

Phtls Manual Military Version

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Phtls Military Manual

Aehlert, Robert Vroman



Phtls Military Manual:

USMC FIELD MEDICAL SERVICE TECHNICIAN FMST TCCC Manual , The FIELD MEDICAL SERVICE TECHNICIAN provides medical and dental services for personnel in field units also provides technical and administrative assistance to support the mission and functions of the Navy and Marine Corps field units Maintains organizational level AMAL s and ADAL s Assits in the procurement and distribution of supplies and equipment for field use and combat areas Maintains field treatment facilities Renders first aid and emergency medical and dental treatment to unt personnel combatants Coordinates and performs medical evacuation procedures Ensures observance of field sanitary measures and preventive measures in specialized warfare Conducts first aid and health education training programs

COURSE DESCRIPTION During this 8 week course you will have a mix of classroom and field training Emphasis is placed on learning field medicine by using the principles of Tactical Combat Casualty Care TCCC This includes familiarization with USMC organization and procedures logistics and administrative support in a field environment Additionally training will include general military subjects individual and small unit tactics military drills physical training conditioning and weapons familiarization with the opportunity to fire the rifle Completion of FMST results in the student receiving Navy Enlisted Classification HM 8404

MEDICAL SPECIFIC CONTENT PREVENTIVE MEDICINE Treat Dehydration FMST 201 Treat Environmental Heat Injuries FMST 202 Manage Environmental Cold Injuries FMST 203 Perform Care of the Feet FMST 204 Perform Water Purification for Individual Use FMST 205 Supervise Field Waste Disposal FMST 206 Manage Envenomation Injuries FMST 207 Review Questions

COMBAT MEDICINE Introduction to Tactical Combat Casualty Care FMST 401 Manage Shock Casualties FMST 402 Manage Hemorrhage FMST 403 Maintain Airway FMST 404 Perform Emergency Cricothyroidotomy FMST 405 Manage Respiratory Trauma FMST 406 Manage Abdominal Injuries FMST 407 Manage Musculoskeletal Injuries FMST 408 Manage Head Neck and Face Injuries FMST 409 Tactical Fluid Resuscitation FMST 410 Perform Casualty Assessment FMST 411 Medication Appendix Review Questions

COMPONENTS OF FIELD MEDICINE Blast Related Injuries FMST 501 Traumatic Brain Injury TBI FMST 502 Manage Burn Casualties FMST 503 Conduct Triage FMST 504 Coordinate Casualty Tactical Evacuation FMST 505 Perform Aid Station Procedures FMST 506 Medical Support for Military Operations in Urban Terrain

MOUT FMST 507 Review Questions

PHTLS: Prehospital Trauma Life Support, Military Edition National Association of Emergency Medical Technicians, 2019-10 PHTLS Prehospital Trauma Life Support Military Edition consists of the PHTLS core content and features thirteen chapters written by military prehospital trauma care experts for practitioners in the military environment PHTLS Prehospital Trauma Life Support Military Edition is created in partnership between the National Association of Emergency

U.S. NAVY HOSPITAL CORPSMAN & USMC FIELD MEDICAL SERVICE TECHNICIAN FMST TACTICAL COMBAT CASUALTY TCCC 2013 & 2014 STUDENT HANDBOOK , 2017-01-01 The FIELD MEDICAL SERVICE TECHNICIAN provides medical and dental services for personnel in field units also provides technical and administrative

