



Rees-Jones Trauma Center @ Parkland's

STOP THE BLEEDING

Program Implementation Guide

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In honor of the Dallas Police / Dart Officers shot on July 7th in Dallas, Texas

Stop the Bleeding Initiative for State of Texas 2016 Initiatives

Governor's EMS / Trauma Advisory Council's Trauma System Committee

Aim: 0% preventable death from extremity hemorrhage in Texas

Objectives

1. Every ambulance, air medical helicopter and every emergency department in Texas will have protocols for tourniquet application and hemostatic gauze utilization integrated into their response protocols by December 2016.
2. Every ambulance, air medical helicopter and every emergency department in Texas will have a minimum of two tourniquets and hemostatic gauze materials in their routine stock by December 2016.
3. Every ambulance, air medical helicopter and every emergency department employee in Texas will have access to training on tourniquet application and hemostatic gauze use by December 2016.
4. Every trauma facility will monitor the ICD.9/ICD.10 injuries identified as having the potential for tourniquet use and monitor compliance to protocol by March, 2016.
5. The Texas State Department of Health Services will link the American College of Surgeons Bleeding Control site to the Governor's EMS/Trauma Advisory Council site. This will ensure the information and materials for the Stop the Bleeding campaign will be available for anyone. This site will identify lead contacts from each regional trauma advisory council for questions.
6. The Governor's EMS/Trauma Advisory Committee's Trauma System Committee, EMS Committee, Education Committee and Injury Prevention Committee will partner to develop a coalition of stakeholders to move the **Stop the Bleeding** training into the public sector.
7. The stakeholder coalition will foster participation and engagement from key organizations and clinical experts.
8. The Texas Trauma Registry will track tourniquet utilization beginning March, 2016.
9. 2016 priorities for non-healthcare provider training target police agencies, volunteer EMS, Red Cross volunteers, emergency management colleagues, colleges, schools systems, churches, entertainment industry agencies and shopping mall employees.

Specific Texas Activities

1. Survey of current activities regarding tourniquet application protocols availability and use.
2. Quarterly reports reflecting the ICD.9/ICD.10 injuries appropriate for tourniquet, shock status, and their outcome produced by the Texas Trauma Registry. This report will be requested from the NTDB as well.
3. Texas Governor's EMS, Trauma Advisory Council's committees to include the Trauma System Committee, EMS Committee, Medical Director's Committee, Air Medical Committee, Education Committee, Pediatric Committee and the Injury Prevention Committee have reviewed and voted to support the **Bleeding Control Course** initiatives of the Hartford Consensus and the **Stop the Bleeding** campaign to ensure it is a statewide priority.

Texas Stop the Bleeding Initiative

Aim: 0% preventable death from extremity hemorrhage in Texas

Objectives Timeline

Activity	Jan.	Feb.	March	April	May	June	July	August	Sept.	Oct.	Nov.	Dec.
Every ambulance, air medical helicopter and every emergency department in Texas will have protocols for tourniquet application and hemostatic gauze integrated into their response protocols by December 2016												
Every ambulance, air medical helicopter and every emergency department in Texas will have a minimum of two tourniquets and two hemostatic gauzes in their routine stock by December 2016.												
Every ambulance, air medical helicopter and every emergency department employee in Texas will have training on and tourniquet application and hemostatic gauze use by December 2016.												
Every trauma facility will monitor the ICD.9/ICD.10 injuries identified as having the potential for tourniquet use and monitor compliance to protocol by March, 2016.												
DSHS will add the Stop the Bleed program link to the GETAC website to facilitate access to the course information and material.												
The Governor’s EMS/Trauma Advisory Committee’s Trauma System Committee, EMS Committee,												

<p>Education Committee and Injury Prevention Committee will partner to develop a coalition of stakeholders to move the Stop the Bleeding training into the public sector. The stakeholder coalition will foster participation and engagement from key organizations and clinical experts.</p>												
<p>The Texas Trauma Registry will track tourniquet use beginning March, 2016.</p>												
<p>The priorities for 2016 are the health care providers then extended into the communities. The priorities for non-healthcare provider training target police agencies, volunteer EMS, Red Cross volunteers, emergency management colleagues, colleges, schools systems, churches, entertainment industry agencies and shopping mall employees.</p>												
<p>The Texas Trauma Registry will track tourniquet utilization – identifying those patient’s appropriate for tourniquet use, shock status and their outcomes.</p>												

