LESSON ASSIGNMENT

LESSON 2 Manual Carries.

LESSON TEXT Paragraphs 2-1 through 2-22.

LESSON OBJECTIVES After completing this lesson, you should be able to:

2-1. Identify which manual carry is preferred for a given situation.

2-2. Identify the procedures for performing the following one-man carries:

- Fireman's carry.
- Arms carry.
- Support carry.
- Saddleback carry.
- Pack-strap carry.
- Pistol-belt carry.
- Load bearing equipment carry.
- Pistol-belt drag.
- Neck drag.
- Cradle drop drag.

2-3. Identify the procedures for performing the following two-man carries:
Fore-and-aft carry.
Support carry.
Arms carry.
Two-hand seat carry.
Four-hand seat carry.

SUGGESTION After completing the assignment, complete the exercises at the end of this lesson. These exercises will help you to achieve the lesson objectives.

LESSON 2

MANUAL CARRIES

Section I. GENERAL

2-1. MANUAL CARRIES

A manual carry is used to evacuate a casualty if a litter is not available, the time or materials needed to make an improvised litter are not available, and/or personnel needed to act as litter bearers are not available or cannot be spared. The use of a two-man carry is preferred to a one-man carry if a second bearer is available.

a. In general, a casualty should not be moved before the required emergency care is given unless it is necessary to remove the casualty (and yourself) out of the line of fire or from a dangerous situation (from inside a burning building, for example). Examine the casualty for possible spinal injury before moving him. If a casualty with a possible spinal injury must be moved, keep his head, neck, and back in alignment.

b. If possible, have another soldier evacuate the casualty while you care for other casualties. When soldiers in a combat situation are using manual carries to evacuate casualties, give preference to the carries that allow the bearers to carry and use their personal weapons.

2-2. GENERAL RULES FOR MANUAL CARRIES

Manual carries are tiring for the bearers and increase the risk of the casualty suffering additional injury. Improper technique can result in injury to the bearer as well as additional injury to the casualty. Minimize the risk of muscle strain and sprains by following the rules given below.

a. Use the body's natural system of levers when lifting or moving the casualty.

b. Know your physical capabilities and limitations.

c. Maintain solid footing when lifting and transporting a casualty.

d. Use your leg muscles (not your back muscles) when lifting and lowering a casualty.

e. Use your shoulder and leg muscles (not your back muscles) when carrying or dragging a casualty.

f. If there are other bearers, work in unison and use deliberate, gradual movements.

g. Rest frequently, or whenever possible, when transporting a casualty.

Section II. ONE-MAN CARRIES

2-3. SELECTING AN APPROPRIATE ONE-MAN CARRY

If a one-man manual carry is to be used, choose an appropriate carry based upon the casualty's condition (some carries are used only with a conscious casualty), the nature of the casualty's injuries (some carries are not used if the casualty's arm is fractured), the situation (you may need to crawl to avoid enemy fire), the distance to be covered (some carries are less tiring), the weight of the casualty, your strength and endurance, and obstacles that will be encountered (some carries leave one or both of your hands free to climb). In general, distances of less than 50 meters are considered to be short, between 50 and 300 meters are considered to be moderate, and more than 300 meters are considered to be long. The distances may vary based upon the casualty's weight and your strength and endurance.

a. **Fireman's Carry.** The fireman's carry can be used to move a conscious or unconscious casualty. It is usually the preferred carry for quickly moving an unconscious or severely injured casualty a moderate distance and can be used for long distances. The fireman's carry leaves one of the bearer's arms free to carry a rifle, move around obstacles, and so forth.

b. **Arms Carry.** The arms carry can be used to move a conscious or unconscious casualty. It is generally used with an unconscious casualty or a conscious casualty who cannot walk. The arms carry is very tiring and is only used for short distances.

c. **Support Carry.** The support carry is only used with a conscious casualty who can walk or at least hop on one leg. The carry can be used to transport the casualty for a long distance if the casualty does not tire.

d. **Saddleback Carry.** The saddleback carry is only used to move a conscious casualty who can put one or both of his arms around the bearer's neck. It is generally used to move the casualty for a moderate or long distance.

e. **Pack-Strap Carry.** The pack-strap carry is generally used to carry a conscious or unconscious casualty for a moderate distance. The carry is <u>not</u> used if the casualty has a fractured arm.

f. **Pistol-Belt Carry**. The pistol-belt carry can be used to move a conscious or unconscious casualty. It is the preferred carry for moving a casualty for a long distance. The carry leaves both of the bearer's hands free; therefore, it is especially useful if the bearer must use his rifle, climb banks, or move over obstacles. The carry also allows the bearer to creep through shrubs and move under low-hanging branches. If the casualty is conscious, he can carry a weapon since the carry leaves his hands free also.

g. **Load Bearing Equipment Carry.** The load bearing equipment (LBE) carry can be used to move a conscious or unconscious casualty for a long distance. If the casualty is conscious and can put his arms around the bearer's neck, the carry leaves the bearer's hands free to carry his weapon, climb, and move around obstacles.

h. **Pistol-Belt Drag.** The pistol-belt drag is used to move a conscious or unconscious casualty for a short distance. This carry is used when the bearer and the casualty must stay very close to the ground, such as moving a casualty during combat.

i. **Neck Drag.** The neck drag is used to move a conscious or unconscious casualty for a short distance. This carry allows the rescuer to maintain a low silhouette, but not as low as the pistol-belt drag. The carry is generally used when moving behind a low wall, under a vehicle, or through a culvert. The neck drag is not used if the casualty has a fractured arm.

j. **Cradle Drop Drag.** The cradle drop drag is generally used to move a conscious or unconscious casualty up or down steps or to quickly remove a casualty from a life-threatening situation. The carry is only used for short distances.

2-4. POSITIONING THE CASUALTY

Some carries require the casualty to be prone (lying on his abdomen) when you begin; others require him to be supine (lying on his back). To turn the casualty either to the prone or supine position, follow the steps given below. Figure 2-1 shows a casualty being turned to a prone position; figure 2-2 shows a casualty being turned to a supine position.

CAUTION: Check the casualty for possible spinal injury before turning the casualty. If possible, avoid moving any casualty with a suspected spinal injury. If the casualty must be moved, keep his head, neck, and back in alignment and keep movement to a minimum.

a. Kneel at the casualty's uninjured side.

WARNING:

If you are in a chemical environment, squat, do not kneel. If you press your knee against the contaminated ground, you may force the chemical agent into your protective clothing, which will greatly reduce the protection time afforded by your protective clothing.

b. Place the casualty's arms above his head.

c. Cross his far ankle over the near ankle.

d. Grasp the casualty's clothing at his far shoulder and hip (or thigh).

e. Gently pull so the casualty rolls toward you. Continue until the casualty is turned over (either onto his abdomen or his back).

f. Place the casualty's arms at his sides and straighten his legs.

Figure 2-1. Turning a casualty to a prone position.

Figure 2-2. Turning a casualty to a supine position.

2-5. RAISING THE CASUALTY TO A STANDING POSITION

Some one-man carries require the casualty be raised to a standing position. If the casualty is conscious, he may be able to stand with your assistance. If the casualty is unconscious or cannot stand, however, you can raise him to a standing position without his help. Two methods of raising the casualty from a prone position are presented in this subcourse. The method shown in figure 2-3 is normally used. The second (alternate) method shown in figure 2-4 is used if you believe this method will be safer for the casualty, because of the location of his injuries.

a. **Regular Method.**

(1) Position the casualty in a prone position (paragraph 2-4).

(2) Straddle the casualty, slip your hands under his chest, and lock your hands together (figure 2-3 A).

(3) Lift the casualty and begin walking backwards until he is on his knees (figure 2-3 B).

(4) Continue walking backward until his legs are straight and his knees are locked, (figure 2-3 C).

(5) Walk forward and bring the casualty to a standing position (figure 2-3 D). Keep the casualty tilted slightly backward so his knees will remain locked. If his knees do not remain locked, walk backward until they lock and then move forward until the casualty is in the standing position.

(6) Grasp one of the casualty's wrists and raise his arm. Use your other arm to keep the casualty in a standing position, (figure 2-3 E).

(7) Move under the casualty's arm to his front, lower his arm, and hold the casualty around his waist.

(8) Place one of your feet between the casualty's feet. Spread his feet so they are about 6 to 8 inches apart, (figure 2-3 F).

b. **Alternate Method.**

(1) Position the casualty in a prone position (paragraph 2-4).

(2) Kneel on one knee (or squat) at the casualty's head, facing his feet.

