		T	T 1
1.	TCCC Critical Decision Case Studies August 2017	TCCC Critical Decision Case Studies August 2017	
		The Biggest Challenge in TCCC	
2.	The Biggest Challenge in TCCC Knowing WHEN to use the interventions taught in TCCC	Knowing WHEN to use the interventions taught in TCCC Based on a suggestion by COL Bob Mabry	Read the text.
۷.	Based on a suggestion by COL Bob Mabry	Based on a suggestion by COL Boo Maory	Read the text.
	 TCCC Critical Decision Case Studies will help to illustrate which interventions to perform for casualties with life-threatening conditions. 	TCCC Critical Decision Case Studies will help to illustrate which interventions to perform for casualties with life-threatening conditions.	
	TCCC Critical Decisions	TCCC Critical Decisions	
	Bleeding Case Study 1	Bleeding Case Study 1	
3.	The Setting • A unit is on a dismounted mission in Afghanistan. • Dismounted IED attack. • The unit has no junctional tourniquets. • There is no effective incoming fire at the moment.	 The Setting A unit is on a dismounted mission in Afghanistan. Dismounted IED attack. The unit has no junctional tourniquets. There is no effective incoming fire at the moment. 	Read the text.
	TCCC Critical Decisions	TCCC Critical Decisions	
	Bleeding Case Study 1	Bleeding Case Study 1	
4.	The Casualty High amputation right leg Below the knee amputation left leg Ongoing massive hemorrhage from his right leg amputation site Too proximal to be controlled by a tourniquet	 The Casualty High amputation right leg Below the knee amputation left leg Ongoing massive hemorrhage from his right leg amputation site Too proximal to be controlled by a tourniquet 	Read the text.
		TCCC Critical Decisions	
5.	TCCC Critical Decisions Bleeding Case Study 1 Question What is the NEXT action you should take? 1. Combat Gazze applied with at least 3 minutes of direct pressure at the bleeding site 2. Construct a pressure dressing over the bleeding site 4. Apply direct pressure over the femoral artery at the level of the inguinal ligament	Reding Case Study 1 Question: What is the NEXT action you should take? 1. Combat Gauze applied with at least 3 minutes of direct pressure at the bleeding site 2. Start an IV 3. Construct a pressure dressing over the bleeding site	Read the text.
		4. Apply direct pressure over the femoral artery at the level of the inguinal ligament	

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		TCCC Critical Decisions	
		Bleeding Case Study 1	
	TCCC Critical Decisions Bleeding Case Study 1 Correct Answer and Feedback	Correct Answer and Feedback: 1. Combat Gauze applied with at least 3 minutes of direct pressure	
	1. Combat Gauze applied with at least 3 minutes of	at the bleeding site	
6.	direct pressure at the bleeding site In this casualty with uncontrolled junctional bleeding in the right upper thigh, since the unit has no junctional tourniquets and since the bleeding site is too proximal on the leg to be controlled with a limb tourniquet, the best option is direct pressure with Combat Gauze. Pressure dressings and pressure applied to so-called "pressure points" at vascular sites proximal to the bleeding have not been proven to be effective.	In this casualty with uncontrolled junctional bleeding in the right upper thigh, since the unit has no junctional tourniquets and since the bleeding site is too proximal on the leg to be controlled with a limb tourniquet, the best option is direct pressure with Combat Gauze. Pressure dressings and pressure applied to so-called	Read the text.
		"pressure points" at vascular sites proximal to the bleeding have not	
		been proven to be effective.	
	TCCC Critical Decisions Bleeding Case Study 2	TCCC Critical Decisions Bleeding Case Study 2	
7.	The Setting • A squad of Marines is engaged in a small arms battle with hostile forces • RPG blast near one of the unit members • Casualty lying on his right side • There is no effective incoming fire at the moment	The Setting • A squad of Marines is engaged in a small arms battle with hostile forces • RPG blast near one of the unit members • Casualty lying on his right side • There is no effective incoming fire at the moment	Read the text.
		TCCC Critical Decisions	
	TCCC Critical Decisions Bleeding Case Study 2	Bleeding Case Study 2	
8.	The Casualty The casualty is moving around and awake, but his movements are not purposeful and he is not responding to questions Face and neck wounds (not airway) are present Several teeth are missing, and there are lip and cheek lacerations There is ongoing severe bleeding from the neck wound No other major bleeding sites are immediately noted He is voicing significant pain	 The Casualty The casualty is moving around and awake, but his movements are not purposeful and he is not responding to questions Face and neck wounds (not airway) are present Several teeth are missing, and there are lip and cheek lacerations There is ongoing severe bleeding from the neck wound No other major bleeding sites are immediately noted He is voicing significant pain 	Read the text.
		TCCC Critical Decisions	
	TCCC Critical Decisions Bleeding Case Study 2	Bleeding Case Study 2	
9.	Question What is the NEXT action you should take?	Question: What is the NEXT action you should take?	Read the text.
<i>y</i> .	1. Perform a cricothyroidotomy 2. Start an IV 3. Apply Combat Gauze with sustained direct pressure at the bleeding site on the neck 4. Administer OTFC to treat the casualty's pain	 Perform a cricothyroidotomy Start an IV Apply Combat Gauze with sustained direct pressure at the bleeding site on the neck Administer OTFC to treat the casualty's pain 	Toda the text

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		TCCC Critical Decisions	
	TCCC Critical Decisions	Bleeding Case Study 2	
	Bleeding Case Study 2	Consider Annual Profit of the state of the s	
		Correct Answer and Feedback:	
	Correct Answer and Feedback	3. Apply Combat Gauze with sustained direct pressure at the	
10.	3. Apply Combat Gauze with sustained direct pressure at the bleeding site on the neck	bleeding site on the neck	Read the text.
	This casualty has massive hemorrhage from a neck wound.	This acqualty has massive hamamhaga from a neal- wound	
	Tourniquets are obviously not usable, so sustained direct pressure with Combat Gauze is the best hemostatic option	This casualty has massive hemorrhage from a neck wound. Tourniquets are obviously not usable, so sustained direct pressure	
	available. Also - opioid medications such as OTFC should not be used in casualties in or at risk for shock, which this casualty definitely is.	with Combat Gauze is the best hemostatic option available. Also -	
		opioid medications such as OTFC should not be used in casualties	
		in or at risk for shock, which this casualty definitely is.	
		TCCC Critical Decisions	
	TCCC Critical Decisions	Bleeding Case Study 3	
	Bleeding Case Study 3	2.00amg case stady c	
		The Setting	
1.1	The Setting		D 141 ()
11.	 A small unit is moving across an open area It is night and there is zero visibility without 	A small unit is moving across an open area	Read the text.
	night vision devices The casualty has a gunshot wound in his left	• It is night and there is zero visibility without night vision devices	
	leg just above the knee The unit is still taking effective incoming fire	• The casualty has a gunshot wound in his left leg just above the	
		knee	
		The unit is still taking effective incoming fire	
	TCCC Critical Decisions	TCCC Critical Decisions	
	Bleeding Case Study 3	Bleeding Case Study 3	
10	The Casualty There is severe bleeding on the thigh on a blood sweep	The Casualty	D 1 41 4
12.		·	Read the text.
	 Visualization of the bleeding site is poor 	There is severe bleeding on the thigh on a blood sweep	
	He is in extreme pain	Visualization of the bleeding site is poor	
		He is in extreme pain	
		TCCC Critical Decisions	
	TCCC Critical Decisions	Bleeding Case Study 3	
	Bleeding Case Study 3	·	
	Question	Question:	
	What is the NEXT action you should take?	What is the NEXT action you should take?	
13.			Read the text.
	1. Apply a limb tourniquet high and tight on the left leg	1. Apply a limb tourniquet high and tight on the left leg	
	2. Try to guess where the bleeding site is and apply a limb tourniquet just proximal to that.	2. Try to guess where the bleeding site is and apply a limb	
	Administer OTFC to the casualty Administer ketamine to the casualty	tourniquet just proximal to that.	
		3. Administer OTFC to the casualty	
\vdash		4. Administer ketamine to the casualty	
		TCCC Critical Decisions	
		Bleeding Case Study 3	
	TCCC Critical Decisions	Correct Answer and Feedback:	
	Bleeding Case Study 3	1. Apply a tourniquet high and tight on the left leg	
	Correct Answer and Feedback	1. 1 1991, a continque ingli and ugit on the left leg	
	1. Apply a tourniquet high and tight on the left leg	For this casualty, with potentially life-threatening bleeding from the	
14.	For this casualty, with potentially life-threatening bleeding from	gunshot wound to his leg, the most important aspect of care is to	Read the text.
	the gunshot wound to his leg, the most important aspect of care is to control the extremity bleeding. Since the bleeding site cannot	control the extremity bleeding. Since the bleeding site cannot be	
	be definitively located at this point in his care, the hemorrhage must be controlled by immediately applying a limb tourniquet as	definitively located at this point in his care, the hemorrhage must be	
	proximally as possible on the extremity. Treating the casualty's pain is important, but should be done after bleeding is controlled,	controlled by immediately applying a limb tourniquet as proximally	
	once the unit is in the Tactical Field Care phase of care.	as possible on the extremity. Treating the casualty's pain is	
		important, but should be done after bleeding is controlled, once the	
		unit is in the Tactical Field Care phase of care.	
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	TCCC Critical Decisions	TCCC Critical Decisions	
	Bleeding Case Study 4	Bleeding Case Study 4	
15.	The Setting • A US Military advisory team is assaulting a terrorist compound • They take small arms fire from a roof • One team member sustains a GSW just below the	 The Setting A US Military advisory team is assaulting a terrorist compound They take small arms fire from a roof 	Read the text.
	left clavicle The casualty is moved to cover for treatment There is no effective incoming fire at the covered location	 One team member sustains a GSW just below the left clavicle The casualty is moved to cover for treatment There is no effective incoming fire at the covered location 	
		TCCC Critical Decisions	
	TCCC Critical Decisions Bleeding Case Study 4	Bleeding Case Study 4	
		The Casualty	
16.	The Casualty There is very heavy bleeding from the wound just below the left clavicle. Breathing is not labored. The wound is noted to have a deep wound track Efforts to control the bleeding with Combat Gauze are unsuccessful	 There is very heavy bleeding from the wound just below the left clavicle. Breathing is not labored. The wound is noted to have a deep wound track Efforts to control the bleeding with Combat Gauze are 	Read the text.
		unsuccessful	
	TCCC Critical Decisions Bleeding Case Study 4	TCCC Critical Decisions Bleeding Case Study 4	
	Question	Question:	
		What is the NEXT action you should take?	
17.	What is the NEXT action you should take? 1. Construct a pressure dressing over the wound using standard gauze 2. Start an IV 3. Use a hemostat to reach in the wound and	Construct a pressure dressing over the wound using standard gauze	Read the text.
	clamp the bleeding vessel 4. Apply XStat into the wound tract	Start an IV Use a hemostat to reach in the wound and clamp the bleeding vessel	
		4. Apply XStat into the wound tract	
	TCCC Critical Decisions Bleeding Case Study 4	TCCC Critical Decisions Bleeding Case Study 4	
		Correct Answer and Feedback:	
	Correct Answer and Feedback	4. Apply XStat into the wound tract	D. Lil. i. i.
18.	4. Apply XStat into the wound tract		Read the text.
	For uncontrolled bleeding from a wound with a deep wound track such as in this casualty, XStat is clearly the	For uncontrolled bleeding from a wound with a deep wound track	
	best of the listed options. Neither a limb tourniquet nor a junctional tourniquet is usable and Combat Gauze has	such as in this casualty, XStat is clearly the best of the listed	
	not been effective.	options. Neither a limb tourniquet nor a junctional tourniquet is	
		usable and Combat Gauze has not been effective. TCCC Critical Decisions	
	TCCC Critical Decisions Bleeding Case Study 5	Bleeding Case Study 5	
	The Setting • A helicopter is disabled by small arms fire and	The Setting	
19.	crashes • 2 of the crew are dead	A helicopter is disabled by small arms fire and crashes	Read the text.
	1 crew member has severe head trauma and is unconscious – she is being treated by another	• 2 of the crew are dead	
	medic You are treating the 4th member of the flight	• 1 crew member has severe head trauma and is unconscious –	
	crew - the pilot There is no effective incoming fire at the crash site	she is being treated by another medic	
		 You are treating the 4th member of the flight crew - the pilot There is no effective incoming fire at the crash site 	
ш		There is no effective incoming file at the clash site	