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Classification HM 8404 *USMC Tactical Combat Casualty Care (TCCC / TC3) Guidelines* ,2013-10-28 Tactical Combat
Casualty Care Guidelines 28 October 2013 All changes to the guidelines made since those published in the 2010 Seventh
Edition of the PHTLS Manual are shown in bold text The most recent changes are shown in red text These recommendations
are intended to be guidelines only and are not a substitute for clinical judgment Basic Management Plan for Care Under Fire
1 Return fire and take cover 2 Direct or expect casualty to remain engaged as a combatant if appropriate 3 Direct casualty to
move to cover and apply self aid if able 4 Try to keep the casualty from sustaining additional wounds 5 Casualties should be
extricated from burning vehicles or buildings and moved to places of relative safety Do what is necessary to stop the burning
process 6 Airway management is generally best deferred until the Tactical Field Care phase 7 Stop life threatening external
hemorrhage if tactically feasible Direct casualty to control hemorrhage by self aid if able Use a CoTCCC recommended
tourniquet for hemorrhage that is anatomically amenable to tourniquet application Apply the tourniquet proximal to the
bleeding site over the uniform tighten and move the casualty to cover *USMC COMBAT LIFESAVER / TACTICAL COMBAT
CASUALTY CARE TCCC TRAINER COURSE INSTRUCTOR & STUDENT CURRICULUM* , BACKGROUND IN 1996 THE
NAVAL SPECIAL WARFARE COMMAND DEVELOPED A NEW SET OF TACTICALLY APPROPRIATE BATTLEFIELD TRAUMA
CARE GUIDELINES NAMED TCCC THE TCCC GUIDELINES WERE ADOPTED BY THE U S SPECIAL OPERATIONS
COMMAND USSOCOM AND APPROVED BY THE AMERICAN COLLEGE OF SURGEONS ACS AND THE NATIONAL
ASSOCIATION OF EMERGENCY MEDICAL TECHNICIANS THE COMMITTEE ON TCCC WAS ESTABLISHED IN 2001 AND
WAS DIRECTED TO FURTHER DEVELOP THE TCCC STANDARDS AND GUIDELINES THE COMMITTEE ON TCCC
FUNCTIONS AS A WORKING GROUP OF THE TRAUMA AND INJURY SUBCOMMITTEE OF THE DEFENSE HEALTH BOARD
DHB WHICH HAS A CHARTER TO PROVIDE MEDICAL RECOMMENDATIONS TO ASD HA AND THE SERVICE SURGEONS
GENERAL TCCC CONCEPTS WERE INCORPORATED INTO THE 8404 CORPSMAN TRAINING CURRICULUM IN 2005 THE