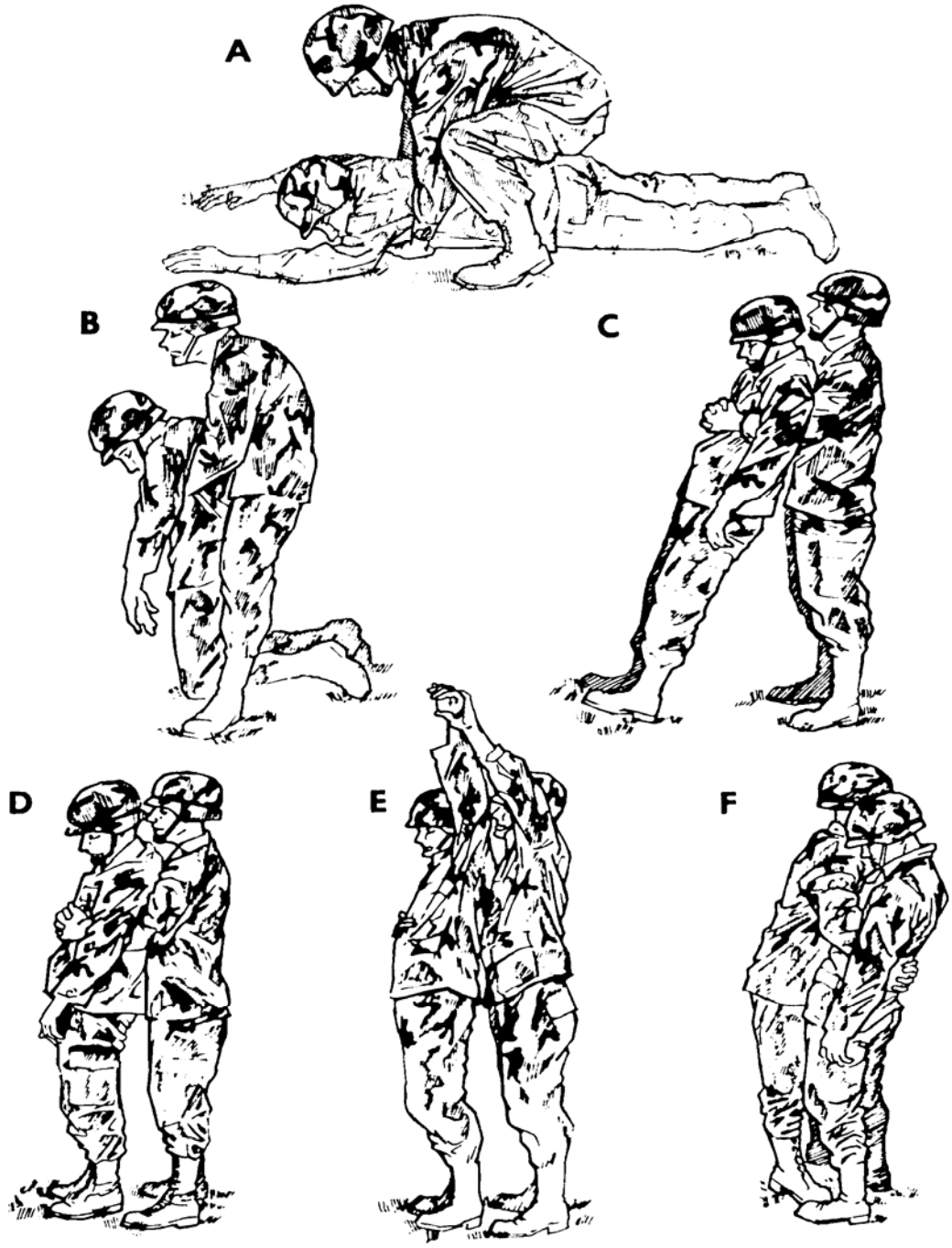

Figure 2-3. Raising a casualty to his feet (regular method).

(3) Put your hands under his armpits, down his sides, and across his back, (figure 2-4 A.)

(4) Rise, lifting the casualty to his knees, (figure 2-4 B). Take care to keep the casualty's head from snapping back while you are raising him to his feet.

(5) Lower your arms, secure a hold on the casualty, and raise him to a standing position with his knees locked.

(6) Put your arms around the casualty's waist and tilt his body slightly backward to keep his knees from buckling.

(7) Place your foot between the casualty's feet and spread his feet so they are about 6 to 8 inches a part (figure 2-4 C). You and the casualty are now in the same position as the normal method of raising a casualty to his feet (figure 2-3 F).

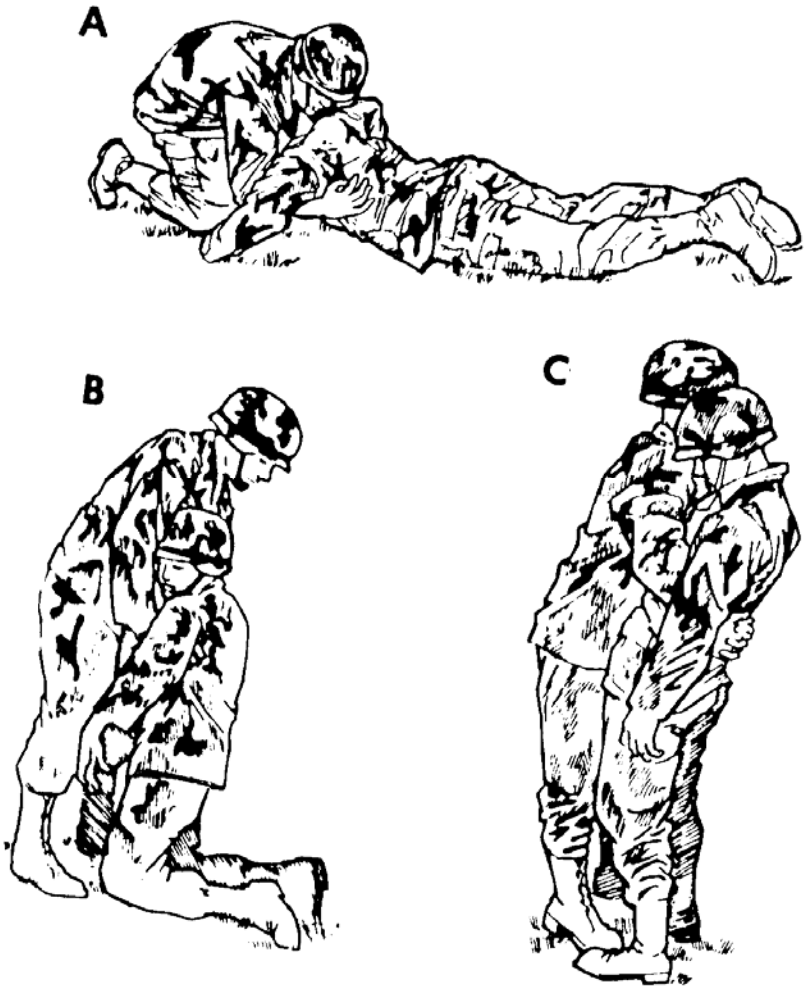

Figure 2-4. Raising a casualty to his feet (alternate method).

2-6. FIREMAN'S CARRY

The fireman's carry (figure 2-5) is used to quickly move an unconscious or severely injured casualty for a moderate or long distance. The steps for performing the fireman's carry are given below.

a. Raise the casualty to a standing position (figure 2-5 A). Use the procedures given in paragraphs 2-4 and 2-5, as needed.

b. Grasp the casualty's wrist and lift his arm high over his head while continuing to support the casualty with your other arm, (figure 2-5 B). If the casualty has an injured arm, grasp the wrist of the uninjured arm.

c. Bend at the waist and kneel (stoop if in a chemical environment), pulling the casualty over your shoulder. At the same time, slip your arm from his waist, pass the arm between the casualty's legs, and grasp behind the casualty's knee, (figure 2-5 C).

d. Move the hand grasping the casualty's wrist toward the hand grasping the casualty's knee.

e. Grasp the casualty's wrist with the hand at the casualty's knee, thus freeing the hand that was originally holding the wrist, (figure 2-5 D).

f. Place your free hand on your knee and slowly rise to a standing position (figure 2-5 E). Use the hand on your knee to help you rise without straining your back.

g. Adjust the casualty's body so his weight is distributed comfortably.

h. Move forward, carrying the casualty. Use your free hand to carry the casualty's weapon, move around obstacles, and so forth.

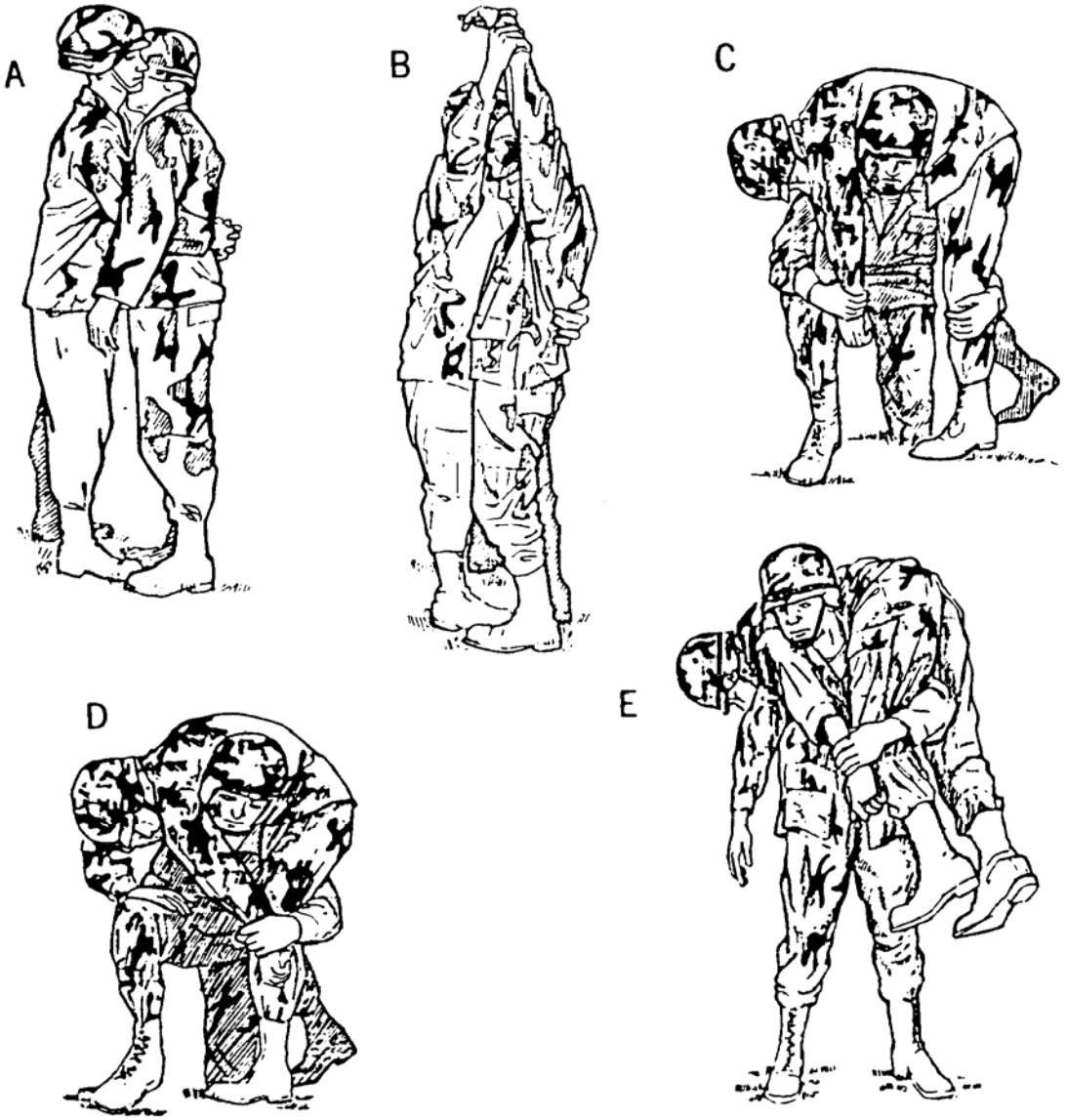

Figure 2-5. Fireman's carry.

2-7. ARMS CARRY

The arms carry (figure 2-6) is often used to move a casualty who cannot walk (conscious or unconscious) for a short distance. The arms carry is performed using the following steps. If the casualty is conscious, tell him what you are going to do.

a. Raise the casualty to a standing position using the procedures given in paragraph 2-5.

b. Slide one of your arms under the casualty's near arm, behind his back, and under his other arm.

c. Move to the casualty's side, bend down, and place your other arm behind the casualty's knees.

d. Lift the casualty from the ground and stand erect.

e. Move forward, carrying the casualty high on your chest to lessen fatigue.

