































<p>1.</p>	<p>Tactical Combat Casualty Care for All Combatants August 2017 <small>(Based on TCCC-MP Guidelines 170131)</small></p>  <p>Scenarios</p>	<p><b>Tactical Combat Casualty Care for All Combatants August 2017</b></p> <p><b>(Based on TCCC-MP Guidelines 170131)</b></p> <p><b>Scenarios</b></p>	<p>We've talked about the basic TCCC trauma management plan. Now let's apply the guidelines to some selected scenarios.</p>
<p>2.</p>	<p> <b>Tactical Casualty Scenarios</b></p> <ul style="list-style-type: none"> <li>• If the basic TCCC combat trauma management plan doesn't work for your specific tactical situation, then <b>it doesn't work.</b></li> <li>• <i>There are no rigid guidelines for combat tactics – THINK ON YOUR FEET.</i></li> <li>• Scenario-based planning is critical for success in TCCC.</li> <li>• Examples follow:</li> </ul> 	<p><b>Tactical Casualty Scenarios</b></p> <ul style="list-style-type: none"> <li>• If the basic TCCC combat trauma management plan doesn't work for your specific tactical situation, then <b>it doesn't work.</b></li> <li>• <i>There are no rigid guidelines for combat tactics – THINK ON YOUR FEET.</i></li> <li>• Scenario-based planning is critical for success in TCCC</li> <li>• Examples follow:</li> </ul>	<p>Read the text.</p>
<p>3.</p>	<p> <b>SEAL Casualty - Afghanistan</b></p> <ul style="list-style-type: none"> <li>• August 2002</li> <li>• Somewhere in Afghanistan</li> <li>• SEAL element on direct action mission</li> <li>• Story of the casualty as described by the first responder who was <i>NOT</i> a corpsman</li> </ul> 	<p><b>SEAL Casualty – Afghanistan</b></p> <ul style="list-style-type: none"> <li>• August 2002</li> <li>• Somewhere in Afghanistan</li> <li>• SEAL element on direct action mission</li> <li>• Story of the casualty as described by the first responder who was NOT a corpsman</li> </ul>	<p>This is a verbatim account of a real scenario that clearly illustrates the difficulty of trauma care on the battlefield.</p>
<p>4.</p>	<p> <b>SEAL Casualty - Afghanistan</b></p> <p>"There were four people in my team, two had been shot. Myself and the other uninjured teammate low crawled to the downed men. The man I came to was lying on his back, conscious, with his left leg pinned awkwardly beneath him. He was alert and oriented to person, place, time, and event. At that point I radioed C2 (mission control) to notify them of the downed man."</p>	<p><b>SEAL Casualty – Afghanistan</b></p> <p>"There were four people in my team, two had been shot. Myself and the other uninjured teammate low crawled to the downed men. The man I came to was lying on his back, conscious, with his left leg pinned awkwardly beneath him. He was alert and oriented to person, place, time, and event. At that point I radioed C2 (mission control) to notify them of the downed man."</p>	<p>Read the text.</p>






<p>5.</p>	 <p><b>SEAL Casualty - Afghanistan</b></p> <p>“Upon closer inspection, his knee was as big as a basketball and his femur had broken. The patient was in extreme pain and did not allow me to do a sweep of his injured leg. He would literally shove me or grab me whenever I touched his leg or wounds. I needed to find the entrance and exit wound and stop any possible arterial bleeding.”</p>	<p><b>SEAL Casualty – Afghanistan</b></p> <p>“Upon closer inspection, his knee was as big as a basketball and his femur had broken. The patient was in extreme pain and did not allow me to do a sweep of his injured leg. He would literally shove me or grab me whenever I touched his leg or wounds. I needed to find the entrance and exit wound and stop any possible arterial bleeding.”</p>	<p>Read the text.</p>
<p>6.</p>	 <p><b>SEAL Casualty - Afghanistan</b></p> <p>“But there was zero illumination and he was lying in a wet irrigation ditch. So I couldn’t see blood and I couldn’t feel for blood.”</p> 	<p><b>SEAL Casualty – Afghanistan</b></p> <p>“But there was zero illumination and he was lying in a wet irrigation ditch. So I couldn’t see blood and I couldn’t feel for blood.”</p>	<p>Picture yourself in this situation. You’ve got a casualty who is badly hurt and you can’t see a thing.</p>
<p>7.</p>	 <p><b>SEAL Casualty - Afghanistan</b></p> <p>“We were also in danger because our position was in an open field (where the firefight had been) and I had to provide security for him and myself. So, I couldn’t afford to turn on any kind of light to examine his wounds. I told him to point to where he felt the pain. He had to sort through his pains.”</p>	<p><b>SEAL Casualty – Afghanistan</b></p> <p>“We were also in danger because our position was in an open field (where the firefight had been) and I had to provide security for him and myself. So, I couldn’t afford to turn on any kind of light to examine his wounds. I told him to point to where he felt the pain. He had to sort through his pains.”</p>	<p>Read the text.</p>
<p>8.</p>	 <p><b>SEAL Casualty - Afghanistan</b></p> <p>“He had extreme pain in his knee and where his femur had been shattered as well as a hematoma at the site of the entrance wound (anterior and upper left thigh). Finally, he pointed to his exit wound (anterior and upper left thigh). Again, I had no way of telling how much blood he had lost. But I did know that he was nonambulatory.”</p>	<p><b>SEAL Casualty – Afghanistan</b></p> <p>“He had extreme pain in his knee and where his femur had been shattered as well as a hematoma at the site of the entrance wound (anterior and upper left thigh). Finally, he pointed to his exit wound (anterior and upper left thigh). Again, I had no way of telling how much blood he had lost. But I did know that he was nonambulatory.”</p>	<p>Read the text.</p>
<p>9.</p>	 <p><b>SEAL Casualty - Afghanistan</b></p> <p>“So I called C2 again. I gave him the disposition of the patient as well as a request for casevac, a Corpsman, and additional personnel to secure my position and assist in moving the patient to the helicopter. I thought about moving the two of us to some concealment 25 meters away, but we were both really low in a shallow irrigation ditch. I felt safer there than trying to drag or carry a screaming man to concealment.”</p>	<p><b>SEAL Casualty – Afghanistan</b></p> <p>“So I called C2 again. I gave him the disposition of the patient as well as a request for casevac, a Corpsman, and additional personnel to secure my position and assist in moving the patient to the helicopter. I thought about moving the two of us to some concealment 25 meters away, but we were both really low in a shallow irrigation ditch. I felt safer there than trying to drag or carry a screaming man to concealment.”</p>	<p>Read the text.</p> <p>C2 = Command and Control</p>





