

NASG Application

**Step-by-Step Instructions
Average Height Conscious Woman**



When to Apply the NASG

The NASG should be applied on a woman experiencing obstetric haemorrhage and shock. She may show one or more of the following signs and symptoms:

- Increased pulse/tachycardia
- Decreased blood pressure/hypotension
- Rapid respirations/tachypnea
- Pallor (pale skin)
- Sweating/diaphoresis
- Clamminess
- Cold extremities
- Confusion or agitation
- Loss of consciousness
- May or may not have heavy external bleeding

STEP 1

Call For Help

- Anyone (a health care worker, family member, porter, driver, cleaner) can help
- Shock is easier to manage in a team

STEP 1 (cont.)

Know where your NASGs are stored



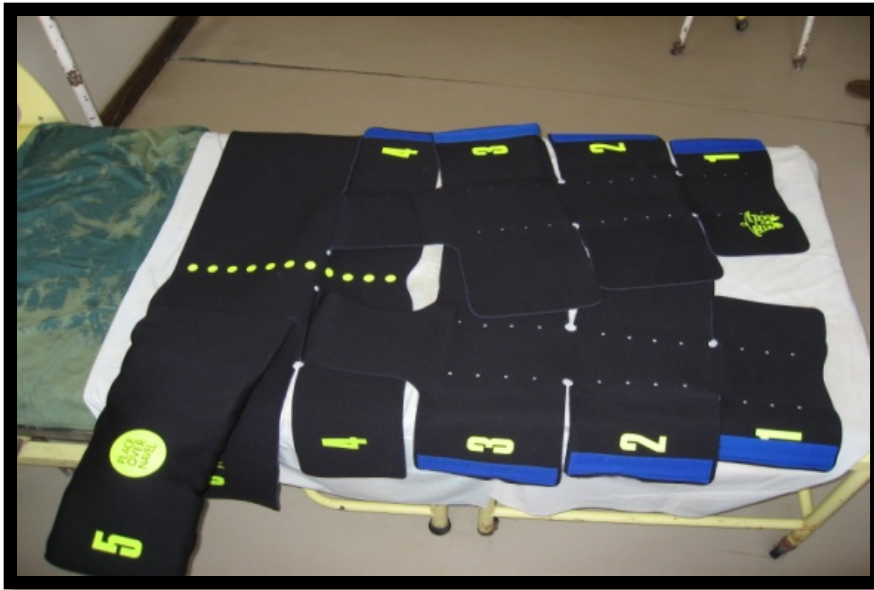
STEP 2

- Always wear gloves when applying the NASG
- If the woman is conscious and already lying down, ask her to first raise her feet and then lift her hips as you slide the NASG under her.



STEP 2 (cont.)

If she is sitting up or able to move easily, you may spread out the NASG on a bed or surface and have her lie down on top of it



STEP 3

The top of the NASG (segments #5 and #6) should be at her lowest rib.

The pressure ball should be placed over the umbilicus.
(Do not close any segments yet.)



STEP 3 (cont.)

Next, look at her ankles, if the bottom of the NASG segment #1 is at her ankles, proceed to step 4

If the woman is shorter and the NASG extends beyond her ankles, see instructions for "NASG Application on a Short Woman"



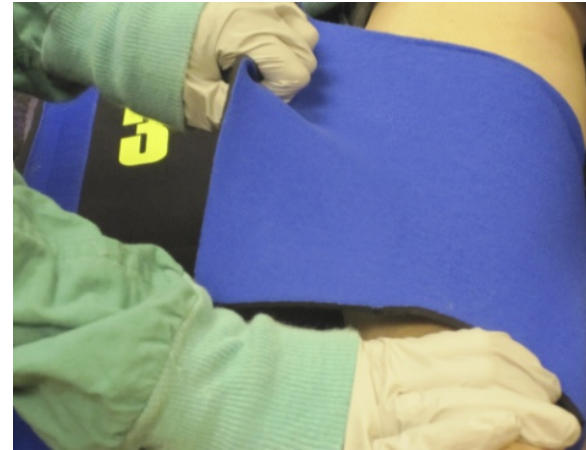
STEP 4

Starting at the ankles, close segment pair #1 tightly around each ankle.