Figure 2-6. Arms carry.

2-8. SUPPORT CARRY

The support carry (figure 2-7) can only be used with a casualty who is conscious and can walk or at least hop on one leg. If the casualty can stand with assistance, you may use the alternate method. Otherwise, use the regular method (paragraph a). Tell the casualty what you are going to do so that he can work with you.

Figure 2-7. Support carry.

a. **Regular Method.**

(1) Raise the casualty to a standing position using the procedures given in paragraph 2-5.

(2) Grasp the casualty's wrist on his injured side with one hand while continuing to support the casualty with your other arm.

(3) Lift the casualty's arm and move to his side so you are facing the same direction as the casualty. At the same time, draw his arm around your neck.

(4) Move forward, allowing the casualty to use you as a crutch when he walks or hops. Adjust your walking motion to help the casualty maintain his balance. If the casualty tires, allow him to rest or use another manual carry to transport him.

b. **Alternate Method.**

(1) Position the casualty in a sitting position.

(2) Position yourself next to the casualty's injured side, facing in the same direction as the casualty.

(3) Squat at the casualty's side.

(4) Grasp the casualty's near wrist with the hand that is away from the casualty and bring the casualty's arm around your neck.

(5) Put your near (free) arm around the casualty's waist.

(6) Stand up, helping the casualty to a standing position.

(7) Move forward, allowing the casualty to use you as a crutch when he walks or hops.

2-9. SADDLEBACK CARRY

The saddleback carry (figure 2-8) is sometimes called the piggyback carry. It is used to move a casualty who can hold on to your neck for moderate to long distances. The saddleback carry is performed in the following manner.

a. Raise the casualty to a standing position. The casualty may be able to rise with assistance. If not, raise him to a standing position using the procedures given in paragraph 2-5.

b. Grasp the casualty's wrist and lift his arm over his head while continuing to support the casualty with your other arm.

c. Turn around so your back is to his and bring his arm over your shoulder. Support the casualty's waist with other arm, if needed.

d. Have the casualty put his other arm around your neck; then have him grasp one of his wrists with his other hand. This hold keeps him from falling backward while being carried.

e. Stoop and move your arms back and around the outside of the casualty's thighs.

f. Bring your hands around the back of his thighs; then bring them to the insides of his thighs. Continue to move your hands until they reach your sides and you have lifted the casualty's thighs.

Figure 2-8. Saddleback carry.

g. Straighten and clasp your hands together in front of you. Maintain your grip to keep from dropping the casualty.

h. Adjust the casualty's weight to make the weight distribution more comfortable, then walk forward.

2-10. PACK-STRAP CARRY

The pack-strap carry can be used to move a conscious or unconscious casualty for a moderate distance. Do not use the carry if the casualty has a fractured arm or wrist. The steps for performing the pack-strap carry are given below.

a. Raise the casualty to a standing position using the procedures given in paragraph 2-5.

b. Grasp one of the casualty's wrists and lift his arm above his head while continuing to support the casualty's waist with your other arm.

c. Turn around so that your back is to the casualty. At the same time, bring the casualty's raised arm over your shoulder. Bend your knees somewhat so your shoulder fits under the casualty's arm and your back supports his weight.

d. Release his waist, grasp his other wrist with your free hand, and bring that arm over your other shoulder (figure 2-9 A). Make sure you are holding both wrists so his hands are in natural palms down (palms toward your abdomen) position. Twisting the casualty's hands could result in injury to his wrists, elbows, or shoulders when he is lifted and carried.

e. Bend forward and hoist the casualty as high on your back as possible so all of his weight is resting on your back (figure 2-9 B).

f. Walk forward, keeping bent so the casualty's weight is balanced on your back and his feet are not dragging.

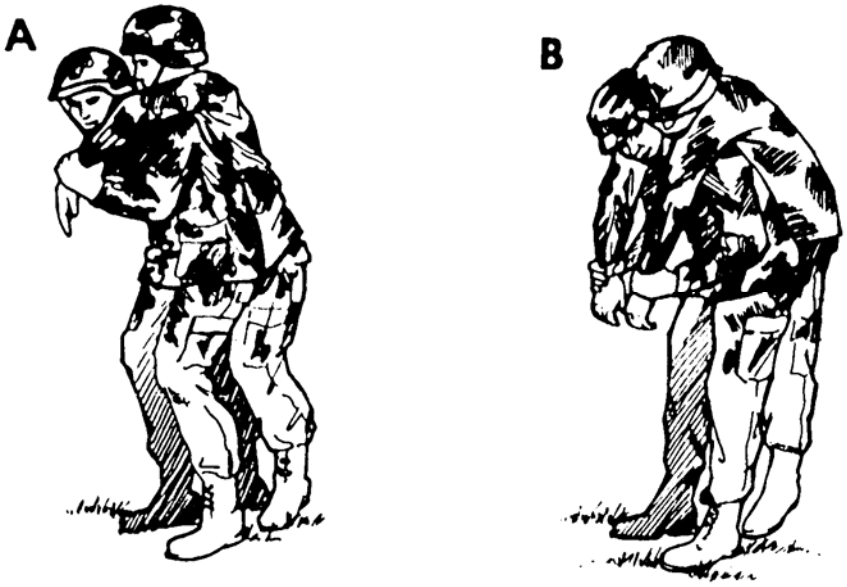

Figure 2-9. Pack-strap carry.

2-11. PISTOL-BELT CARRY

The pistol-belt carry (figure 2-10) is used to move a conscious or unconscious casualty for a long distance while leaving your hands free to move around obstacles or climb banks. The carry is performed using the following steps.

a. Position the casualty on his back. Use the procedures given in paragraph 2-4 to turn the casualty onto his back, if needed.

b. Form a sling by joining two or three fully extended pistol belts together to form one large loop. If pistol belts are not available, use any material that will not break and will not cut or bind the casualty. For example, you can use a rifle-sling, two litter straps joined together, or two muslin bandages tied together.

c. Slip the sling under the casualty with the top part of the loop under his lower back, the bottom part under his thighs, the belt buckles centered behind the casualty, and an end of the loop extending from each side (figure 2-10 A).

d. Move the casualty's legs apart and lie between them on your back.

e. Thrust your arms through the loop ends. Adjust the sling so the loop ends fit over your shoulders.

f. Grasp the casualty's wrist and his trouser leg on his injured side (figure 2-10 B).

g. Roll toward the casualty's uninjured side and onto your abdomen (figure 2-10 C). Both you and the casualty are now in a prone position. (Be sure to roll across the casualty's uninjured side, not his injured side.)

h. Release the casualty's wrist and leg and push yourself up until you are on your knees (figure 2-10 D).

i. Rise to a kneeling position with your hands on your knees for support (figure 2-10 E).

j. Rise to your feet (figure 2-10 F). Lean forward to balance the casualty's weight.

k. Adjust the casualty's weight to a more comfortable position, if needed, and walk forward. Your hands are free to carry a rifle or other object, climb obstacles, and so forth.

(1) If the casualty is unconscious, and you do not have to carry anything in your hands, grasp his wrists (palms down) to help keep the casualty balanced while you are walking.

(2) If the casualty is conscious, have him put his arms around your neck and grasp his wrist with one hand.

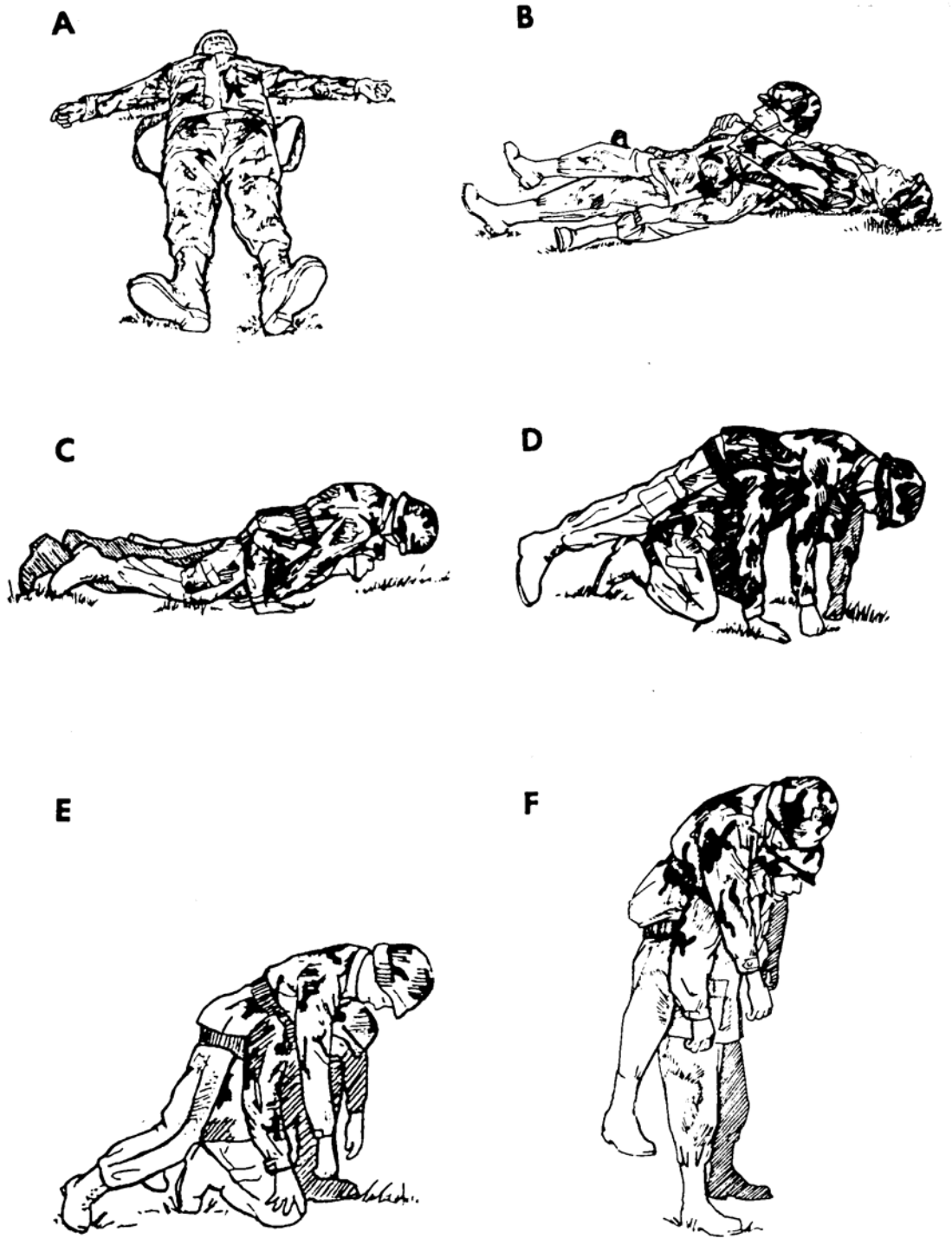

Figure 2-10. Pistol-belt carry.

