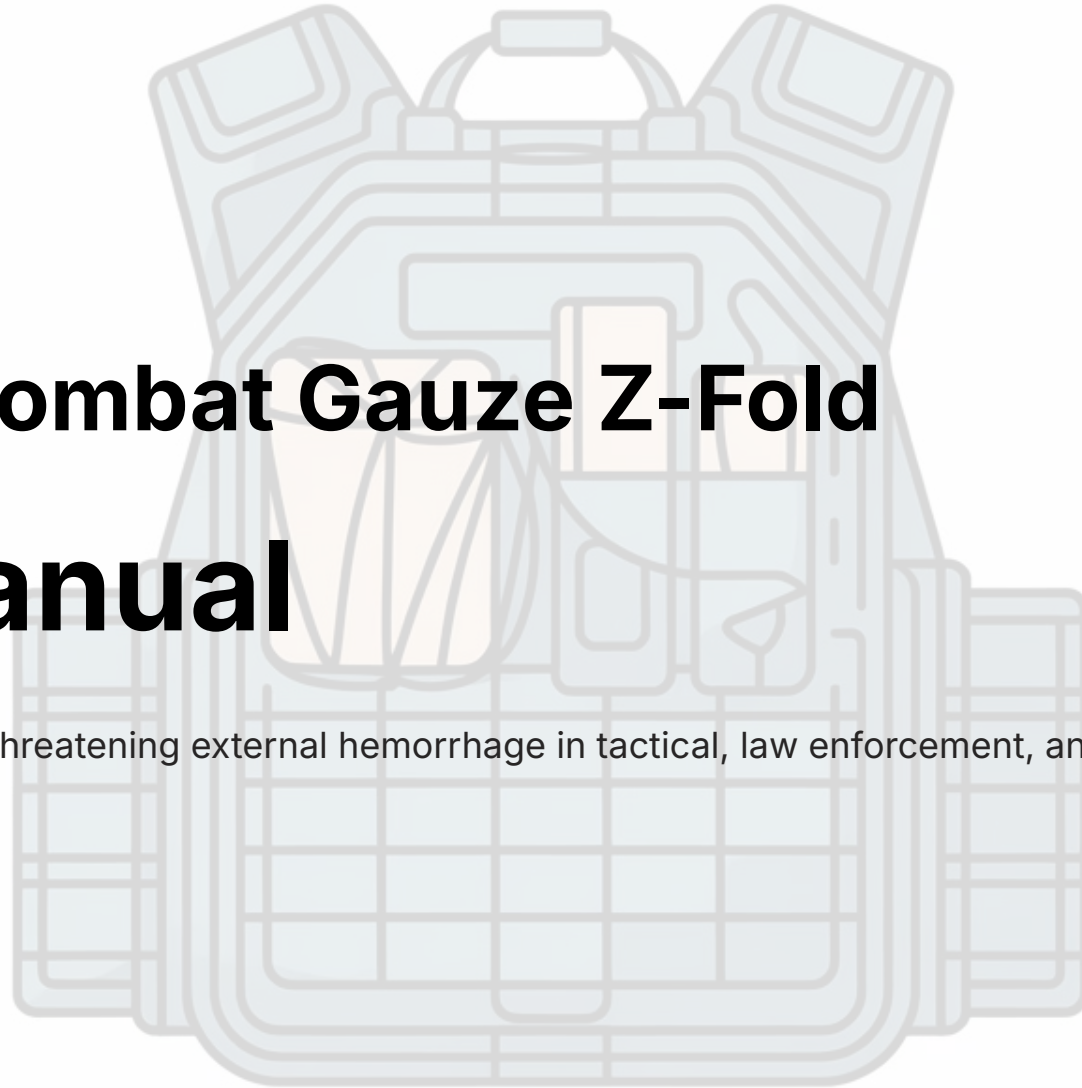


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QuikClot Combat Gauze Z-Fold Field Manual

Hemostasis control for life-threatening external hemorrhage in tactical, law enforcement, and high-risk civilian environments.



SECTION 1

Mission Brief & Intended Use

Primary Mission

Achieve hemostasis (control of bleeding) in casualties with **life-threatening external hemorrhage** from penetrating or complex wounds not amenable to tourniquet application.