TCCC CLS TRAINER COURSE WAS DEVELOPED IN 2006 TO PROVIDE CORPSMEN AS TRAINERS TO TEACH AND SUSTAIN TCCC STANDARDS TO CORPSMEN AND CLS SKILLS TO SELECTED MARINES WITHIN THE OPERATING FORCES THE IMPLEMENTATION OF TCCC ACROSS ALL SERVICES HAS BEEN IDENTIFIED AS ONE OF THE CONTRIBUTING FACTORS TO THE HIGHEST COMBAT CASUALTY SURVIVAL RATES IN HISTORY AND IS RECOMMENDED BY ASD HA FOR USE WHEN TRAINING COMBAT MEDICAL PERSONNEL REF B TCCC INFORMATION IS PUBLISHED IN THE PREHOSPITAL TRAUMA LIFE SUPPORT MANUAL PHTLS MILITARY EDITION WHICH IS UPDATED EVERY FOUR YEARS DEPARTMENT OF DEFENSE DOD APPROVED TCCC TRAINING CURRICULA ARE UPDATED ON THE DOD WEBSITE MHS OSD MIL EDUCATION AND TRAINING TCCC ASPX AS THE TCCC GUIDELINES CHANGE GOAL ELIMINATE PREVENTABLE LOSS OF LIFE ON THE BATTLEFIELD IN ACCOMPLISHING THIS GOAL THE MOST RECENT TCCC GUIDELINES APPROVED BY DOD ARE TO BE UTILIZED AS A MEANS OF PROVIDING STANDARDIZED TRAINING TO THE MARINE CORPS AND IMPROVING FIRST RESPONDER CARE AT THE POINT OF INJURY HISTORY OF TCCC a It is important to realize that civilian trauma care in a non tactical setting is dissimilar to trauma care in a combat environment TCCC and CLS are an attempt to better prepare medical and non medical personnel for the unique factors associated with combat trauma casualties b Historical data shows that 90% of combat wound fatalities die on the battlefield before reaching a military treatment facility This fact illustrates the importance of first responder care at the point of injury c TCCC was originally a US Special Operations research project which was composed of trauma management guidelines focusing on casualty care at the point of injury d TCCC guidelines are currently used throughout the US Military and various allied countries e TCCC guidelines were first introduced in 1996 for use by Special Operations corpsmen medics and pararescue PJs f The TCCC guidelines are currently endorsed by the American College of Surgeons Committee on Trauma and the National Association of Emergency Medical Technicians The guidelines have been incorporated into the Prehospital Trauma Life Support PHTLS text since the 4th edition STUDENT CURRICULUM Tactical Combat Casualty Care CLS Overview Identify Medical Fundamentals Manage Hemorrhage Maintain Casualty Airway Manage Penetrating Chest Injuries Manage Hemorrhagic Shock Manage Burn Casualties Perform Splinting Techniques Administer Battlefield Medications Perform Casualty Movement Perform Combat Lifesaver Triage Perform Combat Lifesaver Care Manuals Combined: U.S. Marine Corps Basic Reconnaissance Course (BRC) References , Over 5 300 total pages MARINE RECON Reconnaissance units are the commander s eyes and ears on the battlefield They are task organized as a highly trained six man team capable of conducting specific missions behind enemy lines Employed as part of the Marine Air Ground Task Force reconnaissance teams provide timely information to the supported commander to shape and influence the battlefield The varying types of missions a Reconnaissance team conduct depends on how deep in the battle space they are operating Division Reconnaissance units support the close and distant battlespace while Force Reconnaissance units conduct deep

reconnaissance in support of a landing force Common missions include but are not limited to Plan coordinate and conduct amphibious ground reconnaissance and surveillance to observe identify and report enemy activity and collect other information of military significance Conduct specialized surveying to include underwater reconnaissance and or demolitions beach permeability and topography routes bridges structures urban rural areas helicopter landing zones LZ parachute drop zones DZ aircraft forward operating sites and mechanized reconnaissance missions When properly task organized with other forces equipment or personnel assist in specialized engineer radio and other special reconnaissance missions Infiltrate mission areas by necessary means to include surface subsurface and airborne operations Conduct Initial Terminal Guidance ITG for helicopters landing craft parachutists air delivery and re supply Designate and engage selected targets with organic weapons and force fires to support battlespace shaping This includes designation and terminal guidance of precision guided munitions Conduct post strike reconnaissance to determine and report battle damage assessment on a specified target or area Conduct limited scale raids and ambushes Just a SAMPLE of the included publications BASIC RECONNAISSANCE COURSE PREPARATION GUIDE RECONNAISSANCE RECON TRAINING AND READINESS T R MANUAL RECONNAISSANCE REPORTS GUIDE GROUND RECONNAISSANCE OPERATIONS GROUND COMBAT OPERATIONS Supporting Arms Observer Spotter and Controller DEEP AIR SUPPORT SCOUTING AND PATROLLING Civil Affairs Tactics Techniques and Procedures MAGTF Intelligence Production and Analysis Counterintelligence Close Air Support Military Operations on Urbanized Terrain MOUT Convoy Operations Handbook TRAINING SUPPORT PACKAGE FOR CONVOY SURVIVABILITY Convoy Operations Battle Book Tactics Techniques and Procedures for Training Planning and Executing Convoy Operations Urban Attacks

