

HOW TO TAKE A BULLET

1 Face the shooter.

You do not want to take the bullet in your back or the base of your skull.

2 Get low.

In addition to making yourself a smaller target, by keeping a low profile you will be better able to protect your head, neck, and midline—all areas where a bullet wound is most likely to cause fatal injury or permanent disability.

3 Sit.

Sit with your rear end on the ground. Bend your knees and keep your legs in front of you, protecting your midline with your shins and thighs.

4 Move your elbows into the center of your body.

Place both forearms in front of you, covering your face.

5 Place your hands over your head.

Hold your fingers together, with your palms toward you. Keep your hands an inch or two in front of you to absorb the impact of the bullet.

6 Wait for the impact.

You may notice little more than a “punch” sensation, or you may feel nothing at all.

7 Determine the site of the injury.

Bullet wounds in the hands and feet, lower legs, and forearms are rarely fatal, provided blood loss is controlled.

8 Control the bleeding.

Place firm, direct pressure on the wound to slow blood loss. If the bullet entered an appendage and pressure does not stop the bleeding, use a belt or narrow strip of cloth as a tourniquet. Place the tourniquet on the affected limb, several inches above the injury site. It should be tight enough to stop heavy blood flow. A tourniquet may cause permanent damage to the affected limb, and should be used only as a last resort. Never leave a tourniquet in place for more than a few minutes.

9 Get help.

Seek medical attention as soon as possible.

Be Aware

- If you are crouching next to a wall, stay a foot or more away from the surface. Bullets will skid along the wall after impact.
- Gunshot wounds to the neck are almost always fatal.
- Most interior walls and doors (including car doors) will not stop a bullet larger than .22 or .25 caliber.