STEP 4 (cont.)

To apply tightly, apply each segment by first pulling the non-Velcro side with all your strength over the leg or body.



STEP 4 (cont.)

Then pull the Velcro side with all your strength over the leg or body and secure it to the first side with the Velcro fastening.



Snap Test



To check that the segment is wrapped tightly enough, put your finger under the top layer of the closed segment. Pull the fabric up.

Release your finger. The fabric should make a sharp **SNAP** sound.



STEP 5

Close segment pair #2 on each calf as tightly as possible. Close the segments tightly enough that you can hear a **SNAP** sound when you lift and release the fabric.



STEP 5 (cont.)

If possible, leave room between segment pair #2 and segment pair # 3 so that the woman's knee can bend.

However, rapid application is more important than knee mobility.



STEP 6 (cont.)

Apply segment pair #3, the thigh segments, in the same way. Close the segments tightly enough that you can hear a **SNAP** sound when you lift and release the fabric.



Leg Segment Pairs Only

If there are two people present, each one can apply the segment pairs #1, #2, and #3 to each leg



Segments #4, #5, & #6

Even if there are two people placing the leg segments (each person applying the NASG to one leg), only one person should close segments #4, #5 and #6.



STEP 7

Segment #4, the pelvic segment, goes all the way around the woman's pelvis. **ONLY ONE PERSON** APPLIES SEGMENT #4



STEP 8

Place segment #5, with the pressure ball, over the woman's umbilicus (navel, belly button).



Segment # 5 is a partial segment, it does not have Velcro and does not go all the way around the woman's body.

STEP 8 (cont.)

Then pull the non-Velcro side of Segment # 6, tightly across the #5 segment.



STEP 8 (cont.)

Then, close the NASG tightly using the side of segment #6 with the Velcro



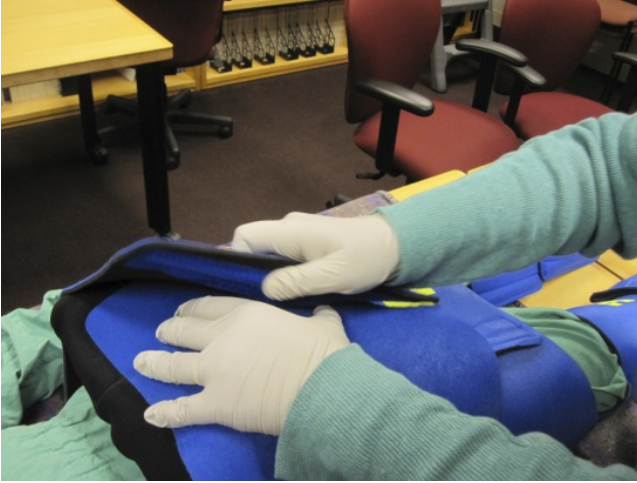
For Large Women



If the woman is very large, you may need to get up very close to her.

Lift the Velcro side of segment #6 straight up, then wrap over her body using all your strength

Finish Application



Ask the patient to take a deep breath to ensure the segment is not constricting her breathing.



Loosen slightly if needed, do not open the segment.

Hold it with one hand, loosen the Velcro and then close the Velcro.

When Finished Applying the NASG

If the source of bleeding appears to be uterine atony massage the uterus.

The NASG stretches, allowing room for your hand under the foam pressure ball.



Follow Standard Procedures for Managing Haemorrhage and Shock

Procedures/protocol may vary depending on your facility and the etiology of the haemorrhage

If you are at a facility that cannot provide blood/surgery, the woman will have to be transferred to a higher level.

NASG APPLICATION ON A SHORTER WOMAN



STEP 1



Have the woman lie down on an opened NASG

OR



Slide an NASG under the woman

STEP 2

Place the top of the NASG at the level of the woman's lowest rib and place the ball in segment #5 over her umbilicus.
Do not close segment #5 yet.