2-12. LOAD BEARING EQUIPMENT CARRY

Steps for performing three variations of the load bearing equipment (LBE) carry are given below. The first version is used only if the casualty is conscious and can stand. The LBE carry can be used to move the casualty for a long distance.

a. **Load Bearing Equipment Carry: Method 1 (Standing Casualty).**

(1) Loosen or have another soldier loosen all suspender straps on your LBE (figure 2-11 A).

(2) Squat down in front of the standing casualty.

(3) Have the casualty place one leg into the loop formed by your suspenders and pistol belt (figure 2-11 B).

(4) Have the casualty place his other leg into the loop.

(5) Have the casualty lean forward and put his arms over your shoulders (figure 2-11 C). This places his weight onto your back.

(6) Stand up. Keep leaning forward to keep the casualty's weight balanced on your back.

(7) Walk forward, staying somewhat bent forward to keep the casualty's weight balanced on your back.

(a) If you do not need to carry anything, you may grip the casualty's wrists (same palms down position used in the pack-strap carry) to help maintain balance (figure 2-11 D).

(b) If you need to use your hands, have the casualty use one hand to grasp his wrist (figure 2-11 E) or clasp his hands together.

b. **Load Bearing Equipment Carry: Method 2 (Using Your Load Bearing Equipment).**

(1) Position the casualty on his back (figure 2-12 A). Turn the casualty using the procedures given in paragraph 2-4, if needed.

(2) Remove your LBE and loosen all suspender straps on the LBE.

(3) Lift one of the casualty's legs and place it through the loop formed by the suspenders and pistol belt (figure 2-12 B); then do the same with the other leg.

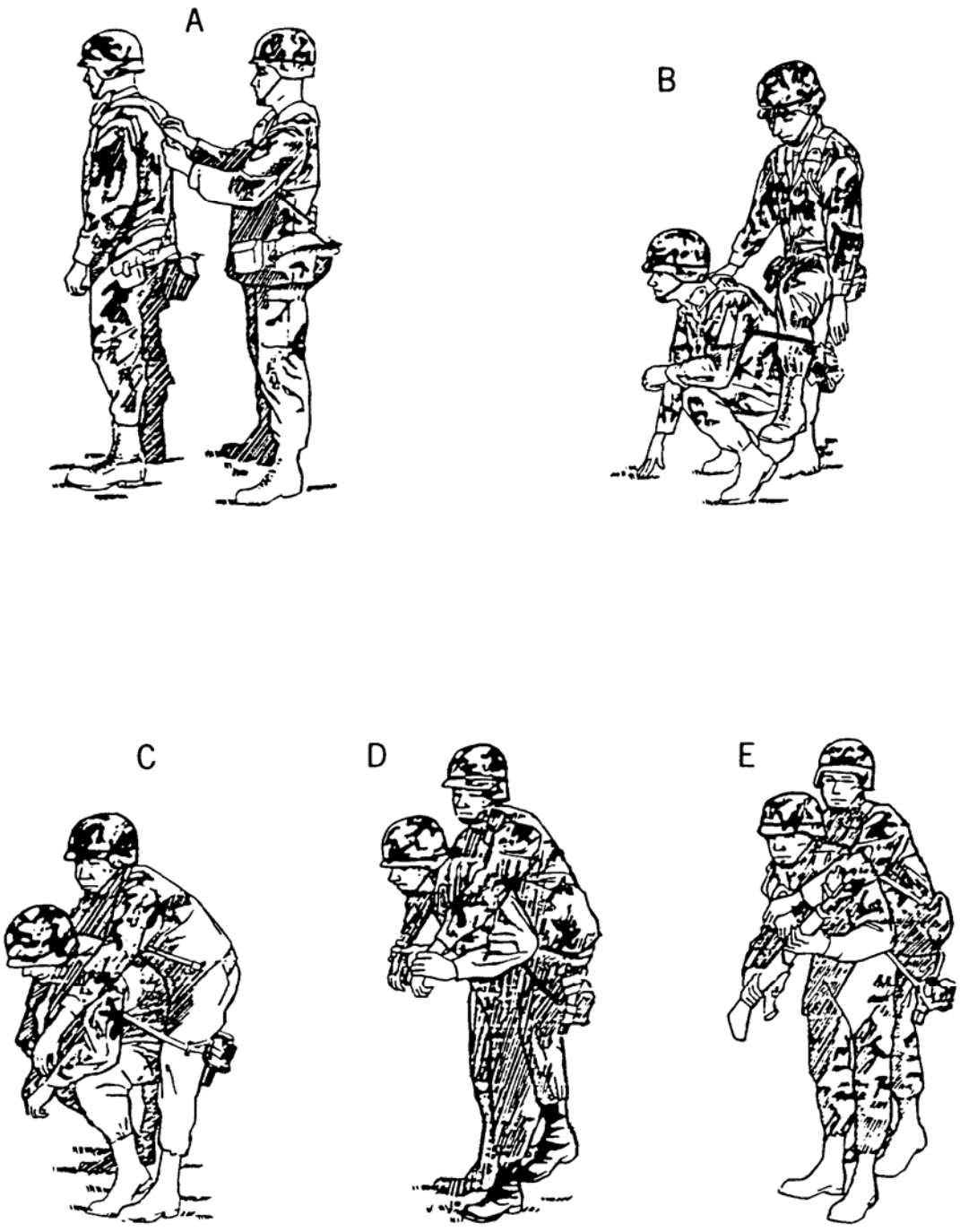

Figure 2-11. Load bearing equipment carry with standing casualty.

(4) Move the LBE up until the pistol belt is behind the casualty's thighs (figure 2-12 C).

(5) Lie on your back between the casualty's legs and work your arms through the LBE suspenders (figure 2-12 D).

(6) Grasp the casualty's wrist on his injured side and roll toward his uninjured side (figure 2-12 E). Continue until you are in a prone position with the casualty on your back.

(7) Push yourself to a kneeling position; then to a position in which you are kneeling on one knee. Maintain your hold on the casualty's wrist to help balance the casualty while you are rising.

(8) Grasp the casualty's other wrist and bring that arm over your other shoulder (figure 2-12 F).

(9) Place one hand on your raised knee for support; then rise to your feet. Lean forward to balance the casualty's weight as you rise.

(a) If the casualty is conscious, have him lock his hands together or use one hand to grasp his other wrist while you are rising.

(b) If the casualty is unconscious, release one wrist while you are rising; then secure the wrist again.

(10) Walk forward, staying somewhat bent forward to keep the casualty's weight balanced on your back.

(a) If the casualty is unconscious and you do not have to carry anything in your hands, grasp his wrists (palms down) to help keep the casualty balanced while you are walking.

(b) If the casualty is conscious, have him grasp his wrist with one hand.

(c) If the casualty is unconscious and you need to have your hands free, tie his wrists together using a muslin bandage, a field dressing, or similar material which will not cut his wrists (figures 2 12 G and H).

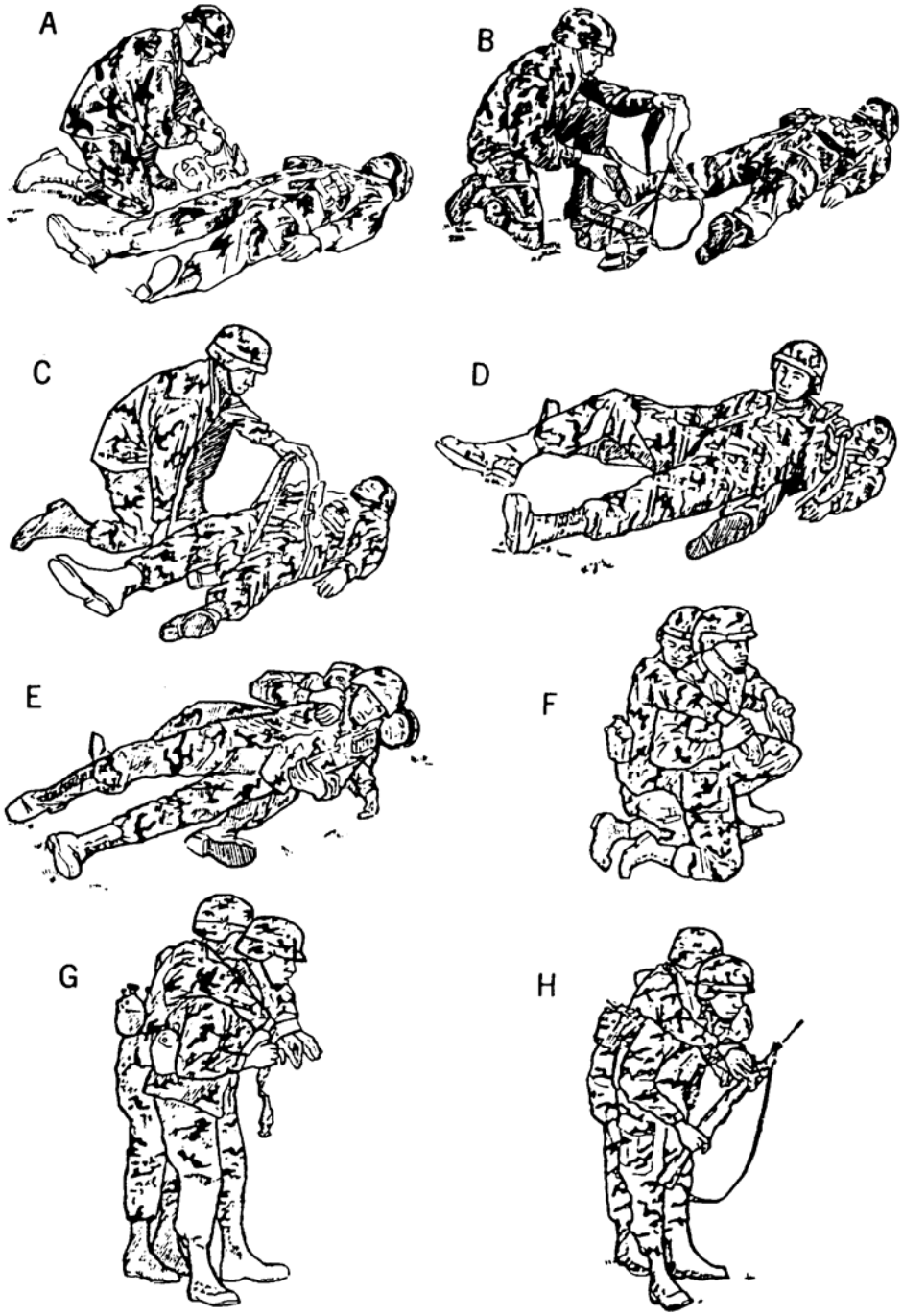

Figure 2-12. Load bearing equipment carry using bearer's LBE.

c. **Load Bearing Equipment Carry: Method 3 (Using Casualty's Load Bearing Equipment).**

(1) Position the casualty on his back. Turn the casualty using the procedures given in paragraph 2-4, if needed.