<p>10.</p>	<p> <b>SEAL Casualty - Afghanistan</b></p> <p>“Between providing security and spending a lot of time on the radio I didn’t get to treat the patient as much as I wanted to. I had given him a Kerlix bandage to hold against his exit wound. When he frantically told me that he was feeling a lot of blood, I went back to trying to treat him. I couldn’t elevate his leg. To move it would mean he’d scream in pain, which wasn’t tactical.”</p>	<p><b>SEAL Casualty – Afghanistan</b></p> <p>“Between providing security and spending a lot of time on the radio I didn’t get to treat the patient as much as I wanted to. I had given him a Kerlix bandage to hold against his exit wound. When he frantically told me that he was feeling a lot of blood, I went back to trying to treat him. I couldn’t elevate his leg. To move it would mean he’d scream in pain, which wasn’t tactical.”</p>	<p>Read the text.</p>
<p>11.</p>	<p> <b>SEAL Casualty - Afghanistan</b></p> <p>“There was just no way he would allow me to apply a pressure dressing to the exit wound even if I could locate it and pack it with Kerlix. So, I decided to put a tourniquet on him.”</p> 	<p><b>SEAL Casualty – Afghanistan</b></p> <p>“There was just no way he would allow me to apply a pressure dressing to the exit wound even if I could locate it and pack it with Kerlix. So, I decided to put a tourniquet on him.”</p>	<p>Read the text.</p>
<p>12.</p>	<p> <b>SEAL Casualty - Afghanistan</b></p> <p>“His wounds were just low enough on his leg to get the tourniquet an inch or so above the site. I had a cravat and a wooden dowel with 550 cord (parachute cord) attached to it to use as a tourniquet. I told him to expect a lot of pain as I would be tightening the cravat down.”</p>	<p><b>SEAL Casualty – Afghanistan</b></p> <p>“His wounds were just low enough on his leg to get the tourniquet an inch or so above the site. I had a cravat and a wooden dowel with 550 cord (parachute cord) attached to it to use as a tourniquet. I told him to expect a lot of pain as I would be tightening the cravat down.”</p>	<p>Note the makeshift tourniquet. When we first started the war in Afghanistan, most U.S. forces were not deploying with issued tourniquets.</p>
<p>13.</p>	<p> <b>SEAL Casualty - Afghanistan</b></p> <p>“At this point he feared for his life so he agreed. Once I got it tightened I had trouble securing it. The 550 cord was hard to get underneath the tightened cravat.”</p> 	<p><b>SEAL Casualty – Afghanistan</b></p> <p>“At this point he feared for his life so he agreed. Once I got it tightened I had trouble securing it. The 550 cord was hard to get underneath the tightened cravat.”</p>	<p>You need to be able to get a tourniquet on a wounded teammate with zero illumination.</p>

