

Combat CARL Care and Evacuation Manikin

Item no.: T3C





Combat Carl was developed in close cooperation with the German Armed Forces and special units and offers all the important functions for **TCCC and TECC training**. Due to its **robust nature and flexibility in the extremities**, **Combat Carl** is ideal for **professional training** in the **civilian and military sector**.



Providing medical care on the battlefield poses different challenges than in the event of an accident at home. From initial treatment in a firefight to onward transportation to a treatment facility, soldiers risk their lives and **Combat Carl** can be used to map the complete **MARCH** scheme.

MARCH

M Treatment of **M**assive bleeding

Three supplied deep wounds can be applied at 7 points and connected to bleeding modules. Wound packing is possible for all wounds, as is the application of tourniquets.

A **A**irway

Airway management with oro- and nasopharyngeal as well as supraglottic devices

R **R**espiration

Chest relief in the monaldi and Bühlauposition

C **C**irculation

Haemostasis and access to the vascular system: i.v. in the forearm, i.o. sternal, humeral head and proximal tibia with reusable pads

H **H**ypothermia / **H**ead Injuries

Interchangeable eyes with normal, dilated and constricted pupils

Although the military-tactical procedure may vary depending on the different threats in the combat situation, the basic philosophy of casualty care always remains the same. **Combat Carl** can optionally be equipped with an **amputation stump arm**, **amputation stump leg** or **realistic wound moulages**.



First phase „Care Under Fire“

During the **first phase, „Care Under Fire“**, the aim is to guide a wounded person to self-help as quickly as possible, despite the possibility of ongoing hostilities, in order to bring them to a safe area away from the fighting and provide them with care. Almost 18% of fatalities can be avoided if care is provided by specially trained first responders within the first ten minutes, the so-called **Platinum Ten Minutes**.



For this reason, great importance is attached to self-help and comrade help. This enables them to provide first aid under tactical conditions. Simple haemostatic measures for gunshot wounds are carried out using **self-adhesive and extremely realistic wound moulages** and can be treated using a tourniquet, increasing the wounded person's chances of survival. Applying a **tourniquet** to the extremities prevents excessive blood loss and the resulting death from haemorrhage. Ideal for training with the **haemorrhage module** which can be **controlled via an APP**.



Second phase „Tactical Field Care“

In the **second phase, „Tactical Field Care“**, a standardised examination according to the MARCH scheme can now be carried out for the first time without enemy action.

This scheme is repeated continuously, followed by **the third and final phase, „Tactical Evacuation Care“**. This comprises the preparation and execution of qualified tactical casualty transport to a field hospital or field hospital. Various means of transport are available for this transport phase, depending on the operational situation. Ideally, this is the rescue helicopter equipped with intensive care equipment. Specially armoured vehicles, such as an armoured transport vehicle, serve as means of rescue by land. The basic aim of **TCCC - Tactical Combat Casualty Care** is to adhere to operationally defined timelines. After basic first aid, the **„Platinum Ten Minutes“**, the wounded must be evacuated from the dangerous situation within the so-called **„Golden Hour“**. Further surgical treatment is then carried out in a sterile environment.

