

Section: Medical Operations General
Subject: TOURNIQUET USE – STATE OF FLORIDA COMMON PROTOCOL
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1. **Indications for tourniquet use** – To stop bleeding when:
 - a. Life-threatening limb hemorrhage is not controlled with direct pressure or other simple measures, e.g. a mangled extremity.
 - b. Traumatic amputation has occurred.
2. **Application** – Combat Application Tourniquet (CAT)
 - a. Placement:
 - i. Expose the extremity by removing clothing in proximity to the injury.
 - ii. Place directly over exposed skin at least 5 cm proximal to the injury.
 - iii. Route the self-adhering band tight.
 - iv. Pass the band through the outside slit of the buckle.
 - v. Pull the self-adhering band tight.
 - vi. Twist the rod until bright red bleeding stops.
 - vii. Lock the rod in place with the clip.
 - viii. Record the date and time of application on the tourniquet and in your report.
 - b. Evaluation:
 - i. The tourniquet is effectively applied when there is cessation of bleeding from the injured extremity indicating a total occlusion of arterial blood flow.
 - ii. Any pre-existing distal pulse should be absent at that time as well.
 - c. Tourniquet time and removal:
 - i. Tourniquets should be removed as soon as possible under conditions where the hemorrhage can be directly controlled, i.e. hospital or casualty collection center (CCC).
 - ii. Tourniquet placement must be communicated verbally and in writing in patient care reports for all pre-hospital to hospital and inter-hospital transfers.
3. **QA Point:**
 - a. Tourniquet use greater than 6 hours is associated with distal tissue loss.
 - b. In patients who have sustained devastating extremity injuries after an explosion, early application of a tourniquet may be life saving.