



EVAC CATEGORY: \_\_\_\_\_ BATTLE ROSTER #: \_\_\_\_\_

NAME (Last, First): \_\_\_\_\_ LAST 4: \_\_\_\_\_

GENDER:  M  F DATE (DD-MMM-YY): \_\_\_\_\_ TIME: \_\_\_\_\_

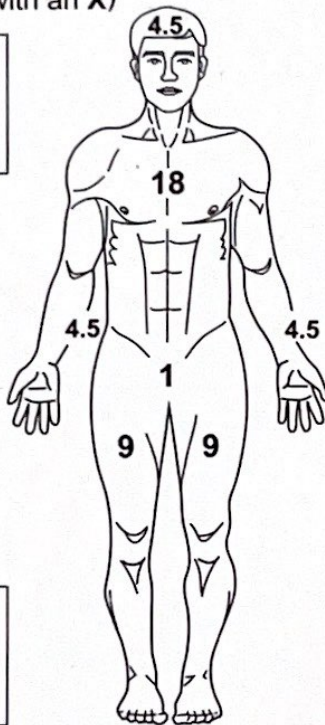
SERVICE: \_\_\_\_\_ UNIT: \_\_\_\_\_ ALLERGIES: \_\_\_\_\_

**Mechanism of Injury:** (X all that apply)

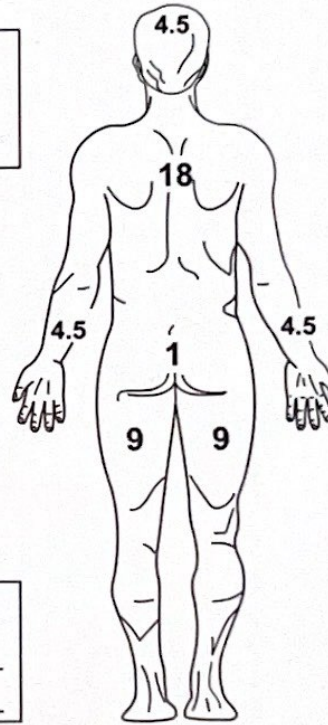
- Artillery     Blunt     Burn     Fall     Grenade     GSW     IED
- Landmine     MVC     RPG     Other: \_\_\_\_\_

**Injury:** (Mark injuries with an X)

**TQ: R Arm**  
 TYPE: \_\_\_\_\_  
 TIME: \_\_\_\_\_



**TQ: L Arm**  
 TYPE: \_\_\_\_\_  
 TIME: \_\_\_\_\_



**TQ: R Leg**  
 TYPE: \_\_\_\_\_  
 TIME: \_\_\_\_\_

**TQ: L Leg**  
 TYPE: \_\_\_\_\_  
 TIME: \_\_\_\_\_

**Signs & Symptoms:** (Fill in the blank)

Time				
<b>Pulse (Rate &amp; Location)</b>				
<b>Blood Pressure</b>	/	/	/	/
<b>Respiratory Rate</b>				
<b>Pulse Ox % O2 Sat</b>				
<b>AVPU</b>				
<b>Pain Scale (0-10)</b>				



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**Treatments:** (X all that apply, and fill in the blank)

*Type*

**C: TQ-**  Extremity  Junctional  Truncal \_\_\_\_\_

Dressing-  Hemostatic  Pressure  Other \_\_\_\_\_

**A:**  Intact  NPA  CRIC  ET-Tube  SGA \_\_\_\_\_

**B:**  O2  Needle-D  Chest-Tube  Chest-Seal \_\_\_\_\_

**C:**

	Name	Volume	Route	Time
<b>Fluid</b>				
<b>Blood Product</b>				

**MEDS:**

	Name	Dose	Route	Time
<b>Analgesic</b> (e.g., Ketamine, Fentanyl, Morphine)				
<b>Antibiotic</b> (e.g., Moxifloxacin, Ertapenem)				
<b>Other</b> (e.g., TXA)				

**OTHER:**  Combat-Pill-Pack  Eye-Shield (  R  L )  Splint  
 Hypothermia-Prevention Type: \_\_\_\_\_

**NOTES:**

**FIRST RESPONDER**

**NAME** (Last, First): \_\_\_\_\_

**LAST 4:** \_\_\_\_\_