<p>14.</p>	 <p><b>SEAL Casualty - Afghanistan</b></p> <p>“After over 5 minutes, the Corpsman arrived along with a CASEVAC bird and a security force. Moving the patient was very hard. Four of us struggled to move him and his gear 25 meters to the bird. The patient was over 200 pounds alone and we were moving over very uneven terrain.”</p>	<p><b>SEAL Casualty – Afghanistan</b></p> <p>“After over 5 minutes, the Corpsman arrived along with a CASEVAC bird and a security force. Moving the patient was very hard. Four of us struggled to move him and his gear 25 meters to the bird. The patient was over 200 pounds alone and we were moving over very uneven terrain.”</p>	<p>Read the text.</p>
<p>15.</p>	 <p><b>SEAL Casualty - Afghanistan</b></p> <p>“We wanted to do a three-man carry with two men under his arms and one under his legs. But again, his leg was flopping around at the thigh and couldn’t be used to lift him.”</p> 	<p><b>SEAL Casualty – Afghanistan</b></p> <p>“We wanted to do a three-man carry with two men under his arms and one under his legs. But again, his leg was flopping around at the thigh and couldn’t be used to lift him.”</p>	<p>Experienced combat medical personnel say that moving the casualty is typically the biggest challenge in TCCC.</p>
<p>16.</p>	 <p><b>SEAL Casualty - Afghanistan</b></p> <p>“The bird, (a Task Force 160 MH-60) had a 50-cal sniper rifle strapped down, which made it hard for us to get him in. It took us minutes to get him 25 meters into the bird. The Corpsman went with my patient as well as the other downed man in my team and I went back to the op.”</p>	<p><b>SEAL Casualty – Afghanistan</b></p> <p>“The bird, (a Task Force 160 MH-60) had a 50-cal sniper rifle strapped down, which made it hard for us to get him in. It took us minutes to get him 25 meters into the bird. The Corpsman went with my patient as well as the other downed man in my team and I went back to the op.”</p>	<p>Was the tourniquet a good move? Absolutely – probably saved the casualty’s life.</p> <p>Would a pressure dressing have been a good idea if tolerated by the patient? NO – a pressure dressing won’t necessarily stop a big bleeder.</p>
<p>17.</p>	 <p><b>Scenario Discussions – Suggested Format</b></p> <ul style="list-style-type: none"> <li>• Break up into groups of six</li> <li>• Present the background for the scenario on the screen.</li> <li>• The Instructor will lead the group’s discussion through to the end of the scenario.</li> <li>• Instructor should have a printout of the speaker notes to lead the session.</li> <li>• 10 minutes per scenario</li> <li>• Stop after 10 minutes and present next scenario on screen</li> </ul>	<p><b>Scenario Discussions – Suggested Format</b></p> <ul style="list-style-type: none"> <li>• Break up into groups of six</li> <li>• Present the background for the scenario on the screen.</li> <li>• The Instructor will lead the group’s discussion through to the end of the scenario.</li> <li>• Instructor should have a printout of the speaker notes to lead the session.</li> <li>• 10 minutes per scenario</li> <li>• Stop after 10 minutes and present next scenario on screen</li> </ul>	<p>Here’s is a suggested format for the scenario discussions Get the class talking and thinking about these!</p>





<p>18.</p>	 <p><b>Urban Warfare Scenario</b></p>	<p><b>Urban Warfare Scenario</b></p>	<p>Now let's look at a scenario in urban warfare operations.</p>
<p>19.</p>	 <p><b>Real-World Scenario</b></p> <ul style="list-style-type: none"> <li>• High-threat urban environment</li> <li>• 16-man Ranger team</li> <li>• 70-foot fast rope insertion for a building assault</li> <li>• One man misses the rope and falls, landing on his back.</li> <li>• Unconscious on the ground</li> <li>• Bleeding from mouth and ears</li> <li>• Unit is taking sporadic fire from all directions from hostile crowds</li> </ul>	<p><b>Real-World Scenario</b></p> <ul style="list-style-type: none"> <li>• High-threat urban environment</li> <li>• 16-man Ranger team</li> <li>• 70-foot fast rope insertion for a building assault</li> <li>• One man misses the rope and falls, landing on his back.</li> <li>• Unconscious on the ground</li> <li>• Bleeding from mouth and ears</li> <li>• Unit is taking sporadic fire from all directions from hostile crowds</li> </ul>	<p>Anybody recognize this casualty? This was the first Ranger casualty in Mogadishu.</p> <p>Has everyone here seen “Blackhawk Down”?</p>
<p>20.</p>	 <p><b>The Battle of Mogadishu</b></p> <ul style="list-style-type: none"> <li>• Somalia – Oct 1993</li> <li>• US casualties: 18 dead, 73 wounded</li> <li>• Estimated Somali casualties: 350 dead, 500 wounded</li> <li>• Battle was 15 hours in length</li> </ul>	<p><b>The Battle of Mogadishu</b></p> <ul style="list-style-type: none"> <li>• Somalia – Oct 1993</li> <li>• US casualties: 18 dead, 73 wounded</li> <li>• Estimated Somali casualties: 350 dead, 500 wounded</li> <li>• Battle was 15 hours in length</li> </ul>	<p>At the time, this was the biggest battle involving U.S. forces since Vietnam.</p>
<p>21.</p>	 <p><b>Mogadishu Complicating Factors</b></p> <ul style="list-style-type: none"> <li>• Helo CASEVAC not possible because of crowds, narrow streets and RPGs</li> <li>• Vehicle CASEVAC not possible initially because of ambushes, roadblocks, and RPGs</li> <li>• Gunfire support problems             <ul style="list-style-type: none"> <li>– Somali crowds included non-combatants</li> <li>– Somalis able to take cover in buildings</li> <li>– RPG threat to helo fire-support gunships</li> </ul> </li> </ul>	<p><b>Mogadishu Complicating Factors</b></p> <ul style="list-style-type: none"> <li>• Helo CASEVAC not possible because of crowds, narrow streets and RPGs</li> <li>• Vehicle CASEVAC not possible initially because of ambushes, roadblocks, and RPGs</li> <li>• Gunfire support problems             <ul style="list-style-type: none"> <li>– Somali crowds included non-combatants</li> <li>– Somalis able to take cover in buildings</li> <li>– RPG threat to helo fire-support gunships</li> </ul> </li> </ul>	<p>We have talked about factors that make evacuation by helicopter difficult. We can add narrow streets and RPG fire to that list. There were LOTS of U.S. helos over Mogadishu, but we were not able to evacuate the casualties with them for these reasons.</p>





