

PR04: Wound Packing

Applicable To

- FR and higher

Introduction

Wound packing is a technique of internal direct pressure that places gauze material directly on the lacerated blood vessels in an attempt to control bleeding.

Indications

- Wound packing is indicated for penetrating wounds where bleeding cannot be controlled using direct pressure alone. It is an ideal technique for injuries to junctional areas of the body, including the groin and axilla, where tourniquets are ineffective and direct pressure can be difficult to maintain.

Contraindications

- Do not pack wounds on the neck, chest, or abdomen. There is a risk of airway compromise when packing neck wounds. Wound packing is unlikely to be effective on the chest or in the abdomen due to the nature of these injuries.

Procedure

- Ensure appropriate protective equipment is used, including eye protection or face shields.
- Obtain and open multiple packages of gauze. Sponges may be used if roll gauze is not available.
- Insert fingers into the wound to provide direct pressure on the target blood vessels; ideally, the artery or vein (or both) should be compressed against a bone while packing material is being readied.
- Pack the wound tightly with gauze. Continue applying pressure during the packing process, alternating fingers if necessary. Ensure the packing material reaches as deeply into the wound cavity as possible.
- When the wound cannot accommodate any more packing material, apply very firm direct pressure to the wound and packing material for at least three minutes to allow the clotting process to begin. If bleeding continues, consider packing more material into the wound.
- Secure the wound packing with a pressure dressing and convey immediately (if not already en route). Immobilization of the injury may help to limit recurrence of bleeding.

Resources

References