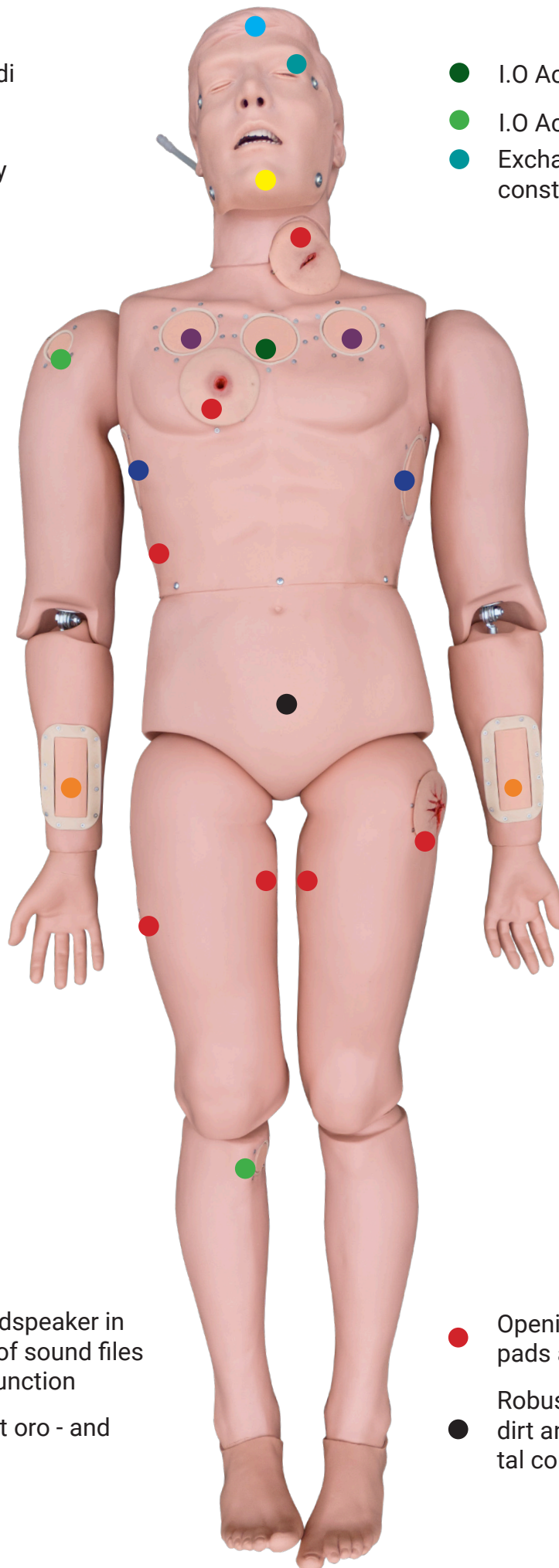


Specifications:

- Weight from approx. **65kg** bis **85kg**
- Realistic size **175cm**
- Robust PVC material
- Ideal for outdoor use in extreme conditions (sand, rain, mud, etc.)
- Wound inserts incl. universal haemorrhage module at 7 points for changing
- Flexible extremities for different carrying techniques
- No sensitive electronics
- Made in Germany
- cABCDE Schema – Conform
- XABCDE Schema – Conform
- MARCH Schema – Conform
- Voice module via Bluetooth (waterproof up to 1 metre according to IPX7)
- Interchangeable eyes, 3 pairs, normal, dilated, constricted
- Airway protection, oropharyngeal and nasopharyngeal
- Wound management 7 positions for wound modules
- Stab wound, bullet wound, bullet hole wound, blind covers
- Wounds have a bleeding function
- haemorrhage module manually or automatically via app control
- Tourniquet system
- Dressing techniques / support and wound dressing
- Intraosseous access tibia
- Intraosseous access humerus
- Intraosseous access sternum
- Thoracic decompression according to Monaldi
- Thoracic decompression according to Bülau
- Intravenous injection
- Peripheral venipuncture

- Thorax relief Monaldi
- Thorax relief Bülau
- IV access possibility

- I.O Access FAST
- I.O Access
- Exchangeable eyes with normal, constricted or dilated pupil



- Voice output via loudspeaker in the head by means of sound files or via microphone function
- Airway management oro - and nasopharyngeal

- Openings for wounds, IM puncture pads and blind covers
- Robust and insensitive to water, dirt and other adverse environmental conditions



*Airway management
nasopharyngeal*



*Airway management
supraglottisch*



Patient voice



Exchangeable eyes



*Wounds in the
thoracic region*



*Relief puncture according
to Monaldi*



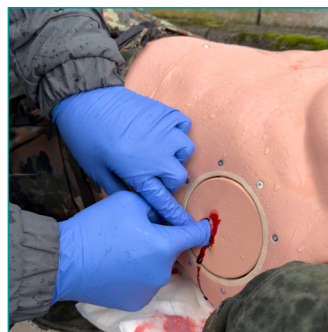
*Sternal intraosseous
approach*



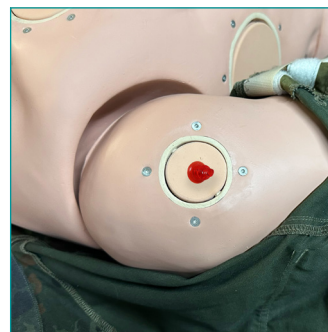
Wound-Packing



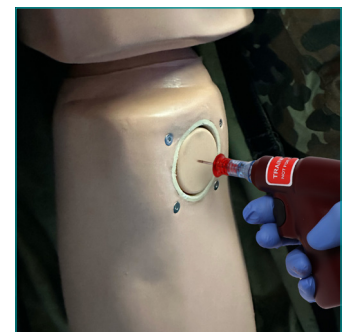
i.V.-additions



Chest drainage



*IO access
Humerus*



*IO access
Tibia*



TQ - placememt



Amputation stump leg



Bandaging techniques



Carrying techniques



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