#### Skill Sheet

## Junctional Emergency Treatment Tool (JETT™)

Objective: Demonstrate the proper application of a Junctional Emergency Treatment Tool.

References: Junctional Emergency Treatment Tool (JETT ) Instructions Overview, http://www.narescue.com/portal.aspx?CN=73330B0D4AFF

<u>Evaluation</u>: Student will be evaluated as a Pass/Fail (P/F). The instructor will verify the student's ability to quickly and effectively apply a Junctional Emergency Treatment Tool to a fellow student by observing the student's procedure and techniques.

#### Materials:

Student Checklists
Junctional Emergency Treatment Tool
JETT<sup>™</sup> Video
Students perform on each other

#### **Instructor Guidelines:**

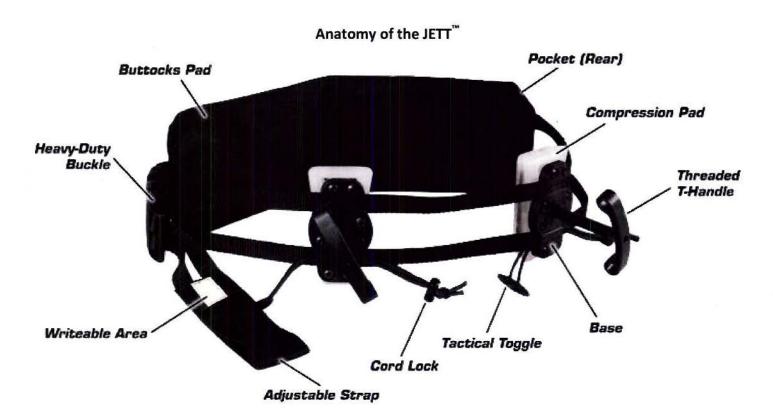
- 1. Provide each instructor with Student Checklists.
- 2. Ensure each student has all required materials
- 3. Read the Learning Objective and the evaluation method to the student.
- 4. Explain the grading of the exercise.

The Junctional Emergency Treatment Tool (JETT<sup>™</sup>) includes two individually adjustable compression pads in a single tool, allowing for simultaneous occlusion of blood flow to both lower limbs (bilateral) with an easy to apply, pre-assembled, ready-to-use belt solution. The unique design of the JETT<sup>™</sup> allows for patient transport while the device is in place and includes a lanyard and toggle solution to ensure that the Threaded T-Handle (windlass axle) does not loosen due to vibration or bumps during transport.

In cases where there are bilateral injuries, the JETT<sup>™</sup> offers a simple, safe solution for occluding blood flow to both lower extremities. This expanded capability is built into every JETT meaning that with standardized training the device will be pre-positioned for rapid bilateral application whether the casualty requires a unilateral or bilateral treatment.

High extremity wounds in the thigh/groin region where tourniquets cannot be placed or are less effective require equipment such as the JETT<sup>™</sup> to stop the bleeding and potentially save the life of a casualty that would otherwise bleed out in minutes. Penetrating trauma, blast injuries and amputation are examples of injuries that may require treatment with this device.

While placing direct pressure in the inguinal area over the femoral artery, a trained provider can apply the Junctional Emergency Treatment Tool quickly and easily.



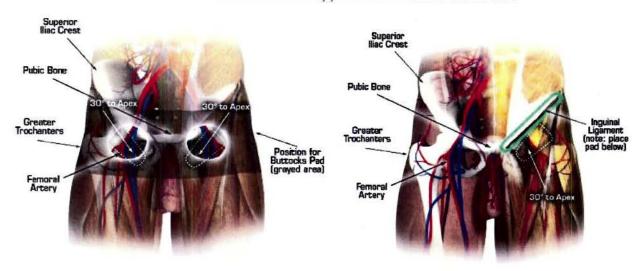
## **i** Instructions For Use

#### Step 1: ASSESSMENT

- 1.1 Determine that the injury is not amenable to treatment with a standard tourniquet (ie: high in the thigh and/or groin region)
- 1.2 Determine if a bilateral or unilateral application is required
- 1.3 Apply direct pressure to the inguinal area over the femoral artery on one or both extremities, as required. (Maintain constant pressure until device is completely in place.)