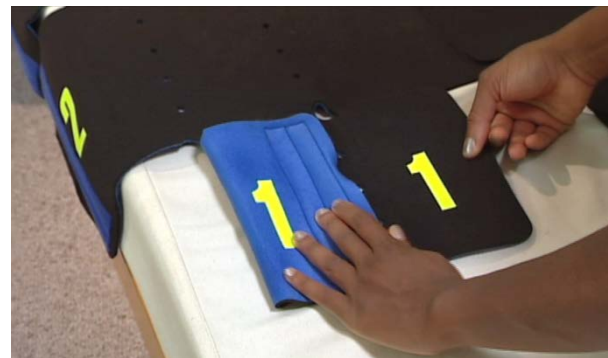
STEP 2 (cont.)

Then, look at her ankles: if segment pair #1 is past her ankles, you will need to start application with segment pair #2



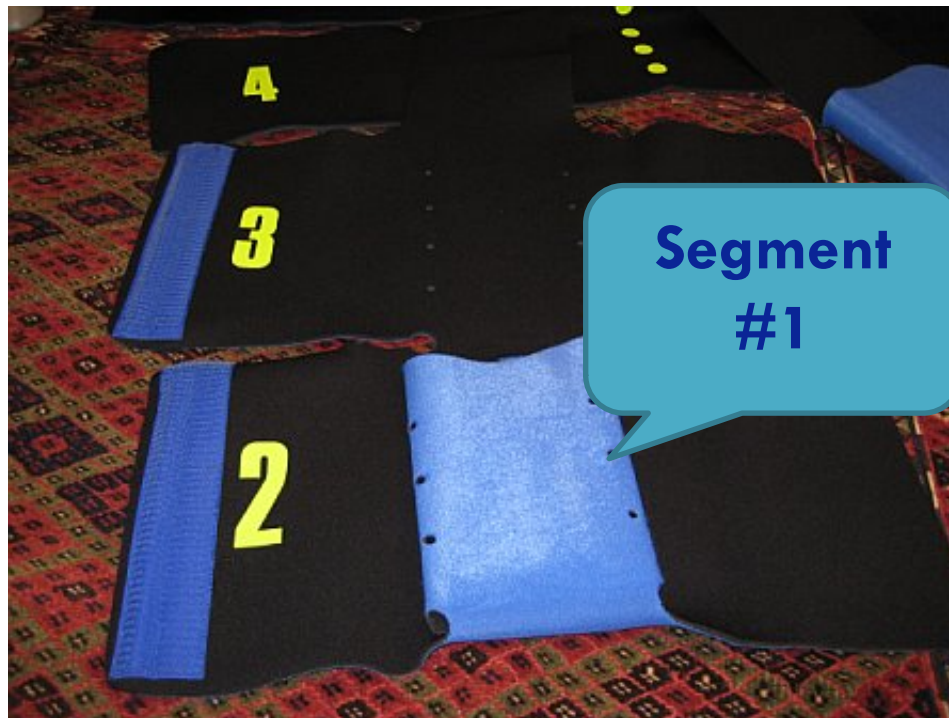
Make the NASG Legs Shorter

Fold segment pair #1 so that the Velcro is on the inside, close the non-Velcro side of segment pair #1 over the Velcro side



Making the NASG Shorter (cont.)

Then fold the closed segment pair #1 inside of segment pair #2



STEP 3

Start application with segment pair #2 at the woman's ankles.



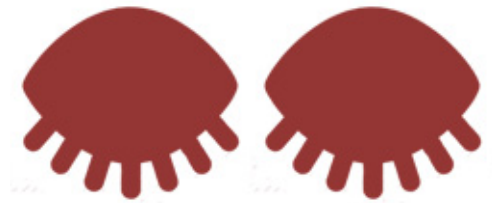
STEP 4

Proceed with segment pair #3 on the thighs, and continue the application of the NASG, ensuring that the pressure ball in segment #5 is over the umbilicus.