Primary tool for **junctional hemorrhage control** — groin, axilla, neck — and deep tissue wounds.

Functional Description

QuikClot Combat Gauze is a sterile, **3-inch by 4-yard** strip of non-woven gauze impregnated with a proprietary, inert, non-allergenic mineral agent.

- Accelerates the body's natural clotting cascade upon contact with blood
- Does **not** generate heat — no secondary thermal injury
- Designed to be packed directly into the wound cavity to contact the bleeding vessel(s)



Tactical / Combat

Gunshot wounds, shrapnel injuries from explosive devices.



Law Enforcement

Penetrating trauma from gunshot or stabbing incidents.



Civilian / High-Risk Industry

Deep lacerations from industrial machinery, vehicle accidents, or remote environment injuries.

SECTION 2

Equipment & Component Familiarization

Grouped by Operational Purpose



Packaging Group

- **Vacuum-Sealed Foil Pouch:** Ensures sterility; compact, low-profile for IFAKs, trauma packs, or vehicle kits. Seal integrity is the primary readiness indicator.
- **Multiple Tear Notches:** Enables rapid, gloved-hand opening from any corner under stress — no fine motor skills or cutting tools required.



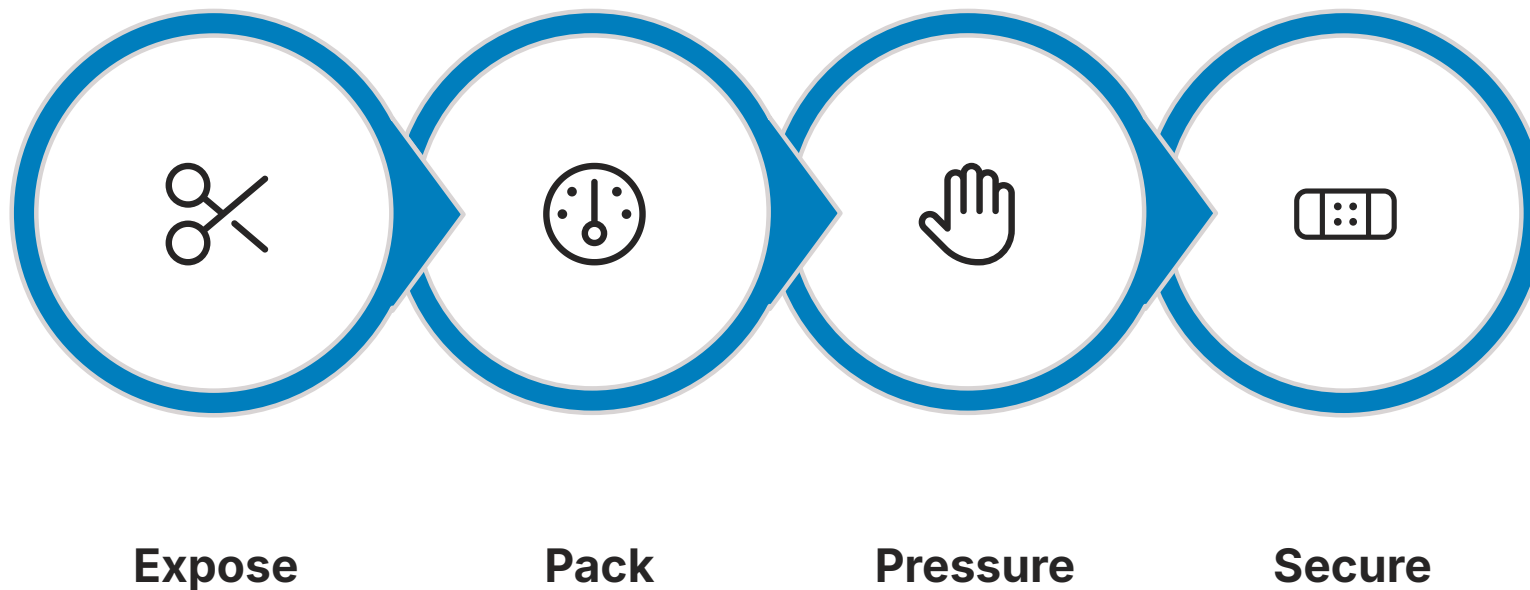
Hemostatic Dressing Group

- **Z-Folded Gauze Strip (3" × 4 yds):** Prevents gauze from rolling away or contamination if dropped. Allows single-hand feeding directly from pouch into wound cavity.
- **Proprietary Hemostatic Agent:** Rapidly absorbs water from blood, concentrating clotting factors and platelets to form a robust clot. Produces no heat.
- **X-Ray Detectable Strip:** Opaque to X-rays; allows surgical staff to confirm complete removal of all packing material prior to definitive wound closure.

SECTION 3

Standard Operating Procedure

- Scenario: Casualty with deep laceration to the upper inner thigh from shrapnel at a mass casualty incident. Tourniquet not feasible due to high wound location. **Arterial bleeding observed.**



Each step is interdependent — skipping or shortcutting any phase compromises hemostatic effectiveness and risks casualty deterioration.

SECTION 3 — DETAIL

SOP: Step-by-Step Actions & Rationale

1 Expose & Identify

Cut away clothing to fully expose the wound. Wipe pooled blood with plain gauze to identify the **exact bleeding source**. You cannot treat what you cannot see — pooled blood obscures the true hemorrhage point.

3 Apply Pressure

Apply firm, direct, continuous pressure with **both hands for a minimum of 3 minutes**. Do not release to check. Releasing pressure prematurely disrupts clot formation and reverses hemostatic action.

2 Pack the Wound