Parkland Health & Hospital System

Rees-Jones Trauma Center

Stop the Bleeding Initiative Proposal

In April of 2013, a Joint Committee to Create a National Policy to Enhance Survivability from Intentional Mass Casualty and Active Shooter Events was assembled by the American College of Surgeons, the National Security Council, the US Military, and the Federal Bureau of Investigation. Representatives from the governmental and nongovernmental emergency medical response and the community participated in the joint committee. The report produced by this joint committee is referred to as the “Hartford Consensus”. The committee’s report defined that uncontrolled bleeding or hemorrhage was the cause of preventable death following injury. This report called for a national action to teach bystanders how to respond to injuries and uncontrolled bleeding because they are often on scene and could provide immediate response with the correct level of training.

The American College of Surgeons in partnership with the National Association of Emergency Medical Technicians (NAEMT) developed a medical preparedness training course to teach bystanders to provide immediate interventions to stop and control bleeding. The bystanders or citizens are taught the same life-saving bleeding control techniques used by the military personnel in Iraq and Afghanistan. The goal is to prevent death and increase survivability. The bleeding control course, ***Stop the Bleeding***, is a two-and-a-half hour course designed to train the citizens how to respond and provides hands-on-training to teach the steps of tourniquet application, applying direct pressure, and packing an injury using hemostatic gauze. The overall goal is to educate individuals and communities how to use effective external hemorrhage control measures to save lives.

The Rees-Jones Trauma Center at Parkland is partnering with the regional trauma advisory council to implement the “***Stop the Bleeding***” course. Parkland’s goal is to provide this level of training to all Parkland employees and then to community.

Opportunity

Parkland’s trauma program is requesting the support and resources to create ***Stop the Bleeding*** training kits and resources to train all employees of the main campus and community centers. Once the Parkland employees are trained, trauma requests the opportunity to move this course into the community. Parkland will collaborate with the regional members to train the public.

Parkland’s trauma center is integrating the concepts of the tourniquet application into all of the ATLS, ATCN, TNCC, and other courses taught by trauma. This includes the nurse residency programs coordinated through clinical education at Parkland. We would like to explore the option of adding a training video to the hospital general orientation.

Request

Parkland's trauma center is requesting the opportunity to purchase 200 tourniquets, 50 hemostatic gauze packets, and 50 bleeding wound simulators for training purposes. Parkland's trauma program will assemble 50 training kits. Each training kits will have the necessary resources to teach ten individuals.

Estimated Costs

Tourniquet:	\$25.00 each
Hemostatic Gauze:	\$38.00 each
Simulators:	\$625.00 each
Sports bag:	\$15.00 each

Marketing

Parkland's trauma center is requesting the opportunity to develop a Stop the Bleed brochure for participants who attend the meeting. In addition, we are requesting the opportunity to develop a t-shirt to wear during the classes. These t-shirts will have the Parkland logo and the Stop the Bleed logo (with appropriate approval).

We are requesting the Stop the Bleed training course be added to the Parkland website in addition to the interview clips of the training. In addition, we are requesting an opportunity to develop a video recording of the training to place on the website. Trauma has created an email address stopthebleed@phhs.org to facilitate communication with the public. Requests for community **Stop the Bleeding** training and class scheduling is coordinated through this process.

Parkland has provided 40 classes between June and August. The classes trained over 1400 employees as well as three scout troops and the Dallas BMW Motorcycle Club. Participants commented on the benefit of the course knowledge and skills and event commented on the desire to have additional training. This course provides a direct link between the trauma center and the public. This opens the doors for trauma to comment on our role in the community and explain the difference between a hospital emergency department and a trauma center.

Instructors

The instructors are Parkland trauma employees and UT Southwestern surgeons. These individuals will provide the courses as scheduled with the goal of maintaining their regular work hours without overtime. Each of the trauma nurses is required to participate in injury prevention and outreach educational programs. Teaching this class will meet those requirements.

Commitment

The Rees-Jones Trauma Center at Parkland is requesting Parkland's senior leadership's support and commitment to provide the Stop the Bleeding courses to the community on a continual basis. This is a priority for the trauma center and is an element of our compliance to the American College of Surgeons Trauma Center Verification criteria. Additional information regarding this program is available at www.facs.org/media/press-releases/2015/naemt0715.

Parkland Health & Hospital System
Rees-Jones Trauma Center
Stop the Bleed Educational Program Guidelines

Purpose: To standardize the processes and coordination of the **Stop the Bleeding** classes.

- Guidelines:
1. The course schedule will be approved by the director.
 2. The administrative assistant will schedule all rooms for the courses.
 3. The administrative assistant will copy all course material and prepare the sign-in sheet for the classes.
 - a. Course Materials
 1. Copy of PowerPoint – six slides per page
 2. Pre Test
 3. Post Test
 4. Course Evaluation
 5. Course certificates
 - b. Identify audiovisual equipment available.
 4. The Director or Outreach Education / Injury Prevention Manager will ensure the courses are available on the website and through the hospital management system.
 5. The Director or Outreach Education / Injury Prevention Manager will schedule one lead instructor and instructor assistants.
 6. Instructors must meet the instructor requirement and meet the expectations.
 - a. Instructor requirements – must be current in ATLS, ITLS, PHTLS, ATCN, TNCC, ENPC or a current working paramedic or paramedic instructor
 - b. Instructors expectations – attended a **Stop the Bleeding** class, assisted in a minimum of two class
 7. The instructor ratio is one instructor per ten participants.
 8. The lead instructor is responsible to obtain the equipment for the class.
 - a. Training bag – 1 bag for every ten participants
 - b. Computer and power point (flash drive or on computer)
 - c. Mannequins (one per ten participants)
 - d. Course materials
 9. The lead instructor will complete all travel and reimbursement request a minimum of 30 days prior to the course and ensure all instructors have completed their requests.
 10. If the lead instructor identifies barriers to completing the course, they must notify the director as soon as an issue is defined.
 11. Individuals are considered on the clock with teaching the **Stop the Bleeding** course and must maintain all Parkland Compliance and Conduct procedures.
 - 12. Stop the Bleeding** instructors must wear Parkland uniforms or the identified **Stop the Bleeding** t-shirt.
 13. The course agenda must follow the same format for standardization.

- a. Participants must sign in on the sign-in sheet and complete the course pre-test.
 - b. The instructor will provide each participant with a tourniquet and arrange the equipment and mannequins.
 - c. The lead instructor will ensure the computer and power point are ready and operational.
 - d. The lead instructor will provide the course content and demonstrate the correct application of a tourniquet.
 - e. The lead instructor and instructor assistants will monitor the participants as they place a tourniquet on the lower arm, upper arm, thigh and then on another course participant or instructor, monitoring for the correct application.
 - f. The instructor will continue with the power point then stop and review the application of direct pressure and packing with hemostatic gauze.
 - g. The lead instructor and assistants will allow each participant to practice direct pressure and packing techniques.
 - h. The lead instructor will finish the power point and review the importance of keeping the patient warm, review how to use a tourniquet when a formal tourniquet is not available, and wrap up the power point presentation.
 - i. The lead instructor and assistants will then have the participants complete a scenario demonstrating the use of the course principles: scene safety, notify 911, define injury/bleeding, take action, keep patient warm.
 - j. Scenarios will rotate between the participants to enhance engagement.
14. Instructors must complete all necessary follow-up documentation and submit to the administrative assistant on the next business day.
 15. The Director and the Outreach Education / Injury Prevention Manager will track all course and evaluation summaries to define trends, needs and outcomes.
 16. The Outreach Education / Injury Prevention Manager will include all courses in the quarterly and annual course summary.
 17. The Trauma Medical Director and Director will review all summaries to define needs and outcomes.
 18. The Trauma Medical Director will provide the Senior Leaders an update on the Stop the Bleed activities.
 19. The Director is responsible to provide all documentation to the regional trauma advisory council and the Governor's EMS/Trauma Advisory Council's Trauma System Committee.
 20. The Outreach Education / Injury Prevention Manager is responsible to work with the regional activities to promote the courses.