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	TCCC Critical Decisions	TCCC Critical Decisions Bleeding Case Study 5	
	Bleeding Case Study 5	Dictumg Case Study 5	
		The Casualty	
20.	The Casualty The pilot is alert and complains of severe left hip pain Breathing is unlabored with an O2 sat of 96% Blood sweep shows no external hemorrhage You examine his pelvic region and find a large area of bruising over his left hip There is marked tenderness to palpation in that area	 The pilot is alert and complains of severe left hip pain Breathing is unlabored with an O2 sat of 96% Blood sweep shows no external hemorrhage You examine his pelvic region and find a large area of bruising over his left hip 	Read the text.
		There is marked tenderness to palpation in that area	
	TCCC Critical Decisions Bleeding Case Study 5	TCCC Critical Decisions Bleeding Case Study 5	
21.	Casualty Dashboard AVPU Alert Airway Patent – patient is talking well Breathing RR 19 and unlabored Radial Pulse Present but weak O2 Saturation 97%	Casualty Dashboard AVPU Alert Airway Patent – patient is talking well RR 19 and unlabored Radial Pulse Present but weak O2 Saturation Patent – patient is talking well RR 19 and unlabored Present but weak	Read the text.
		TCCC Critical Decisions	
	TCCC Critical Decisions Bleeding Case Study 5 Question What is the NEXT action you should take?	Bleeding Case Study 5 Question: What is the NEXT action you should take?	
22.	Administer OTFC 800 ug for pain Apply a pelvic binder for suspected pelvic fracture Start an IV and administer 500 mL of Hextend Administer the Combat Wound Medication Pack	 Administer OTFC 800 ug for pain Apply a pelvic binder for suspected pelvic fracture Start an IV and administer 500 mL of Hextend Administer the Combat Wound Medication Pack 	Read the text.
		TCCC Critical Decisions	
	TCCC Critical Decisions Bleeding Case Study 5	Bleeding Case Study 5 Correct Answer and Feedback: 2. Apply a pelvic binder for suspected pelvic fracture	
23.	Correct Answer and Feedback 2. Apply a pelvic binder for suspected pelvic fracture The diagnosis of immediate concern here is a suspected pelvic fracture, so a pelvic binder should be applied immediately. Pelvic fractures may be associated with non-compressible bleeding. This casualty has a weak radial pulse and may be going into hemorrhagie shock. He may need fluid resuscitation shortly, but the pelvic binder should be applied first. OTFC should not be used in this casualty.	The diagnosis of immediate concern here is a suspected pelvic fracture, so a pelvic binder should be applied immediately. Pelvic fractures may be associated with non-compressible bleeding. This casualty has a weak radial pulse and may be going into hemorrhagic shock. He may need fluid resuscitation shortly, but the pelvic binder should be applied first. OTFC should not be used in this casualty.	Read the text.
	TCCC Critical Decisions Bleeding Case Study 6	TCCC Critical Decisions Bleeding Case Study 6	
24.	The Setting • An Army infantry squad is on foot patrol in Iraq • A dismounted IED detonates, causing multiple	The Setting	Read the text.
	casualties • There is no effective incoming fire at the moment	 An Army infantry squad is on foot patrol in Iraq A dismounted IED detonates, causing multiple casualties There is no effective incoming fire at the moment 	

		TCCC Cuitical Darinian	
		TCCC Critical Decisions Blooding Cose Study 6	
	TCCC Critical Decisions	Bleeding Case Study 6	
	Bleeding Case Study 6	The Casualty	
	The Casualty	The Casualty	
25.	The casualty you are treating has bilateral	The casualty you are treating has bilateral lower extremity	Read the text.
23.	lower extremity amputations Both are very high	amputations	Read the text.
	 There is severe bleeding from both amputation sites 	Both are very high	
	 Limb tourniquets are judged unlikely to be successful 	There is severe bleeding from both amputation sites	
	No other life threatening injuries are noted	Limb tourniquets are judged unlikely to be successful	
		No other life-threatening injuries are noted	
		TCCC Critical Decisions	
		Bleeding Case Study 6	
	O magagati in in	Dictaing Cuse Study 0	
	TCCC Critical Decisions Bleeding Case Study 6	Question:	
	Dictung Case Study 0	What is the NEXT action you should take?	
	Question	,	
26.	What is the NEXT action you should take?	1. Administer ketamine since this casualty is at risk of going into	Read the text.
	 Administer ketamine since this casualty is at risk of going into shock 	shock	
	Start an IV and administer TXA Construct pressure dressing's using standard gauze for both amputation sites	2. Start an IV and administer TXA	
	4. Apply direct pressure with Combat Gauze until the unit's SAM Junctional Tourniquet is ready to apply	3. Construct pressure dressing's using standard gauze for both	
		amputation sites	
		4. Apply direct pressure with Combat Gauze until the unit's SAM	
		Junctional Tourniquet is ready to apply	
		TCCC Critical Decisions	
		Bleeding Case Study 6	
	TCCC Critical Decisions		
	Bleeding Case Study 6	Correct Answer and Feedback:	
	Correct Answer and Feedback	4. Apply direct pressure with Combat Gauze until the unit's SAM	
27	4. Apply direct pressure with Combat Gauze until the unit's SAM	junctional tourniquet is ready to apply	Dand the took
27.	junctional tourniquet is ready to apply The correct next action is to apply direct pressure with Combat	The correct next action is to apply direct pressure with Combat	Read the text.
	Gauze until a junctional tourniquet is ready to apply. This action may prevent the casualty from going into shock. An IV, TXA, and	Gauze until a junctional tourniquet is ready to apply. This action	
	ketamine are all good follow-on actions in this casualty, but the first priority is to control massive hemorrhage, which this	may prevent the casualty from going into shock. An IV, TXA, and	
	casualty currently has.	ketamine are all good follow-on actions in this casualty, but the	
		first priority is to control massive hemorrhage, which this casualty	
		currently has.	
	TCCC Critical Decisions		
	TCCC Critical Decisions Circulation Case Study 1	TCCC Critical Decisions	
	,	Circulation Case Study 1	
	The Setting	The Setting	
28.	A small unit is moving outside of a village	The Setting	Read the text.
	There is a single shot from somewhere in the village	A small unit is moving outside of a village	
	No other hostile fire	There is a single shot from somewhere in the village	
		No other hostile fire	
	TCCC Critical Decisions	TCCC Critical Decisions	
	Circulation Case Study 1	Circulation Case Study 1	
		The Casualty	
29.	The Casualty	The Casualty	Read the text.
29.	Single gunshot wound to abdomen The casualty is alert and in moderate pain	Single gunshot wound to abdomen	Read the text.
	 There is no life-threatening external hemorrhage There is a normal radial pulse 	The casualty is alert and in moderate pain	
		The casualty is afert and in moderate pain There is no life-threatening external hemorrhage	
		There is a normal radial pulse	
		Incre is a normal radial paise	1

