

<b>EFMB Test Score Sheet</b> <b>TCCC — TREAT AN OPEN HEAD INJURY</b> (For use of this form, see AMEDDC&S HRCOE Pam 350-10, the proponent is MCCS-OPE)		
CANDIDATE'S RANK AND NAME	CANDIDATE #	
<b>TASK:</b> TREAT AN OPEN HEAD INJURY.		
<b>CONDITIONS:</b> Given a casualty in a simulated combat environment with an open head injury and the necessary materials to treat the head injury.		
<b>STANDARDS:</b> Perform all steps and measures correctly without causing further injury to the casualty.		
<b>NOTE: THIS TASK HAS BEEN MODIFIED FOR EFMB TESTING PURPOSES ONLY.</b>		
<b>PERFORMANCE STEPS/MEASURES</b>	<b>GO</b>	<b>NO-GO</b>
1. Take body substance isolation (BSI) precautions.		
2. Assess the casualty's pupil size and reaction.		
a. Observe the size of each pupil.		
<b>NOTE:</b> A variation of pupil size may indicate a brain injury. In a very small percentage of people, unequal pupil size is normal.		
b. Shine a light into each eye to observe the pupillary reaction to light.		
<b>NOTE:</b> The candidate will not turn the pin light on for EFMB testing.		
<b>EVALUATOR STATES</b> "PUPILS ARE EQUAL AND REACTIVE TO LIGHT" IF APPLICABLE OR STATE OTHER OBSERVATIONS.		
<b>NOTE:</b> The pupils should constrict promptly when exposed to bright light. Failure of the pupils to constrict may indicate brain injury.		
3. Assess the casualty's motor function. Evaluate the casualty's strength, mobility, coordination, and sensation.		
<b>NOTE:</b> Progressive loss of strength or sensation is an important indicator of brain injury.		
4. Position the casualty.		
<b>NOTE:</b> The casualty can be placed sitting up or with their head elevated, depending on if they are conscious or have other injuries that contradict the casualty sitting up.		
5. Treat the head injury.		
a. Expose the wound.		
b. Apply a dressing to the wound, either a first aid dressing or emergency trauma dressing can be used.		
6. Monitor the casualty at 15-minute intervals.		
7. Did not cause further injury to the casualty.		
8. Met all administrative requirements for this task		
<b>EVALUATOR WRITES:</b> TIMES CANDIDATE MONITORS THE CASUALTY: _____		
REASON(S) FOR FAILURE	DOES THE CANDIDATE WISH TO REBUT THIS TASK? (CANDIDATE INITIALS APPROPRIATE BOX)	YES      NO
LANE OIC/NCIC INITIALS	EVALUATOR'S SIGNATURE	DATE