Example Scenarios

You are at your home. The insurance person is there to inspect your roof. He is on the roof when he slips and falls to the ground. He hits a tree branch on the way down. His right leg appears broken in the thigh area with a wound just above the knee that is spurting bright red blood that is pulsatile. What are your priorities?

You are watching the game at your apartment. You hear a loud commotion outside. You go out to see what is going on. You find out that a 16 year old has been hit by a car while riding his bicycle. His lower leg appears broken with multiple sites bleeding above the ankle. One site has bright red bleeding. What are your priorities?

You stop at a convenience store to pick up drinks on your way to the game party. You are in the back with your roommate when someone enters the store and you hear him yelling at the cashier to give him the money. You hear gunshots fired and the person runs out of the store gets in a car and speeds away. The cashier is calling for help. He has significant bleeding from a wound to his right upper arm above his elbow.

You are at the high school play off football game. One of the grandparents trips and falls in the bleachers and tumbles all the way to the bottom. He has multiple wounds but there is a large wound on his left lower leg with profuse bleeding. His family states he is on blood thinners. What are your priorities?

You and your family are riding ATVs in the country. One of them hits a rock and it flips the ATV over and their left leg is trapped under the machine. You flip it over and find a large gaping wound from the knee to the mid-thigh with profuse bright red bleeding. What are your priorities?

You are at the mall with your partner. Gunfire erupts. People are running. You duck into a store. The mall gets very quiet. You see a woman approximately two feet away with profuse bleeding from her left leg around the knee. What are your priorities?

Trauma team helps ‘*Stop the Bleeding*’

Course designed to teach community members to save lives until EMS arrives

CITY – A person with a life-threatening injury from a car crash or a gunshot wound can bleed to death in three minutes. On average, it takes five to eight minutes for paramedics to respond to a 911 call. But thanks to a class being taught by staff of the _____ Trauma Center at _____, community members can learn how to recognize life-threatening bleeding and administer appropriate medical treatment before professional rescuers arrive.

_____ Stop the Bleeding classes have been adapted from courses including the U.S. Military’s Tactical Combat Casualty Care Guidelines and the Prehospital Trauma Life Support (PHTLS) course and a part of a large, United States Government effort to make “Stop the Bleed” training the CPR of the 21st century. This is an initiative of the Hartford Consensus, the White House and Homeland Security. The goal is to train the citizens of the United States how to assist individuals who have been injured and are bleeding how to respond. This effort will save lives across America.

“This course is designed for the general public with a focus on controlling bleeding,” said _____ in the _____ Trauma Center at _____. “This training is important because events such as home injuries, work injuries, motor-vehicle trauma, can happen at any moment. The new threats in our communities such as the shootings or terrorist related events such as bombings require all citizens to be prepared at all times. –Those precious few minutes can save a life.

Controlling a victim’s bleeding has four primary principles: ensuring your own safety, identifying the injury, stopping the bleeding and keeping the victim warm. It’s paramount, _____, to make sure you are safe so that you can offer assistance to another.

“First direct someone to call 911 or call yourself if no one else is available. You need to identify your location, a person has been injured and they are bleeding. Although you may be panicked it’s important that you keep calm which keeps the injured individual calm, and it enables you to give a clear location and description of the injury to the 911 operator.”.

If your safety is threatened, attempt to remove yourself from danger and find a safe location. For example, if you witness a car crash or one happens in front of your home, make sure you are out of the way of oncoming traffic. In addition, protect yourself from blood-borne pathogens by wearing gloves and eye protection, _____ said.

The ***Stop the Bleeding*** class will teach individuals to recognize life-threatening bleeding and how to control the bleeding on various locations of the body using a tourniquet or other measures such as direct pressure and/or wound packing.

“An individual who is bleeding from an artery can die in as little as three minutes,” said _____, MD, Medical Director and Chief of _____ Trauma Center at _____ Professor of Surgery at _____. “Serious bleeding from an extremity is the most frequent cause of preventable death from an injury. Life-threatening bleeding warrants immediate interventions and in most cases the person

who can provide that immediate care is not a trained healthcare provider or first-responder. Everyone can save a life when minutes count.”