	TCCC Critical Decisions	TCCC Critical Decisions	
	Circulation Case Study 1	Circulation Case Study 1	
	Casualty Dashboard	<u>Casualty Dashboard</u>	
30.	• AVPU Alert • Airway Patent	• AVPU Alert	Read the text.
	Breathing RR 18 and unlabored Radial Pulse Strong	Airway Patent	
	• O2 Saturation 97%	Breathing RR 18 and unlabored	
		Radial Pulse Strong	
		• O2 Saturation 97%	
		TCCC Critical Decisions	
	TCCC Critical Decisions	Circulation Case Study 1	
	Circulation Case Study 1		
	Question	Question:	
31.	What is the NEXT action you should take?	What is the NEXT action you should take?	Read the text.
31.	Start an IV and administer TXA immediately Start an IV and administer a unit of freeze-		Read the text.
	dried plasma 3. Administer 50 mg of ketamine IM	Start an IV and administer TXA immediately	
	4. Administer an 800ug fentanyl lozenge	2. Start an IV and administer a unit of freeze dried plasma	
		3. Administer 50 mg of ketamine IM	
		4. Administer an 800ug fentanyl lozenge	
	TCCC Critical Decisions	TCCC Critical Decisions	
	Circulation Case Study 1	Circulation Case Study 1	
	Correct Answer and Feedback	Correct Answer and Feedback:	
32.	1. Start an IV and administer TXA immediately	1. Start an IV and administer TXA <u>immediately.</u>	Read the text
	This casualty may have life-threatening intra-abdominal		
	hemorrhage. The next action should be to immediately start an IV and infuse 1 gm of TXA over 10 minutes.	This casualty may have life-threatening intra-abdominal	
	start and IV and infuse I gill of TAA over 10 influtes.	hemorrhage. The next action should be to immediately start an IV	
		and infuse 1 gm of TXA over 10 minutes.	
	TCCC Critical Decisions	TCCC Critical Decisions	
	Circulation Case Study 2	Circulation Case Study 2	
33.	The Setting	The Setting	Read the text.
33.	 A small unit is patrolling outside of a village There is a single shot from somewhere in the 		Read the text.
	village • No other hostile fire	A small unit is patrolling outside of a village	
		There is a single shot from somewhere in the village	
		No other hostile fire	
	TCCC Critical Decisions	TCCC Critical Decisions	
	Circulation Case Study 2	Circulation Case Study 2	
	•	-	
	The Casualty	The Casualty	
34.	Single gunshot wound to abdomen The casualty was alert initially but is now		Read the text.
	becoming confused The radial pulse is weak	Single gunshot wound to abdomen	
	You have already started an IV and administered a gram of TXA	The casualty was alert initially but is now becoming confused	
	- Brann or Asset	The radial pulse is weak	
		You have already started an IV and administered a gram of TXA	
	TCCC Critical Decisions	TCCC Critical Decisions	
	TCCC Critical Decisions Circulation Case Study 2	Circulation Case Study 2	
	Casualty Dashboard	Casualty Dashboard	
35.	• AVPU Alert but confused • Airway Patent	AVPU Alert but confused	Read the text.
	Breathing RR 20 and unlabored Radial Pulse Present but rapid and weak	Airway Patent	
	• O2 Saturation 96%	Breathing RR 20 and unlabored	
		Radial Pulse Present but rapid and weak	
1 1		• O2 Saturation 96%	
1 1		• O2 Saturation 96%	

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	000 0 11 15 11	TCCC Critical Decisions	
A ITEL A	CCC Critical Decisions Circulation Case Study 2	Circulation Case Study 2	
	circulation case study 2		
	Question	Question:	
36. What is the	he NEXT action you should take?	What is the NEXT action you should take?	Read the text.
	another gram of TXA		read the text.
	unit of fresh whole blood as per	1. Administer another gram of TXA	
	gm of ertapenem to prevent	2. Infuse 500 mL of Hextend	
intection		3. Administer a unit of fresh whole blood as per unit protocol	
		4. Administer 1 gm of ertapenem to prevent infection	
To To	CCC Critical Decisions	TCCC Critical Decisions	
	Circulation Case Study 2	Circulation Case Study 2	
	rrect Answer and Feedback	Correct Answer and Feedback:	
37.	nister a unit of fresh whole blood as per unit protocol	3. Administer a unit of fresh whole blood as	Read the text.
	lty has gone into shock from intra-	per unit protocol	
fluid for h	l hemorrhage. The best resuscitation emorrhagic shock is whole blood and	The accounts has some into shoot from interest demined by	
giving a ui taken.	nit of that should be the next action	The casualty has gone into shock from intraabdominal hemorrhage.	
		The best resuscitation fluid for hemorrhagic shock is whole blood	
		and giving a unit of that should be the next action taken. TCCC Critical Decisions	
1 17 17	CCC Critical Decisions		
	Circulation Case Study 3	Circulation Case Study 3	
		The Setting	
38. The Setting		The Setting	Read the text.
• An Army infa	antry squad is on foot patrol in Iraq I IED detonates	An Army infantry squad is on foot patrol in Iraq	Read the text.
There are mu	ltiple casualties	All Army infantry squad is on root patrol in fraq A dismounted IED detonates	
• I here is no el	ffective incoming fire at the moment	• There are multiple casualties	
		• There is no effective incoming fire at the moment	
		TCCC Critical Decisions	
		Circulation Case Study 3	
		Circulation Case Study 5	
	CCC Critical Decisions Circulation Case Study 3	The Casualty	
	kast esection (LTM) de trade i Process professiones tradecto est distribuir 🕊 professiones.		
The Casualty • Your casual	ty has bilateral lower extremity	Your casualty has bilateral lower extremity amputations	
39. *There was p	s previously severe bleeding from the	• There was previously severe bleeding from the amputation sites	Read the text.
amputation • Limb tourn	sites siquets were quickly applied to both	• Limb tourniquets were quickly applied to both legs and are	
legs and are • The casualt	e effective ty is alert and in significant pain	effective	
 His radial p 	oulse is normal by also has multiple penetrating	The casualty is alert and in significant pain	
	the abdomen and pelvis	His radial pulse is normal	
		The casualty also has multiple penetrating wounds of the	
		abdomen and pelvis	
To	CCC Critical Decisions	TCCC Critical Decisions	
B III II	Circulation Case Study 3	Circulation Case Study 3	
Casualty D		<u>Casualty Dashboard</u>	
40. · AVPU · Airway	Alert Patent with patient dazed but	• AVPU Alert	Read the text.
• Breathing	breathing well RR 16 and unlabored	Airway Patent with patient dazed but breathing well	
Radial Pu O2 Satura		• Breathing RR 16 and unlabored	
1 1		• Radial Pulse Strong	
		• O2 Saturation 95%	

			
		TCCC Critical Decisions	
	Transport in the first	Circulation Case Study 3	
	TCCC Critical Decisions Circulation Case Study 3		
	Circulation Case Study 5	Question:	
	Question	What is the NEXT action you should take?	
41.	What is the NEXT action you should take?		Read the text.
41.	Start an IV and administer 1 gm of TXA Start an IV and administer 500 mL of Hextend,	1. Start an IV and administer 1 gm of TXA	Read the text.
	since there are no blood products available on this operation	2. Start an IV and administer 500 mL of Hextend, since there are no	
	3. Administer 50 mg of ketamine IM 4. Try to convert both tourniquets to other modes	blood products available on this operation	
	of hemorrhage control	3. Administer 50 mg of ketamine IM	
		4. Try to convert both tourniquets to other modes of hemorrhage	
		control	
		TCCC Critical Decisions	
	TCCC Critical Decisions	Circulation Case Study 3	
	Circulation Case Study 3		
		Correct Answer and Feedback:	
	Correct Answer and Feedback	1. Start an IV and administer TXA	
42.	1. Start an IV and administer TXA		Read the text.
	This casualty does need battlefield analgesia, but the	This casualty does need battlefield analgesia, but the most	
	most important aspect of care right now is to start an IV and administer 1 gm of TXA. He is at risk of non-	important aspect of care right now is to start an IV and administer 1	
	compressible hemorrhage due to his penetrating abdominal and pelvic wounds. He does not require fluid	gm of TXA. He is at risk of non-compressible hemorrhage due to	
	resuscitation at the moment.	his penetrating abdominal and pelvic wounds. He does not require	
		fluid resuscitation at the moment.	
		TCCC Critical Decisions	
	TCCC Critical Decisions	Airway Case Study 1	
	Airway Case Study 1		
	Section 1990 Visit Section 1990	The Setting	
	The Setting		
43.	 An IED detonates underneath a vehicle in a mounted convoy 	An IED detonates underneath a vehicle in a mounted convoy	Read the text.
	The vehicle is turned over by the blast The casualty is unconscious	• The vehicle is turned over by the blast	
	She is not wearing seat belt Her helmet is dented	The casualty is unconscious	
	 There is no effective incoming fire at the moment 	She is not wearing seat belt	
		Her helmet is dented	
		There is no effective incoming fire at the moment	
		TCCC Critical Decisions	
	TCCC Critical Decisions	Airway Case Study 1	
	Airway Case Study 1		
		The Casualty	
	The Casualty		
44.	 Blood and bruising over the right parietal area No facial injuries noted 	Blood and bruising over the right parietal area	Read the text.
	No other injuries noted The unconscious casualty has been removed	No facial injuries noted	
	from the vehicle and is in the supine position Chin lift maneuver accomplished	No other injuries noted	
	Cam int maneuver accompnished	• The unconscious casualty has been removed from the vehicle and	
		is in the supine position	
		Chin lift maneuver accomplished	
	TCCC Critical Pagisians	TCCC Critical Decisions	
	TCCC Critical Decisions Airway Case Study 1	Airway Case Study 1	
	,,		
	Consolts Dashboar	Casualty Dashboard	
45.	Casualty Dashboard • AVPU Unconscious	• AVPU Unconscious	Read the text.
	• Airway No injuries noted • Breathing RR 12 - shallow	Airway No injuries noted	
	• Radial Pulse Normal • O2 Saturation 70%	• Breathing RR 12 - shallow	
		• Radial Pulse Normal	
		• O2 Saturation 70%	
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	TCCC Critical Decisions	TCCC Critical Decisions	
	Airway Case Study 1	Airway Case Study 1	
	0.91	Overskiens	
	Question	Question: What is the NEXT action you should take?	
46.	What is the NEXT action you should take?	what is the NEXT action you should take?	Read the text.
	Cricothyroidotomy Place casualty in a sit-up and lean forward	1. Crisothymoidatamy	
	position 3. Start an IV	 Cricothyroidotomy Place casualty in a sit-up and lean forward position 	
	4. Insert a nasopharyngeal airway	3. Start an IV	
		4. Insert a nasopharyngeal airway	
		TCCC Critical Decisions	
		Airway Case Study 1	
		Till way Gube Study 1	
	TCCC Critical Decisions	Correct Answer and Feedback:	
	Airway Case Study 1	4. Insert a nasopharyngeal airway	
	Correct Answer and Feedback	in insert a hasopharyngear an way	
	4. Insert a nasopharyngeal airway	This casualty may have an airway obstruction. The low pulse	
47.	This casualty may have an airway obstruction. The low pulse oximetry reading indicates a critical level of hypoxia. This	oximetry reading indicates a critical level of hypoxia. This casualty	Read the text.
	casualty needs her airway opened immediately. There are no facial injuries noted, so a cricothyroidotomy should not be	needs her airway opened immediately. There are no facial injuries	
	attempted until less invasive measures have failed. The casualty should not be placed supported in a sitting position because of the	noted, so a cricothyroidotomy should not be attempted until less	
	potential for spinal cord injury. Inserting a nasopharyngeal airway is the best option of the choices shown.	invasive measures have failed. The casualty should not be placed	
		supported in a sitting position because of the potential for spinal	
		cord injury. Inserting a nasopharyngeal airway is the best option of	
		the choices shown.	
		TCCC Critical Decisions	
	TCCC Critical Decisions	Airway Case Study 2	
	Airway Case Study 2		
		The Setting	
	The Setting		
48.	 A small unit is on foot patrol There is incoming fire from two hostiles 	A small unit is on foot patrol	Read the text.
	The hostile threat is quickly eliminated by the unit	There is incoming fire from two hostiles	
	One of your unit members sustains a gunshot wound to the lower face	• The hostile threat is quickly eliminated by the unit	
	There is no further effective incoming fire	• One of your unit members sustains a gunshot wound to the lower	
		face There is no further offsetive incoming fire	
		There is no further effective incoming fire TCCC Critical Decisions	
		Airway Case Study 2	
	TCCC Critical Decisions	An way Case Study 2	
	Airway Case Study 2	The Casualty	
		1110 Custuity	
49.	The Casualty The casualty is awake	The casualty is awake	Read the text.
./.	There are facial wounds to lower jaw and teeth There is blood in the mouth	There are facial wounds to lower jaw and teeth	
	The casualty has noisy, rapid breathing while in the supine position	• There is blood in the mouth	
	• He is struggling to breathe	The casualty has noisy, rapid breathing while in the supine	
		position	
		He is struggling to breathe	
	TCCC Critical Decisions	TCCC Critical Decisions	
	Airway Case Study 2	Airway Case Study 2	
	Casualty Dashboard	<u>Casualty Dashboard</u>	
50.	• AVPU Alert • Airway Facial injuries	AVPU Alert	Read the text.
	• Breathing RR 22 - Noisy • Radial Pulse Strong	Airway Facial injuries	
	• O2 Saturation 75%	Breathing RR 22 - Noisy	
		Radial Pulse Strong	
1		• O2 Saturation 75%	

