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Tactical Combat Casualty Care rules applied to civilian traumatic cardiopulmonary resuscitation.

Pasquier P, Carbonnel N, Bensalah M, et al:

Quote:

“For the study interval between October 2001 and June 2011, 4596 battlefield fatalities in Operation Iraqi Freedom and Operation Enduring Freedom were reviewed and analyzed. 24.3% (n = 976) were deemed potentially survivable (PS). The injury/physiologic focus of PS acute mortality was largely associated with hemorrhage (90.9%) and airway compromise (8.0%). This analysis highlighted the importance of TCCC to impact the outcome of combat casualties with PS injury, including strategies developed to mitigate hemorrhage on the battlefield, optimize airway management, and decrease the time from point of injury to surgical intervention. Furthermore, also illustrated in the study of Kleber et al, some of the concepts and successes noted in TCCC are gaining increasing acceptance in civilian trauma care systems, including tourniquets, hemostatic agents, intraosseous devices and hypotensive resuscitation.