_____ also stressed the importance of having “*Stop the Bleeding*” equipment in your car and home, and keeping gloves and goggles handy in case of an emergency. The equipment includes:

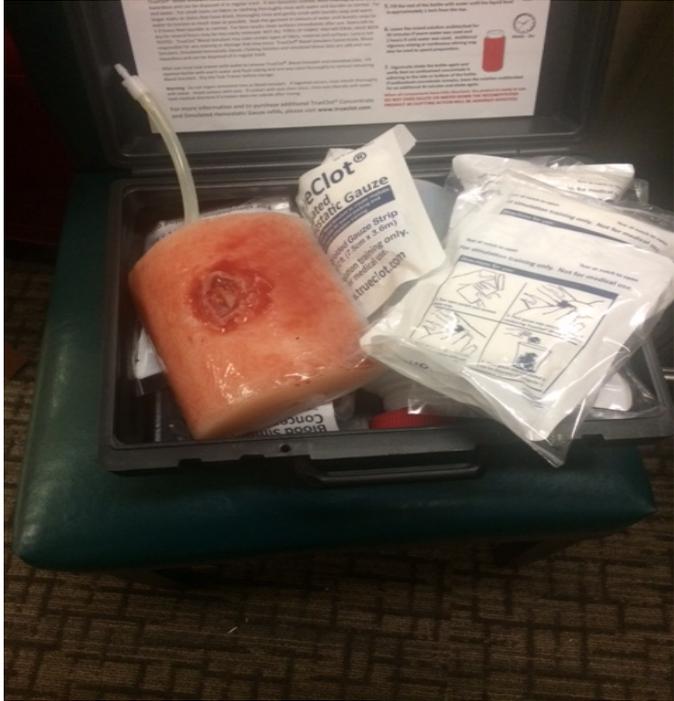
- Tourniquets – 3
- Hemostatic Gauze (Quikclot Combat Gauze) – 3 in each bag
- Adhesive bandage
- Blanket
- Bottles of water
- Flashlight/batteries
- Glow sticks

“I’m a trauma nurse so I carry items I need in my car and home, but I also keep a Zip-lock bag in my purse with a tourniquet, gloves and goggles,” she said. “You never know when something will happen. I want to be prepared.

For more information about _____ Stop the Bleed classes or to request a class be taught at your office, school or agency, contact _____ at stopthebleed@_____.org .

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Example Training Kits



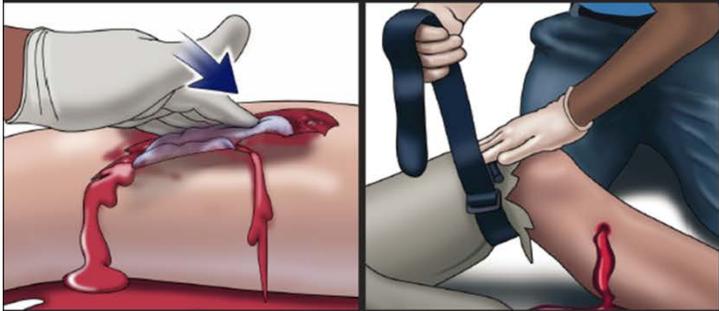
STB Training Shirt





SAVE A LIFE

SAVE A LIFE:
What Everyone Should Know
to Stop Bleeding After an Injury



stopthebleed@phhs.org

STOP the Bleeding Poster
Utilized to Identify the Classroom
Need a Tripod

Course Documents

COURSE EVALUATION

Please answer the following questions about your Instructor and/or Skills Evaluator.

My Instructor and/or Skills Evaluator:

1. Answered all of my questions from the lecture content.
 - a. Yes
 - b. No
2. Provided instruction and help during my skills practice session.
 - a. Yes
 - b. No
3. Was professional and courteous to the students.
 - a. Yes
 - b. No

Please answer the following questions about the course content.

1. The course learning objectives were clear.
 - a. Yes
 - b. No
2. The overall level of difficulty of the course was
 - a. Too hard
 - b. Too easy
 - c. Appropriate
3. The content was presented clearly.
 - a. Yes
 - b. No
4. The quality of the lecture materials were
 - a. Excellent
 - b. Good
 - c. Fair
 - d. Poor
5. The equipment was clean and in good working condition.
 - a. Yes
 - b. No

Please answer the following questions about your skill mastery.