PUBLICATIONS COMBINED: FIELD MEDICAL SERVICE OFFICER STUDENT HANDBOOK, SERVICE TECHNICIAN HANDBOOK (THREE VERSIONS), OUTLINES, FLEET MEDICAL POCKET REFERENCE, FIELD HYGIENE & SANITATION AND MUCH MORE ,2019-03-05 Over 3 000 total pages Contents FIELD MEDICAL SERVICE OFFICER STUDENT HANDBOOK FIELD MEDICAL SERVICE TECHNICIAN STUDENT HANDBOOK Version 4 1 Block 1 Student Outlines For Version 4 1 Block 2 Student Outlines For Version 4 1 FIELD MEDICAL SERVICE TECHNICIAN STUDENT HANDBOOK Version 4 0 FIELD MEDICAL SERVICE TECHNICIAN STUDENT HANDBOOK June 2013 FMST STUDY GUIDE 2015 Fleet Medicine Pocket Reference 2016 MCRP 4 11 1D FIELD HYGIENE AND SANITATION PREVENTION AND TREATMENT OF FIELD RELATED INJURIES STUDENT HANDOUT CASUALTY EVALUATION AND EVACUATION STUDENT HANDOUT COMBAT LIFESAVER TACTICAL COMBAT CASUALTY CARE STUDENT HANDOUT Combat Lifesaver Tactical Combat Casualty Care Instructor Course Student Handbook Command Philosophy My philosophy is basic provide the highest quality service possible to every person you encounter We are an institution of higher learning we need to be the best with everything we do We are preparing the next generation of heroes for the greatest fighting force on the planet the 8404 Hospital Corpsman assigned to the United States Marine Corps They operate at the tip of the spear

providing combat medicine to our operational forces they are critical to the success of the Navy ask for help before it's too late in all aspects of your life and career If you see a problem fix it or bring it to the attention of someone who can Don't ignore it Supporting each other is just as important as supporting the mission Continue the relentless pursuit of customer satisfaction feedback is a valuable tool in life and career Basic military courtesy should be a part of everyday life Always strive to do the right thing even when no one is looking or when tempted to take the easy wrong As a leader I believe all members of the team are important Our civilian shipmates are essential to the success of our mission As a military leader I believe as the Sailor creed says I proudly serve my country's Navy combat team with Honor Courage and Commitment I am committed to excellence and the fair treatment of all I cannot over emphasize the importance of leadership from E 1 to O 6 everyone has a part I expect officers to lead from the front by setting the example Be sure that regularly scheduled performance counseling sessions are conducted for military and civilian employees Cover the good which should be sustained as well as the areas which need improvement Although I like to be informed I believe in allowing leaders to lead managers to manage A big part of my job is to provide you the support systems necessary for you to accomplish your mission Tell me what you need and don't worry how it will be resourced Let me worry about that

U.S. Army Special Warfare Medical Group

SPECIAL OPERATIONS COMBAT MEDICAL SKILLS SUSTAINMENT COURSE: Tactical Combat Casualty Care

(TCCC) Training For The SOF Advanced Tactical Practitioner (ATP) , Scope a USSOCOM's principle function is to prepare SOF to carry out assigned missions This responsibility is derived from US Code Title 10 Section 167 In addition to organizing training and equipping SOF for unique missions medical education is fundamental to fulfilling this law Title 10 explicit responsibilities include development of strategy doctrine tactics conducting specialized courses of medical instruction for commissioned and non commissioned officers and monitoring the medical education and professional certification of officers and enlisted personnel USSOCOM's medical education and certification responsibilities are inherent responsibilities of developing strategy doctrine and tactics b The Commander United States Special Operations Command CDRUSSOCOM has the service like responsibility of providing joint training and education venues that specialize in the art and science of joint Special Operations and its medical support These efforts complete the education and training picture within the Department of Defense DOD While each of the Services and the joint community provide education and training to fill a particular niche i.e. naval warfare air warfare joint warfare etc the Joint Special Operations Medical Training Center JSOMTC within USSOCOM and the Air Force's Pararescue PJ course provides training to fill the medical niche of joint SOF core task requirements SOF medical training and certification is force wide designed to initiate maintain and or enhance medical skills of those SOF medics and non medics who are required to perform the unique global multi discipline mission of USSOCOM Within the parameters of this directive as outlined by first reference Glossary Section III USSOCOM's primary responsibility is the medical education and training and certification of SOF A secondary responsibility is the training and

