

# GUN SAFETY 101

## STOP THE BLEED

### CONSTRUCTING AN IFAK

(INDIVIDUAL FIRST AID KIT)



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## Gun Safety 101: 4 Basic Rules

1. Always know the condition of your weapon (round chambered? loaded magazine? safety on?) Treat it as if it is loaded.
2. Don't point a gun at anything you don't want to destroy.
3. Know what's around and behind your target.
4. Keep the finger off the trigger until you have lined up the shot and decided to shoot.

Many people are understandably uncomfortable with firearms. Many people have loved ones who have been killed or seriously injured by accidental or intentional firearms usage.

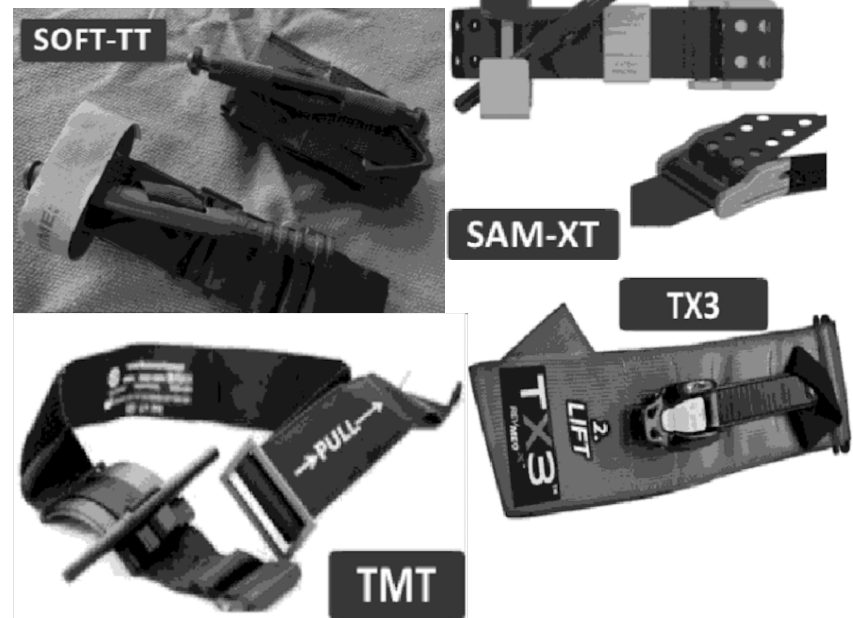
Not everyone has to fight, but everyone should know how to safely handle a firearm. If you don't want to or cannot handle firearms, consider being prepared to provide medical care to those who do.

People can totally not like guns and still use them. People can also like the idea of guns and not want to use them themselves. And if you are armed, you should know how to plug holes as well as make them.

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## Recommended Non-Pneumatic Limb Tourniquets

- Combat Application Tourniquet Gen 6 (CAT-6)
- Combat Application Tourniquet Gen 7 (CAT-7)
- Ratcheting Medical Tourniquet (RMT) Tactical
- SAM Extremity Tourniquet (SAM-XT)
- SOF Tactical Tourniquet-Wide (SOFTT-Wide)
- Tactical Mechanical Tourniquet (TMT)
- TX2 Tourniquet (TX2)
- TX3 Tourniquet (TX3)



## Standard Individual 1st Aid Kit (IFAK) Supplies

- Compression Gauze (x3)
- Tourniquet (x2/3)
- Chest Seals (2 pack)
- Gloves
- Gauze Roll
- Bandage/EMT Scissors
- NARCAN (x2)
- Hemostatic Bandages (x3)
- Hand Sanitizer



## Stop the Bleed 101

1. Check your surroundings. Your safety is the priority. Move injured to a safe position when possible. If the injured are still conscious, ask consent before providing care.

2. Follow the ABCS:

A: ALERT 911 or a trusted medical professional immediately of your location and situation. Not everyone is going to be helped at a hospital or by the police. Use your discretion. ACAB

B: Find the source of BLEEDING. Check where blood is pooling, or for any continuous, large-volume bleeding. There may be multiple sites. Remove clothing and check for the source(s) of bleeding. Neck? Shoulders? Chest? Groin? Arms? Legs? Be sure to look for both entrance and exit wounds.

C: COMPRESS and apply direct pressure to the wound. Use gauze or cloth to cover the injury and focus on the location of bleeding. Stick your thumbs or fingers inside if needed. Gloves are good, but worry about infection later. Stopping bleeding is the priority.

4. For large wounds, direct pressure won't be enough. Pack compression and hemostatic gauze deep into the wound(s). Apply pressure until help arrives. For CHEST WOUNDS: packing gauze will not work. If available, use a chest seal to ensure the injured lung will not collapse.