1. I am confident I can use the skills the course taught me.
 - a. Yes
 - b. No
 - c. Not Sure

2. I will respond in an emergency because of the skills I learned in this course
 - a. Yes
 - b. No
 - c. Not Sure

Were there any strengths or weaknesses of the course that you would like to comment on?

After Completing This Evaluation

Please return this evaluation to your Instructor before you leave the class. Thank you for participating in our learning activity. The Instructor and/or Skills Evaluator value your comments in improving future courses.

Date: _____ Instructors: _____

Location: _____



Bleeding Control (B-Con) Course

Stop the Bleed

Course Documents

Stop the Bleeding Pre / Post Test

Please answer the following questions about your knowledge of how to stop the bleeding.

1. *What is one of the most common causes of preventable death in injured people?*
 - a. *Infections*
 - b. *Breathing difficulties*
 - c. *Uncontrolled bleeding*
 - d. *Burns*

2. *Which of the following is one of the four primary principles of the B-Con course?*
 - a. *Always remain with the injured person*
 - b. *Ensure your own safety*
 - c. *Tell everyone to call 911*
 - d. *Help the victim, even if you are injured*

3. *A victim who is bleeding from an artery can die in as little as how many minutes?*
 - a. *3 minutes*
 - b. *5 minutes*
 - c. *8 minutes*
 - d. *10 minutes*

4. *True or False. Tourniquets are used for junctional location wounds.*
 - a. *True*
 - b. *False*

5. *This type of bleeding can be life-threatening and is usually dark red in color and flows steadily from the wound.*
 - a. *Bleeding from an artery*
 - b. *Bleeding from a vein*
 - c. *Bleeding from capillaries*
 - d. *Bleeding from the chest or abdomen*

6. *True or False. Direct pressure and packing will stop most bleeding.*
 - a. *True*
 - b. *False*

7. *Bleeding from the chest or abdomen can best be controlled with what method of bleeding control?*
 - a. *Tourniquet*
 - b. *Direct Pressure*
 - c. *First Responders*
 - d. *Hospital Staff*



Bleeding Control (B-Con) Course
Stop the Bleed
Course Documents

8. *Keeping the victim warm to minimize further bleeding is one of the four priorities of the B-Con course. What techniques can you implement to keep the victim warm?*

- a. *Keep the victim in their blood soaked clothing*
- b. *Do not cover the victim with a blanket so first responders can see their wounds*
- c. *Minimize the victim's exposure to the elements*
- d. *Use ice to help stop the bleeding*

9. *List the Four Primary Principles of the B-Con Course.*

- 1. _____
- 2. _____
- 3. _____
- 4. _____

Bleeding Control (B-Con) Course
 Stop the Bleed
 Course Documents



Class Sign-In Sheet

Name	Email Address	Home Zip Code	Work Zip Code	Define Health Care Provider Status
				__MD __RN __APP __LP __EMT-P __EMT __First Responder __Other Healthcare __Non Health care
				__MD __RN __LP __EMT-P __EMT __First Responder __Other Healthcare __Non Health care
				__MD __RN __LP __EMT-P __EMT __First Responder __Other Healthcare __Non Health care
				__MD __RN __LP __EMT-P __EMT __First Responder __Other Healthcare __Non Health care
				__MD __RN __LP __EMT-P __EMT __First Responder __Other Healthcare __Non Health care
				__MD __RN __LP __EMT-P __EMT __First Responder __Other Healthcare __Non Health care
				__MD __RN __LP __EMT-P __EMT __First Responder __Other Healthcare __Non Health care
				__MD __RN __LP __EMT-P __EMT __First Responder __Other Healthcare __Non Health care
				__MD __RN __LP __EMT-P __EMT __First Responder __Other Healthcare __Non Health care
				__MD __RN __LP __EMT-P __EMT __First Responder __Other Healthcare __Non Health care

Bleeding Control (B-Con) Course
Stop the Bleed
Course Documents

