

SECURITY RISK BRIEF

Stop the Bleed: Turning Your Community into Immediate Responders

See Something, Say Something. Run, Hide, Fight. Both are well-known phrases in the new normal of constant threat awareness. But there is another important phrase becoming part of the safety and security lexicon at the urging of the American College of Surgeons and the United States Departments of Defense and Homeland Security: 'Stop the Bleed'.

When a mass casualty event occurs – whether the all-too-familiar active shooter incidents as at Sandy Hook or Las Vegas or an explosive device as at the Boston Marathon bombing or the Ariana Grande concert in Manchester – first responders rush to the scene as soon as possible. Unfortunately, those initial minutes between infliction of injury and arrival of paramedics are critical. If a bleeding injury is severe, it may prove fatal if left untreated (a victim bleeding from an artery can die in as little as three minutes). Analyses of recent mass casualty events show that at times, whether victims survived or died had to do with the presence or absence of bystanders who had the knowledge and fortitude to intervene. The "Stop the Bleed" campaign seeks to give the general public the tools and knowledge to become life-saving first care providers.

What is "Stop the Bleed"?

In the wars of Afghanistan and Iraq, military medicine has made great strides in combat casualty care: treatment of severe bleeding wounds caused by gun and mortar fire and unpredictable improvised explosive devices (IEDs). Actions like quickly applying a tourniquet and using sufficient gauze and packing – and having such materials available – have greatly increased the survival rate of servicemen and women injured in these conflicts. Additionally, rudimentary training has converted large numbers of front line military personnel into immediate responders, able to offer life-saving treatment until more formal medical care is available.

A grim reality is that domestic mass casualty events often result in similar injuries to those inflicted on the battlefield. The Boston Marathon bombing utilized an IED that caused just as serious injuries, particular to the legs, as those seen from IEDs in Afghanistan and Iraq. Similarly, the weapons used in Sandy Hook and more recently in the Orlando nightclub, Las Vegas, and other shootings were variants of the AR-15, a military-style rifle. The same techniques developed for treating combat injuries therefore translate to mass casualty events at home.



“Stop the Bleed is a nationwide campaign to bring this battlefield knowledge to the general public. Coordinated by the White House’s National Security Council Staff, the Department of Defense, and the Department of Homeland Security, its aim is to empower individuals to act quickly and save lives. Individuals are transformed from bystanders into “immediate responders” or “first care providers” who can literally stop the bleeding until help arrives. The campaign builds off of the work of the American College of Surgeons’ (ACS) Hartford Consensus. The Hartford Consensus, a private-public partnership led by the ACS, is an ongoing series of recommendations that first grew out of a response to the mass shooting tragedy at Sandy Hook. This Consensus now works in coordination with the Department of Homeland Security to support Presidential Policy Directive 8, a comprehensive Directive “aimed at strengthening the security and resilience of the U.S. through systematic preparation for the threats that pose the greatest risk to the security of the nation,” including mass casualty events (as stated by DoD/DHS). Together, the ACS, DoD, DHS and other organizations collaborate to provide training materials and other resources, as well as detailed policy information, to the American public to promote Stop the Bleed.

What It Means for You

Many businesses, venues and schools already have various types of training for active shooter or other emergency events. Some also offer several levels of first aid and AED training. The Stop the Bleed campaign encourages the public to prepare for the worst case scenarios and ready everyone – staff, students, and other members of the community – to act. To this end, Stop the Bleed and its partners offer a two-pronged solution: promoting distribution of bleeding control kits and training people in injury response and specifically in how to use the tools in the kits.

Contents of a kit may vary, but most contain items like gloves; tourniquets; emergency bandages and packs of gauze; and trauma shears. A school of thought is that kits should hang alongside every AED in a building, sit next to first aid kits, and go out with every first responder’s vehicle. Many law enforcement and other first responder agencies provide variations of the kits that personnel can wear when on patrol.

For purposes of training, best practice suggests training your first responders in combat casualty care is of primary importance. Strong consideration should go to offering it more broadly if such is feasible, as the unpredictability of mass casualty events means that any member of the public might be an immediate responder. If you have a practice for offering first aid and related training to a wider variety of community members, willing participants could also be offered this type of training.

Conclusion

The ever-present threat of a mass casualty event – and even everyday events like car accidents that cause serious bleeding injuries – means businesses, public facility and venue operators, and schools should consider what they are doing to prepare. Stop the Bleed is an important preparatory measure to consider.

For more information, please visit:

- The American College of Surgeons: <https://www.facs.org/>
- ACS Hartford Consensus: <https://www.facs.org/about-ac/hartford-consensus>
- BleedingControl.org: <http://www.bleedingcontrol.org/>
- The Department of Homeland Security: www.dhs.gov; <https://www.dhs.gov/stopthebleed>
- Presidential Policy Directive 8: National Preparedness: <https://www.dhs.gov/presidential-policydirective-8-national-preparedness>

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