5. If someone is injured on the arm or leg, tourniquets should be used above the wound in addition to packing gauze. Place around the limb 2-3 inches above the injury. Do not use over an elbow, knee, or other joint. Place around the limb, twisting until bleeding stops. *This will hurt.* Mark the time the tourniquet is applied on the tourniquet or somewhere visible on the injured person. You may need multiple tourniquets to stop bleeding completely. DO NOT REMOVE the tourniquet, even if bleeding has stopped. Removing a tourniquet could lead to more bleeding and even shock from rapid blood loss. You can apply tourniquets on yourself or others, as well as over clothing.

**NOTE:** Many fear that tourniquets can result in amputation of a limb. This is only the case when they have been misapplied, or left in place for at least 4 hours. Be sure to only use a tourniquet if the bleeding is life threatening (does not respond to direct pressure and packing gauze alone), and the injury location allows (on a limb with space at least 2-3 inches above the wound and not on a joint).

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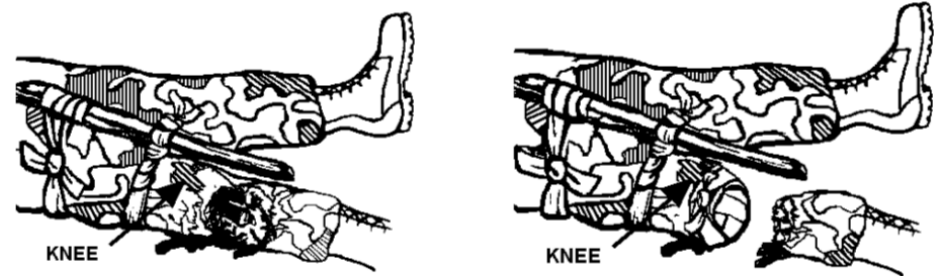


Figure 2-36. Tie free ends on side of limb.

**NOTE:** Other methods of securing the stick may be used as long as the stick does not unwind and no further injury results.

**NOTE:** If possible, save and transport any severed (amputated) limbs or body parts with (but out of sight of) the casualty.

(6) DO NOT cover the tourniquet – you should leave it in full view. If the limb is missing (total amputation), apply a dressing to the stump. All wounds should have a dressing to protect the wound from contamination.

(7) Mark the casualty's forehead with a "T" and the time to indicate a tourniquet has been applied. If necessary, use the casualty's blood to make this mark.

(8) Check and treat for shock. Seek medical aid. **CAUTION:** Only appropriately skilled medical personnel may adjust or otherwise remove/release the tourniquet in the appropriate setting.

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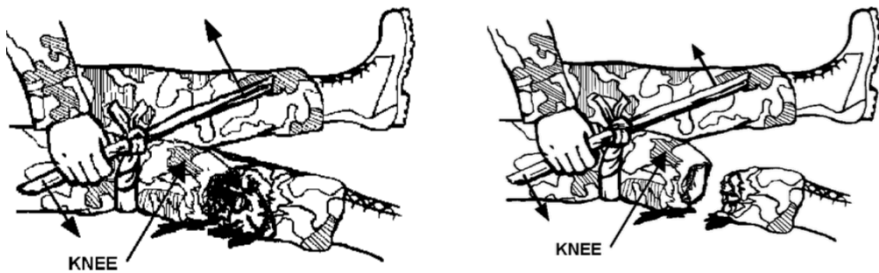


Figure 2-34. Full knot over rigid object.

(4) Twist the stick (Figure (2-35)) until the tourniquet is tight around the limb and/or the bright red bleeding has stopped. In the case of amputation, dark oozing blood may continue for a short time. This is the blood trapped in the area between the wound and tourniquet.

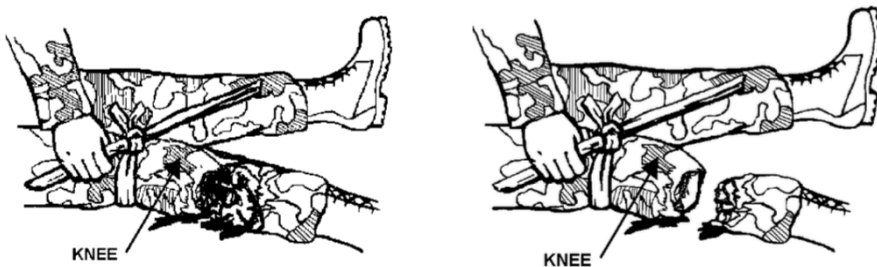
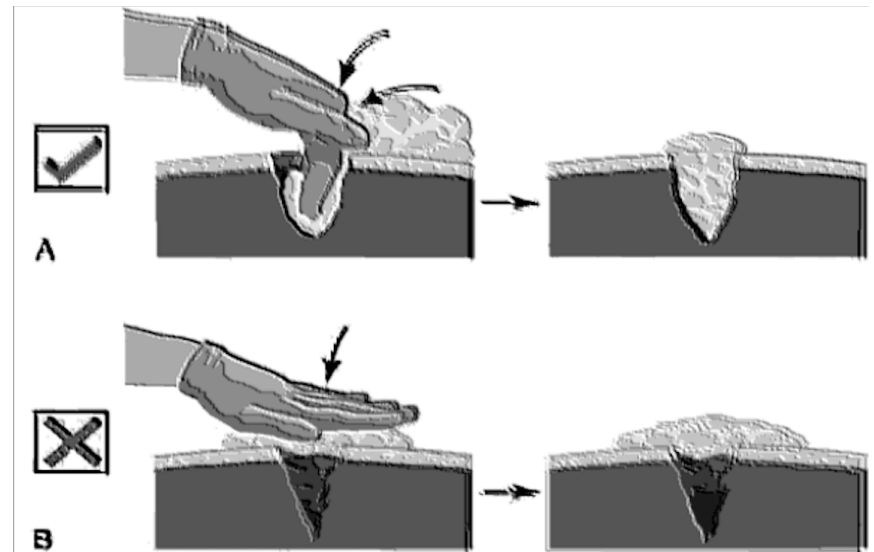