education of select DOD interagency and international military personnel in the requirements capabilities and limitations of joint special operations organizations. Fostering a mutual understanding ensures the proper application of SOF and the enhancement of joint combined and interagency medical operations. General In support of the Global War On Terrorism GWOT Special Operations medical personnel often find themselves providing care for both trauma and non traumatic medical emergencies beyond the Forward Edge of the Battlefield Area Forward Line Of Troops often in non linear environments that may be far forward of any supporting medical infrastructure. This directive identifies the authority mission command relationships functions and responsibilities of the United States Special Operations Command as directed under Section 167 Title 10 of US Code to provide SOF medics with the required skill sets. In order to define and administer this SOF Medical skill set USSOCOM has established a SOF Emergency Medical Services EMS State that is administered by the Command Surgeon Medics who successfully complete the required academic requirements as defined within this directive will thus be known as SOF Advanced Tactical Practitioners ATP.

PHTLS National Association of Emergency Medical Technicians (U.S.). Pre-Hospital Trauma Life Support Committee, 1999. The PREHOSPITAL TRAUMA LIFE SUPPORT PHTLS course is a unique continuing education program created from the real need in EMS education for additional training in the handling of trauma patients. The course and the book PREHOSPITAL TRAUMA LIFE SUPPORT educate EMS personnel to identify stabilize treat and transport trauma patients with the highest level of care. Prehospital patients who are stabilized and then quickly transported to an appropriate medical facility have the best chance of survival. Identifying the mechanism of injury interpreting signs and symptoms understanding pathophysiology recognizing life threatening injuries and honing assessment skills all help the EMT to identify a trauma patient with multiple injuries and perform appropriate interventions. PHTLS treats the trauma patient as a special entity with needs that differ from those of other patients. Provides the most current information available through revised and updated chapters which adhere to the new 1998 ATLS guidelines. Features comprehensive coverage for both basic and advanced level training. Emphasizes the foundation of trauma care specifically understanding the mechanism of injury. Includes in depth coverage of anatomy and physiology pathophysiology assessment and management of trauma to key body systems and regions. Covers special patient populations including pediatrics geriatrics and pregnant patients to refresh the EMT regarding the importance of understanding the differences in physiology and presentation in these special populations. Contains an entire chapter devoted to trauma care in the military because prehospital care in military situations is indisputably different than most civilian trauma situations. Promotes clear practical understanding of the proper procedures for airway and spine skills with separate chapters that outline techniques and procedures with photos alongside text in a step by step format. Includes chapter objectives summary and review questions to help the student self assess and pick out key points from the material. Includes case scenarios and conclusions to promote critical thinking and allow the student to see real application of the concepts discussed in each chapter. Provides a