<p>22.</p>	 <p><b>Mogadishu Scenario 1 Fast Rope Fall</b></p> <ul style="list-style-type: none"> <li>• Should the first responder return fire or care for casualty?             <ul style="list-style-type: none"> <li>– It was reasonable to have someone (a medic or corpsman would be preferred, if available) to attend the casualty in this scenario.</li> </ul> </li> <li>• Why?             <ul style="list-style-type: none"> <li>– Total suppression of hostile fire was not possible.</li> <li>– The crowd was large – the team couldn’t eliminate all the hostiles.</li> <li>– There were a good number of guns on the team – sparing one man for casualty care made little difference in defensive firepower.</li> <li>– The casualty was critically injured.</li> </ul> </li> </ul>	<p><b>Mogadishu Scenario 1 Fast Rope Fall</b></p> <ul style="list-style-type: none"> <li>• Should the first responder return fire or care for casualty?             <ul style="list-style-type: none"> <li>– It was reasonable to have someone (a medic or corpsman would be preferred, if available) to attend the casualty in this scenario.</li> </ul> </li> <li>• Why?             <ul style="list-style-type: none"> <li>– Total suppression of hostile fire was not possible.</li> <li>– The crowd was large – the team couldn’t eliminate all the hostiles.</li> <li>– There were a good number of guns on the team – sparing one man for casualty care made little difference in defensive firepower.</li> <li>– The casualty was critically injured.</li> </ul> </li> </ul>	<p>Read the text.</p>
<p>23.</p>	 <p><b>Mogadishu Scenario 1 Fast Rope Fall</b></p> <ul style="list-style-type: none"> <li>• Does that break our rule about shooting first and treating later?             <ul style="list-style-type: none"> <li>– Yes - but that’s OK – it’s the right answer for this particular situation.</li> </ul> </li> <li>• What’s next?             <ul style="list-style-type: none"> <li>– Move patient to cover right away?</li> <li>– Cover would be good, but is he at risk for a spinal cord injury if moved?</li> <li>– Yes, but he’s also very much at risk of getting shot.</li> <li>– You probably DO want to get him to cover immediately. (Cover was available at the side of the road.)</li> </ul> </li> </ul>	<p><b>Mogadishu Scenario 1 Fast Rope Fall</b></p> <ul style="list-style-type: none"> <li>• Does that break our rule about shooting first and treating later?             <ul style="list-style-type: none"> <li>– Yes - but that’s OK – it’s the right answer for this particular situation.</li> </ul> </li> <li>• What’s next?             <ul style="list-style-type: none"> <li>– Move patient to cover right away?</li> <li>– Cover would be good, but is he at risk for a spinal cord injury if moved?</li> <li>– Yes, but he’s also very much at risk of getting shot.</li> <li>– You probably DO want to get him to cover immediately. (Cover was available at the side of the road.)</li> </ul> </li> </ul>	<p>Read the text.</p>
<p>24.</p>	 <p><b>Mogadishu Scenario 1 Fast Rope Fall</b></p> <ul style="list-style-type: none"> <li>• How do you want to move him?             <ul style="list-style-type: none"> <li>– Carefully!!</li> <li>– Cradle head with forearms to stabilize neck and drag</li> </ul> </li> <li>• What about his airway?             <ul style="list-style-type: none"> <li>– Chin-lift/jaw-thrust followed by NPA</li> </ul> </li> </ul>	<p><b>Mogadishu Scenario 1 Fast Rope Fall</b></p> <ul style="list-style-type: none"> <li>• How do you want to move him?             <ul style="list-style-type: none"> <li>– Carefully!!</li> <li>– Cradle head with forearms to stabilize neck and drag</li> </ul> </li> <li>• What about his airway?             <ul style="list-style-type: none"> <li>– Chin-lift/jaw-thrust followed by NPA</li> </ul> </li> </ul>	<p>Read the text.</p>




