty's hand with the palm facing up. **NOTE:** In this position, you should see a ligament elevated underneath the skin.



ALIGN the middle and index fingers of your dominant hand.



PLACE your fingers next to the ligament on the same side as the casualty's thumb. **NOTE:** If your fingers are on the hard surface of the wrist bones, move them down and along the ligament until they reach a softer area.



PRESS your fingers into the hollow space to feel the radial artery beneath the skin.



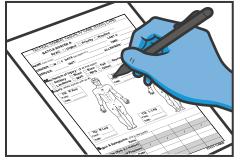
05 With a timing device, **COUNT** the beats of the pulse for 15 seconds.



06 MULTIPLY that number by four and you will have the casualty's pulse rate (in beats/minute).

STEP 4 NOTE: If you cannot feel the pulse, press a little harder, being careful not to hurt the casualty. **STEP 4 NOTE:** If you are still having trouble locating the radial artery, slide your fingers up and along the ligament until you reach the bottom of the wrist bones.

STEP 4 NOTE: At the point where the hollow space meets the wrist bones, the pulse is easier to feel.



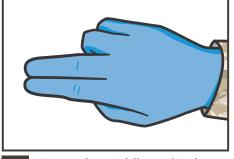
DOCUMENT all findings and treatments on a DD Form 1380 TCCC Casualty Card and attach it to the casualty.



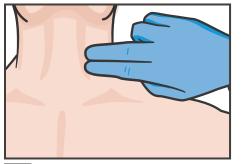


CAROTID PULSE ASSESSMENT

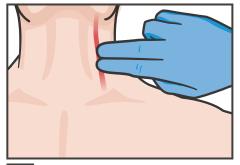
CONSIDER body substance isolation. **NOTE:** If a Combat Lifesaver is available, direct them to assist.



ALIGN the middle and index 01 fingers of your dominant hand.

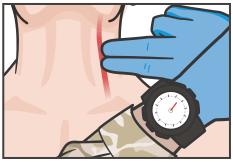


PLACE your middle and index 02 finger on the side of the casualty's neck, to the side of the trachea, to find the carotid artery.

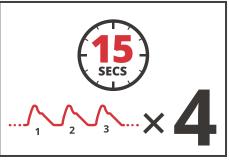


Press your fingers into the 03 hollow space to feel the carotid artery beneath the skin.

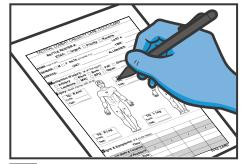
STEP 3 NOTE: If you cannot feel the pulse, press a little harder, being careful not to hurt the casualty. STEP 3 CAUTION: Be careful not to press too hard over the carotid artery, as this can cause the casualty to become lightheaded.



With a timing device, 04 **COUNT** the beats of the pulse for 15 seconds.



MULTIPLY that number by four 05 and you will have the casualty's pulse rate (in beats/minute).



DOCUMENT all findings and 06 treatments on a DD Form 1380 TCCC Casualty Card and attach it to the casualty.



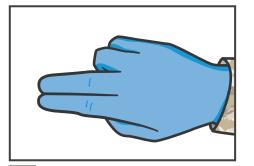




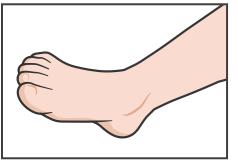
POSTERIOR TIBIAL PULSE ASSESSMENT

CONSIDER body substance isolation.

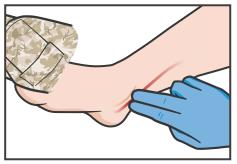
NOTE: If a Combat Lifesaver is available, direct them to assist.



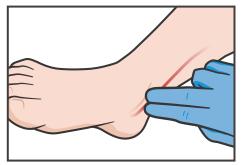
ALIGN the middle and index fingers of your dominant hand.



SLIDE your fingers down the inside of the casualty's boot behind the bony part of the ankle or remove the boot to expose the ankle.

