

# Tourniquet Application

6.7

Procedure 6.7

## EMT/ADVANCED EMT/PARAMEDIC STANDING ORDERS— ADULT & PEDIATRIC

A tourniquet is a commercial device used to control a life threatening hemorrhage on an injured extremity to prevent exsanguination.

### INDICATIONS:

- Life threatening extremity hemorrhage that cannot be controlled by other means.
- Serious or life threatening extremity hemorrhage in the face of operational considerations that prevent the use of less aggressive hemorrhage control techniques.

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### PROCEDURE:

1. If hemorrhage is not severe, attempt to control the hemorrhage with direct pressure, bandaging and elevation.
2. If a tourniquet is indicated:
  - Place tourniquet 2 – 3 inches proximal to wound on the affected extremity.
  - Tighten per manufacturer instructions until hemorrhage stops and distal pulses are extinguished.
  - If initial tourniquet fails to stop bleeding, ensure proper deployment of first tourniquet, and consider placement of a second tourniquet just proximal to first.
  - Document time of tourniquet application and communicate this clearly with receiving facility.
  - Do not cover tourniquet.
  - Dress wounds per standard wound care and consider use of hemostatic bandage.
  - Reassess for rebleeding frequently, especially after any patient movement.
  - Proper tourniquet placement often causes significant pain. Consider pain management, see [Pain Protocol 2.15](#).
  - Do not remove or loosen tourniquet once hemostasis is achieved, unless in the extended care setting.

## EMT/ADVANCED EMT/PARAMEDIC STANDING ORDERS

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- Extended Care Section: See the following page



In the absence of a commercial tourniquet (preferred), an improvised device e.g., cravat with windlass, blood pressure cuff could be used. The device must be a minimum of 2 inches wide, otherwise it can cut through the skin.

### PEARLS:

- Do not apply tourniquets over clothing or joints. If wound is just distal to joint, the tourniquet should be placed just proximal to joint.
- Delay in placement of a tourniquet for life threatening hemorrhage significantly increases mortality. Do not wait for hemodynamic compromise to apply a tourniquet.
- If feasible, transport patients directly to a Level 1 or Level 2 trauma center and provide earliest possible notification / trauma alert.
- Damage to the limb from tourniquet application is unlikely if removed in several hours.

Protocol Continues 

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# Tourniquet Application

Protocol Continued

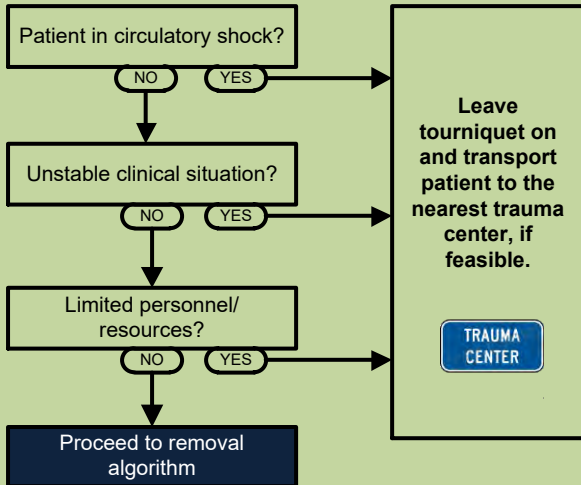
## EMT/ADVANCED EMT/PARAMEDIC STANDING ORDERS



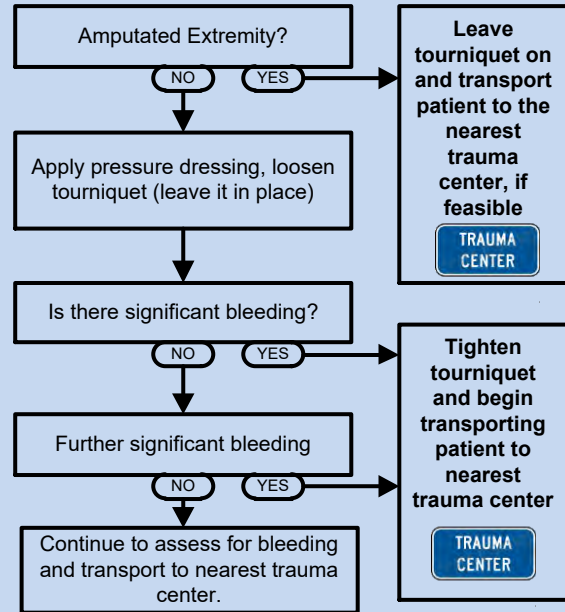
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- Consult **Medical Control**, if feasible.
- If tourniquet has been in place for greater than 6 hours, do not remove.
- If less than 6 hours consider Tourniquet Reassessment and Tourniquet Removal Algorithms

### Tourniquet Reassessment Algorithm



### Tourniquet Removal Algorithm



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