<p>25.</p>	 <p><b>Mogadishu Scenario 1 Fast Rope Fall</b></p> <ul style="list-style-type: none"> <li>• Urgency for evacuation?             <ul style="list-style-type: none"> <li>– Possible ruptured spleen or other internal bleeding from blunt force trauma puts him at risk for hemorrhagic shock.</li> <li>– Need for evacuation is urgent.</li> <li>– Tactical commander in Mogadishu split his force in order to effect immediate evacuation by ground vehicle and to pursue other aspects of the mission..</li> </ul> </li> </ul>	<p><b>Mogadishu Scenario 1 Fast Rope Fall</b></p> <ul style="list-style-type: none"> <li>• Urgency for evacuation?             <ul style="list-style-type: none"> <li>– Possible ruptured spleen or other internal bleeding from blunt force trauma puts him at risk for hemorrhagic shock.</li> <li>– Need for evacuation is urgent.</li> <li>– Tactical commander in Mogadishu split his force in order to effect immediate evacuation by ground vehicle and to pursue other aspects of the mission.</li> </ul> </li> </ul>	<p>Read the text.</p>
<p>26.</p>	 <p><b>Mogadishu Scenario 1 Fast Rope Fall</b></p> <ul style="list-style-type: none"> <li>• Does he need antibiotics or analgesia?             <ul style="list-style-type: none"> <li>– No – he has no open wounds and he is unconscious.</li> <li>– An unconscious casualty doesn't need pain meds, and you wouldn't put pills in his mouth anyway.</li> </ul> </li> <li>• The actual outcome?             <ul style="list-style-type: none"> <li>– The Ranger survived his injuries.</li> </ul> </li> </ul>	<p><b>Mogadishu Scenario 1 Fast Rope Fall</b></p> <ul style="list-style-type: none"> <li>• Does he need antibiotics or analgesia?             <ul style="list-style-type: none"> <li>– No – he has no open wounds and he is unconscious.</li> <li>– An unconscious casualty doesn't need pain meds, and you wouldn't put pills in his mouth anyway.</li> </ul> </li> <li>• The actual outcome?             <ul style="list-style-type: none"> <li>– The Ranger survived his injuries.</li> </ul> </li> </ul>	<p>Read the text.</p>
<p>27.</p>	 <p><b>Mogadishu Scenario 1 Fast Rope Fall</b></p> <p><b>End of Scenario</b></p>	<p><b>Mogadishu Scenario 1 Fast Rope Fall</b></p> <p><b>End of Scenario</b></p>	
<p>28.</p>	 <p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> 	<p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p>	<p>Here is a second real-world scenario from Mogadishu, presenting a very different tactical situation.</p>




<p>29.</p>	 <p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• Hostile and well-armed (AK-47s, RPG) crowds in an urban environment</li> <li>• Building assault to capture members of a hostile clan</li> <li>• Blackhawk helicopter trying to cover helo crash site</li> <li>• Flying at 300 feet</li> </ul>	<p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• Hostile and well-armed (AK-47s, RPGs) crowds in an urban environment</li> <li>• Building assault to capture members of a hostile clan</li> <li>• Blackhawk helicopter trying to cover helo crash site</li> <li>• Flying at an altitude of 300 feet</li> </ul>	<p>Read the text.</p>
<p>30.</p>	 <p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• Left door gunner manning a 6-barrel M-134 minigun (4000 rpm)</li> <li>• Hit in hand by ground fire</li> <li>• Another crew member takes over the mini-gun</li> <li>• An RPG impacts under the right door gunner</li> </ul>	<p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• Left door gunner manning a 6-barrel M-134 minigun (4000 rpm)</li> <li>• Hit in left hand by ground fire</li> <li>• Another crew member takes over the mini-gun</li> <li>• An RPG impacts under the right door gunner</li> </ul>	<p>Read the text.</p>
<p>31.</p>	 <p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• Windshields are all blown out</li> <li>• Smoke is filling the aircraft</li> <li>• Right minigun is not functioning</li> <li>• Left minigun is without a gunner and is firing uncontrolled</li> <li>• Pilot:             <ul style="list-style-type: none"> <li>– Transiently unconscious - now becoming alert</li> </ul> </li> </ul>	<p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• Windshields are all blown out</li> <li>• Smoke is filling the aircraft</li> <li>• Right minigun is not functioning</li> <li>• Left minigun is without a gunner and is firing uncontrolled</li> <li>• Pilot:             <ul style="list-style-type: none"> <li>– Transiently unconscious - now becoming alert</li> </ul> </li> </ul>	<p>Read the text.</p>
<p>32.</p>	 <p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• Co-pilot             <ul style="list-style-type: none"> <li>– Unconscious - lying forward on the helo's controls</li> </ul> </li> <li>• Crew Member             <ul style="list-style-type: none"> <li>– Right leg blown off above the knee</li> <li>– Lying in puddle of his own blood</li> <li>– Pulsatile bleeding from the stump</li> </ul> </li> </ul>	<p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• Co-pilot             <ul style="list-style-type: none"> <li>– Unconscious - lying forward on the helo's controls</li> </ul> </li> <li>• Crew Member             <ul style="list-style-type: none"> <li>– Right leg blown off above the knee</li> <li>– Lying in puddle of his own blood</li> <li>– Pulsatile bleeding from the stump</li> </ul> </li> </ul>	<p>Read the text.</p>










