

# General Instructions for JTS MASCAL/Trauma Resuscitation Form

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**PURPOSE:** The MASCAL/Austere Trauma Team Resuscitation Record is an abridged version of the Resuscitation Record DD 3019 to be used in austere trauma scenarios and during mass casualty events when an individual cannot be dedicated to documentation. *The Resuscitation Record DD 3019 should be used preferentially for trauma evaluations.*

This form documents a trauma patient's injuries and related medical treatment and resuscitation care provided at medical treatment facilities (MTFs). It is to be used at all DoD MTFs which have a surgical capability or emergency department. The form is broken into prehospital interventions, initial – primary – survey and the more comprehensive secondary survey. The completed MASCAL Form becomes part of the patient's permanent DoD medical record.

## GENERAL INSTRUCTIONS

- This instructions only address the section which require explanation or clarification.
- The nurse fulfilling the role as a scribe or the nurse providing bed side care will complete the Transport and Interventions Prior to Arrival sections.
- The trauma care physician tending to the patient will complete the Primary Survey and Secondary Survey.
- Time Zones: Record all time local 24 hour military format, hh:mm
- A + (plus sign) means positive test result; a - (minus sign) means negative test result.

**PATIENT IDENTIFICATION** (at bottom of page). As stated.

**FACILITY NAME.** Record your MTF unit identifier

**FACILITY LOCATION.** Record FOB, COB, or geographic site

**MOS.** Military Occupational Specialty

**AFSC.** Air Force Specialty Code

**NEC.** Navy Enlisted Classification

## PATIENT/TRANSPORT INFORMATION NOTES

**EVAC FROM.** Check all that apply. Location is the facility name.

**INJURY CAUSE.** Check all that apply. If Other, describe cause of the injury.

**Building Collapse:** Entire building or wall collapses and causes injury

**Bullet/GSW:** Ballistic Injury

**Fall:** Injury caused by fall from differing or same level of height

**MVC:** Injured while inside a moving vehicle prior to the occurrence causing harm to the vehicle occupants.

**Burn/Fire/Frame/Hot Obj:** Burn injury with no documented mechanism (Use by exception only when sources exhausted)

**Fire/Flame:** Injury caused by direct contact with fires or flames

**IED NFS/VBIED/PBIED:** Improvised explosive device (Add P=Person, V=Vehicle, NFS=Not Further Specified) Inhalation Injury: Injury causing damage to the airway from the nasal cavity to the lungs

**Knife/Other Sharp Obj**

**Mortar/Rocket/Artillery:** Indirect or Direct Fire (Circle specified Cause)

**Mine:** Injury resulting from detonation of ordnance

**Sports:** Any type of sports related injuries (Enter Specific Cause: i.e. Twisted ankle playing soccer)

**Other:** Describe Other Cause of Injury (i.e. RPG, Hand Grenade, Aerial Bomb, UAV)

**TRIAGE CATEGORY.** Check one.

**Immediate** - Patients who require rapid, immediate intervention in order to preserve life and/or limb AND are likely to survive because of the intervention--damage control surgery (ex: respiratory obstruction, unstable casualty with chest or abdominal injuries, uncontrolled hemorrhage, hypovolemic shock, emergency amputation)

**Delayed** - Patients who require surgery or other specific therapeutic intervention, but who will not be severely compromised if the intervention is delayed to a later time (ex: closed fx without neurovascular compromise, moderate burns of < 50% TBSA, large muscle wounds, intra-abdominal and/or thoracic wounds)

**Minimal** - Non-Urgent: Minor Injuries; patient can safely care for themselves or be helped by non-medical personnel. (ex: Minor lacerations, abrasions, fractures of small bones, and minor burns). Can safely wait 12-24 hours or longer for care.