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		TCCC Critical Decisions	
	TCCC Critical Decisions	Airway Case Study 2	
	Airway Case Study 2	Question	
	Question	Question: What is the NEVT estion you should take?	
51	What is the NEXT action you should take?	What is the NEXT action you should take?	Doed the test
51.	Cricothyroidotomy Nasopharyngeal airway	1. Cricothyroidatamy	Read the text.
	3. Endotracheal intubation	1. Cricothyroidotomy	
	4. Allow this conscious casualty to assume any position that best protects the airway, to include attraction are not beginn for my decimal forms.	Nasopharyngeal airway Endotracheal intubation	
	include sitting up and leaning forward.	4. Allow this conscious casualty to assume any position that best	
		protects the airway, to include sitting up and leaning forward.	
		TCCC Critical Decisions	
	TOGG G W I I I	Airway Case Study 2	
	TCCC Critical Decisions Airway Case Study 2	III nay Sust Study 2	
		Correct Answer and Feedback:	
	Correct Answer and Feedback	4. Allow this conscious casualty to assume any position that best	
52.	4. Allow this conscious casualty to assume any position that best protects the airway, to	protects the airway, to include sitting up and leaning forward.	Read the text.
22.	include sitting up and leaning forward.	restriction and many, to metade strong up and realing for water.	
	The diagnosis is airway obstruction due to his maxillofacial injuries. The principle is to open the	The diagnosis is airway obstruction due to his maxillofacial	
	airway. Since the casualty is conscious, allow him to assume any position that best protects his airway, to	injuries. The principle is to open the airway. Since the casualty is	
	include sitting up and leaning forward.	conscious, allow him to assume any position that best protects his	
		airway, to include sitting up and leaning forward.	
	TCCC Critical Decisions		
	Airway Case Study 3	TCCC Critical Decisions	
		Airway Case Study 3	
	The Setting	The Setting	
53.	· A Marine platoon is moving across an open field	The Setting	Read the text.
	on foot Dismounted IED detonation	A Marine platoon is moving across an open field on foot	
	 There is no effective incoming fire at the moment 	Dismounted IED detonation	
		There is no effective incoming fire at the moment	
		TCCC Critical Decisions	
	TOGG GAVE ED TO	Airway Case Study 3	
	TCCC Critical Decisions Airway Case Study 3		
	way Case Study 5	The Casualty	
	The Casualty The face and neck are peppered with shrapnel		
54.	The face and neck are peppered with shrapher wounds The casualty is alert but noted to have labored	• The face and neck are peppered with shrapnel wounds	Read the text.
	respirations and moderate distress • A small puncture wound is noted on the left	• The casualty is alert but noted to have labored respirations and	
	side of neck with minimal bleeding But there is rapidly expanding swollen area	moderate distress • A small puncture wound is noted on the left side of neek with	
	 But there is rapidly expanding swohen area under the skin of the neck immediately adjacent to the midline airway structures 	A small puncture wound is noted on the left side of neck with minimal bleeding	
	the minime an way so necures	But there is rapidly expanding swollen area under the skin of the	
		neck immediately adjacent to the midline airway structures	
		TCCC Critical Decisions	
	TCCC Critical Decisions	Airway Case Study 3	
	Airway Case Study 3	III nay Sust Study S	
	Casualty Dashboard	Casualty Dashboard	
55.	Casualty Dashboard • AVPU Alert and in distress	AVPU Alert and in distress	Read the text.
55.	No blood or obstruction noted Breathing RR 22 - labored	Airway No blood or obstruction noted	roud the text.
	• Radial Pulse Strong • O2 Saturation 65%	Breathing RR 22 - labored	
		• Radial Pulse Strong	
		• O2 Saturation 65%	
oxdot		OB Saturation 0070	

56.	TCCC Critical Decisions Airway Case Study 3	TCCC Critical Decisions Airway Case Study 3	
		Airway Case Study 3	
	- I I I I I I I I I I I I I I I I I I I	Till way case study b	
	Question	Question:	
	What is the NEXT action you should take?	What is the NEXT action you should take?	Read the text.
	. Cricothyroidotomy using the CricKey device . Nasopharyngeal airway		
3.1	. Endotracheal intubation	1. Cricothyroidotomy using the CricKey device	
4.1	. Help the casualty into the sit-up and lean- forward position	2. Nasopharyngeal airway	
		3. Endotracheal intubation	
		4. Help the casualty into the sit-up and lean-forward position	
		TCCC Critical Decisions	
(A	TCCC Critical Decisions	Airway Case Study 3	
	Airway Case Study 3		
	Correct Answer and Feedback	Correct Answer and Feedback:	
57		1. Cricothyroidotomy using the CricKey device	Decil decide
57.	1. Cricothyroidotomy using the CricKey device	The diagnosis is simpley charmotics due to a socially sense it	Read the text.
exp	he diagnosis is airway obstruction due to a rapidly panding hematoma that has resulted from a shrapnel	The diagnosis is airway obstruction due to a rapidly expanding	
airv	jury to a large blood vessel in the neck. A nasopharyngeal rway and the sit-up and lean-forward position will not help	hematoma that has resulted from a shrapnel injury to a large blood	
	this situation. The best next action is a cricothyroidotomy erformed with local anesthesia.	vessel in the neck. A nasopharyngeal airway and the sit-up and	
		lean-forward position will not help in this situation. The best next	
	TCCC C tit I P tt	action is a cricothyroidotomy performed with local anesthesia.	
	TCCC Critical Decisions Breathing Case Study 1	TCCC Critical Decisions	
		Breathing Case Study 1	
		The Carlos	
58 -	he Setting A small unit is on patrol in a mountainous area	The Setting	Read the text.
• T	The unit is ambushed, but hostile fire is quickly suppressed	A amallouit is an astrolling assessed in an array	
• T	There is no effective incoming fire at the moment	A small unit is on patrol in a mountainous area The unit is ambushed, but hostile fire is quickly suppressed	
		The unit is amoustied, but nostrie fire is quickly suppressed There is no effective incoming fire at the moment	
		TCCC Critical Decisions	
	TCCC Critical Decisions	Breathing Case Study 1	
	Breathing Case Study 1	The County	
		The Casualty	
	The Casualty	Gunshot wound in right upper quadrant of the abdomen just	Read the text.
a	Gunshot wound in right upper quadrant of the abdomen just below the plate	below the plate	Read the text.
• 0	No other wounds Casualty conscious	No other wounds	
	Noted to have increasing difficulty breathing Breath sounds on the right are absent	Casualty conscious	
		Noted to have increasing difficulty breathing	
		Breath sounds on the right are absent	
		TCCC Critical Decisions	
	TCCC Critical Decisions Breathing Case Study 1	Breathing Case Study 1	
	Dicating Case Study 1	Distriction of the state of the	
	Casualty Dashbaard	Casualty Dashboard	
60.	Casualty Dashboard • AVPU Alert	• AVPU Alert	Read the text.
	Airway Patent Breathing RR 24 - Noisy and labored Padial Pulse Strong	• Airway Patent	
	• Radial Pulse Strong • O2 Saturation 80%	Breathing RR 24 - Noisy and labored	
1 1		Radial Pulse Strong	
		• O2 Saturation 80%	

		,	
	Trong Guitain II	TCCC Critical Decisions	
	TCCC Critical Decisions Breathing Case Study 1	Breathing Case Study 1	
	Dreating Case Study 1		
	Question	Question:	
61.	What is the NEXT action you should take?	What is the NEXT action you should take?	Read the text.
	1. Perform a cricothyroidotomy	1 Doubour a minethousidate un.	
	2. Perform a needle decompression on the right side	1. Perform a cricothyroidotomy	
	2. Insert a chest tube 4. Start an IV	2. Perform a needle decompression on the right side 2. Insert a chest tube	
		4. Start an IV	
		TCCC Critical Decisions	
		Breathing Case Study 1	
	TCCC Critical Decisions Breathing Case Study 1	Dicatining Case Study 1	
	Dreathing Case Study 1	Correct Answer and Feedback:	
	Correct Answer and Feedback	2. Perform a needle decompression on the right side	
62.		2. I criothi a needle decompression on the right side	Read the text.
02.	2. Perform a needle decompression on the right side	The diagnosis is a suspected tension pneumothorax. Although the	Troug the term
	The diagnosis is a suspected tension pneumothorax. Although the entry wound is in the abdomen, the bullet	entry wound is in the abdomen, the bullet may have traveled into	
	may have traveled into the chest and injured the right lung. The correct next action is to perform a needle	the chest and injured the right lung. The correct next action is to	
	decompression on the right side of the casualty's chest.	perform a needle decompression on the right side of the casualty's	
		chest.	
		TCCC Critical Decisions	
	TCCC Critical Decisions	Breathing Case Study 2	
	Breathing Case Study 2		
		<u>The Setting</u>	
63.	The Setting		Read the text.
05.	A small unit is patrolling in a mountainous area The unit is ambushed	A small unit is patrolling in a mountainous area	Read the text.
	 One unit member is hit Four hostiles are killed after an intense, 2- 	The unit is ambushed	
	minute firefight There is no effective incoming fire at the	One unit member is hit	
	moment	• Four hostiles are killed after an intense, 2-minute firefight	
		• There is no effective incoming fire at the moment	
		TCCC Critical Decisions	
		Breathing Case Study 2	
		The Casualty	
	TCCC Critical Decisions	The Casualty	
	Breathing Case Study 2	Gunshot wound in right upper quadrant of the abdomen just	
	The Casualty	below the plate	
64.	 Gunshot wound in right upper quadrant of the abdomen just below the plate 	No other wounds	Read the text.
"	No other wounds The casualty is conscious but in pain He is noted to have increasing difficulty breathing	The casualty is conscious but in pain	
	There are absent breath sounds on the right Breath sounds are present on the left side	He is noted to have increasing difficulty breathing	
	 Needle decompression is performed on the right side at the right 4th ICS at the anterior axillary line 	• There are absent breath sounds on the right	
	No improvement is noted	Breath sounds are present on the left side	
		• Needle decompression is performed on the right side at the	
		right 4 th ICS at the anterior axillary line	
		No improvement is noted	
	TCCC Critical Decisions	TCCC Critical Decisions	
	Breathing Case Study 2	Breathing Case Study 2	
	Casualty Dashboard	Casualty Dashboard	
65.	• AVPU Alert • Airway Patent	• AVPU Alert	Read the text.
	Breathing RR 22 and labored Radial Pulse Rapid and thready	• Airway Patent	
	• O2 Saturation 80%	Breathing RR 22 and labored Registrated and labored	
		• Radial Pulse Rapid and thready	
		• O2 Saturation 80%	