(2) Loosen the front two suspenders of the casualty's LBE (figure 2-13 A).

(3) Spread the casualty's legs and lie on your back between the casualty's legs.

(4) Slip your arms through the casualty's two front suspenders up to your shoulders (figure 2-13 B).

(5) Grasp the casualty's wrist on his injured side and roll toward his uninjured side (figure 2-13 C). Continue until you are in a prone position with the casualty on your back.

(6) Push yourself to a kneeling position (figure 2-13 D); then to a position in which you are kneeling on one knee (figure 2-13 E). Maintain your hold on the casualty's wrist to help balance him as you rise.

(7) Grasp the casualty's other wrist and bring that arm over your other shoulder.

(8) Place one hand on your raised knee for support; then rise to your feet. Lean forward to balance the casualty's weight as you rise.

(a) If the casualty is conscious, have him lock his hands together or use one hand to grasp his other wrist while you are rising.

(b) If the casualty is unconscious, release one wrist while you are rising; then secure the wrist again.

(9) Walk forward, staying somewhat bent forward to keep the casualty's weight balanced on your back.

(a) If the casualty is unconscious and you do not have to carry anything in your hands, grasp his wrists (palms down) to help keep the casualty balanced while you are walking.

(b) If the casualty is conscious, have him grasp his wrist with one hand.

(c) If the casualty is unconscious and you need to have your hands free, tie his wrists together using a muslin bandage, a field dressing, or other material that will not cut his wrists (figure 2-13 F).

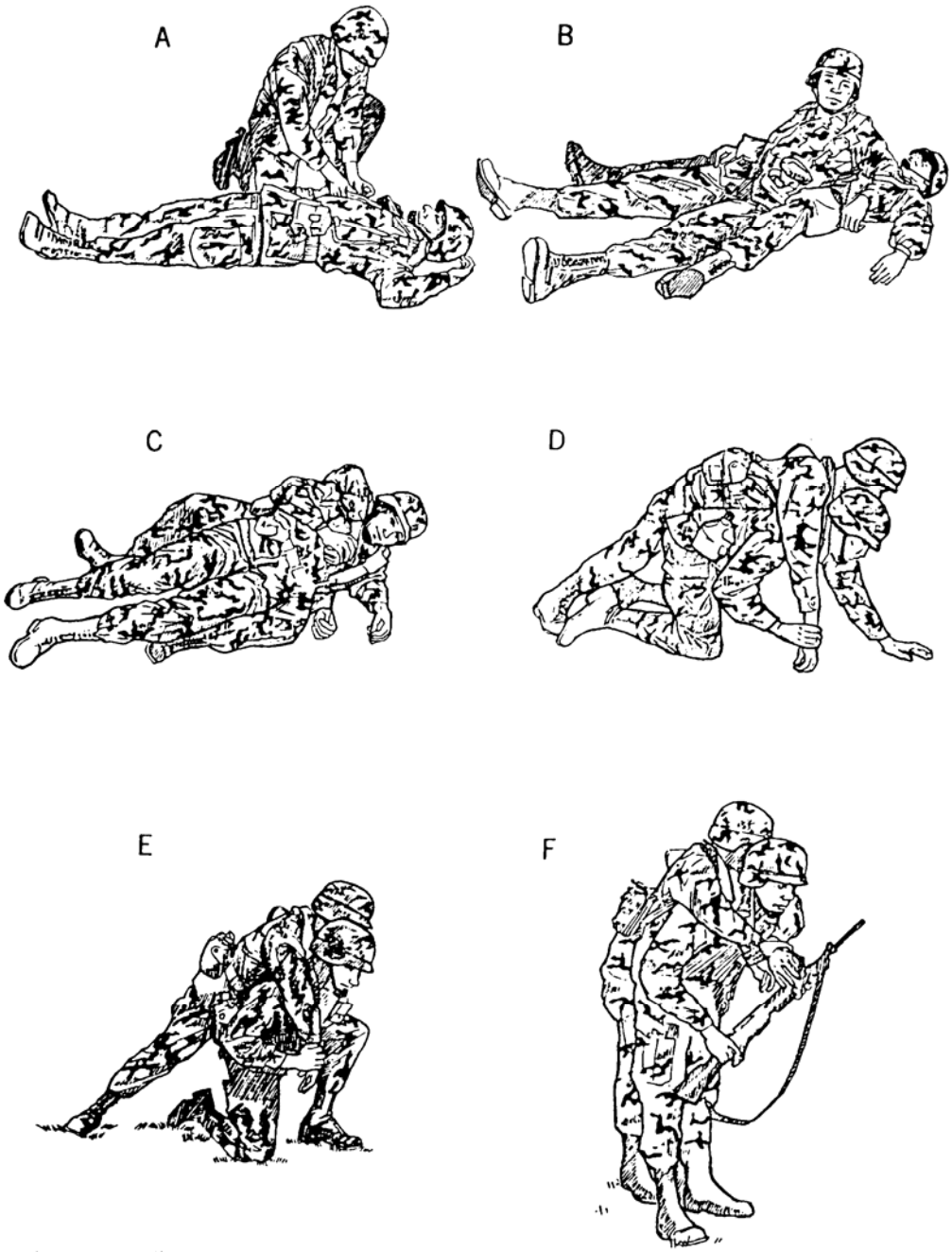

Figure 2-13. Load bearing equipment carry using casualty's LBE.

2-13. PISTOL-BELT DRAG

The pistol-belt drag is used to move a conscious or unconscious casualty for a conscious or unconscious casualty for a short distance when the bearer and the casualty must very close to the ground. The steps for performing the pistol-belt drag are given below.

a. Position the casualty on his back. Use the procedures given in paragraph 2-4 to turn the casualty onto his back, if needed.

b. Form a sling by joining two or three fully extended pistol belts together to form one large loop. If pistol belts are not available, use any material that will not break, and will not cut or bind the casualty. For example, you can use a rifle-sling, two litter straps joined together, or two muslin bandages tied together.

c. Slip the bottom of the loop across the casualty's chest, under his armpits, and under his shoulders (figure 2-14 A).

d. Twist the remainder (top portion above the casualty's head) of the loop to form a figure 8 (figure 2-14 B). Adjust the loop so the buckles cross in the center of the figure 8.

e. Lie on your side facing the casualty with your head in the same direction as the casualty's head. Support yourself on your elbow.

f. Slip your lower arm (the arm on which you are resting) through the top loop of the figure 8 and bring the loop over your shoulder (shoulder nearest the ground).

g. Roll toward the casualty and turn onto your abdomen (90 degree turn). The pistol belts are now across your chest and the loop is over the shoulder that is away from the casualty (figure 2-14 C).

h. Crawl forward, dragging the casualty with you.

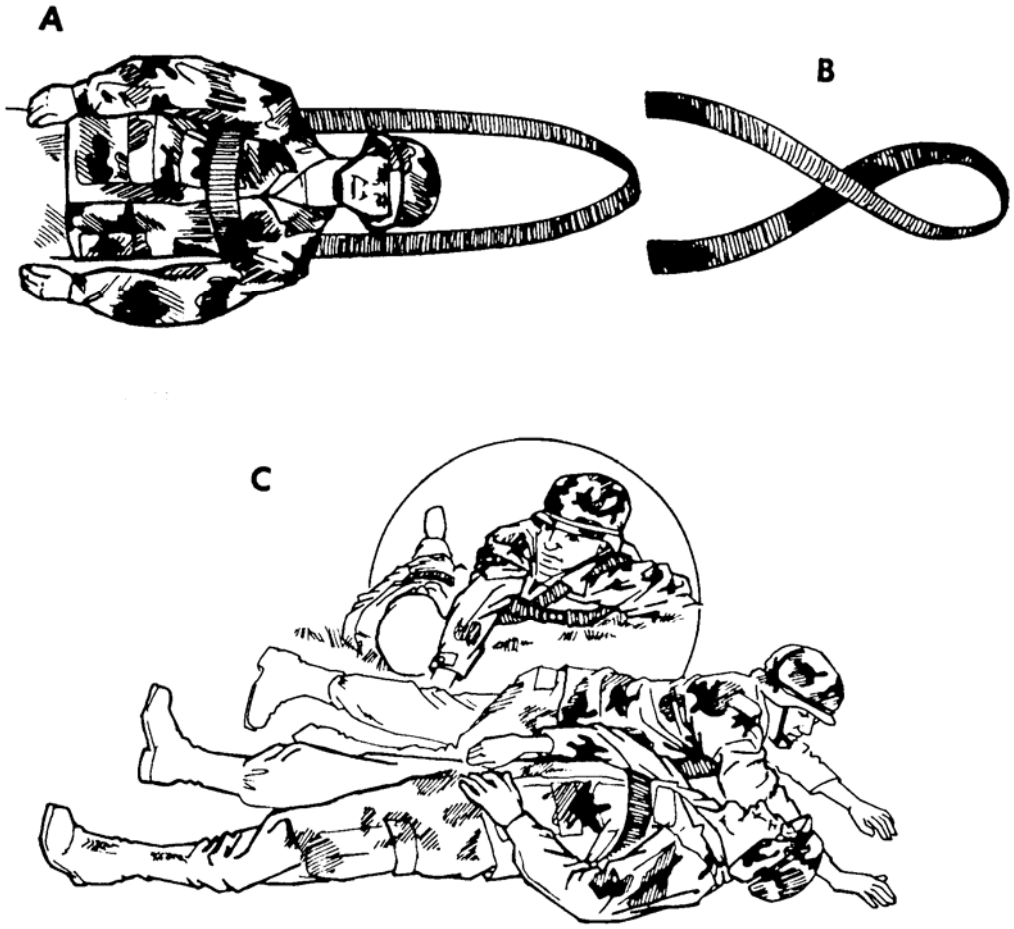

Figure 2-14. Pistol-belt drag.