comprehensive glossary and bibliography to direct the reader when further study on a particular topic is desired
Incorporates more than 300 full color illustrations many updated and enlarged from previous edition to aid in visual learning
comprehension of material explanation of difficult concepts and keep reader s interest **Armed Conflict Injuries to the Extremities** Alexander Lerner, Michael Soudry, 2011-04-28 This book is designed to meet the continued need to re learn the principles of treatment of complex war injuries to the extremities in order to minimize post traumatic and post treatment complications and optimize functional recovery Most of the chapters are based on the unique experience gained in the treatment of military personnel who have suffered modern combat trauma and civilian victims of terror attacks at a single large level 1 trauma center The remaining chapters present the experience of leading international authorities in trauma and reconstructive surgery A staged treatment protocol is presented ranging from primary damage control through to definitive functional limb reconstruction The organization of medical aid anesthesiology diagnostic imaging infection prophylaxis and management of complications are reviewed and a special chapter is devoted to the challenging dilemma of limb salvage versus amputation in the treatment of limbs at risk *Trauma Team Dynamics* Lawrence Marshall Gillman, Sandy Widder, 2025-09-12 The majority of medical errors are non technical in nature stemming from faulty decision making asynchronous information gathering lack of situational awareness and ineffective communication and team leadership Reviews of accidents from other high risk industries including the airline industry have had similar findings This led the National Aeronautics and Space Administration NASA and the airline industry to develop crew now crisis resource management CRM training These team based training strategies address non technical skills to counteract human error and improve team and patient safety Medicine has begun adapting this training especially within the realms of anesthesia and critical care Trauma surgery has been slower to utilize this work however simulation based training is increasing in popularity The first edition of Trauma Team Dynamics was a revolutionary book in the field of trauma care It was the first text that integrated the complexities of trauma care but illustrated how these could be streamlined and improved through a team based focus and training CRM and team based training has grown substantially in the past six years since this text was conceived and there have been significant developments both in the breadth of the training as well as refinement in the topics covered teaching methods utilized and strategies employed to overcome the multitude of challenges still faced in this area The second edition of this text expands greatly on the initial CRM topics covered in the opening section of the book Hot topics in CRM training including the concepts of followership and conflict resolution and highlights strategies such as mindfulness and others to manage stress and reduce burnout are discussed The text also expands into novel areas of trauma care including less invasive bedside endovascular treatments such as REBOA Resuscitative Endovascular Balloon Occlusion of the Aorta and a more in depth discussion of teleresuscitation and trauma care in austere environments Featuring 28 new chapters the second edition of Trauma Team Dynamics is written by experts in trauma critical care emergency medicine

nursing respiratory therapy and pre hospital care and include NASA and United States military affiliated experts It is intended for use as both a day to day clinical resource and a reference text and includes self assessment questions as well as guidance on CRM curriculum design and implementation Journal of Special Operations Medicine ,2006 Fundamentals of Military Medicine Francis G. O'Connor, Eric B. Schoomaker, Dale C. Smith, 2019-06-03 An introduction to military medicine for medical students new to the military Military medicine is the application of medical art and science in a military setting for the benefit of the military organization through optimal care of the combatant Topics include the history of military medicine leadership the management and treatment of trauma and mass casualties in frequently austere field and ship environments the humane clearing of the battlefield vaccines and protection against exotic global pathogens both manmade and naturally occurring unique psychological stressors of war biodefense against chemical and nuclear weapons facilitating return to duty and the eventual return and reintegration home of valuable human resource This first of its kind textbook offers both authoritative scholarship and the experience of high level medical officers for the new medical officer within any of the armed services ranging from medical surgical nursing dental veterinary and more It also provides health education and research for the military health professional s deployed to save enlisted military lives and helps to educate medical students with military medical practices and leadership *FIELD MEDICAL SERVICE TECHNICIAN STUDENT HANDBOOK VERSION 4.1 With Block 1 & 2 Student Outlines And Visual Presentations* , Over 2 300 total pages OVERVIEW Tactical Combat Casualty Care TCCC was developed to emphasize the need for continued improvement in combat pre hospital care The Committee on Tactical Combat Casualty Care CoTCCC was established in 2001 and is part of the Defense Health Board CoTCCC is a standing multi service committee charged with monitoring medical developments in regards to practice technology pharmacology and doctrine New concepts in hemorrhage control airway management fluid resuscitation analgesia antibiotics and other lifesaving techniques are important steps in providing the best possible care for our Marines and Sailors in combat The TCCC guidelines are published every 4 years in the Prehospital Trauma Life Support manual It has been recognized that TCCC guidelines and curriculum will need to change more often than the 4 year cycle of the PHTLS textbook publication The National Association of Emergency Medical Technicians NAEMT will include the updated TCCC guidelines and curriculum on its website as they are approved as a way to help get this new information out to the combat medical personnel in the military that need it PRINCIPLES OF TACTICAL COMBAT CASUALTY CARE TCCC The principles of Tactical Combat Casualty Care are fundamentally different from those of traditional civilian trauma care where most medical providers and medics train These differences are based on both the unique patterns and types of wounds that are suffered in combat and the tactical conditions medical personnel face in combat Unique combat wounds and tactical conditions make it difficult to determine which intervention to perform at what time Besides addressing a casualty s medical condition responding medical personnel must also address the tactical problems faced while providing care in combat A medically

