

EL DORADO COUNTY EMS AGENCY

FIELD PROCEDURES

811

Effective: July 1, 2012
Last Revised: August 2024
Scope: BLS/ALS

(on file)

EMS Agency Medical Director

TOURNIQUET FOR HEMORRHAGE CONTROL

PURPOSE:

To control severe arterial hemorrhage in an extremity.

INDICATIONS:

Uncontrolled hemorrhage of an extremity secondary to a traumatic injury, after direct pressure and hemostatic gauze have failed to adequately control hemorrhage.

COMPLICATIONS: (Typically secondary to prolonged application)

- Nerve damage
- Tissue ischemia
- Compartment syndrome
- Reperfusion injury
- Vascular injury
- Thrombosis
- Loss of limb

CONTRAINDICATIONS:

- Application over a joint
- Non-life threatening bleeding
- Prolonged use (beyond 2 hours)

PROCEDURE:

1. Ensure direct pressure, hemostatic agents, and/or bandaging have been utilized.
2. Remove any improvised/improperly placed tourniquet if indicated.
3. Apply approved tourniquet 2-4" proximal to wound and not overlying a joint. Tighten until bleeding has stopped. In rare cases severe distal extremity hemorrhage may require proximal extremity tourniquet application.
4. If bleeding is still not controlled, apply a second approved tourniquet just proximal to first.
5. Document time each device applied. Appropriate applied tourniquet should not be loosened or removed unless time to definitive care will be greatly delayed (> 2 hours)
6. Tighten tourniquet until there is no distal pulse palpable and bleeding has stopped.
7. Document the TIME the tourniquet was applied on the tourniquet and/or patient using an indelible marker and report that time to the provider during patient transfer.
8. **DO NOT COVER THE EXTREMITY.** You must visually monitor the wound site, and leave tourniquet in open view.
9. Continue to reassess tourniquet(s) and adjust as needed.

10. If bleeding is not controlled, place a second tourniquet a few inches proximal to the first if space allows.

PEDIATRIC CONSIDERATIONS:

1. Tourniquet application can be used on children, except infants or very small children where the tourniquet is too big.

2. For the infant or very small child where the tourniquet is too big, direct pressure on the wound will work in virtually all cases.

3. For large, deep wounds, wound packing can be performed in children, same as in adults.

NOTE: Do not place a tourniquet anywhere other than the extremities. Other wounds require direct pressure and/or hemostatic dressings for hemorrhage control.