<p>33.</p>	 <p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• YOU are the person providing care in the helo.             <ul style="list-style-type: none"> <li>– Casualty with femoral bleeding</li> <li>– Unconscious co-pilot</li> <li>– Semi-conscious pilot</li> <li>– Unmanned min-gun firing</li> </ul> </li> <li>• What do you do first?</li> </ul>	<p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• YOU are the person providing care in the helo.             <ul style="list-style-type: none"> <li>– Casualty with femoral bleeding</li> <li>– Unconscious co-pilot</li> <li>– Semi-conscious pilot</li> <li>– Unmanned min-gun firing</li> </ul> </li> <li>• What do you do first?</li> </ul>	<p>Read the text.</p>
<p>34.</p>	 <p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• Who gets treated first?             <ul style="list-style-type: none"> <li>– Take care of the pilot first.                 <ul style="list-style-type: none"> <li>• You want to get him back to flying the aircraft.</li> <li>• The most important thing about medical care in an aircraft is to keep the aircraft in the air.</li> </ul> </li> <li>– Stimulate the pilot by shaking him or performing a sternal rub.</li> </ul> </li> </ul>	<p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• Who gets treated first?             <ul style="list-style-type: none"> <li>– Take care of the pilot first.                 <ul style="list-style-type: none"> <li>• You want to get him back to flying the aircraft.</li> <li>• The most important thing about medical care in an aircraft is to keep the aircraft in the air.</li> </ul> </li> <li>– Stimulate the pilot by shaking him or performing a sternal rub.</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>35.</p>	 <p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• Who's next?             <ul style="list-style-type: none"> <li>– The casualty with the femoral bleeder is next.</li> <li>– He needs a tourniquet.</li> <li>– He should be able to provide self-care if he's conscious.</li> <li>– The individual in Mogadishu treated himself.                 <ul style="list-style-type: none"> <li>• He used an improvised tourniquet.</li> <li>• He survived.</li> </ul> </li> </ul> </li> </ul>	<p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• Who's next?             <ul style="list-style-type: none"> <li>– The casualty with the femoral bleeder is next.</li> <li>– He needs a tourniquet.</li> <li>– He should be able to provide self-care if he's conscious.</li> <li>– The individual in Mogadishu treated himself.                 <ul style="list-style-type: none"> <li>• He used an improvised tourniquet.</li> <li>• He survived.</li> </ul> </li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>36.</p>	 <p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• What can you do for the unconscious co-pilot?             <ul style="list-style-type: none"> <li>– First, get him off the controls in order to keep the aircraft flying.</li> <li>– Get him into a supine position.</li> <li>– Check for massive hemorrhage.                 <ul style="list-style-type: none"> <li>• You see none.</li> </ul> </li> <li>– Establish a protected airway with an NPA.</li> </ul> </li> </ul>	<p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• What can you do for the unconscious co-pilot?</li> <li>• First, get him off the controls to keep the aircraft flying.</li> <li>• Get him into a supine position.</li> <li>• Check for massive hemorrhage.             <ul style="list-style-type: none"> <li>– You see none.</li> </ul> </li> <li>• Establish a protected airway with an NPA.</li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>






<p>37.</p>	 <p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• Next action?             <ul style="list-style-type: none"> <li>– Check the casualty with the hand injury.</li> <li>– Stop any severe bleeding.</li> </ul> </li> </ul>	<p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• Next action?             <ul style="list-style-type: none"> <li>– Check the casualty with the hand injury.</li> <li>– Stop any severe bleeding.</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>38.</p>	 <p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• What else?             <ul style="list-style-type: none"> <li>– Radio for help.</li> <li>– Prepare for impact if a crash landing is anticipated.</li> <li>– After impact – secure weapons and ordnance.</li> </ul> </li> </ul>	<p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <ul style="list-style-type: none"> <li>• What else?             <ul style="list-style-type: none"> <li>– Radio for help.</li> <li>– Prepare for impact if a crash landing is anticipated.</li> <li>– After impact – secure weapons and ordnance.</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>39.</p>	 <p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <p><b>End of Scenario</b></p>	<p><b>Mogadishu Scenario 2 Helo Hit by RPG Round</b></p> <p><b>End of Scenario</b></p>	
<p>40.</p>	 <p><b>Military Operations in Urban Terrain</b></p>	<p><b>Military Operations in Urban Terrain</b></p>	<p>Now let’s look at a few scenarios that are representative of what we saw more recently in Afghanistan.</p>





<p>41.</p>	 <p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• A U.S. ground element is moving on a high-value target in an urban environment.</li> <li>• The first two men in a 8-man patrol are shot by an individual with an automatic weapon while moving down a hallway in a building.</li> <li>• The attacker follows this burst with a grenade.</li> </ul>	<p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• A U.S. ground element is moving on a high-value target in an urban environment.</li> <li>• The first two men in an 8-man patrol are shot by an individual with an automatic weapon while moving down a hallway in a building.</li> <li>• The attacker follows this burst with a grenade.</li> </ul>	<p>Read the text.</p>
<p>42.</p>	 <p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• One casualty is shot in the abdomen, but conscious.</li> <li>• The second casualty is shot in the shoulder with severe external bleeding.</li> <li>• The third casualty is unconscious from the grenade blast.</li> <li>• The attacker withdraws around a corner.</li> </ul>	<p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• One casualty is shot in the abdomen, but conscious.</li> <li>• The second casualty is shot in the shoulder with severe external bleeding.</li> <li>• The third casualty is unconscious from the grenade blast.</li> <li>• The attacker withdraws around a corner.</li> </ul>	<p>Read the text.</p>
<p>43.</p>	 <p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• YOU are the person providing medical care.</li> <li>• What do you do?</li> </ul>	<p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• YOU are the person providing medical care.</li> <li>• What do you do?</li> </ul>	<p>Read the text.</p>

