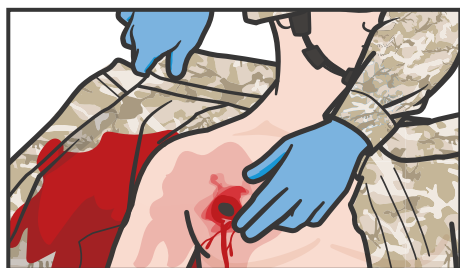


CHEST SEAL



CONSIDER body substance isolation.

NOTE: If a Combat Lifesaver is available, direct them to assist.



- 01 EXPOSE** and uncover any anterior, posterior or axillary chest wounds.

NOTE: If multiple wounds are found, treat them in the order in which you found them.



- 02 CHECK** for signs of an open and/or sucking chest wound.

NOTE: If you are not sure if the wound has penetrated the chest wall completely, treat the wound as though it were an open chest wound.

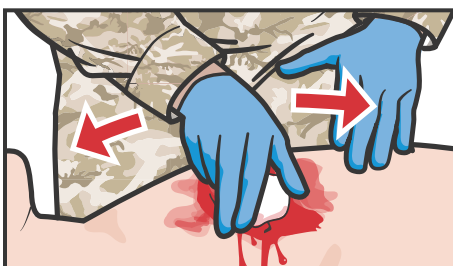


- 03 PLACE** hand or back of hand over open chest wound to create a temporary seal.

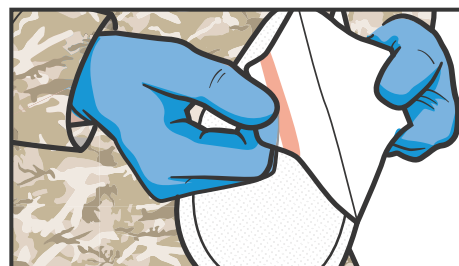


- 04 Fully OPEN** the outer wrapper of the commercial vented chest seal or other airtight material from the casualty's JFAK.

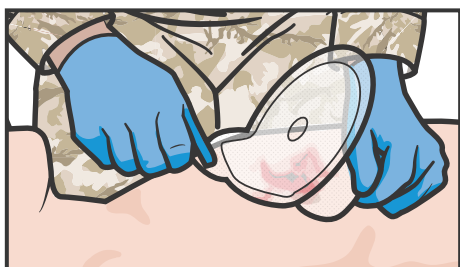
NOTE: If a vented chest seal is not available, use a non-vented chest seal.



- 05 REMOVE** gauze from vented chest seal package (or other gauze) to wipe away any dirt, blood, or other fluid.

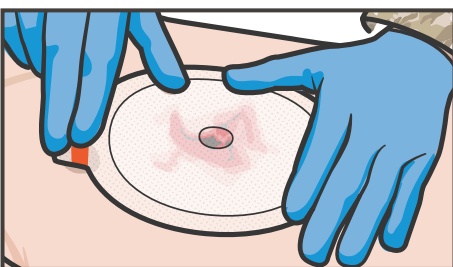


- 06 PEEL OFF** the protective liner, exposing the adhesive portion of the vented chest seal.



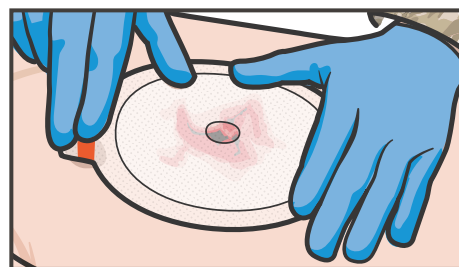
- 07 PLACE** adhesive side directly over hole as casualty exhales, pressing firmly to vented chest seal.

NOTE: Ensure edge of vented chest seal extends 2" beyond edges of the wound.



- 08 ENSURE** the adhesive surface of the vented chest seal is adhering to the skin.

NOTE: Tape may be used to secure the edges of the vented chest seal if needed.



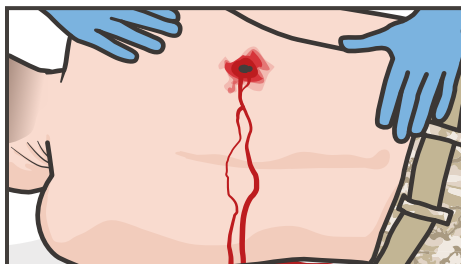
- 09 ASSESS** the effectiveness of the vented chest seal when the casualty breathes.

STEP 9 NOTE: When the casualty inhales, the plastic should be sucked against the wound, preventing air entry.

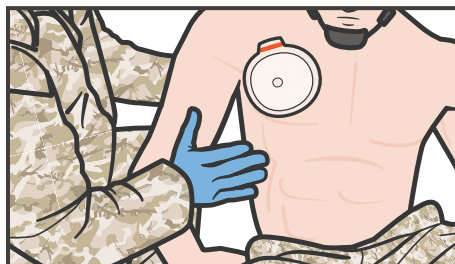
STEP 9 NOTE: When the casualty exhales, trapped air should be able to escape from the wound and out the commercial chest seal valve.

Continued on next page...

CHEST SEAL



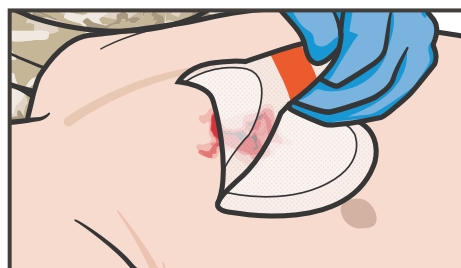
10 CHECK/FEEL for additional open wounds (anterior, posterior, and axillary). Treat any additional wounds with vented chest seals if needed.



11 PLACE conscious casualty into a sitting position or an unconscious casualty in the recovery position (with their injured side down).

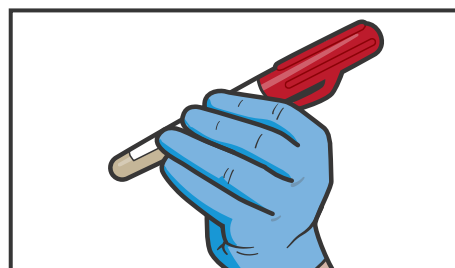


12 MONITOR for signs of a tension pneumothorax.

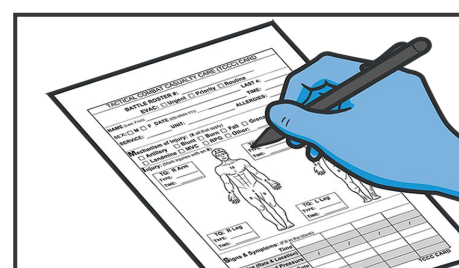


13 If signs of a tension pneumothorax develop, **LIFT** one edge of the vented chest seal to allow decompression ("burping" the seal)

NOTE: Alternatively, remove the chest seal for a few seconds to decompress and then reapply or replace it with a new commercial vented chest seal.



14 If signs of a tension pneumothorax persist despite burping the seal, **PERFORM** a needle decompression of the chest (see Needle Decompression of the Chest Instruction).



15 DOCUMENT all findings and treatments on a DD Form 1380 TCCC Casualty Card and attach it to the casualty.