2-14. NECK DRAG

The neck drag is used to move a conscious or unconscious casualty for a short distance when the rescuer needs to maintain a low silhouette (moving behind a low wall, under a vehicle, or through a culvert, for example). Do not use the neck drag if the casualty has a fractured arm or wrist. The neck drag is performed in the manner described below.

a. Position the casualty on his back. Use the procedures given in paragraph 2-4 to turn the casualty onto his back, if needed.

b. Tie the casualty's hands together with material that will not cut his wrists, such as a muslin bandage or a field dressing. Do not tie the materials tight enough to interfere with blood circulation. If the casualty is conscious, also have him interlock his fingers.

c. Straddle the casualty's hips, facing the casualty's head.

d. Kneel.

e. Loop the casualty's arms around your neck.

f. Crawl forward on your hands and knees, dragging the casualty beneath (figure 2-15). Make sure the casualty's head does not drag on the ground.

Figure 2-15. Neck drag.

2-15. CRADLE DROP DRAG

The cradle drop drag is used to move a conscious or unconscious casualty a short distance. It is commonly used to move a casualty down steps or away from a life-threatening situation. The following steps are used to perform the cradle drop drag.

a. Position the casualty on his back (paragraph 2-4).

b. Kneel at the casualty's head, slide your hands (palms up) under his shoulders, and grasp the clothing under his armpits (figure 2-16 A).

c. Rise to one knee with the casualty in a semi-sitting position (figure 2-16 B). Support the casualty's head by resting it against your arm or by bringing your elbows together and supporting the head on your forearms.

d. Rise to a stooped position and walk backward (figure 2-16 C), dragging the casualty. If you go down steps or a short drop, support the casualty's head and shoulders and let his hips and legs drop from step to step (figure 2-16 D).

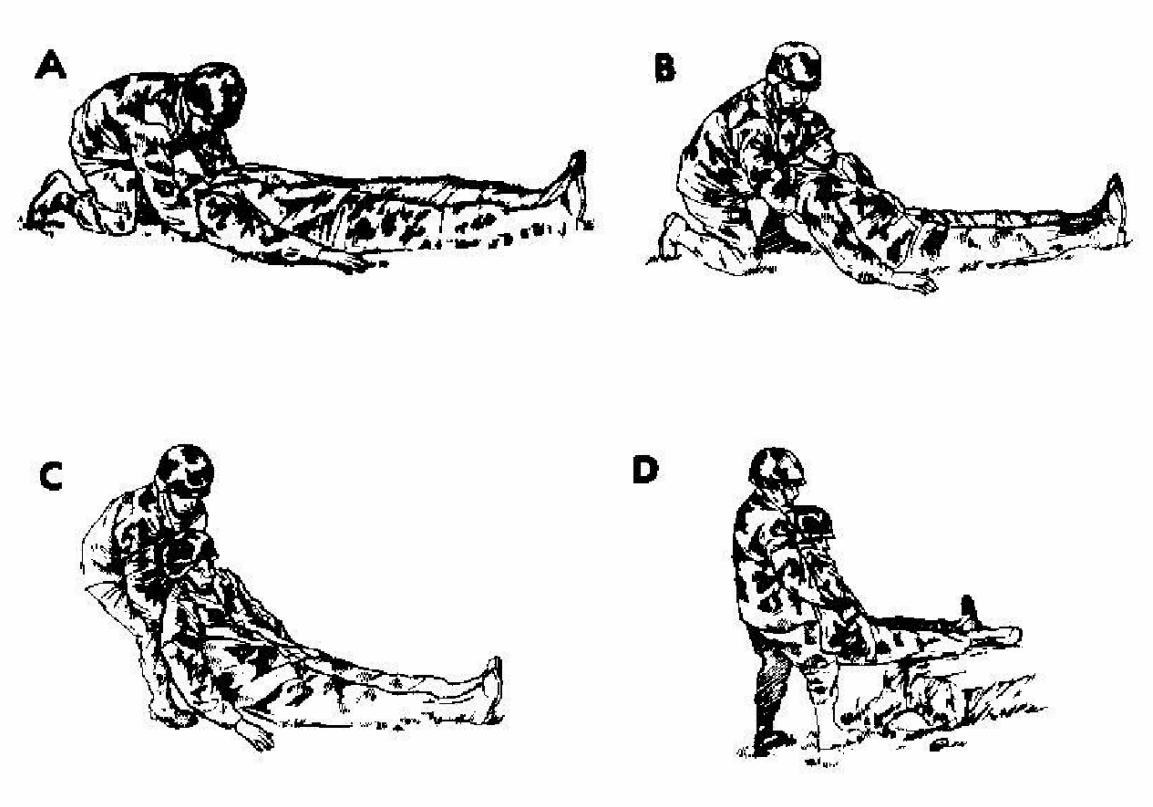

Figure 2-16. Cradle drop drag.

Section III. TWO-MAN CARRIES

2-16. CHOOSING AN APPROPRIATE TWO-MAN CARRY

Two-man carries are less tiring than one-man carries since the weight of the casualty is shared. Two-man carries are also more comfortable for the casualty and less likely to aggravate his injuries. If a two-man manual carry is to be used, choose an appropriate carry based upon the casualty's condition and the distance to be covered. In general, distances of less than 50 meters are considered to be short, distances between 50 and 300 meters are considered to be moderate, and distances of more than 300 meters are considered to be long.

a. **Two-Man Forward-and-After Carry**. The two-man forward-and-after carry can be used to move a conscious or unconscious casualty. It is not as tiring as other carries; therefore, it is usually the preferred two-man carry for moving a casualty a long distance.

b. **Two-Man Support Carry**. The two-man support carry can be used to transport either a conscious or an unconscious casualty. It is especially useful if the casualty is conscious and can walk if assisted. The carry can be used for long distances. A variation of the carry can be used if the casualty is taller than the bearers.

c. **Two-Man Arms Carry**. The two-man arms carry can be used to move a conscious or unconscious casualty a moderate distance. If a casualty with a suspected spinal fracture must be moved immediately, a variation of this carry is used with one bearer supporting the casualty's head and neck and three or more bearers supporting the casualty's body and legs. Whenever possible, a spine board (Lesson 3) should be applied before moving a casualty with a suspected spinal injury.

d. **Two-Hand Seat Carry**. The two-hand seat carry can be used to move a conscious or unconscious casualty. This carry is normally used to move a casualty a short distance.

e. **Four-Hand Seat Carry**. The four-hand seat carry is only used with a conscious casualty who can help support himself while he is being carried. This carry is usually used to transport a casualty a moderate distance. It is especially useful in transporting a conscious casualty with a head or foot injury.

2-17. WORKING IN UNISON

One major difference between one-man and two-man carries is the need for coordinated effort in the two-man carries. Before beginning the carry, the bearers should determine which bearer is to give the instructions so they will lift the casualty in unison and begin walking at the same time. Normally, the more experienced bearer is the leader. A combat medic who is not one of the bearers can give the instructions to the bearers when they begin the carry.

2-18. TWO-MAN FORWARD-AND-AFTER CARRY

The two-man fore-and-aft carry can be used to move a casualty for a long distance. If the two bearers are of different height, the taller bearer supports the casualty's upper body and the shorter bearer supports the casualty's legs.

a. The bearers position the casualty on his back with his arms by his sides (paragraph 2-4).

b. Both bearers prepare to lift the casualty (figure 2-17 A).

(1) The first (taller) bearer kneels at the casualty's head facing toward the casualty's feet. The bearer slides his hands under the casualty's armpits and across the casualty's chest. Then he locks his hands together over the casualty's chest.

(2) The second (shorter) bearer spreads the casualty's legs apart and kneels between the casualty's legs with his back to the casualty's head. He then reaches around the outside of the casualty's legs, places his hands under (behind) the casualty's knees, and secures his grip.

c. Once both bearers are prepared, the leader gives the command to lift the casualty.

d. Both bearers rise together, lifting the casualty (figure 2-17 B).

e. Upon the command of the leader, both bearers walk forward.

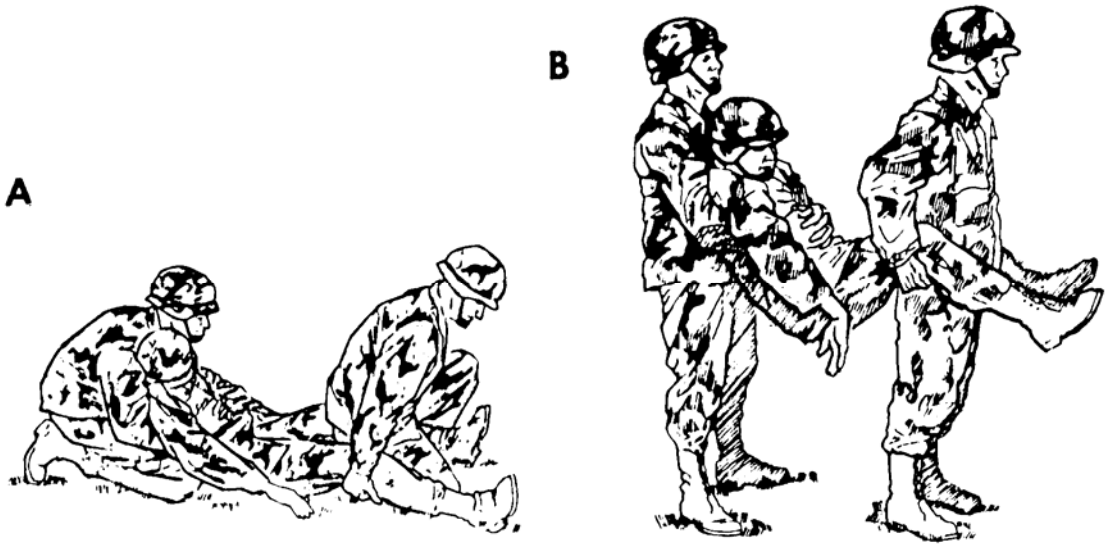

Figure 2-17. Two-man forward-and-after carry.

2-19. TWO-MAN SUPPORT CARRY

The two-man support carry can be used to transport a casualty for a long distance. The carry has two versions. The regular version (figure 2-18 A) is especially useful when transporting a conscious casualty who can hop or walk with assistance. The second version (figure 2-18 B) can be used when the casualty is taller than the bearers and cannot walk.

a. The bearers kneel on each side of the casualty and face the same direction as the casualty.

b. Each bearer grasps the wrist of the casualty's near arm with his far (outside) hand.