		I magaging and a second	T
		TCCC Critical Decisions	
	TCCC Critical Decisions	Breathing Case Study 2	
	Breathing Case Study 2		
		Question:	
	Question	What is the NEXT action you should take?	
66.	What is the NEXT action you should take?	·	Read the text.
	1. Perform a cricothyroidotomy	Perform a cricothyroidotomy	
	2. Administer OTFC 800 ug 3. Start an IV	2. Administer OTFC 800 ug	
	4. Repeat needle decompression at the 2 ICS in	3. Start an IV	
	the right mid-clavicular line		
		4. Repeat needle decompression at the 2 ICS in the right mid-	
		clavicular line	
		TCCC Critical Decisions	
		Breathing Case Study 2	
	TCCC Critical Decisions	Correct Answer and Feedback:	
	Breathing Case Study 2		
		4. Repeat needle decompression at the 2 ICS in the right mid-	
	Correct Answer and Feedback	clavicular line	
67.	4. Repeat needle decompression at the 2 ICS in the right mid-clavicular line		Read the text.
07.	The diagnosis is a suspected tension pneumothorax. Since needle	The diagnosis is a suspected tension pneumothorax. Since needle	Read the text.
	decompression at the lateral site on the right side did not improve the casualty's condition, the next step should be to move to an	decompression at the lateral site on the right side did not improve	
	alternate decompression site. A cricothyroidotomy will not help a casualty with a tension pneumothorax. Anyone with respiratory	the casualty's condition, the next step should be to move to an	
	distress and hypoxia should not be given opioids, since this will potentially depress respirations.	alternate decompression site. A cricothyroidotomy will not help a	
	potentially depress respirations.	casualty with a tension pneumothorax. Anyone with respiratory	
		distress and hypoxia should not be given opioids, since this will	
-		potentially depress respirations. TCCC Critical Decisions	
	TCCC Critical Decisions		
	Breathing Case Study 3	Breathing Case Study 3	
		TTI C	
	The Setting	The Setting	
68.	The Setting • A platoon of Marines is approaching a village to		Read the text.
	meet with village leaders One Marine steps on a pressure-plate IED and it	A platoon of Marines is approaching a village to meet with	
	explodes	village leaders	
	 There is no effective incoming fire at the moment 	One Marine steps on a pressure-plate IED and it explodes	
		There is no effective incoming fire at the moment	
		TCCC Critical Decisions	
		Breathing Case Study 3	
	TCCC Critical Decisions	The Casualty	
	Breathing Case Study 3		
		Facial peppering	
	The Casualty • Facial peppering	Below the knee amputation - left leg	
69.	Below the knee amputation - left leg Above the knee amputation - right leg	Above the knee amputation - right leg	Read the text.
57.	Multiple fragment wounds to pelvis and abdomen Leg bleeding is controlled with tourniquets	Multiple fragment wounds to pelvis and abdomen	Touc the text.
	 15 minutes later, while waiting for evacuation, 		
	he is noted to have labored breathing • He becomes confused, then loses consciousness	• Leg bleeding is controlled with tourniquets	
	 Not breathing There is no radial or carotid pulse detectable 	• 15 minutes later, while waiting for evacuation, he is noted to have	
		labored breathing	
		He becomes confused, then loses consciousness	
		Not breathing	
		There is no radial or carotid pulse detectable	

	TCCC Critical Decisions	TCCC Critical Decisions	
	Breathing Case Study 3	Breathing Case Study 3	
	Casualty Dashboard	Casualty Dashboard	
70.	• AVPU Unconscious	• AVPU Unconscious	Read the text.
	Airway Apparently patent Breathing Not breathing	Airway Apparently patent	
	Radial Pulse None O2 Saturation Not displaying on the pulse ox	• Breathing Not breathing	
		Radial Pulse None	
		• O2 Saturation Not displaying on the pulse ox	
		TCCC Critical Decisions	
	TCCC Critical Decisions	Breathing Case Study 3	
	Breathing Case Study 3	Breating Case Study 5	
	0	Question	
	Question		
71.	What is the NEXT action you should take?	What is the NEXT action you should take?	Read the text.
	Perform CPR Perform needle decompression on both sides	1. Perform CPR	
	of the chest 3. Declare the casualty deceased and		
	discontinue care 4. Start an IV	2. Perform needle decompression on both sides of the chest	
		3. Declare the casualty deceased and discontinue care	
		4. Start an IV	
		TCCC Critical Decisions	
		Breathing Case Study 3	
	TCCC Critical Decisions		
	Breathing Case Study 3	Correct Answer and Feedback:	
	Correct Answer and Feedback	2. Perform needle decompression on both sides of the chest	
	2. Perform needle decompression on both sides of the		
72.	chest	This casualty has lost vital signs. This could be due to non-	Read the text.
	This casualty has lost vital signs. This could be due to non- compressible hemorrhage, but it may also be due to bilateral	compressible hemorrhage, but it may also be due to bilateral	
	tension pneumothoraces. Casualties with chest or abdominal trauma or polytrauma who suffer a traumatic cardiac arrest	tension pneumothoraces. Casualties with chest or abdominal trauma	
	should have needle decompression performed on both sides of the chest. If the arrest was caused by a tension pneumothorax, this	or polytrauma who suffer a traumatic cardiac arrest should have	
	maneuver may result in a return of vital signs.	needle decompression performed on both sides of the chest. If the	
		arrest was caused by a tension pneumothorax, this maneuver may	
		result in a return of vital signs.	
		TCCC Critical Decisions	
	TGGG G W I D W	Breathing Case Study 4	
	TCCC Critical Decisions Breathing Case Study 4	g ,	
	_ Dreaming Case Study 4	The Setting	
73.	The Setting • A vehicle-borne IED explodes near US troops	A vehicle-borne IED explodes near US troops	Read the text.
13.	Your casualty was near the explosion	Your casualty was near the explosion	read the text.
	She was briefly unconscious. Her tympanic membranes are ruptured –	1	
	 You are now caring for her on a TACEVAC flight 	She was briefly unconscious. Har tympopic membranes are runtured difficulty bearing.	
	to the Role II hospital.	Her tympanic membranes are ruptured – difficulty hearing You are now entired for her on a TACEVAC flight to the Role II.	
		You are now caring for her on a TACEVAC flight to the Role II	
		hospital.	
		TCCC Critical Decisions	
	TCCC Critical Decisions	Breathing Case Study 4	
	Breathing Case Study 4		
		The Casualty	
	The Casualty • Your casualty is alert		
74.	There is no external hemorrhage There is no obvious trauma to the chest or	Your casualty is alert	Read the text.
	abdomen.	There is no external hemorrhage	
	 Some shrapnel peppering on face and extremities But she is having labored respirations. 	There is no obvious trauma to the chest or abdomen.	
	 You are unable to hear breath sounds because of helicopter noise 	Some shrapnel peppering on face and extremities	
		But she is having labored respirations.	
		• You are unable to hear breath sounds because of helicopter noise	
		, and the second	

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	TCCC Critical Decisions	TCCC Critical Decisions	
	Breathing Case Study 4	Breathing Case Study 4	
	Casualty Dashboard	Casualty Dashboard	
75.	• AVPU Alert • Airway Patent	• AVPU Alert	Read the text.
	 Breathing RR 22 – Mildly labored 	Airway Patent	
	• Blood pressure 140/85 • O2 Saturation 70%	Breathing RR 22 – Mildly labored	
		• Blood pressure 140/85	
		• O2 Saturation 70%	
		TCCC Critical Decisions	
	TCCC Critical Decisions	Breathing Case Study 4	
	Breathing Case Study 4	Dicatining Case Study 4	
	Operation	Question:	
	Question		
76.	What is the NEXT action you should take?	What is the NEXT action you should take?	Read the text.
	1. Needle decompression of both sides of the chest	1. No. 11. document of the document	
	2. Start an IV and administer TXA 3. Insert a supragottic airway	1. Needle decompression of both sides of the chest	
	4. Start supplemental oxygen	2. Start an IV and administer TXA	
		3. Insert a supragottic airway	
		4. Start supplemental oxygen	
		TCCC Critical Decisions	
		Breathing Case Study 4	
	TCCC Critical Projetors		
	TCCC Critical Decisions Breathing Case Study 4	Correct Answer and Feedback:	
	Dreating case Study 4	4. Start supplemental oxygen	
	Correct Answer and Feedback		
77.	4. Start supplemental oxygen	This casualty is likely suffering from blast-induced pulmonary	Read the text.
/ / .	This casualty is likely suffering from blast-induced pulmonary contusions. A tension pneumothorax is possible, but unlikely	contusions. A tension pneumothorax is possible, but unlikely	Read the text.
	because there is no penetrating trauma and there was no evidence of blunt trauma on exam. Additionally, the casualty is NOT in	because there is no penetrating trauma and there was no evidence of	
	shock - her blood pressure is 140/85. The blast wave from the explosion can injure the lung and interfere with oxygenation.	blunt trauma on exam. Additionally, the casualty is NOT in shock -	
	Providing supplemental oxygen will help reverse the hypoxia induced by the blast-induced pulmonary contusions.	her blood pressure is 140/85. The blast wave from the explosion	
		can injure the lung and interfere with oxygenation. Providing	
		supplemental oxygen will help reverse the hypoxia induced by the	
		blast-induced pulmonary contusions.	
		TCCC Critical Decisions	
		TBI Case Study 1	
		·	
	TCCC Cuities Produing	The Setting	
	TCCC Critical Decisions TBI Case Study 1		
		A small unit is operating in a mountainous region	
	The Setting	The casualty was a passenger in a vehicle that was attacked	
78.	A small unit is operating in a mountainous region The casualty was a passenger in a vehicle that was	with an IED	Read the text.
, 0.	attacked with an IED The vehicle was turned over by the blast	The vehicle was turned over by the blast	Troug the text.
	Casualty was unrestrained in his seat Unconscious after the IED detonation Lying on roof of vehicle	Casualty was unrestrained in his seat	
	Helmet is dented Casualty was removed from the vehicle with attention to	Unconscious after the IED detonation	
	possible spinal injuries	Lying on roof of vehicle	
		• Helmet is dented	
		• Casualty was removed from the vehicle with attention to possible	
		spinal injuries	

