

MANAGE AN OPEN PNEUMOTHORAX

For use of this form see TC 8-800; the proponent agency is TRADOC.

TABLES: I
REFERENCES: STP 8-68W13-SM-TG, Task: 081-833-0049, Treat a Casualty with a Chest Injury; Prehospital Trauma Life Support (PHTLS), Revised Military Edition.

1. Soldier (Last Name, First Name, MI)

2. Date (YYYYMMDD)

CONDITIONS: Given a casualty or a Soldier acting as a casualty with severe thoracic trauma in a simulated combat environment. You are not in a CBRN environment.
Many casualties with multiple injuries have an associated chest injury. Severe thoracic injuries often result from motor vehicle collisions, falls, gunshot wounds, crush injuries, and stab wounds. Thoracic injuries are treatable if the casualty is properly assessed, managed, and evacuated in a timely and effective manner.

STANDARDS: Perform all measures IAW the standards of evaluation outlined in C168W144/1 Tactical Combat Casualty Care. You must score at least 70% (8 of 11 steps) and not miss any critical (*) elements on the skill sheet.

SAFETY:

- o Risk Assessment: Low. All bodily fluids should be considered potentially infectious; always observe body substance isolation (BSI).
- o Precautions: Wear gloves and eye protection as a minimal standard of protection.
- o Environmental: None

NOTE: Soldier Medics must be observed. (Evaluator to Soldier Medic ratio is 1:6).

TEST SCENARIO:

During an artillery barrage, a Soldier is struck in the chest with a fragment from one of the exploding projectiles. After moving the casualty behind effective cover, you perform your initial and rapid trauma assessment. You determine the casualty has an open pneumothorax. You must manage the chest wound and restore adequate respirations; you have been provided the necessary medical equipment.

3. Evaluator's Comments and After-Test Recommendations:

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**MANAGE AN OPEN PNEUMOTHORAX
GRADING SHEET**

TASK	COMPLETED					
	1ST		2ND		3RD	
	P	F	P	F	P	F
4.						
a. * Took/verbalized body substance isolation (BSI) precautions.						
b. Exposed the injury by cutting away the casualty's clothing.						
c. Covered the open wound immediately with their gloved hand.						
d. * Covered the wound with a large sterile, nonporous dressing, covering the larger wound first if multiple wounds were assessed.						
e. Taped three of four sides to provide a flutter-type valve effect.						
f. * While maintaining C-spine stabilization, log-rolled the casualty (onto their injured side) to examine the posterior.						
g. * Covered the exit wound with a (four-sided) fully occlusive dressing.						
h. * Placed the casualty in a sitting position or on their injured side (recovery position) during transport.						
i. Removed their gloves and disposed of them appropriately.						
j. Documented the procedure on the appropriate medical form.						
k. * Did not cause further injury to the casualty.						

* CRITICAL ELEMENTS

**MANAGE AN OPEN PNEUMOTHORAX
GRADING SHEET (cont'd)**

5. Demonstrated Proficiency Yes No

6. Start Time	7. Stop Time	8. Initial Evaluator
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9. Start Time	10. Stop Time	11. Retest Evaluator
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12. Start Time	13. Stop Time	14. Final Evaluator
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15. Remarks

**MANAGE AN OPEN PNEUMOTHORAX
EVALUATOR GUIDELINES AND INSTRUCTIONS**

Inform the Soldier Medic of the CONDITIONS and STANDARDS as stated on this form.
Provide an optional scenario, if appropriate. This scenario should reinforce the unique or particular needs of the unit.
Allow sufficient time for the Soldier Medic to extract information from the scenario.
Provide each evaluator with the grading sheet.
Ensure the Soldier Medic has all required materials.
Explain how the exercise is graded.

Resource Requirements:

Evaluator: Grading sheet and applicable scenario.

Soldier Medic: Applicable scenario, medical aid bag stocked with a basic load.

Additional Scoring Guidelines: None