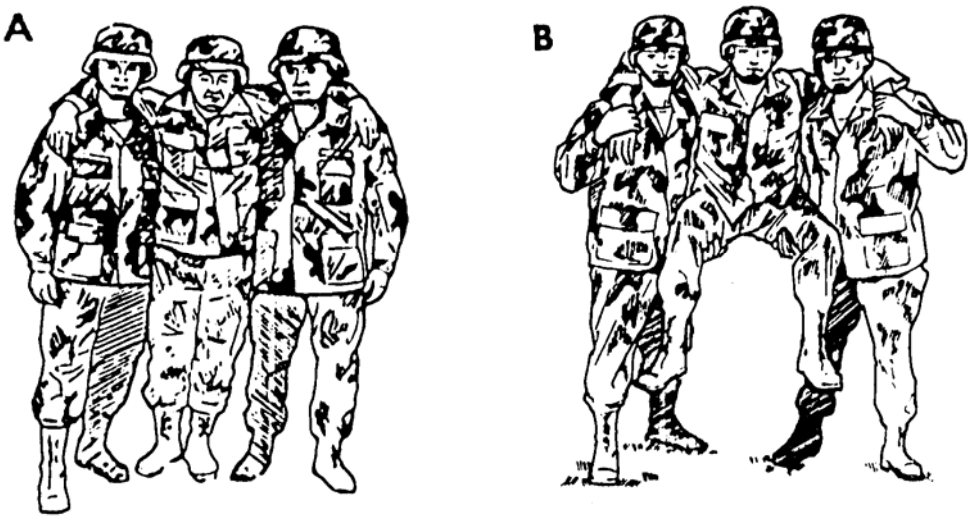

Figure 2-18. Two-man support carry.

c. Each bearer brings the casualty's arm around his (the bearer's) neck and maintains his grasp on the casualty's wrist.

d. Each bearer puts his other arm (the inside arm near the casualty) around the casualty's waist.

e. Upon the command from the leader, both bearers rise in unison, lifting the casualty. If the casualty is conscious, he can help the bearers lift his weight. The bearers' arms around the casualty's wrist should support most of the weight.

(1) If the casualty is conscious, can walk or hop, and can hold on to the bearers' shoulders, the bearers can release the casualty's wrists (figure 2-18 A).

(2) If the casualty is unconscious, the bearers do not release the casualty's wrists.

(3) If the casualty is taller than the bearers, the bearers can remove their arms from around the casualty's waist and use them to lift and support the casualty's thighs (figure 2-18 B). This will keep the casualty's feet from dragging.

f. Upon the command of the leader, both bearers walk forward.

2-20. TWO-MAN ARMS CARRY

The two-man arms carry can be used to move a casualty a moderate distance. If the casualty is heavy or if the casualty's head or legs need additional support, more than two bearers may be required.

a. The bearers position the casualty on his back (paragraph 2-4).

b. The bearers place the casualty's arms on his abdomen.

(1) If the casualty is conscious, have him use one hand to grasp his other wrist.

(2) If the casualty is unconscious, tie his wrists together loosely using a muslin bandage, field dressing, or similar material.

c. Both bearers position themselves on the same side of the casualty one at the casualty's chest and one at his thighs.

d. Both bearers kneel on one knee and place their arms under the casualty (figure 2-19 A).

(1) The bearer at the casualty's chest slips one arm beneath the casualty's shoulders and the other arm beneath his waist.

(2) The bearer at the casualty's thighs slips one arm beneath the casualty's hips and the other arm beneath his knees.

e. Upon command from the leader, both bearers shift their weight backward in unison and lift the casualty to knee level (figure 2-19 B), keeping the casualty as level as possible.

f. Upon command from the leader, both bearers turn the casualty's front toward their chests.

g. Upon command from the leader, both bearers rise to their feet in unison (figure 2-19 C).

h. Upon command from the leader, both bearers move forward. The bearers should carry the casualty high on their chests to lessen fatigue.

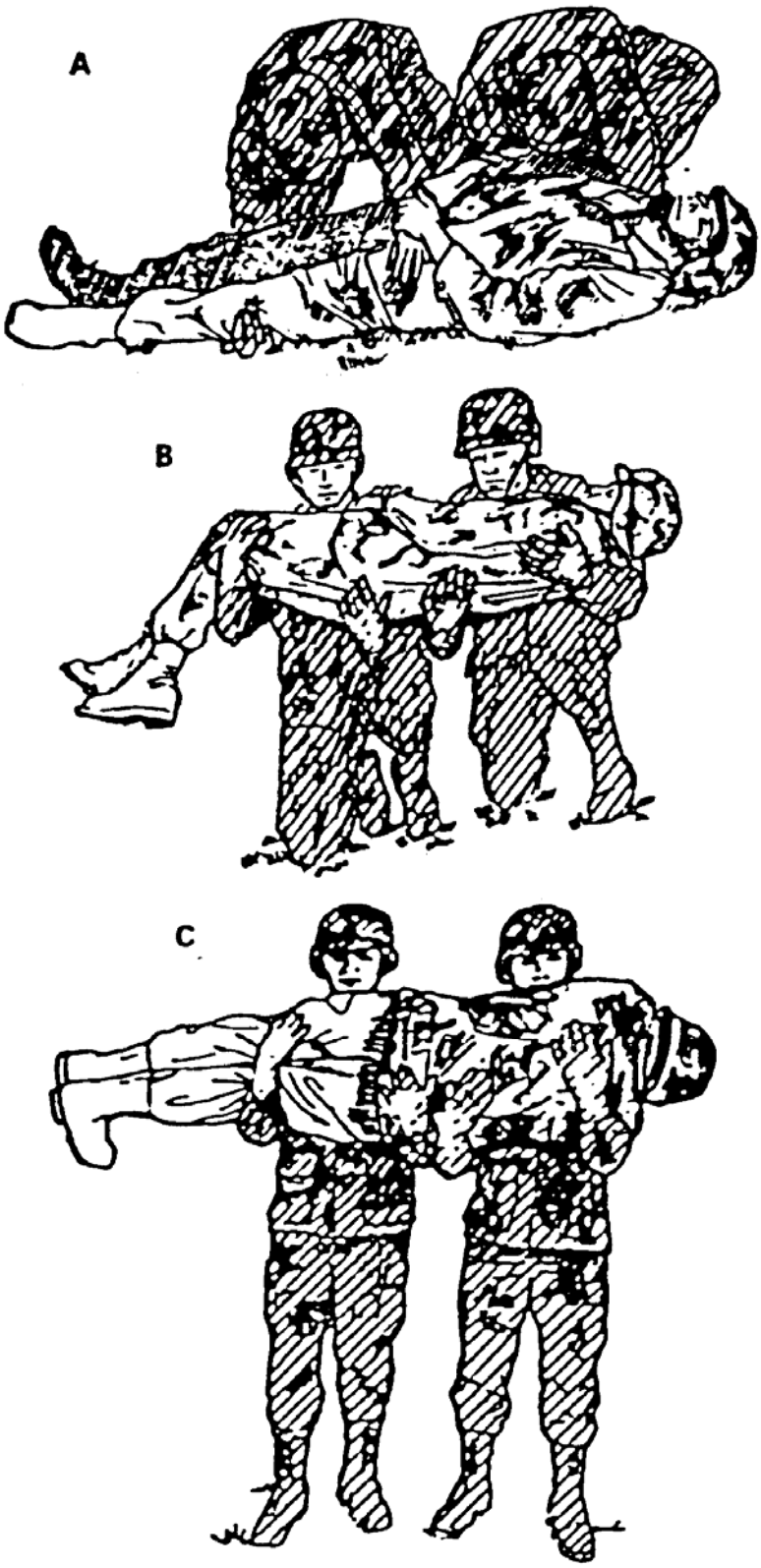

Figure 2-19. Two-man arms carry.

2-21. TWO-HAND SEAT CARRY

The two-hand seat carry (figure 2-20) is used to move a casualty a short distance. The carry is performed in the following manner.

a. The bearers position the casualty on his back (paragraph 2-4).

b. The bearers position themselves on opposite sides of the casualty's hips (facing each other) and kneel.

c. Each bearer passes one arm under the casualty's back and the other arm under the casualty's thigh.

d. The bearers grasp each other's wrists securely.

e. Upon command from the leader, both bearers (still facing each other) rise in unison, lifting the casualty.

f. Upon command from the leader, both bearers move forward.

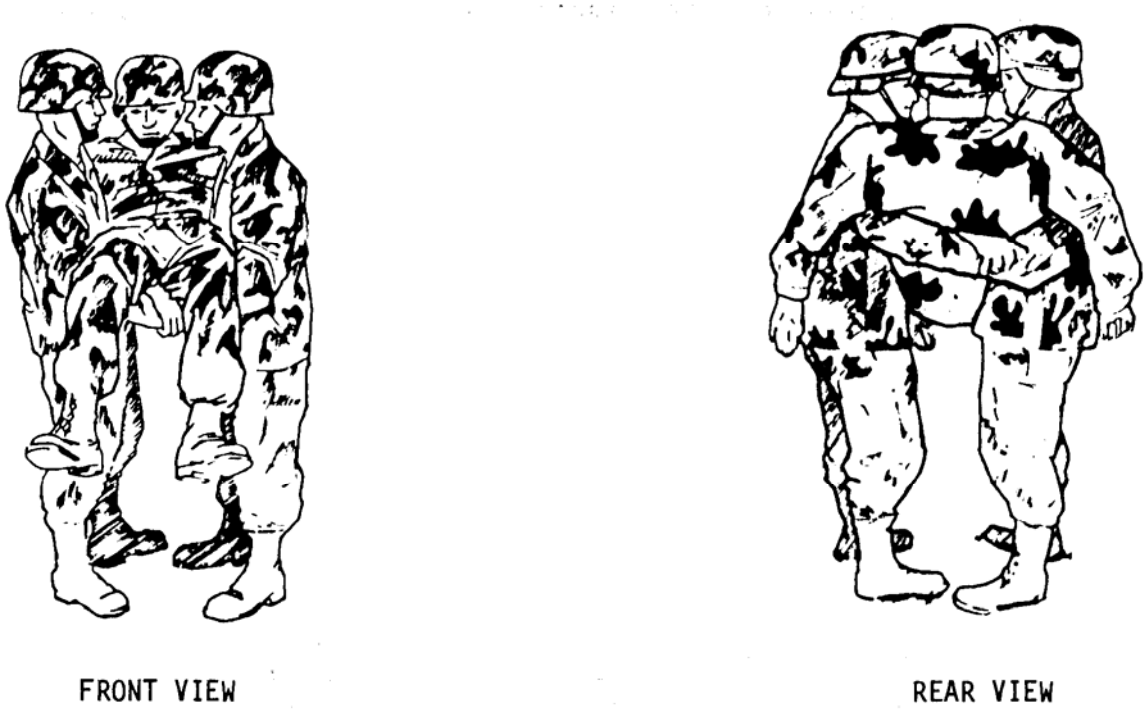

Figure 2-20. Two-hand seat carry.

