

M6: Evaluate and Treat a Casualty for a Spinal Injury and Shock

Based on:

**081-COM-1001-Evaluate a Casualty**

**081-000-0083-Apply a Cervical Collar**

**081-COM-1005-Apply Preventative Measures to Control Shock**

**081-COM-0013 Record Treatment on a Tactical Combat Casualty Card (DD 1380)**

**Task:** Identify the signs and symptoms of shock. Evaluate and treat a casualty for spinal injury and shock.

**Condition:** You are on a secure Forward Operating Base (FOB) in a non-CBRNE environment. You witness a soldier fall from a guard tower that the casualty was initially acting fine, but begins complaining of nausea, difficulty breathing, and abdominal pain but now only reacts to pain. The casualty is laying on a litter with long spine board and there is another soldier available to assist.

**Standard:** Identify at least six signs and symptoms of shock with no incorrect answers within one minute. Apply a cervical collar, treat for shock, and prepare for transfer to standard, in sequence, within seven minutes, without causing further injury.

**Station Requirements:** A simulated casualty or mannequin in the complete EIB uniform. A Department of Defense (DD) Form 1380 Tactical Combat Casualty Care (TCCC) Card with the administrative data already filled out. A Basic Life Support (BLS) bag with adjustable Cervical Collars (one pediatric and one adult), set to incorrect sizes. Head immobilization blocks. Casualty should be positioned on the litter and spine board where the Candidate will apply aid. Additional Soldier (if available) to assist. Laminated sheet of paper with blank lines, alcohol pens, and eraser. Provide the Candidate with, or ensure the Candidate has a stopwatch.

**Identify Signs and Symptoms of Shock:**

1. Sweaty but cool skin.
2. Pale skin.
3. Restlessness or nervousness.
4. Thirst.
5. Severe bleeding.
6. Confusion.
7. Rapid breathing.
8. Blotchy blue skin.
9. Nausea and/or vomiting.

**Apply a Cervical Collar, Treat for Shock, and Prepare for Transfer:**

1. Apply Cervical Collar
  - a. Have the other Soldier kneel at the casualty's head and manually apply in-line stabilization of the head and neck. **If the assistant is notional, the Grader will state, "The other Soldier has the head and neck in-line and immobilized."**
  - b. Reassure the casualty and explain the procedure to them.
  - c. Determine the size of collar to apply.
    1. The front height of the collar should fit between the chin and the chest at the suprasternal notch.
    2. Once in place, the collar should rest on the shoulder girdle and provide firm support under both sides of the mandible without obstructing the airway or any ventilation efforts. *Note: If the collar is too large, the casualty's neck may be placed in hyperextension and if the collar is too small, the casualty's neck may be placed in hyper flexion.*
  - d. Size the collar based on the manufacturer instructions.
  - e. Apply the collar to a supine casualty.
    1. Ensure the other Soldier maintains in-line stabilization.
    2. Set the collar in place around the neck and secure the Velcro strap in place.
    3. Maintain manual stabilization of the head and neck until the casualty is immobilized on a long spine board. **If the assistant is notional, the Grader will state, "The other Soldier has the head and neck immobilized."**
    4. Immobilize casualty to spine board using straps across chest, pelvis, and legs.
    5. Apply head supports to each side of the casualty's head and fasten the straps or cravat-like material tightly over the head supports and lower forehead and over the pads and rigid cervical collar.
2. Assess for shock.
  - a. Assess casualty's level of consciousness. **Grader will state, "Casualty does not answer, but reacts to pain."**
  - b. Evaluate skin. **Grader will state, "Skin is pale and moist; abdomen is distended."**

3. Treat for hemorrhagic shock.
  - a. Position the casualty.
    1. Move the casualty under shelter to shade them from direct sunlight.
    2. Secure casualty and long spine board to the litter before moving. **If no assistant is available, Candidate will verbalize, but still ensure to secure the casualty on the litter.**
  - b. Loosen clothing at the neck, waist, or anywhere it is binding.
  - c. Prevent the casualty from getting chilled or overheated. Using a blanket or clothing, cover the casualty to avoid loss of body heat by wrapping completely around the casualty, underneath the litter straps. Re-secure the patient on the litter.
  - d. Calm and reassure the casualty; watch the casualty closely for life-threatening conditions.
  - e. Watch the casualty closely for life threatening conditions and check for other injuries, if necessary.
  - f. Seek the next level of medical aid.
4. Remove DD Form 1380 from IFAK and record all treatments. Administrative data will already be filled out.
  - a. Front of card
    1. Evacuation (EVAC) -Mark an "X" on the casualty's evacuation priority/precedence (Urgent; Priority; Routine).
    2. Date - Write date of injury in DD-MMM-YY format. For example, "29-JUN-13."
    3. Time - Write 24-hour time of injury and indicate whether local (L) or Zulu (Z) time. For example, "1300Z."
    4. Mechanism of Injury - Mark an "X" on the mechanism or cause of injury (artillery, blunt, burn, fall, grenade, gunshot wound (GSW), improvised explosive device (IED), landmine, motor vehicle crash/collision (MVC), rocket propelled grenade (RPG), other (specify)). Mark all that apply.
    5. Injury - Mark an "X" at the site of the injury(s) on the body picture. If multiple mechanisms of injury and multiple injuries, draw a line between the mechanism of injury and the anatomical site of the injury. (Spinal injury and internal bleeding).
    6. Time - Write time of vital signs taken.
    7. Pulse (rate & location) - Write casualty's pulse rate.
    8. Respiratory Rate - Write casualty's respiratory rate.
    9. AVPU - Write casualty's level of consciousness (AVPU: Alert, Verbal, Pain, Unresponsive).
  - b. Back of card
    1. Evacuation (EVAC) -Mark an "X" on the casualty's evacuation priority/precedence (Urgent; Priority; Routine).
    2. Other - Mark an "X" for other treatments administered (combat pill pack, eye shield (mark right (R) or left (L)), splint, hypothermia prevention) and type of device(s) used. (Cervical collar).
    3. Notes - Use this space to record any other pertinent information and/or clarifications. (Patient exhibiting signs and symptoms of shock).
    4. First Responder Name - Print the first responder's name (Last, First).
    5. First Responder Last 4 - Write last four numbers of first responder's Social Security number.
  - c. Secure the DD Form 1380 to the casualty per Unit SOP. *Note: Do not attach the Card to casualty's body armor as this equipment may be separated from the casualty once they arrive at the medical treatment facility (MTF).*