

Tourniquet Protocol

INDICATIONS

- A. A tourniquet should be used to control potentially fatal hemorrhagic wounds only after other means of stopping blood loss have failed.

PRECAUTIONS

- A. Use BSI
- B. A tourniquet applied incorrectly can increase blood loss and lead to death.
- C. Applying a tourniquet can cause nerve and tissue damage whether applied correctly or not. Proper patient selection is of the utmost importance.
- D. Damage is unlikely if the tourniquet is removed within an hour. Low risk to tissue is acceptable over death secondary to hypovolemic shock.
- E. A commercially made tourniquet is the only acceptable tourniquet to be used; improvised tourniquets are not as effective and may cause more harm.

TECHNIQUE

- A. Attempt to control hemorrhage using direct pressure, elevation, and indirect pressure over pressure points prior to considering the application of a tourniquet.
- B. If unable to control hemorrhage using the above means, apply a tourniquet, using the procedure below, and minding the considerations
 - a. Tourniquet application is a standing order
 - b. Apply tourniquet proximal to the wound and not across any joints.
 - c. Tighten tourniquet until bleeding stops.
 - i. Applying tourniquet loosely will only increase blood loss by inhibiting venous return.
 - ii. Cut away any clothing so that the tourniquet is clearly visible. The tourniquet should NEVER be covered by clothing or bandages.
 - d. The time and date of application should be written on the patient's skin next to the tourniquet with a permanent marker.
 - e. Keep tourniquet on throughout hospital transport – a correctly applied tourniquet should only be removed by the receiving hospital.