## **Step 2: PATIENT PREPARATION**

2.1 Remove any gear, items in pockets or debris that might interfere with the placement of the JETT<sup>™</sup> or cause additional trauma



#### Step 3: DEVICE DEPLOYMENT

- 3.1 Unroll the device in preparation for application
- 3.2 Placement of JETT"
  - 3.2.A Slide the belt with "This Side Toward Casualty" facing up under the body at the lower back
  - 3.2.B Locate the Superior Iliac Crest and Pubic Bone, which are connected by the Inguinal Ligament
  - 3.2.C Lifting the hips, position the belt under the buttocks so that the buttocks pad is centered behind the casualty and the pressure pads are immediately below (inferior to) the Inguinal Ligament
- 3.3 Initial Placement of the Pressure pads
  - 3.3.A Palpate to determine the location of the Inguinal Ligament
  - 3.3.B Angle the pressure pads parallel to the Inguinal Ligament (approximately 30°) pointing midline toward the feet making sure that both pads are correctly positioned
  - 3.3.C Ensure that casualty's genitals are clear of the area where the pads will be positioned
- 3.4 Buckle the belt, then firmly tighten by pulling the loop handle while stabilizing the belt with your other hand on top of the belt on the casualty (remove ALL slack)
- 3.5 Reassess the pad placement to ensure that they are still in the correct location below the inguinal ligament
- 3.6 With one hand on the base plate, grip the threaded T-handle and rotate it clockwise to tighten
- 3.7 Increase pressure until bright red bleeding stops (hemostasis is achieved) and If the extremity is intact, check to confirm that distal pulse has been occluded
- 3.8 Insert the toggle into the opening on the threaded T-handle (pulling the handle in clockwise rotation) and cinch it tight at the base plate in order to secure the device
- 3.9 Repeat as necessary with the other threaded T-handle for bilateral injuries
- 3.10 Note time of application on Writeable Area on the JETT™



### Step 4: Monitoring JETT™ and Patient Reassessment

- 4.1 Assess frequently (every 5 minutes) to ensure that bleeding is still controlled (or based on your medical protocols)
- 4.2 Assess after any movement to ensure that pressure pads are in correct location and that pressure was not reduced during movement (hemostasis is maintained)
- 4.3 Device should only be removed under physician supervision (or based on your medical protocols)
- 4.4 Device application should not exceed 4 hours

#### Step 5: Documentation

- 5.1 Document JETT placement and time of placement on the TCCC card.
- 5.2 Include JETT<sup>™</sup> placement time on patient AAR following the mission.

# Student Checklist Control Bleeding Using a Junctional Tourniquet

TASK Completed 2<sup>nd</sup> Determine need for junctional tourniquet and application of direct pressure to inguinal area over P / F P / F P / F the femoral artery unilaterally or bilaterally depending on injuries noted Applied direct pressure if required while applying the JETT device P / F P/F Applied the JETT<sup>™</sup> with the belt positioned under the buttocks and the pressure pads P / F immediately below the Inguinal Ligament Removed all slack in the belt prior to tightening down the T-handle(s), ensuring pressure pads P / F P / F are correctly positioned (ensured genitals are clear of pads) Assessed for hemorrhage control and checked that distal pulse has been occluded once T-P / F P / F P / F handles are tightened down P / F Secured T-handle with toggle and cinched cord lock to secure device P / F P / F Verbalized recording the time of application on the JETT label and the TCCC Card P / F P / F Correctly positioned the casualty on the litter; reassessed JETT™ placement and for occlusion of P / F distal pulses. Verbalized requirement to reassess patient every 5 minutes P / F P / F P / F

Critical Criteria:	
Did not ensure manual pressure applied and maintained during assessment and pla	acement of JETT   T
Did not correctly position the JETT	
Did not assess for control of bleeding	
Did not secure JETT <sup>™</sup> properly prior to placing patient on litter	
Evaluator's Comments:	
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Student Name: [	Date:
Evaluator	)ata: