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Army Medical Logistics and Operations

July 03, 2016
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Purpose



The purpose of this information brief is to inform you of Army Medical Roles 1, 2, 3, and 4 in order to familiarize you with Charlie Med's role on the battlefield in order to help you prepare for Capstone.



References

FM 4-02.1 Army Medical Logistics

FM 4-02.2 Medical Evacuation

FM 4-02.6 The Medical Company

FM 55-30 Army Motor Transport Units and Operations

FM 8-10-6 Medical Evacuation in Theater of Operations

<http://www.usamma.army.mil/> *US Army Medical Department*

www.usamma.army.mil/assets/docs/USAMMAStrategicPlanFY15-18.pdf

US Army Medical Department Strategic Plan

<http://armymedicine.mil/Pages/home.aspx> *Army Medical*

<http://www.cs.amedd.army.mil/FileDownloadpublic.aspx?docid=1a73495d-1176-4638-9011-9e7f3c6017d8> *Roles of Medical Care*



Outline



- Medical Overview
- Roles 1, 2, 3, 4, 5
- Who provides the support
- Where on the battlefield you'll find these roles
- Mission Planning
- Questions
- Summary



US Army Medical Department (AMEDD)



- Formed: Revolutionary War
- 27 July, 1775, when the Continental Congress authorized a Medical Service for an army of 20,000 men



U.S. Army Medical Materiel Agency (USAMMA)



Lead the acquisition and sustainment of medical materiel equipment and technology

HDQTR: Fort Detrick, Maryland





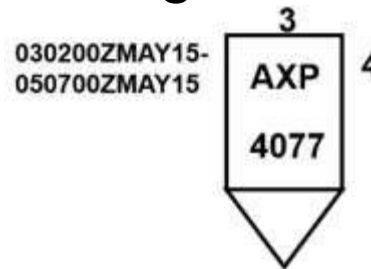
Role 1

Point of Injury (FLOT) → Company Train

- 1st-CLS-Self and Buddy Aid (Treatment Team), CASEVAC

Company Train → Combat Train

- 2nd- Battalion Aid Station (Medical Treatment Facility),
- Medical Platoon: Has Physician and PA Triage, Treatment, MEDEVAC (Ambulance)





Mission Planning: Movement to Combat Trains



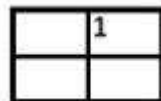
- Ground evacuation - principal means of evacuation for patients in the forward areas (FLOT).
- CASEVAC
- MEDEVAC



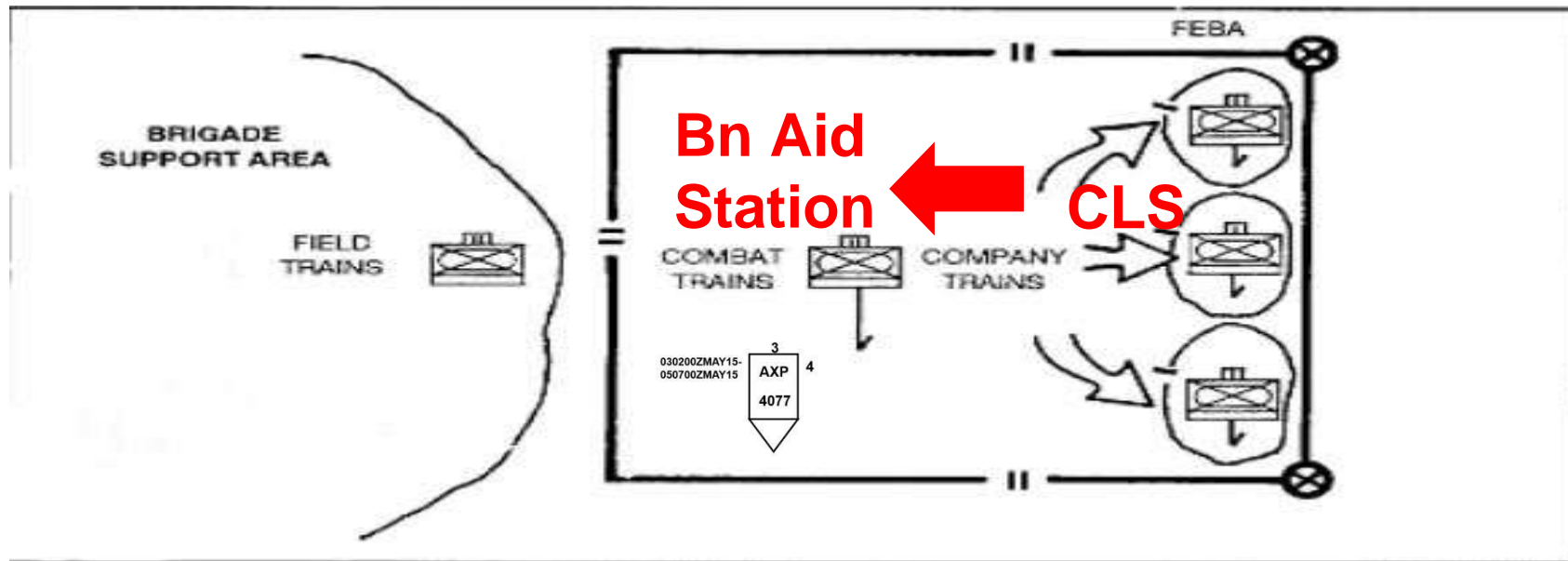
Role 1



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Mission Planning: Role 1



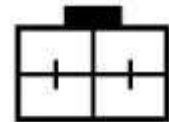
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Role 2

Basic Primary Care/Emergency Treatment

- Brigade/Division Clearing Station (small hospital)
- **BSA-BSB Charlie Co**
- For all units operating in AO
- 100% mobile ~10ppl



Medical Treatment Facility



Role 2



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Role 2-FST

- **Forward Surgical Team (FST)** rapidly deploys to BCT for immediate surgery to patient while awaiting evacuation
- 20 person team
- Transportable by ground, wing, or airborne
- Operational within 1 hr and can sustain for 72hrs
- Supporting Medical Co provides logistics/security



Modularity in Roles 1 and 2



Area Support Medical Company

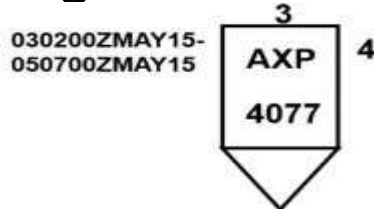
- 6 Modulars

Casualty Collection, Treatment, RTD, or Evacuation

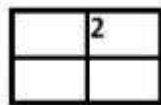


Mission Planning: Ambulance Platoon

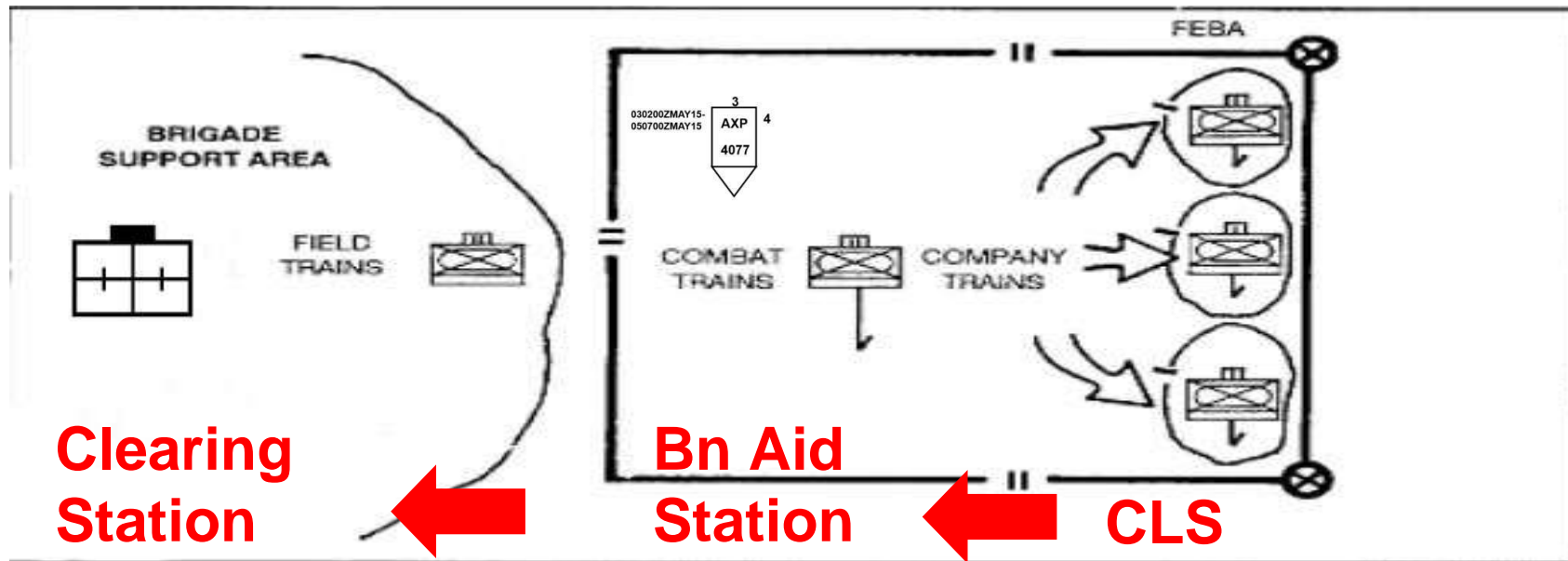
- Fully mobile
- Ambulances may be dispatched from the BSA (Role 2) to units near the BSA that are receiving area medical support.
- The platoon leader/sergeant coordinates/establishes AXP's as needed



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Mission Planning: Role 2



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Role 3



Combat Support Hospital

- All types of care: Inpatient/Outpatient/Surgical
- **In Theater**

- Return To Duty or Further Evacuation to CONUS



Mission Planning: Movement to Combat Hospital



- Evacuation from the Clearing Station (Role 2) is performed by ground and air ambulances from the corps medical evacuation (MEDEVAC) battalion.

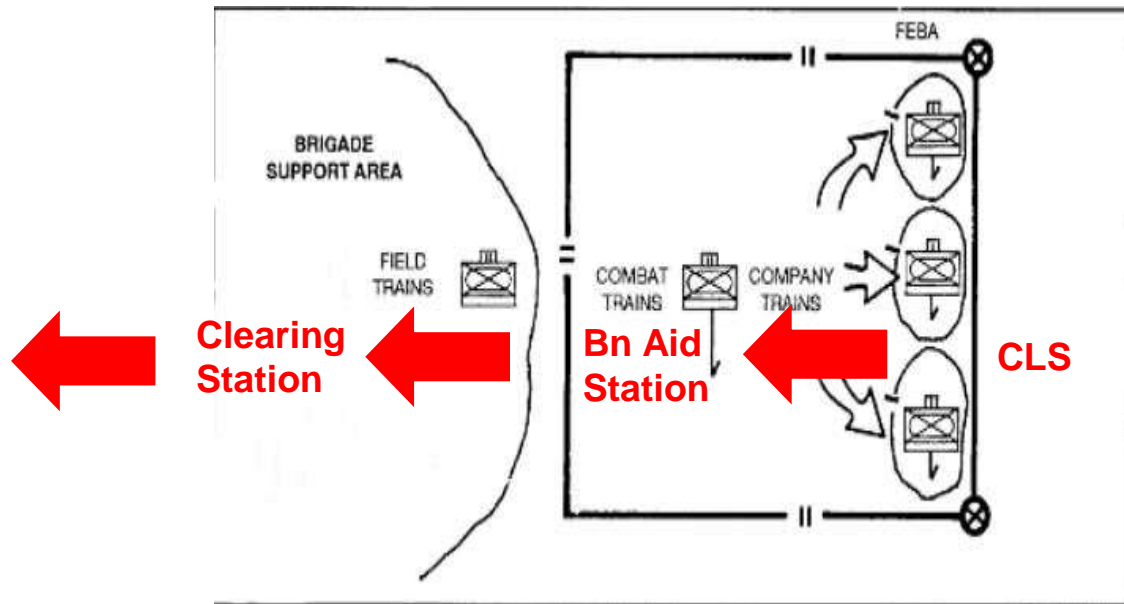


Role 3





Mission Planning



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Role 4



General Hospital

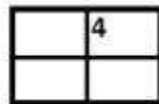
- Major Overseas Hospitals or within CONUS
- RTD or Evacuate to CONUS
- Theater Evacuation Policy



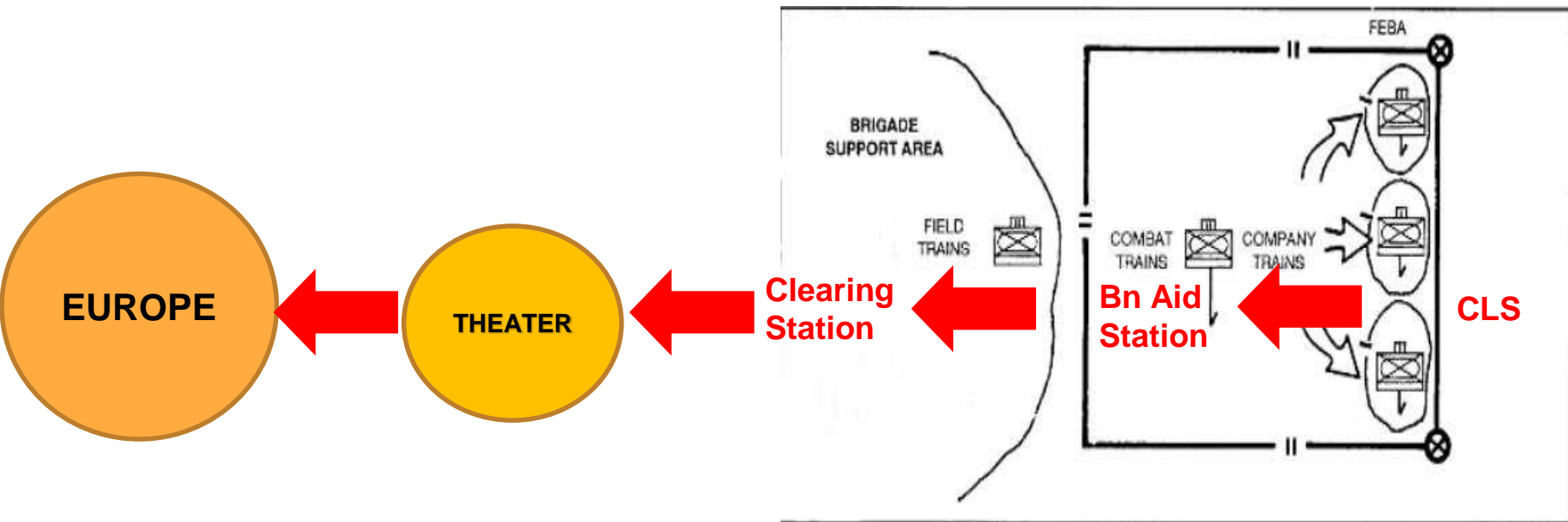
Role 4



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Mission Planning: Role 4



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Role 5



CONUS Based Hospitals

- Department of Defense Hospitals
- Department of Veteran Affairs Hospitals



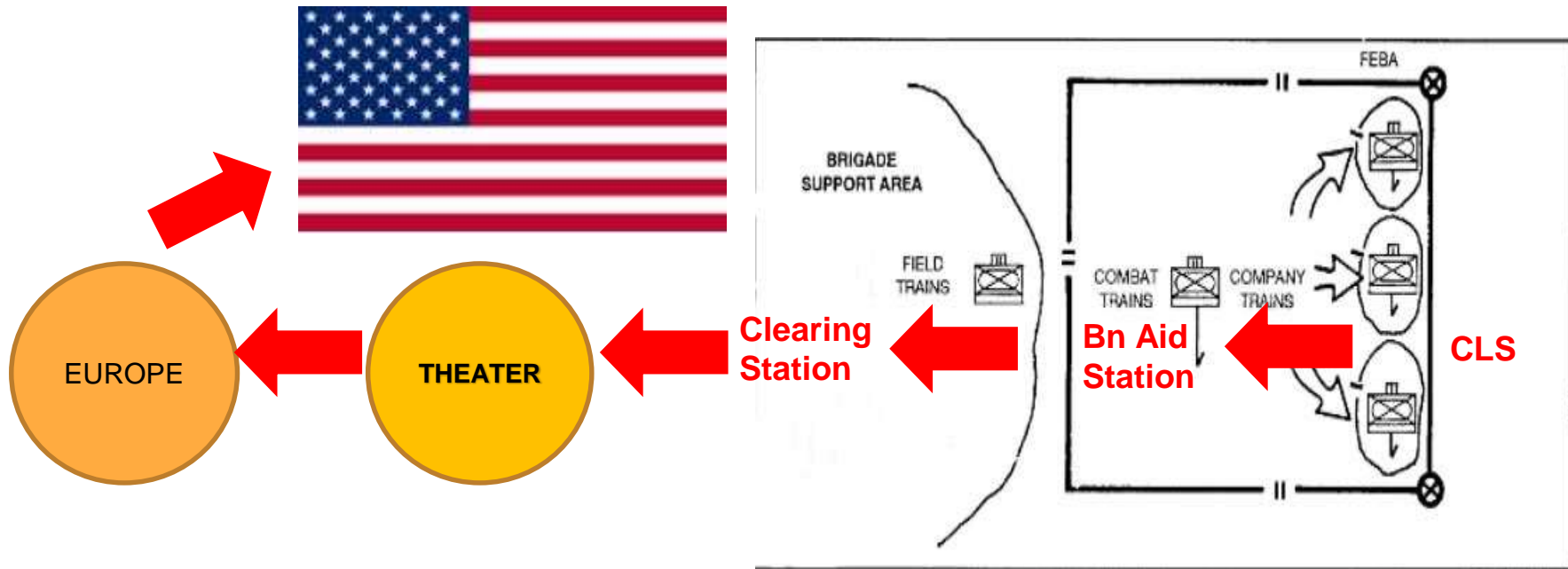
Role 5



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Mission Planning: Role 5



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Mission Planning: Evacuation



- **Medical Evacuation-** Gaining Echelon is responsible for arranging for evacuation from lower Echelons of care
- **Theater Evacuation Policy-** Number of days you can be held in the hospital, in theater, before evacuation to CONUS or other Safe Haven



Mission Planning: Ambulance Teams



Ambulance squad - 2 Ambulance Teams (two ambulances, wheel or tracked vehicles).

Wheeled (Airborne/Light Infantry) -2 personnel: Emergency Care Sergeant (E5) and an Ambulance/Aide Driver (E4).

Tracked (Armor/Mechanized Infantry)- 3 personnel: Emergency Care Sergeant/Track Commander and 2 Ambulance/Aide Drivers.



Mission Planning

- Know your Assets-Wheeled/Tracked, Personnel, Capabilities
- Site Selection- Accessible, avoiding enemy targets, Patient Density
- CASEVAC vs MEDEVAC vs AEROMEDICAL EVAC



Mission Planning: PACE PLAN



Primary, Alternate, Contingency, Emergency

Role 1

And

Role 1 to Role 2



Mission Planning: PACE PLAN



- **Primary:** Medical Platoon with BCT renders care and evacuation from FLOT and brings to Clearing Station (Role 1) for further support/evac (MEDEVAC)
- **Alternate:** FST (Forward Surgical Team) (Role 2) to deploy to BCT while awaiting Evac from Role 1
- **Emergency:** Evac with only Role 1 care, utilize other agencies resources, call to notify them of AO operation (CASEVAC) (Aeromedical evac)



Questions



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Summary



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