<p>44.</p>	 <p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• What are the tactical considerations here?             <ul style="list-style-type: none"> <li>– How many other hostiles in are in house?</li> <li>– Should everyone pursue the hostile(s) and leave care of the casualties for later?</li> <li>– Should the whole unit withdraw to care for casualties?</li> <li>– Should the unit set security and treat casualties there?</li> <li>– Should the unit split up and have some pursue and others treat?                 <ul style="list-style-type: none"> <li>• Splitting the force is most often chosen by previous groups as the best option.</li> </ul> </li> <li>– So, you are left with the casualties to proceed with care as per Tactical Field Care Guidelines.</li> </ul> </li> </ul>	<p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• What are the tactical considerations here?             <ul style="list-style-type: none"> <li>– How many other hostiles in are in house?</li> <li>– Should everyone pursue the hostile(s) and leave care of the casualties for later?</li> <li>– Should the whole unit withdraw to care for casualties?</li> <li>– Should the unit set security and treat casualties there?</li> <li>– Should the unit split up and have some pursue and others treat?                 <ul style="list-style-type: none"> <li>• Splitting the force is most often chosen by previous groups as the best option.</li> </ul> </li> <li>– So, you are left with the casualties to proceed with care as per Tactical Field Care Guidelines.</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>45.</p>	 <p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Who gets treated first?             <ul style="list-style-type: none"> <li>– The casualty with the shoulder injury and massive external bleeding.</li> <li>– He's the most important to treat immediately – he could bleed to death quickly.</li> </ul> </li> <li>• What do you do for him?             <ul style="list-style-type: none"> <li>– Stop the bleeding with Combat Gauze                 <ul style="list-style-type: none"> <li>• Apply with direct pressure for at least 3 minutes.</li> </ul> </li> <li>– Bleeding is controlled</li> <li>– Casualty is alert.</li> </ul> </li> </ul>	<p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Who gets treated first?             <ul style="list-style-type: none"> <li>– The casualty with the shoulder injury and massive external bleeding.</li> <li>– He's the most important to treat immediately – he could bleed to death quickly.</li> </ul> </li> <li>• What do you do for him?             <ul style="list-style-type: none"> <li>– Stop the bleeding with Combat Gauze                 <ul style="list-style-type: none"> <li>• Apply with direct pressure for at least 3 minutes.</li> </ul> </li> <li>– Bleeding is controlled</li> <li>– Casualty is alert.</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>46.</p>	 <p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Casualty with shoulder injury: what next?</li> <li>• Airway Management?             <ul style="list-style-type: none"> <li>– He's conscious and breathing OK.</li> </ul> </li> <li>• Respirations?             <ul style="list-style-type: none"> <li>– He's breathing OK.</li> <li>– Beware of the risk for tension pneumothorax.</li> </ul> </li> <li>• Combat Wound Medication Pack?             <ul style="list-style-type: none"> <li>– Yes</li> </ul> </li> </ul>	<p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Casualty with shoulder injury: what next?</li> <li>• Airway Management?             <ul style="list-style-type: none"> <li>– He's conscious and breathing OK.</li> </ul> </li> <li>• Respirations?             <ul style="list-style-type: none"> <li>– He's breathing OK.</li> <li>– Beware of the risk for tension pneumothorax.</li> </ul> </li> <li>• Combat Wound Medication Pack?             <ul style="list-style-type: none"> <li>– Yes</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>





<p>47.</p>	 <p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Who's next?</li> <li>• Unconscious Casualty</li> <li>• He has no penetrating head trauma.</li> <li>• What do you do first?             <ul style="list-style-type: none"> <li>– Check for massive hemorrhage                 <ul style="list-style-type: none"> <li>• You find major bleeding in back of one thigh from a shrapnel wound. Treatment?</li> </ul> </li> <li>• Apply a limb tourniquet.</li> </ul> </li> </ul>	<p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Who's next?</li> <li>• Unconscious Casualty</li> <li>• He has no penetrating head trauma.</li> <li>• What do you do first?             <ul style="list-style-type: none"> <li>– Check for massive hemorrhage                 <ul style="list-style-type: none"> <li>• You find major bleeding in back of one thigh from a shrapnel wound. Treatment?</li> </ul> </li> <li>• Apply a limb tourniquet.</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>48.</p>	 <p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Unconscious casualty: What else?</li> <li>• Airway Management             <ul style="list-style-type: none"> <li>– Chin-lift/jaw thrust</li> <li>– NPA</li> </ul> </li> <li>• Next?             <ul style="list-style-type: none"> <li>– Assess for shock                 <ul style="list-style-type: none"> <li>• You find a rapid, thready radial pulse</li> <li>• Unconscious (from blast injury)</li> <li>• He needs a medic/corpsman for treatment for shock</li> </ul> </li> </ul> </li> </ul>	<p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Unconscious casualty: What else?</li> <li>• Airway Management             <ul style="list-style-type: none"> <li>– Chin-lift/jaw thrust</li> <li>– NPA</li> </ul> </li> <li>• Next?             <ul style="list-style-type: none"> <li>– Assess for shock                 <ul style="list-style-type: none"> <li>• You find a rapid, thready radial pulse</li> <li>• Unconscious (from blast injury)</li> <li>• He needs a medic/corpsman for treatment for shock</li> </ul> </li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>49.</p>	 <p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Unconscious casualty: Next?             <ul style="list-style-type: none"> <li>– Hypothermia prevention</li> </ul> </li> <li>• Next?</li> <li>• Analgesia?             <ul style="list-style-type: none"> <li>– None required since he's unconscious.</li> </ul> </li> <li>• Antibiotics?             <ul style="list-style-type: none"> <li>– Yes. Thigh wound.</li> <li>– He's unconscious and can't swallow, so he'll need a medic/corpsman for IV abx.</li> </ul> </li> </ul>	<p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Unconscious casualty: Next?             <ul style="list-style-type: none"> <li>– Hypothermia prevention</li> </ul> </li> <li>• Next?</li> <li>• Analgesia?             <ul style="list-style-type: none"> <li>– None required since he's unconscious.</li> </ul> </li> <li>• Antibiotics?             <ul style="list-style-type: none"> <li>– Yes. Thigh wound.</li> <li>– He's unconscious and can't swallow, so he'll need a medic/corpsman for IV abx.</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>