correct intervention at the wrong time may lead to further casualties Put another way good medicine may be a bad tactical decision which can get the rescuer and the casualty killed To successfully navigate these issues medical providers must have skills and training oriented to combat trauma care as opposed to civilian trauma care The specifics of casualty care in the tactical setting will depend on the tactical situation the injuries sustained by the casualty the knowledge and skills of the first responder and the medical equipment at hand In contrast to a hospital Emergency Department setting where the patient IS the mission on the battlefield care of casualties sustained is only PART of the mission TCCC recognizes this fact and structures its guidelines to accomplish three primary goals 1 Treat the casualty 2 Prevent additional casualties 3 Complete the mission In thinking about the management of combat casualties it is helpful to divide care into three distinct phases each with its own characteristics and limitations

UH-72 Lakota Helicopter Flight Manual , Eurocopter EC145 UH-72 Lakota Helicopter Flight Manual , Paramedic Practice Today: Above and Beyond: Volume 2 Aehlert,Robert Vroman,2011

Providing the tools you need to succeed the two volume set of Paramedic Practice Today Above and Beyond offers a solid foundation for paramedic practice and is now updated to reflect the 2010 emergency cardiovascular care guidelines A conversational easy to read style simplifies topics and helps you master National Standard Curriculum objectives and meet the new National Education Standards Each volume includes a companion DVD ROM with step by step videos demonstrating the skills in the textbook and more Because this two volume set corresponds to the National Registry of EMTs National EMS Practice Analysis it provides you with the best possible preparation for the National Registry exam Publisher s website

PHTLS--Pre-Hospital Trauma Life Support National Association of Emergency Medical Technicians (U.S.). Pre-Hospital Trauma Life Support Committee,1986 **SOF Combat Casualty Care Handbook** Combined Arms Center , This handbook was previously distributed as a supplement to the Journal of Special Operations Medicine The realm of special operations forces SOF medicine is a unique and ever changing one that demands specialized training for our joint SOF Managing trauma on today s battlefield presents a dynamic array of challenges where limited resources can be rapidly overwhelmed An austere environment hostile gunfire and delays in casualty evacuation CASEVAC are the norms for the special operations medic The material in this handbook was gleaned from special operations medics operating in the Global War on Terrorism and other operational environments It should not be viewed as a substitute for the professional training and judgment of special operations medics rather it is designed to be a hip pocket reference on the tactics techniques and procedures TTP of SOF relevant tactical combat casualty care Key Lessons Ninety percent of combat loss of life occurs before casualties ever reach a military treatment facility MTF treatment prior to casualty evacuation is vital Litter carries are fundamental for good patient care they prevent further injury and get individuals off target as soon as possible Rehearse manual carry methods prior to deployment Every special operations warfighter should carry a tourniquet and be thoroughly familiar with its application When managing multiple casualties apply the principles of triage in classifying the priority of

treatment and evacuation Rehearse and employ all of the mechanics of CASEVAC from the point of injury to the handover at a MTF This handbook provides a number of considerations when employing medical support to SOF in combat The challenges are numerous but the special operations medic must deliver medical care to save Soldiers lives The collection of TTP in this handbook will enhance the medic s ability to determine the optimum method to deliver casualty survival assistance

Tactical Management of Urban Warfare Casualties in Special Operations Frank K. Butler, John H. Hagmann, 1999

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Phtls Military Manual Introduction

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