Open at tear notches. Using fingertips, push the gauze end directly **onto the bleeding source**. Feed and pack tightly, filling the entire cavity. Methodical packing — not stuffing — ensures pressure contacts the damaged vessel. The hemostatic agent requires direct contact to function.

4 Secure & Reassess

Slowly release and inspect. If controlled, secure with a pressure dressing or elastic wrap. If bleeding continues, apply a **second unit on top** and re-apply pressure for 3 more minutes. Document hemostatic agent use and time of application on the casualty card.

SECTION 4

Critical Warnings, Limits & Safety

Training Prerequisite

Wound packing is an **invasive medical procedure** requiring hands-on training from a qualified instructor. Improper application can fail to control hemorrhage or cause additional harm. This manual is a procedural guide — **not a substitute for training.**

Scope of Practice

All personnel must operate within their level of training, certification, and **agency-specific medical protocols**. Unauthorized use may result in legal liability.

Operational Limitations

- **External use only.** Do NOT pack the chest cavity, abdomen, or airway.
- Reserved for life-threatening hemorrhage where standard dressings fail.
- Effectiveness may be reduced in casualties with hypothermia or coagulopathies.

Critical Safety Protocols

- **DO NOT REMOVE** in the field — removal dislodges formed clots and causes re-bleeding. Removal is a surgical/clinical procedure only.
- **SINGLE USE** — sterile, single-patient. Do not sterilize or reuse. Discard after use.
- **PPE Required** — always use medical gloves and eye protection to prevent bloodborne pathogen exposure.

SECTION 5

Readiness, Inspection & Sustainment

Inspection Schedule

Visually inspect all carried units during **every gear check**, and at a minimum **monthly**.

Packaging Integrity

- Verify vacuum seal is intact — package should be **flat and rigid**.
- If loose or contains air, seal is compromised — gauze is no longer sterile.
- Relegate compromised units to **training use only**. Replace immediately in operational kit.

Expiration Date

- Check the manufacturer's expiration date printed on the package.
- Rotate and replace stock **before** the expiration date is reached.
- Clearly mark expired units and use for **training only**.

Storage Conditions

- Store in a **temperature-controlled, dry environment**.
- Avoid prolonged exposure to extreme heat, cold, or direct sunlight.
- When carried in an IFAK, protect packaging from **punctures or abrasion** from adjacent equipment.

3"

Gauze Width

Standard strip width for wound packing

4 yds

Gauze Length

Per single unit of Combat Gauze

3 min

Min. Pressure Time

Continuous direct pressure required per application

1x

Single Use

Sterile, single-patient — never reuse or re-sterilize