**Expectant** - Patients whose injuries are so severe that even with the benefit of optimal medical resources, their survival would be unlikely (ex: massive open head injury with brain matter present, high spinal cord injuries, mutilating explosive wounds involving multiple anatomical sites and organs, second/third degree burns in excess of 60% TBSA, profound shock with multiple injuries and agonal respirations)

**PATIENT CATEGORY.** Check one. If Other, describe the patient's classification as it relates to military, government or civilian organizations. Not all acronyms are defined below.

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**USPHS.** United States Public Health Services  
**Civilian – Local.** Includes Host Nation  
**Contractor – Local.** Includes Host Nation  
**EPW/Detainee.** Enemy Prisoner of War  
**Other.** Describe not otherwise specified category  
**Non-NATO Coalition.** Coalition recognized military who do not belong to NATO.

**NATO-Coalition.** Non US Coalition recognized military whose country belongs to NATO  
NATO Countries Include: Albania, Belgium, Bulgaria, Canada, Croatia, Czech Republic, Denmark, Estonia, France, Germany, Greece, Hungary, Iceland, Italy, Latvia, Lithuania, Luxembourg, Montenegro, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Turkey, United Kingdom

## PATIENT MEDICAL INFORMATION

**NKDA.** No Known Drug Allergies. **Other.** Describe not otherwise specified allergy.

**MEDEVAC Air** includes DUSTOFF.

**Other:** Describe the method by which the patient arrived, such as PJ or MERT, but not DUSTOFF.

**HPI/NOTES:** Notes regarding History of Present Illness

## INTERVENTIONS PRIOR TO ARRIVAL NOTES

**PREHOSPITAL WARMING.** Check all that apply.

**HPMK.** Hypothermia Prevention and Management Kit. Check only if 3 components were used: Hat/Hood, Activated Liner, and Outer Shell.

**Other.** Describe the not otherwise specified warming device.

**TOURNIQUET.** Check all that apply.

**HEMORRHAGE CONTROL MEASURES –** Check all that apply.

**Combat Gauze.** Combat Gauze is a 3-inch x 4-yard roll of sterile gauze. The gauze is impregnated with kaolin, a material that causes the blood to clot.

**Celox.** Granules, applicator or gauze. Stops bleeding by bonding with red blood cells and gelling with fluids to produce a sticky pseudo clot. This clot sticks to moist tissue to plug the bleeding site.

**ChitoGauze.** Hemostatic gauze applied directly to external wounds (moderate to severe hemorrhage)

**Direct Pressure.** Pressure applied directly to a wound, usually with sterile, low-adherent gauze between the wound and source of bleeding.

**Field Dressing.** A casualty's dressing applied to a wound to control hemorrhaging.

**Other.** Describe the not otherwise specified hemorrhage control measure.

**PREHOSPITAL AIRWAY/BREATHING INTERVENTIONS.** As stated.

**OPA/NPA.** Oropharyngeal Airway/Nasopharyngeal Airway basic airway adjuncts

**ETT.** Endotracheal tube

**LMA.** Laryngeal mask airway

**King LT.** King laryngeal tube

**Other.** Describe the not otherwise specified type of airway.

**Cric.** Cricothyrotomy

**Trach.** Tracheostomy

**MEDICATIONS GIVEN.** Enter medication, dose and route.

## PRIMARY SURVEY NOTES

As stated.

## SECONDARY SURVEY NOTES

**INJURY DESCRIPTION.** As stated. Doppler includes non-palpable, but detected with Doppler. Absent means no pulse, non-palpable and not detected with Doppler.

**LAB RESULTS.** As stated. See example for format at right.

**MEDS GIVEN.** List current medication, dose and route.

**RADIOLOGY.** Check all that apply.

**RADIOLOGY RESULTS.** Note the results.

**DIAGNOSES/PLAN.** Enter diagnoses and findings, up to six. If more than six, record the most life-threatening findings. Enter the treatment plan.

WBC 4.5 - 10.5	Hgb 11.0 - 18.0	Plt 150 - 450
Hct 35 - 60		