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		TCCC Critical Decisions	
		TBI Case Study 1	
	TCCC Critical Decisions		
	TBI Case Study 1	The Casualty	
	The Casualty	Casualty is now lying supine on a litter during helicopter	
79.	 Casualty is now lying supine on a litter during helicopter TACEVAC 	TACEVAC	Read the text.
	C-Collar in place Still unconscious	C-Collar in place	
	 There is an open left-sided skull fracture No other injuries are noted 	Still unconscious	
	Breathing is not labored A supraglottic airway is in place	There is an open left-sided skull fracture	
		No other injuries are noted	
		Breathing is not labored	
		A supraglottic airway is in place	
	TCCC Critical Decisions	TCCC Critical Decisions	
	TBI Case Study 1	TBI Case Study 1	
00	Casualty Dashboard	Casualty Dashboard	D 1.1
80.	• AVPU Unconscious • Airway Patent	• AVPU Unconscious	Read the text.
	Breathing RR 12 - unlabored Blood pressure 135/85	• Airway Patent	
	• O2 Saturation 85%	• Breathing RR 12 - unlabored	
		Blood pressure 135/85 O2 Saturation 85%	
		TCCC Critical Decisions	
		TBI Case Study 1	
	TCCC Critical Decisions	1DI Case Study I	
	TBI Case Study 1	Question:	
	Question	What is the NEXT action you should take?	
81.	What is the NEXT action you should take?	What is the 142211 action you should take.	Read the text.
01.	Start an IV and give a unit of red blood cells Perform a bilateral needle decompression of	1. Start an IV and give a unit of red blood cells	read the text.
	the chest 3. Perform a surgical airway	2. Perform a bilateral needle decompression of the chest	
	4. Start high-flow supplemental oxygen via reservoir mask to get oxygen saturation to	3. Perform a surgical airway	
	90% or higher	4. Start high-flow supplemental oxygen via reservoir mask to get	
		oxygen saturation to 90% or higher	
		TCCC Critical Decisions	
		TBI Case Study 1	
	TCCC Critical Decisions	-	
	TBI Case Study 1	Correct Answer and Feedback:	
	Correct Answer and Feedback	4. Start high-flow supplemental oxygen via reservoir mask to get	
82.	4. Start high-flow supplemental oxygen via reservoir mask to	oxygen saturation to 90% or higher	Read the text.
02.	get oxygen saturation to 90% or higher		Read the text.
	Hypoxia (oxygen saturations below 90%) in casualties with moderate/severe TBI is associated with worsening of	Hypoxia (oxygen saturations below 90%) in casualties with	
	outcomes. This casualty should receive supplemental oxygen to improve his oxygenation status and reduce the likelihood	moderate/severe TBI is associated with worsening of outcomes.	
	of secondary brain injury.	This casualty should receive supplemental oxygen to improve his	
		oxygenation status and reduce the likelihood of secondary brain	
		injury.	

		TOOO Calland Davids	
		TCCC Critical Decisions	
		TBI Case Study 2	
	TCCC Critical Decisions	The Setting • The casualty was a passenger in a vehicle that was attacked	
	TBI Case Study 2	with an IED	
	The Setting The casualty was a passenger in a vehicle that was	• The vehicle was turned over in the explosion	
83.	attacked with an IED The vehicle was turned over in the explosion Casualty was unrestrained in his seat	Casualty was unrestrained in his seat	Read the text.
05.	Unconscious for several minutes after the IED detonation Lying on roof of vehicle	Unconscious for several minutes after the IED detonation	read the text.
	Helmet was dented She was removed from the vehicle with attention to possible spinal injuries	Lying on roof of vehicle	
	possible spinal injuries - Pupils were equal and reactive at the point of injury - You are now caring for her on a TACEVAC flight	Helmet was dented	
	to the Role II hospital.	She was removed from the vehicle with attention to possible	
		spinal injuries	
		• Pupils were equal and reactive at the point of injury	
		• You are now caring for her on a TACEVAC flight to the Role	
		II hospital. TCCC Critical Decisions	
		TBI Case Study 2	
	TCCC Critical Decisions TBI Case Study 2	The Casualty	
	The Casualty	• Casualty is now lying supine on a litter during helicopter	
0.4	 Casualty is now lying supine on a litter during helicopter TACEVAC 	TACEVAC	Dood the test
84.	She was initially alert and followed commands Pupils were equal and reactive at the start of the flight	 She was initially alert and followed commands Pupils were equal and reactive at the start of the flight	Read the text.
	There is a left-sided scalp laceration No other injuries are noted Breathing is not labored	There is a left-sided scalp laceration	
	 The casualty suddenly becomes confused and then loses consciousness 	No other injuries are noted	
	One pupil is dilated and unresponsive	Breathing is not labored	
		The casualty suddenly becomes confused and then loses	
		consciousness	
		One pupil is dilated and unresponsive	
	TCCC Critical Decisions	TCCC Critical Decisions	
	TBI Case Study 2	TBI Case Study 2	
	Casualty Dashboard	Casualty Dashboard	
85.	• AVPU Now unconscious • Airway Apparently patent	• AVPU Now unconscious	Read the text.
	•Breathing RR 18 •Blood pressure 150/100	Airway Apparently patent	
	•O2 Saturation 96% on supplemental oxygen	• Breathing RR 18	
		• Blood pressure 150/100	
		O2 Saturation 96% on supplemental oxygen TCCC Critical Decisions	
		TBI Case Study 2	
	TCCC Critical Decisions TBI Case Study 2	1D1 Case Study 2	
	1 Bi Case Study 2	Question:	
	Question	What is the NEXT action you should take?	
86.	What is the NEXT action you should take?	•	Read the text.
	1. Administer 250 mL of 3% hypertonic saline	1. Administer 250 mL of 3% hypertonic saline	
	Perform an emergency cricothyroidotomy Elevate the foot of the casualty's litter Immediately begin therapeutic hypothermia by	2. Perform an emergency cricothyroidotomy	
	4. Immediately begin therapeutic hypothermia by removing the casualty's HPMK	3. Elevate the foot of the casualty's litter	
		4. Immediately begin therapeutic hypothermia by removing the	
		casualty's HPMK	

