

## USAMMDA INFORMATION PAPER

### PRODUCT: ONE-HANDED TOURNIQUET

**DESCRIPTION:** The One-Handed Tourniquet (OHT) is intended to provide an individual who has lost the use of one of his extremities a method for the control of a severe life-threatening hemorrhage. The goal is to have a tourniquet that can be applied with only the use of one hand, and will stop severe arterial, venous, or mixed bleeding.

**PROGRAM RELEVANCE to the ARMY:** This product supports both the core mission of the Army and the Army Campaign Plan. Of the Army's core competencies, this product supports "Forcible Entry Operations" and "Sustained Land Dominance," as well as "Support of Civil Authorities." In any conflict or civilian disaster, it is an unfortunate fact that there will be casualties with severe bleeding, some of whom may have the use of only one hand and be unable to receive help. This product enables the soldier who has lost the use of one arm, and has no buddy near to apply the tourniquet with one hand, and potentially save his life. This product supports Future Operational Capabilities: MD-02-001 Clearing the Battlefield, MD-02-002 Hospitalization, MD-02-003 Medical Force Protection, and MD-02-004 Combat Health Logistics.

### ISSUES/ACTIONS:

- Twenty thousand units were obtained with 5,000 units delivered to the Special Forces, 10,000 units to the U.S. Army Medical Materiel Agency (USAMMA) to be delivered to Germany, and 5000 units were distributed to other deploying forces.
- To support the current operation, it was decided to provide each Combat Medic with three units and each combat Life Saver with two.
- A transportable training package has been developed that will be provided to each group getting the OHT.
- The U.S. Army Institute of Surgical Research (USAISR) has developed a Human Use Protocol to assess in-depth the efficacy of the OHT. The U.S. Army Medical Department Board (AMEDDBD) is assessing the human factor requirements of the device. Initial results from the study shows that the device is effective for upper extremity wounds and lower extremity wounds below the knee. The device appears to be about 50 percent effective when used on the upper thigh. More studies are underway and samples from industry and academia are being evaluated for effectiveness. This information requires that the Milestone C be postponed until a solution is found for the upper thigh problem.

### ADDITIONAL INFORMATION:

**BPL #** 427

**DA PROJECT/TASK:** Trauma Management –  
PE/PROJ 643807/836DC

**MAMP RANK:** 22/36

**ARMY ORD:** Draft

### SCHEDULE:

MS A	4QFY01
MS C	4QFY05
FRP	2QFY06

**For additional information, contact:** Applied Medical Systems, DSN 343-7582, Comm. 301-619-7582