Emergency Protocol: Traumatic Blood Loss & Life-Threatening External Bleeding

Aligned with American Red Cross First Aid for Severe Trauma (FAST®) and Stop the Bleed® Guidelines

https://www.redcross.org/take-a-class/resources/learn-first-aid/bleeding-life-threatening-external?srsltid=AfmBOope1snZHZ6c6zIsvD8o3LHXz7qIsVp8pT6elrjv2NgPW_2AVmd_&scrlybrkr=d16dd3f3

1. Purpose & Scope

This protocol outlines the emergency procedures for responding to life-threatening external bleeding incidents involving students, staff, or visitors at North Side Community School. Uncontrolled bleeding is the leading cause of preventable death from trauma. Immediate action by trained staff prior to the arrival of Emergency Medical Services (EMS) is critical.

2. Recognition of Life-Threatening Bleeding

Bleeding is considered **life-threatening** if any of the following are observed:

- **Volume:** Blood pooling on the ground, soaking through clothing, or equal to approximately half a soda can (less volume in young children or infants).
- **Flow:** Blood spurting from a wound or flowing continuously and steadily.
- **Location:** Deep or gaping wounds to arms, legs, neck, shoulder, groin, torso, or head.
- **Patient Condition:** Confusion, pale/cool/clammy skin, rapid breathing, or loss of consciousness (signs of shock).

North Side Community School
Education Beyond Expectations

3. Immediate Action Steps (ARC FAST Framework)

STEP 1: CHECK (Scene & Victim)

1. **Ensure Scene Safety:** Check for immediate hazards (e.g., violence, active danger, structural hazards). **Do not enter an unsafe scene.**
2. **Form Initial Impression & Obtain Consent:** If the individual is conscious, state who you are and that you are trained to help.
3. **Put on Personal Protective Equipment (PPE):** Put on latex-free disposable gloves immediately to protect against bloodborne pathogens.

STEP 2: CALL (Emergency Communications & Logistics)

1. **Call 9-1-1 Immediately:** Put phone on speaker mode if acting alone so hands remain free to render care.
2. **Mobilize Assistance & Retrieve Trauma Supplies:**
    - Direct a specific bystander to retrieve the nearest **Trauma / Bleeding Control Kit** and **AED**.
    - Notify the **School Main Office** and **School Nurse / First Responders**.
3. **Inform 9-1-1 Dispatch:** State the exact location in the school, the nature of the trauma, and whether severe bleeding is present.

STEP 3: CARE (Bleeding Control Procedures)

Expose the wound by cutting or removing clothing to identify the exact source of bleeding.

A. Direct Pressure (Initial Action for ALL Wounds)

1. Place a sterile dressing (or hemostatic gauze if available) directly over the source of the bleeding.
2. Apply **firm, continuous, direct manual pressure** using both hands directly over the wound.
3. Ensure the injured body part rests on a firm surface to allow effective compression.
4. **DO NOT remove the original dressing.** If blood soaks through, apply an additional gauze pad on top and maintain firm pressure.

B. Tourniquet Application (For Severe Limb Bleeding: Arms & Legs)

If severe bleeding is on an arm or leg and direct pressure is insufficient or a commercial tourniquet is available:

1. **Position the Tourniquet:**
    - Place the tourniquet **2 to 3 inches above the wound** (between the injury and the heart).
    - **Do NOT** place the tourniquet directly over a joint (elbow or knee). If the wound location is unclear, place it high and tight on the limb.
2. **Tighten & Secure:**
    - Pull the main strap as tight as possible and fasten the velcro strap securely.
    - Twist the windlass rod until the bleeding stops completely and the distal pulse disappears.
    - Lock the windlass rod in the clip.
3. **Record Time:** Write the time of application on the tourniquet time strap or on the patient's forehead (e.g., "T = 10:15 AM").
4. **If Bleeding Continues:** Apply a second tourniquet closer to the torso (above the first tourniquet).
5. **NEVER loosen or remove a tourniquet once applied.** Only medical personnel may remove it.

C. Wound Packing (For Junctional Areas: Neck, Shoulder, Groin, Back)

Tourniquets cannot be used on junctional areas (neck, shoulders, groin) or torso.

1. **Pack the Wound:** Insert hemostatic gauze (e.g., QuikClot) or standard sterile gauze deep into the wound cavity directly against the bleeding vessel.
2. **Apply Direct Compression:** Apply continuous, firm manual pressure over the packed wound for **at least 3 minutes** (for hemostatic gauze) or **10 minutes** (for standard gauze).
3. Hold pressure continuously until EMS arrives and takes over.

STEP 4: SHOCK MANAGEMENT & CONTINUOUS MONITORING

1. **Position the Patient:** Lay the individual flat on their back unless breathing is compromised or a head/spinal injury is suspected.
2. **Maintain Body Temperature:** Cover the individual with a blanket or jacket to keep them warm and prevent hypothermia.

3. **Do NOT Give Food or Liquids.**
4. **Reassure & Monitor:** Remain with the individual, speak calmly, and continuously check for changes in responsiveness and breathing until EMS arrives.

4. Post-Incident & School Administrative Response

1. **EMS Hand-Off:** Provide responding paramedics with:
    - Exact time tourniquet(s) or wound packing was applied.
    - Estimated volume of blood lost.
    - Any changes in the victim's condition.
2. **Site Remediation:** Secure and isolate the area. Custodial staff trained in Bloodborne Pathogens (BBP) must clean and decontaminate the area according to OSHA standards.
3. **Parent/Guardian Notification:** Administration will contact the student's parent/guardian immediately after EMS dispatch.
4. **Debriefing & Support:** Activate the school counseling team to offer trauma-informed emotional support for witness students and staff.
5. **Incident Reporting:** Complete an official school Incident Report and ARC/OSHA injury documentation within 24 hours.
6. **Restock Equipment:** Immediately replenish all used supplies in the school Trauma Kits.

5. Equipment Locations & Maintenance

- **Bleeding Control Kit Locations:**
    - Main Office / Nurse's Office
    - Gym
    - Cafeteria
    - Hallway Emergency Stations (mounted beside AED units)
- **Kit Contents:** Commercial Tourniquets (e.g., C-A-T or SAM XT), Hemostatic Gauze, Compressed Sterile Gauze, Trauma Shears, Nitrile Gloves, Marker/Pen, and Emergency Blanket.
- **Maintenance Schedule:** The School Nurse or designated Safety Coordinator will inspect all bleeding control kits monthly to check seal integrity and expiration dates on hemostatic agents.