NASG Application on an Unconscious Woman

Two people will need to work together to apply the NASG on an unconscious woman



STEP 1



Turn the woman on her left side. Lay an NASG on the bed next to her and open only segments #4, #5 and #6.

Keep segment pairs #1, #2 and #3 closed, but not fastened with Velcro.

STEP 2

Fold the Velcro sides of segments #4 and #6 once toward the yellow midline dots to prevent the Velcro from sticking.



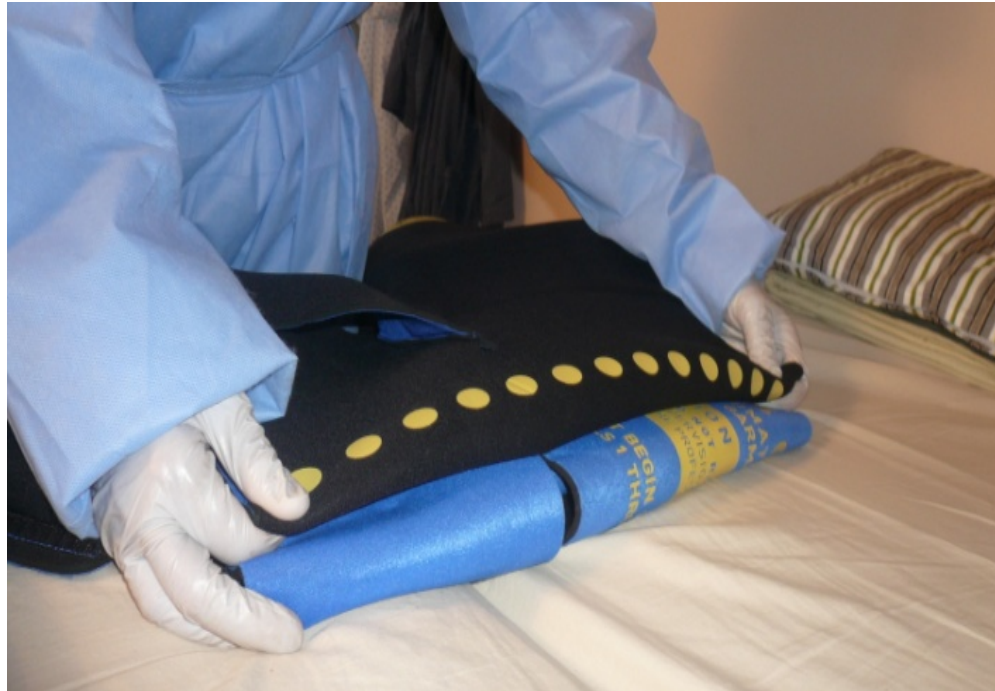
STEP 3

Roll segments #4 and #6 toward the yellow dotted midline so that the rolled edge lies along the yellow dotted midline.



STEP 4

Take the folded segments #4 and #6 and fold them underneath the unfolded side of the NASG, along the yellow dotted midline.



STEP 5

Place the rolled NASG on the bed with the dotted line along her spine and the top edge of the NASG at the level of her lowest rib.



STEP 6



Next turn the woman over the folded portions of the NASG. She should now be on her right side.

The person on her left (behind her) should pull the folded segments #4 and #6 out from under the woman.

STEP 7

Turn the woman on her back. The yellow dots will be along her spine. Check the positioning of the NASG by placing the ball in segment #5 over her umbilicus without closing the NASG.



STEP 8

Begin closing the segments starting with segment pair #1 at the ankles



Follow Standard Procedures for Managing Haemorrhage and Shock

Procedures/protocol may vary depending on your facility and the etiology of the haemorrhage

If you are at a facility that cannot provide blood/surgery, the woman will have to be transferred to a higher level

DO NOT REMOVE THE NASG Unless Trained

The NASG should only be removed by a trained health care provider in a referral facility. Keep the NASG in place during transfer. The woman should have an IV in place as soon as possible.