2-22. FOUR-HAND SEAT CARRY

The four-hand seat carry can be used if the casualty is conscious and can grasp the bearers' shoulders. The carry is used for moderate distances.

a. Both bearers position themselves behind the casualty and face each other.

b. Each bearer grasps his own left wrist with his right hand and grasps the other bearer's right wrist with his left hand. This forms the seat (packsaddle) for the casualty (figure 2-2l A).

c. Have the casualty stand up or have another soldier help the casualty to a standing position.

d. Both bearers lower their bodies so the seat is low enough for the casualty to sit (about even with the casualty's knees).

e. Have the casualty sit on the bearers' forearms and place his arms around the bearers' shoulders for balance and support.

f. Upon command from the leader, both bearers stand erect, lifting the casualty (figure 2-21 B).

g. Upon command from the leader, both bearers move forward.

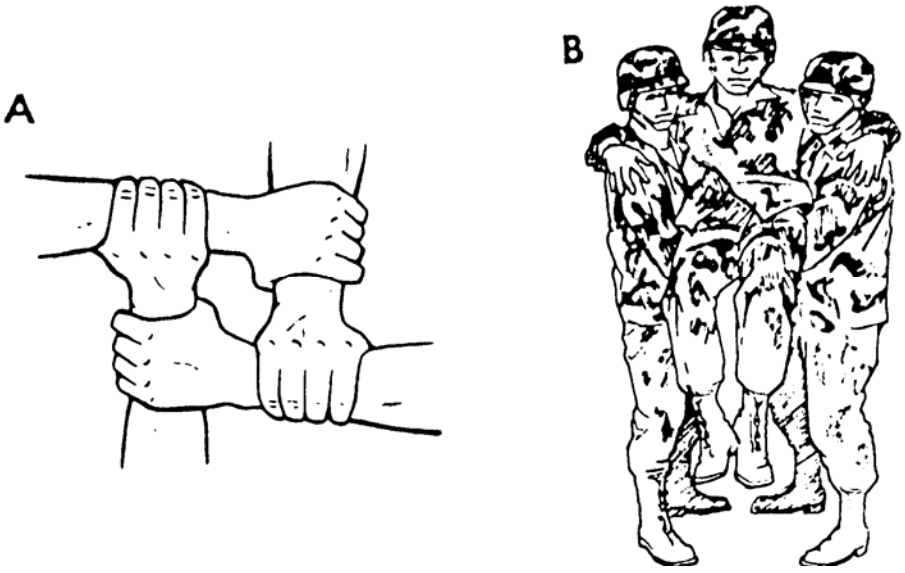

Figure 2-21. Four-hand seat carry.

Continue with Exercises

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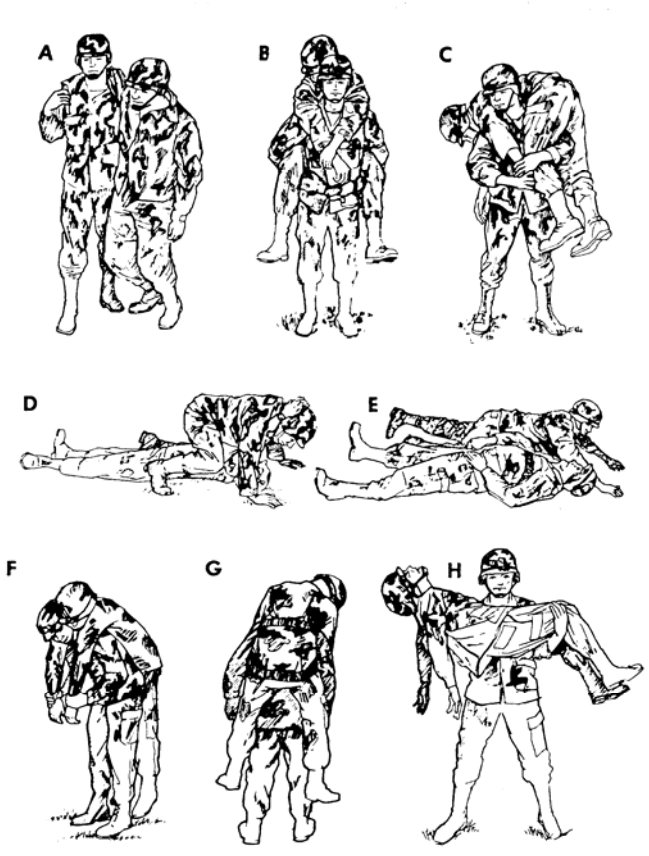
EXERCISES, LESSON 2

INSTRUCTIONS: Answer the following exercises by marking the lettered response that best answers the question or best completes the incomplete statement or by writing the answer in the space provided at the end of the exercise.

After you have completed all the exercises, turn to "Solutions to Exercises" at the end of the lesson and check your answers. For each exercise answered incorrectly, reread the material referenced with the solution.

SPECIAL INSTRUCTIONS FOR EXERCISES 1 THROUGH 8. In exercises 1 through 8, match the name of the one-man carry on the left with the correct letter of the illustration on the right.

1. Arms carry. ____
2. Fireman's carry. ____
3. Neck drag. ____
4. Pack-strap carry. ____
5. Pistol-belt carry. ____
6. Pistol-belt drag ____
7. Saddleback carry. ____
8. Support carry ____



SPECIAL INSTRUCTIONS FOR EXERCISES 9 THROUGH 13. In exercises 9 through 13, match the two-man carry in the left column with the correct letter of the illustration in the right column.

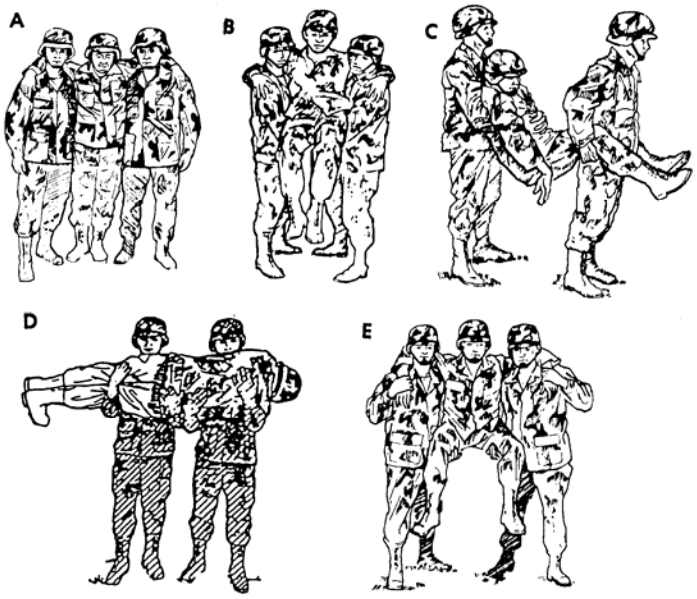
9. Four-hand seat carry.___

10. Arms carry. ___

11. Fore-and-aft carry. ___

12. Support carry (normal). ___

13. Support carry (tall casualty). ___



14. Which one-man carries should only be used if the casualty is conscious?

_____

15. Which two-man carry should only be used if the casualty is conscious and can grasp the bearer's shoulders?

_____

16. Which one-man carries are used to move the casualty for distances of more than 300 meters?

_____

17. Which two-man carries are used to move the casualty for distances of more than 300 meters?

_____

18. Which one-man carries are not used if the casualty has a fractured arm? Do not list those carries that can be used if only one arm is fractured.

_____

19. Two soldiers are going to evacuate a casualty using the two-man fore-and-aft carry. One soldier is several inches taller than the other. Will the height difference affect the carry?

    a. Yes, the tall soldier should support the casualty's upper body.

    b. Yes, the tall soldier should support the casualty's legs.

    c. No.

20. You and another soldier are going to move a casualty using the two-man support carry. The casualty is unconscious and is considerably taller than you and the other bearer. How will this affect the way you and the other bearer perform the carry (as opposed to transporting a conscious, shorter casualty)?

    a. Each bearer will continue to grasp the wrist of the casualty's arm that is around his neck.

    b. Each bearer will use one arm to lift and support the casualty's thigh.

    c. You will use a cravat, field dressing, or similar material to tie the casualty's wrists together.

    d. Responses a and b above are correct.

    e. Responses a, b, and c above are correct.

21. What one-man carry is normally used when you need to move an unconscious casualty down a flight of stairs?

_____

22. You are moving an injured soldier using the pack-strap carry. The casualty's hands should be grasped so the:

    a. Palms of his hands are up (away from your body).

    b. Palms of his hands are down (toward your body).

    c. Palms of his hands are facing each other.

    d. Backs of his hands are pressed together.

23. You must move an unconscious casualty and keep both the casualty and yourself as close to the ground as possible. Which carry should you use?

    _____

24. Which one-man carry is usually preferred for quickly moving an unconscious or severely injured casualty for a moderate distance?

    _____

25. A casualty is lying on his back. You have dressed a wound on his left side. In order to turn him onto his abdomen, you should:

    a. Kneel at his left side, grab his far shoulder and hip, and pull so the casualty rolls onto his front.

    b. Kneel at his left side, grab his near shoulder and hip, and push so the casualty rolls onto his front.

    c. Kneel at his right side, grab his near shoulder and hip, and push so the casualty rolls onto his front.

    d. Kneel at his right side, grab his far shoulder and hip, and pull so the casualty rolls onto his front.

26. You must carry an unconscious casualty for a long distance. Also, you want to have both hands free to climb a steep embankment. What carry should you use?

    _____

Check Your Answers on Next Page

SOLUTIONS TO EXERCISES, LESSON 2

1. H (para 2-7)
2. C (para 2-6)
3. D (para 2-14)
4. F (para 2-10)
5. G (para 2-11)
6. E (para 2-13)
7. B (para 2-9)
8. A (para 2-8)
9. B (para 2-22)
10. D (para 2-20)
11. C (para 2-18)
12. A (para 2-19)
13. E (para 2-19)
14. Support carry, saddleback carry. (paras 2-3, 2-8, 2-9)
15. Four-hand seat carry. (paras 2-16, 2-22)
16. Fireman's, support, saddleback, pistol-belt, and LBE carries. (para 2-3)
17. Two-man fore-and-aft carry, two-man support carry. (para 2-16)
18. Pack-strap carry, neck drag. (paras 2-3, 2-10, 2-14)
19. a (para 2-18)
20. d (para 2-19e(2), e(3))
21. Cradle drop drag. (paras 2-3j, 2-15)

22. b (para 2-10d)

23. Pistol-belt drag. (paras 2-3h, 2-13)

24. Fireman's carry. (paras 2-3a, 2-6)

25. d (paras 2-4a, d, e)

26. Pistol-belt carry. (paras 2-3f, 2-11)

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