			, ,
		TCCC Critical Decisions	
		TBI Case Study 2	
	TCCC Critical Decisions TBI Case Study 2		
	1 Bi Case Study 2	Correct Answer and Feedback:	
	Correct Answer and Feedback	1) Administer 250 mL of 3% hypertonic saline	
07	1) Administra 250 mJ of 29/ hymograpia salina		D a a d 41a 4 a 44
87.	1) Administer 250 mL of 3% hypertonic saline	The decreasing state of consciousness and the dilated pupil are	Read the text.
	The decreasing state of consciousness and the dilated pupil are signs of an impending cerebral herniation. The casualty should receive 250 mL of hypertonic saline and have the head of his litter	signs of an impending cerebral herniation. The casualty should	
	elevated 30 degrees. His oxygen saturation is good, so there is no need to perform an emergency surgical airway. Therapeutic	receive 250 mL of hypertonic saline and have the head of his litter	
	hypothermia should not be undertaken during TACEVAC.	elevated 30 degrees. His oxygen saturation is good, so there is no	
		need to perform an emergency surgical airway. Therapeutic	
		hypothermia should not be undertaken during TACEVAC.	
		TCCC Critical Decisions	
		Additional Case Study 1	
	TCCC Critical Decisions		
	Additional Case Study 1	The Setting	
	The Setting • You are on a hostage rescue mission	You are on a hostage rescue mission	
88.	 An 8-man team is looking for 3 hostages in a building 	An 8-man team is looking for 3 hostages in a building	Read the text.
	The team suddenly comes under heavy fire The assaulter next to you is shot in the head	The team suddenly comes under heavy fire	
	 The hostages have not yet been located 	• The assaulter next to you is shot in the head	
	 The hostiles are moving and returning fire The tactical situation is dynamic 	The hostages have not yet been located	
		• The hostiles are moving and returning fire	
		• The tactical situation is dynamic	
	TCCC Critical Decisions	The taction is dynamic	
	Additional Case Study 1	TCCC Critical Decisions	
	·	Additional Case Study 1	
	-	-	
89.	The Casualty The casualty is lying on the floor with a massive	The Casualty	Read the text.
	head wound. • Shots are still being exchanged with the hostile		
	forces.	The casualty is lying on the floor with a massive head wound.	
		Shots are still being exchanged with the hostile forces.	
		TCCC Critical Decisions	
		Additional Case Study 1	
	TCCC Critical Decisions	Additional Case Study 1	
	Additional Case Study 1	Question:	
	Question	What is the NEXT action you should take?	
90.	What is the NEXT action you should take?	What is the MEXI action you should take:	Read the text.
70.	1. Stop the assault and examine the casualty for	Stop the assault and examine the casualty for other wounds	read the text.
	other wounds 2. Stop the assault and start an IV	2. Stop the assault and start an IV	
	Stop the assault and begin CPR as needed Continue the assault until the threat is eliminated	3. Stop the assault and start and V	
	and the hostages have been secured.	4. Continue the assault until the threat is eliminated and the	
		hostages have been secured.	
		TCCC Critical Decisions	
	TCCC CuitiI Desister-	Additional Case Study 1	
	TCCC Critical Decisions Additional Case Study 1	The state of the s	
		Correct Answer and Feedback:	
	Correct Answer and Feedback	4. Continue the assault until the threat is eliminated and the	
91.	4. Continue the assault until the threat is eliminated and	hostages have been secured.	Read the text.
	the hostages have been secured.	3	
	In the context of a hostage rescue operation, the hostages are in grave danger until the threat has been eliminated.	In the context of a hostage rescue operation, the hostages are in	
	The correct action here is to continue the mission until the hostages have been located and their safety has been	grave danger until the threat has been eliminated. The correct action	
	assured.	here is to continue the mission until the hostages have been located	
		and their safety has been assured.	
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	A magagati in it	TCCC Critical Decisions	
	TCCC Critical Decisions Additional Case Study 2	Additional Case Study 2	
	Additional Case Study 2		
		The Setting	
92.	The Setting • A small unit is approaching a compound to		Read the text.
/2.	search for weapons and drugs They suddenly come under fire	A small unit is approaching a compound to search for weapons	read the text.
	 Fire is suppressed but several unit members are injured 	and drugs	
	•There is no effective incoming fire at present	They suddenly come under fire	
		Fire is suppressed but several unit members are injured	
		There is no effective incoming fire at present	
		TCCC Critical Decisions	
		Additional Case Study 2	
	O magagati in it	The Casualty	
	TCCC Critical Decisions Additional Case Study 2		
	The Casualty	• Gunshot wound to the left chest just above his plate	
	Gunshot wound to the left chest just above his plate	The casualty is conscious and in severe pain	
93.	The casualty is conscious and in severe pain His radial pulse is weak	His radial pulse is weak	Read the text.
/3.	His breathing is deep and rapid Oxygen saturation was 85% prior to needle decompression After needle decompression, the casualty's breathing	His breathing is deep and rapid	read the text.
	becomes slower and less labored His oxygen saturation improves to 92%	Oxygen saturation was 85% prior to needle decompression	
	 An IV has been started, TXA has been given, and Hextend is running 	After needle decompression, the casualty's breathing becomes	
	 The severe pain persists and he repeatedly asks for pain medicine 	slower and less labored	
		His oxygen saturation improves to 92%	
		• An IV has been started, TXA has been given, and Hextend is	
		running	
		• The severe pain persists and he repeatedly asks for pain medicine	
	TCCC Critical Decisions	TCCC Critical Decisions	
	Additional Case Study 2	Additional Case Study 2	
	Casualty Dashboard	<u>Casualty Dashboard</u>	
94.	• AVPU Alert • Airway Patent	• AVPU Alert	Read the text.
	• Breathing RR 20 • Radial Pulse Weak	• Airway Patent	
	• O2 Saturation 92% at present	• Breathing RR 20	
		• Radial Pulse Weak	
-		• O2 Saturation 92% at present	
	TCCC Critical Decisions	TCCC Critical Decisions	
	Additional Case Study 2	Additional Case Study 2	
	,	O serious	
	Question	Question: What is the NEXT action you should take?	
95.	What is the NEXT action you should take?	What is the NEXT action you should take?	Read the text.
	1. Administer OTFC 800 ug	1 Administra OTEC 900	
	2. Administer 5 mg of IV morphine 3. Administer 20 mg of IV ketamine	1. Administer OTFC 800 ug	
	4. Administer 10 mg of IM morphine	2. Administer 5 mg of IV morphine	
		3. Administer 20 mg of IV ketamine	
-		4. Administer 10 mg of IM morphine TCCC Critical Decisions	
	TCCC Critical Decisions		
	Additional Case Study 2	Additional Case Study 2	
		Correct Answer and Feedback:	
	Correct Answer and Feedback		
96.	3. Administer 20 mg of ketamine IV	3. Administer 20 mg of ketamine IV	Read the text.
	The casualty has both pulmonary compromise and the	The consulty has both nulmanary compromise and the notantial fac-	
	potential for hemorrhagic shock. Opioids may worsen both conditions. The best choice for analgesia here is	The casualty has both pulmonary compromise and the potential for	
	ketamine, which does not lower blood pressure or	hemorrhagic shock. Opioids may worsen both conditions. The best	
	suppress respirations.	choice for analgesia here is ketamine, which does not lower blood	
		pressure or suppress respirations.	

97.	TCCC Critical Decisions Additional Case Study 3 The Setting • An Army convoy has taken multiple casualties in an ambush • There is no effective incoming fire at the moment • One casualty has a gunshot wound to the knee	TCCC Critical Decisions Additional Case Study 3 The Setting • An Army convoy has taken multiple casualties in an ambush • There is no effective incoming fire at the moment • One casualty has a gunshot wound to the knee	Read the text.
98.	TCCC Critical Decisions Additional Case Study 3 The Casualty Gunshot wound to the right knee There was moderate bleeding that was quickly controlled with a tourniquet No other wounds Casualty in severe pain Asking loudly for pain medications There are multiple other casualties remaining to be treated	TCCC Critical Decisions Additional Case Study 3 The Casualty Gunshot wound to the right knee There was moderate bleeding that was quickly controlled with a tourniquet No other wounds Casualty in severe pain Asking loudly for pain medications There are multiple other casualties remaining to be treated	Read the text.
99.	TCCC Critical Decisions Additional Case Study 3 Casualty Dashboard - AVPU - Airway - Breathing - Breathing - Radial Pulse - O2 Saturation - Page 18 - Page 18 - Page 18 - Page 19 - Page	TCCC Critical Decisions Additional Case Study 3 Casualty Dashboard • AVPU Alert • Airway Patent • Breathing RR 18 and unlabored • Radial Pulse Strong • O2 Saturation 98%	Read the text.
100.	TCCC Critical Decisions Additional Case Study 3 Question What is the NEXT action you should take? 1. Administer IM morphine 8 mg 2. Administer OTFC 800 ug 3. Give the casualty meloxicam and acetaminophen from the Combat Wound Medication Pack 4. Withhold pain meds because of the risk of shock	TCCC Critical Decisions Additional Case Study 3 Question: What is the NEXT action you should take? 1. Administer IM morphine 8 mg 2. Administer OTFC 800 ug 3. Give the casualty meloxicam and acetaminophen from the Combat Wound Medication Pack 4. Withhold pain meds because of the risk of shock	Read the text.
101.	TCCC Critical Decisions Additional Case Study 3 Correct Answer and Feedback 2. Administer OTFC 800 ug This casualty needs analgesia. OTFC is as effective as IV morphine and its onset of action is very rapid. IM morphine is slower acting and a less desirable choice. Meloxicam and acctaminophen are less potent than OTFC. There is no need to withhold opioid analgesia from this casualty since he is not in shock and his bleeding is controlled with a tourniquet – he should get an 800 ug OTFC lozenge.	TCCC Critical Decisions Additional Case Study 3 Correct Answer and Feedback: 2. Administer OTFC 800 ug This casualty needs analgesia. OTFC is as effective as IV morphine and its onset of action is very rapid. IM morphine is slower acting and a less desirable choice. Meloxicam and acetaminophen are less potent than OTFC. There is no need to withhold opioid analgesia from this casualty since he is not in shock and his bleeding is controlled with a tourniquet – he should get an 800 ug OTFC lozenge.	Read the text.

	TCCC Critical Decisions Additional Case Study 4	TCCC Critical Decisions Additional Case Study 4	
102.	The Setting • A small unit sustains multiple casualties from	The Setting	Read the text.
	an engagement with hostile forces • There is no effective incoming fire at the moment	 A small unit sustains multiple casualties from an engagement with hostile forces There is no effective incoming fire at the moment 	
		TCCC Critical Decisions Additional Case Study 4	
103.	TCCC Critical Decisions Additional Case Study 4 The Casualty Nour casualty has a gunshot wound to the right knee Heavy bleeding from the wound was controlled quickly with a tourniquet There are no other injuries The casualty has a strong radial pulse Casualty given 800 ug of OTFC for pain and the antibiotic ertapenen simintes later - the casualty suddenly has labored breathing and is confused Re-exam confirms no chest or abdominal wounds Breath sounds reveal bilateral wheezing	 Your casualty has a gunshot wound to the right knee Heavy bleeding from the wound was controlled quickly with a tourniquet There are no other injuries The casualty has a strong radial pulse Casualty given 800 ug of OTFC for pain and the antibiotic ertapenem 5 minutes later - the casualty suddenly has labored breathing and is confused Re-exam confirms no chest or abdominal wounds Breath sounds reveal bilateral wheezing 	Read the text.
	TCCC Critical Decisions Additional Case Study 4	TCCC Critical Decisions Additional Case Study 4	
104.	Casualty Dashboard • AVPU Alert but confused • Airway Raspy breathing • Breathing RR 26 - Noisy and rapid • Radial Pulse Rapid and weak • O2 Saturation 82%	 Casualty Dashboard AVPU Alert but confused Airway Raspy breathing Breathing RR 26 - Noisy and rapid Radial Pulse Rapid and weak O2 Saturation 82% 	Read the text.
	TCCC Critical Decisions Additional Case Study 4	TCCC Critical Decisions Additional Case Study 4	
105.	Question What is the NEXT action you should take?	Question: What is the NEXT action you should take?	Read the text.
	Perform a bilateral needle chest decompression Administer 0.5 mg epinephrine by autoinjector Insert a supraglottic airway Start an IV	 Perform a bilateral needle chest decompression Administer 0.5 mg epinephrine by autoinjector Insert a supraglottic airway Start an IV 	

