

Tourniquets

Use a tourniquet on an arm or leg **ONLY** if blood loss is *uncontrolled* by direct pressure or if direct pressure is *not* possible. Situations might include:

- A disaster scene with multiple persons and limited rescuers.
- One person with multiple injuries and one first aid provider.
- A person who needs to be moved quickly or who is trapped without access to the wound.

To give **CARE**:

- Tie a band of soft material, about 1 to 2 inches wide, approximately 2 inches above the wound but not over the joint (Figure 4). **DO NOT** use anything narrow (e.g., rope or string).



Figure 4

- Tie a short, sturdy stick or another rigid object into the material and twist it (called the windlass technique) (Figure 5).
- Tighten the tourniquet by twisting until bleeding stops, and no more.
- In a non-delayed-help situation, continue to monitor and care for shock and keep the tourniquet tight and in place until the person reaches advanced medical care (surgery will most likely be required).
- Note the time that you applied the tourniquet.
- Tag the person in an obvious place with information about when and where the tourniquet was placed.
- **DO NOT** cover the tourniquet with clothing.
- **DO NOT** remove the tourniquet unless advised to do so by a health care provider (by phone or radio while awaiting help).



Figure 5

- NOTE**
- Commercial emergency tourniquets are available and recommended. Follow manufacturer's instructions.
 - If a tourniquet is required for a lower leg wound and bleeding is not stopped when a tourniquet is placed near the wound, relocate the tourniquet to just above the knee. (This may work better because it is easier to compress the artery against the femur.)
 - It is better to continuously use a tourniquet than to allow additional blood loss.