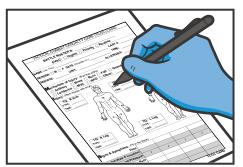


PLACE your fingers, on the inside of the foot, between the bony part of the ankle bone and the Achilles tendon.



PRESS your fingers into the hollow space to feel the posterior tibial artery beneath the skin.

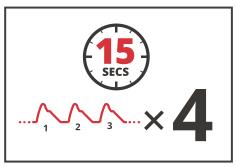
NOTE: If you cannot feel the pulse, press a little harder, being careful not to hurt the casualty.



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



05 With a timing device, **COUNT** the beats of the pulse for 15 seconds.



06 MULTIPLY that number by four and you will have the casualty's pulse rate (in beats/minute).

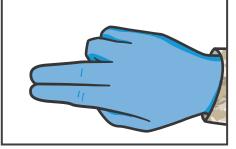




DORSALIS PEDIS PULSE ASSESSMENT

Ø

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



REMOVE the casualty's boot and sock.

ALIGN the middle and index fingers of your dominant hand.



Have the top of the casualty's **FOOT FACING UP**. **NOTE:** In this position, you should see an elevated arch underneath the skin on the top of the foot.



PLACE fingers just lateral to the extensor tendon (the firm ridge formed by the extensor tendon) of the great toe.

STEP 4 NOTE: A hollow soft spot should be felt.

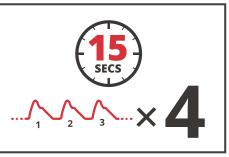
STEP 4 NOTE: If you cannot feel a pulse, move fingers more laterally until they reach a softer area.



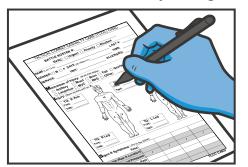
PRESS your fingers into the hollow space to feel the dorsalis pedis artery beneath the skin.



06 With a timing device, COUNT the beats of the pulse for 15 seconds.



- **07 MULTIPLY** that number by four and you will have the casualty's pulse rate (in beats/minute).
- **STEP 5 NOTE:** (a) If you cannot feel the pulse, press a little harder, being careful not to hurt the casualty. (b) If you are still having trouble locating the dorsalis pedis artery, slide your fingers up and along
 - the ligament until you reach the base of the ankle.
 - (c) At the point where the hollow space meets the foot bones, the pulse is easier to feel.(d) Press your fingers into the hollow space to feel the dorsalis pedis artery beneath the skin.



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





FEMORAL PULSE ASSESSMENT

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



POSITION the casualty in the supine position.

PLACE your fingers halfway

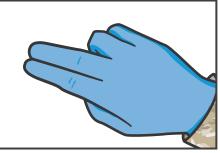
and the anterior iliac spine (or slightly

medial to that) and press in and up toward the head (just past the

between the pubis symphysis

04

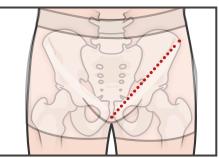
inguinal gutter).



ALIGN the middle and index fingers of your dominant hand.



PRESS on the artery gently with your two fingers to feel a pulse.



DRAW an imaginary line from the anterior aspect of the pelvic crest to the pubic bone.



06 With a timing device, **COUNT** the beats of the pulse for 15 seconds.

STEP 4 NOTE: The inguinal gutter is the crevice between the top of the thigh and the lower abdomen where heavy blood flow structures are located; it is halfway between the bone above the genitals (pubic bone) and top of the thigh. **STEP 5 NOTE:** (a) If you are unable to feel the pulse, reposition the casualty (ensure they are lying flat on their back

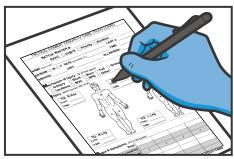
with legs outstretched).

(b) If you are still unable to find the pulse, rotate the casualty's leg externally, opening up the inner thigh region.

(c) If you are still unsuccessful, reposition the leg in external rotation with a slight bend to the knee.



MULTIPLY that number by four and you will have the casualty's pulse rate (in beats/minute).



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