		TCCC Critical Decisions	
	TCCC Cuitical President	Additional Case Study 4	
	TCCC Critical Decisions Additional Case Study 4		
		Correct Answer and Feedback:	
	Correct Answer and Feedback	2. Administer 0.5 mg epinephrine by autoinjector	
106.	2. Administer 0.5 mg epinephrine by autoinjector		Read the text.
	Anaphylactic reactions to ertapenem are rare but they	Anaphylactic reactions to ertapenem are rare but they do occur. The	
	do occur. The presence of labored breathing and a weak pulse shortly after administering this medication require	presence of labored breathing and a weak pulse shortly after	
	that this diagnosis be considered and appropriate treatment rendered. There is no chest trauma and other	administering this medication require that this diagnosis be	
	obvious cause for these severe signs in this casualty.	considered and appropriate treatment rendered. There is no chest	
		trauma and other obvious cause for these severe signs in this	
		casualty. TCCC Critical Decisions	
	TCCC Critical Decisions	Additional Case Study 5	
	Additional Case Study 5	Additional Case Study 5	
		The Setting	
	The Setting	The betting	
107.	 A hand grenade detonates in a building One unit member has moderate pain and vision 	A hand grenade detonates in a building	Read the text.
	loss in his right eye after the explosion • He was not wearing eye protection	• One unit member has moderate pain and vision loss in his right	
	 There is no effective incoming fire at the moment 	eye after the explosion	
		He was not wearing eye protection	
		There is no effective incoming fire at the moment	
		TCCC Critical Decisions	
		Additional Case Study 5	
	TCCC Critical Decisions Additional Case Study 5	The Casualty	
	Additional case study 5		
	The Casualty The casualty is alert but in significant pain from his	• The casualty is alert but in significant pain from his eye injury	
108.	eye injury There is mild pain from several scattered fragment	• There is mild pain from several scattered fragment injuries on his	Read the text.
	injuries on his extremities and abdomen but no significant external bleeding is identified	extremities and abdomen, but no significant external bleeding is identified	
	His right eye is red and tearing The cornea appears to be injured His right upper cyclid is lacerated	His right eye is red and tearing	
	 On vision testing, he is unable to count fingers with that eye but can see hand motion 	The cornea appears to be injured	
		His right upper eyelid is lacerated	
		• On vision testing, he is unable to count fingers with that eye but	
		can see hand motion	
	TCCC Critical Decisions	TCCC Critical Decisions	
	Additional Case Study 5	Additional Case Study 5	
	Casualty Dashboard	Casualty Dashboard	
109.	• AVPU Alert • Airway Patent	• AVPU Alert	Read the text.
	Breathing RR 18 and unlabored Radial Pulse Strong	• Airway Patent	
	• O2 Saturation 98%	Breathing RR 18 and unlabored	
		• Radial Pulse Strong	
		• O2 Saturation 98% TCCC Critical Decisions	
	TCCC Critical Decisions	Additional Case Study 5	
	Additional Case Study 5	Additional Case Study S	
		Question:	
	Question	What is the NEXT action you should take?	
110.	What is the NEXT action you should take?	Journal of the second s	Read the text.
	Cover the eye with a rigid eye shield Perform a detailed eye exam with the aid of a	1. Cover the eye with a rigid eye shield	
	tactical flashlight 3. Apply a pressure patch to the injured eye	2. Perform a detailed eye exam with the aid of a tactical flashlight	
	4. Apply pressure patches to both eyes to minimize eye movement	3. Apply a pressure patch to the injured eye	
		4. Apply pressure patches to both eyes to minimize eye movement	

		maga a v. ID V.	
		TCCC Critical Decisions	
	TCCC Cuitical Pasisians	Additional Case Study 5	
	TCCC Critical Decisions Additional Case Study 5		
	Additional Case Study 5	Correct Answer and Feedback:	
	Correct Answer and Feedback	1. Cover the eye with a rigid eye shield	
111.	16		Read the text.
111.	1. Cover the eye with a rigid eye shield	The injured eye should be immediately covered with a rigid eye	Read the text.
	The injured eye should be immediately covered with a rigid eye shield to protect it from further injury or from accidental	shield to protect it from further injury or from accidental pressure	
	pressure being applied that might cause the ocular contents to extrude from the corneal laceration. DO NOT attempt to	being applied that might cause the ocular contents to extrude from	
	manipulate the eye to perform a more thorough exam. DO NOT apply a pressure patch to the injured eye.	the corneal laceration. DO NOT attempt to manipulate the eye to	
		perform a more thorough exam. DO NOT apply a pressure patch to	
		the injured eye.	
	TCCC Cuitical Paciations	TCCC Critical Decisions	
	TCCC Critical Decisions Additional Case Study 6	Additional Case Study 6	
		,	
	The Setting	The Setting	
112.	• A small unit sustains multiple casualties from a		Read the text.
	small arms engagement • Your casualty has a gunshot wound to the right	A small unit sustains multiple casualties from a small arms	
	knee • There are no other injuries	engagement	
	-	Your casualty has a gunshot wound to the right knee	
		There are no other injuries	
		TCCC Critical Decisions	
		Additional Case Study 6	
		Tadamondi Cube Dudy o	
		The Casualty	
	TCCC Critical Decisions	110 Subutity	
	Additional Case Study 6	You are now on board a helicopter in the TACEVAC phase of	
	The Casualty	care	
	 You are now on board a helicopter in the TACEVAC phase of care 	Severe pain during Tactical Field Care was treated with IM	
113.	 Severe pain during Tactical Field Care was treated with IM morphine x 3 	morphine x 3	Read the text.
	 Bleeding from the wound was controlled quickly with a tourniquet 	Bleeding from the wound was controlled quickly with a	
	 The casualty continues to complain of pain You give the casualty 5 more mg of IV morphine x 2 at 10 minute intervals in an attempt to relieve his pain 	tourniquet	
	at 10 minute intervals in an attempt to relieve his pain • The casualty experiences relief of his pain • But soon appears sleepy and confused	The casualty continues to complain of pain	
		• You give the casualty 5 more mg of IV morphine x 2 at 10-	
		minute intervals in an attempt to relieve his pain	
		The casualty experiences relief of his pain	
		But soon appears sleepy and confused	
		TCCC Critical Decisions	
	TCCC Critical Decisions		
	Additional Case Study 6	Additional Case Study 6	
		Cacualty Dachboard	
111	Casualty Dashboard • AVPU Awake but drowsy	Casualty Dashboard • AVPU Awake but drowsy	Read the text.
114.	Airway Patent Breathing RR 8	1	reau the text.
	• Breathing KK 8 • Blood Pressure 95/70 • O2 Saturation 79%		
	Saturation 1976	Breathing RR 8 Blood Pressure 95/70	
		• O2 Saturation 79%	

		TCCC Critical Decisions	
115.	TCCC Critical Decisions	Additional Case Study 6	
	Additional Case Study 6	·	
		Question:	
	Question	What is the NEXT action you should take?	Read the text.
	What is the NEXT action you should take?	j	
	1. Administer a unit of packed red blood cells	1. Administer a unit of packed red blood cells	
	2. Stop using IV morphine and switch to 50 mg of ketamine as your next option	2. Stop using IV morphine and switch to 50 mg of ketamine as your	
	3. Administer 0.4 mg of naloxone IV 4. Administer 1 gm of TXA	next option	
		3. Administer 0.4 mg of naloxone IV	
		4. Administer 1 gm of TXA	
		TCCC Critical Decisions	
		Additional Case Study 6	
	Tagg a W 15 11	Huditional Case Study o	
	TCCC Critical Decisions Additional Case Study 6	Correct Answer and Feedback:	
	Additional Case Study 6	3) Administer 0.4 mg of naloxone IV	
	Correct Answer and Feedback	3) radininster of hig of haloxone iv	
116.	3) Administer 0.4 mg of naloxone IV	This scenario depicts a casualty suffering from an opioid overdose.	Read the text.
110.	This scenario depicts a casualty suffering from an opioid overdose. IM morphine acts slowly, and the lack of pain relief	IM morphine acts slowly, and the lack of pain relief may cause the	Read the text.
	may cause the combat medical provider to administer multiple doses of morphine, as in this scenario. When the	combat medical provider to administer multiple doses of morphine,	
	morphine begins to take effect 30-45 minutes later, the multiple doses may act on concert with the IV morphine to	as in this scenario. When the morphine begins to take effect 30-45	
	produce an overdose. The next action should be to administer $\ensuremath{\mathbf{IV}}$ naloxone.	minutes later, the multiple doses may act on concert with the IV	
		morphine to produce an overdose. The next action should be to	
		administer IV naloxone.	
		TCCC Critical Decisions	
		Additional Case Study 7	
	A TOGGGGW IN I	Traditional Case Stray	
	TCCC Critical Decisions Additional Case Study 7	The Setting	
	State of the state	<u> </u>	
117.	The Setting • A mission team is clearing a building	A mission team is clearing a building	
	 One person is moving near the edge of the roof of a two-story building 	One person is moving near the edge of the roof of a two-story	Read the text.
	 The person is hit by small arms fire in his body armor plates 	building	
	He stumbles backwards and falls from the roof There is no effective incoming fire at present	• The person is hit by small arms fire in his body armor plates	
	Hostile fire is intensifying from nearby buildings	He stumbles backwards and falls from the roof	
	Rounds are landing near you and your casualty	There is no effective incoming fire at present	
		Hostile fire is intensifying from nearby buildings	
		Rounds are landing near you and your casualty	
	TCCC Cutties I Poststone	TCCC Critical Decisions	
	TCCC Critical Decisions Additional Case Study 7	Additional Case Study 7	
	The Casualty	The Casualty	
118.	• The casualty is unconscious when you get to him		Read the text.
	Hostile fire is intensifying from nearby buildings There are rounds landing near you and your	The casualty is unconscious when you get to him	
	casualty • There is no obvious external bleeding	Hostile fire is intensifying from nearby buildings	
		There are rounds landing near you and your casualty	
		There is no obvious external bleeding	
			1

119.	TCCC Critical Decisions Additional Case Study 7 Question What is the NEXT action you should take? 1. Intubate the casualty to secure his airway 2. Await the arrival of a commercial litter before attempting to move the casualty to cover 3. Start an IV 4. Immediately move the casualty to the nearest cover by supporting his head and dragging him along the long axis of his body.	TCCC Critical Decisions Additional Case Study 7 Question: What is the NEXT action you should take? 1. Intubate the casualty to secure his airway 2. Await the arrival of a commercial litter before attempting to move the casualty to cover 3. Start an IV 4. Immediately move the casualty to the nearest cover by supporting his head and dragging him along the long axis of his body.	Read the text.
120.	TCCC Critical Decisions Additional Case Study 7 Correct Answer and Feedback 4. Immediately move the casualty to the nearest cover by supporting his head and dragging him along the long axis of his body. This casualty has a potential spinal cord injury that must be considered as well as likely TBI. He may also have noncompressible hemorrhage and multiple musculoskeletal injuries from his fail. But the first consideration at the moment is to move him to cover so that he (and you) will not be injured further by hostile fire.	TCCC Critical Decisions Additional Case Study 7 Correct Answer and Feedback: 4. Immediately move the casualty to the nearest cover by supporting his head and dragging him along the long axis of his body. This casualty has a potential spinal cord injury that must be considered as well as likely TBI. He may also have noncompressible hemorrhage and multiple musculoskeletal injuries from his fall. But the first consideration at the moment is to move him to cover so that he (and you) will not be injured further by hostile fire.	Read the text.
121.	Questions?		