## TCCC QUIZ BURNS, ANALGESIA, AND BROKEN BONES

1.	What is the goal of analgesia?
2.	What is the goal of sedation?
3.	How is pain management achieved?
4.	How are burns to be treated?
5.	What actions are taken for fractures?
6.	What are signs that an extremity may require a splint?
7.	What is the process of splinting?
8.	What additional step is taken for splinting an arm injury?
9.	What should you do immediately after applying a splint?
10.	What materials work well as splints?

## TCCC QUIZ BURNS, ANALGESIA, AND BROKEN BONES

- 1. What is the goal of analgesia?
  - a. To reduce pain to a tolerable level while still protecting their airway and mentation.
- 2. What is the goal of sedation?
  - a. The goals is to stop awareness of painful procedures.
- 3. How is pain management achieved?
  - a. Analgesia on the battlefield should generally be achieved by one of three options:
  - b. Mild to Moderate Pain and/or Casualty can swallow and is still able to fight:
  - c. -Administer TCCC Combat Wound Medication Pack (CWMP)
  - d. Moderate to Severe Pain and casualty IS NOT in Shock
  - e. -Oral Transmucosal Fentanyl Citrate (OTFC) 800mcg
  - f. Moderate to Severe Pain and casualty is in hemorrhagic shock or respiratory distress
  - g. -Administer Ketamine 50mg IM or IN repeating q30min prn OR -Administer Ketamine 20mg Slow IV or IO repeating q20min prn \*Endpoint control of pain or development of nystagmus. \*Consider Ondansetron 4mg ODT/IV/IO/IM q8hours prn for nausea and vomiting
- 4. How are burns to be treated?
  - a. Facial burns should be aggressively monitored for airway status and potential inhalation injury. Estimate total body surface area (TBSA) burned to nearest 10%. Cover burned areas with dry, sterile dressings.
  - b. For burns >20% TBSA, consider placing casualty immediately in HPMK or other hypothermia prevention means. Fluid Resuscitation (USAISR Rule of Ten):
  - c. -If burns >20% TBSA, initiate IV/IO fluids ASAP with Lactated Ringers, NS, or Hextend. If Hextend, then no more than 1000ml followed by LR or NS as needed.
  - d. -Initial IV/IO fluid rate = %TBSA X 10ml/per hour for adults 40-80 kg (+100ml/hr for every 10kg above 80kg).
  - e. -If hemorrhagic shock is present then resuscitate IAW fluid resuscitation in Circulation section. All TCCC interventions may be performed on or through burned skin.
- 5. What actions are taken for fractures?
  - a. Splint Fractures and Recheck Pulses.
- 6. What are signs that an extremity may require a splint?
  - a. Pain at a specific location
  - b. Severe bruising
  - c. False joint (Extremity is bending where is isn't supposed to).
  - d. Feeling a snap or a pop in your limb
- 7. What is the process of splinting?

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- a. Check patients circulation, motion, and sensation in the injured extremity.
- b. Stabilize the extremity as still as possible
- c. Size the splint to the uninjured extremity.
- d. Apply splint over/under injured limb.
- e. Use roller gauze or bandage to wrap the splint onto the injured extremity.
- 8. What additional step is taken for splinting an arm injury?
  - a. Immobilize the elbow joint by applying a triangular bandage to create a sling.
- 9. What should you do immediately after applying a splint?
  - a. Check injured extremity for circulation, motion, and sensation. If the patient loses circulation, motion, and sensation after splint application, you need to reassess the splint and check if it is too tight.
  - b. Evac patient to trauma center as soon as possible.
- 10. What materials work well as splints?
  - a. SAM Splints work well with roller gauze or bandages.
  - b. Splints can be improvised with rigid, flat objects that span the length of the injured extremity.