Figure 2-35. Stick twisted.

(5) Fasten the tourniquet to the limb by looping the free ends of the tourniquet over the ends of the stick. Then bring the ends around the limbs to prevent the stick from loosening. Tie them together on the side of the limb (Figure 2-36).

**NOTE:** For pediatric (youth and infant) care, adult tourniquets and packing gauze can be applied on children. For infants, direct pressure will work in most cases.



**NOTE:** Follow A, the proper packing method

## ***Improvising a Tourniquet (From US Military Field Manual 4-25.11, 2002)***

a. *Improvising a Tourniquet.* In the absence of a specially designed tourniquet, a tourniquet may be made from a strong, pliable material, such as a sauce or muslin bandages, clothing, or cravats. An improvised tourniquet is used with a rigid, stick-like object. To minimize skin damage, ensure that the improvised tourniquet is at least 2 inches wide.

**WARNING: The tourniquet must be easily identified or seen easily. WARNING: DO NOT use wire or shoestring for a tourniquet band.**

### *b. Placing the Improvised Tourniquet*

(1) Place the tourniquet around the limb, between the wound and the body truck. Never place it directly over a wound, a fracture, or a joint. Tourniquets, for maximum effectiveness, should be placed on the upper arm or above the knee on the thigh (Figure 2-32).

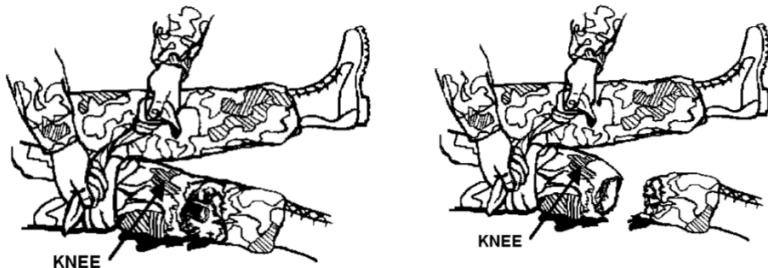


Figure 2-32. Tourniquet above knee.

2) The tourniquet should be well-padded. If possible, place the tourniquet over the smoothed sleeve or trouser leg to prevent the skin from being pinched or twisted. If the tourniquet is long enough, wrap it around the limb several times, keeping the material as flat as possible. Damaging the skin may deprive the surgeon of skin required to cover an amputation. Protection of the skin also reduces pain.

### *c. Applying the Tourniquet*

(1) Tie a half-knot. (A half-knot is the same as the first part of tying a shoe lace).

(2) Place a stick (or similar rigid object) on top of the half-knot (Figure 2-33).

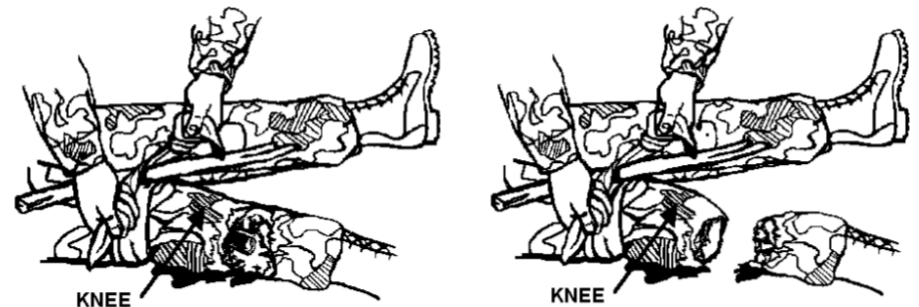


Figure 2-33. Rigid object on top of half-knot.

(3) Tie a full knot over the stick (Figure 2-34).