



INDICATIONS:

- Use of a tourniquet is appropriate when upper or lower extremity hemorrhage cannot be controlled by applying direct pressure or hemostatic dressings to the bleeding site.

CONTRAINDICATIONS:

- None.

EQUIPMENT:

- A California EMS Authority approved tourniquet device.
Combat Application Tourniquet (C-A-T)
SOF Tactical Tourniquet (SOFT)
Mechanical Advantage Tourniquet (MAT)
Tourni-Kwik 4 (TK4) Tourniquet
- Personal protective equipment, dressings and bandages.

PROCEDURE:

- Use personal protective equipment (PPE) appropriate for potential blood exposure.
- Visually inspect injured extremity and avoid placement of a tourniquet over joint, angulated or open fracture, stab or gunshot wound sites.
- Assess and document circulation, motor and sensation distal to injury site.
- Apply tourniquet proximal to wound (usually 2-4 inches).
- Tighten tourniquet incrementally to the least amount of pressure required to stop bleeding.
- Cover wound with an appropriate sterile dressing and/or bandage.
- Do not cover tourniquet (keep tourniquet visible).
- Re-assess and document circulation, motor and sensation distal to tourniquet.
- Ensure receiving facility staff are aware of tourniquet placement and time tourniquet placed.

DOCUMENTATION:

- Estimated blood loss.
- Vital signs, assessment of circulation, motor, and sensation distal to injury site before and after tourniquet application.
- Time tourniquet is applied.

NOTES:

- Advanced Life Support (ALS) level response is required when a tourniquet is placed.
- During multi-casualty incidents, consider a patient requiring a tourniquet to have a perfusion problem and categorize as START category "Immediate" (Red) to facilitate treatment and minimize tourniquet time.

Approved:

A handwritten signature in blue ink, appearing to read "J. Frattolini".

Review Date: 09/08, 4/17
Final Date for Implementation: 10/01/2017
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