<p>50.</p>	 <p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Unconscious casualty: Next?             <ul style="list-style-type: none"> <li>– Check for other injuries:                 <ul style="list-style-type: none"> <li>• There are none.</li> </ul> </li> </ul> </li> <li>• Conscious casualty with abdominal GSW is last. What do you do?             <ul style="list-style-type: none"> <li>– Check for massive hemorrhage                 <ul style="list-style-type: none"> <li>• Minimal oozing from abdominal GSW</li> <li>• No exit wound</li> </ul> </li> </ul> </li> </ul>	<p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Unconscious casualty: Next?             <ul style="list-style-type: none"> <li>– Check for other injuries:                 <ul style="list-style-type: none"> <li>• There are none.</li> </ul> </li> </ul> </li> <li>• Conscious casualty with abdominal GSW is last. What do you do?             <ul style="list-style-type: none"> <li>– Check for massive hemorrhage                 <ul style="list-style-type: none"> <li>• Minimal oozing from abdominal GSW</li> <li>• No exit wound</li> </ul> </li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>51.</p>	 <p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Conscious casualty with abdominal GSW: Next?</li> <li>• Airway Management             <ul style="list-style-type: none"> <li>– He’s conscious and breathing OK.</li> </ul> </li> <li>• Circulation             <ul style="list-style-type: none"> <li>– His radial pulse is strong.</li> <li>– He’s not in shock yet, but he is probably bleeding internally, so he’s at high risk for shock later.</li> <li>– He needs a medic for IV access.</li> </ul> </li> </ul>	<p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Conscious casualty with abdominal GSW: Next?</li> <li>• Airway Management             <ul style="list-style-type: none"> <li>– He’s conscious and breathing OK.</li> </ul> </li> <li>• Circulation             <ul style="list-style-type: none"> <li>– His radial pulse is strong.</li> <li>– He’s not in shock yet, but he is probably bleeding internally, so he’s at high risk for shock later.</li> <li>– He needs a medic for IV access.</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>52.</p>	 <p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Conscious casualty with abdominal GSW: what else can you do?</li> <li>• Hypothermia prevention?             <ul style="list-style-type: none"> <li>– You bet</li> </ul> </li> <li>• Analgesia?             <ul style="list-style-type: none"> <li>– Yes</li> <li>– In CWMP</li> </ul> </li> </ul>	<p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Conscious casualty with abdominal GSW: what else can you do?</li> <li>• Hypothermia prevention?             <ul style="list-style-type: none"> <li>– You bet</li> </ul> </li> <li>• Analgesia?             <ul style="list-style-type: none"> <li>– Yes</li> <li>– In CWMP</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>53.</p>	 <p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Conscious casualty with abdominal GSW: what else?</li> <li>• Antibiotics?             <ul style="list-style-type: none"> <li>– Yes</li> <li>– Also in CWMP</li> </ul> </li> <li>• Anything else?             <ul style="list-style-type: none"> <li>– Keep talking to the casualty</li> <li>– Check his status repeatedly until you can get him to a medic.</li> </ul> </li> </ul>	<p><b>MOUT Scenario 1</b></p> <ul style="list-style-type: none"> <li>• Conscious casualty with abdominal GSW: what else?</li> <li>• Antibiotics?             <ul style="list-style-type: none"> <li>– Yes</li> <li>– Also in CWMP</li> </ul> </li> <li>• Anything else?             <ul style="list-style-type: none"> <li>– Keep talking to the casualty</li> <li>– Check his status repeatedly until you can get him to a medic.</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>





<p>54.</p>	 <p><b>MOUT Scenario 1</b></p> <p><b>End of Scenario</b></p>	<p><b>MOUT Scenario 1</b></p> <p><b>End of Scenario</b></p>	
<p>55.</p>	  <p><b>MOUT Scenario 2</b></p>	<p><b>MOUT Scenario 2</b></p>	
<p>56.</p>	 <p><b>MOUT Scenario 2</b></p> <p><b>SCENARIO HISTORY:</b> While on patrol in the city of Tal Afar your platoon receives effective direct small arms fire. A 22-year-old unit member falls to the ground and begins screaming, holding his right leg. The platoon, including you, reacts to the ongoing contact by returning fire.</p>	<p><b>MOUT Scenario 2</b></p> <p><b>SCENARIO HISTORY:</b> While on patrol in the city of Tal Afar your platoon receives effective direct small arms fire. A 22-year-old unit member falls to the ground and begins screaming, holding his right thigh. The platoon, including you, reacts to the ongoing contact by returning fire.</p>	<p>Read the text.</p>
<p>57.</p>	 <p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• You can see that the casualty is bleeding heavily from his thigh wound.</li> <li>• YOU are the person providing medical care for this casualty.</li> <li>• What do you do?</li> </ul>	<p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• You can see that the casualty is bleeding heavily from his thigh wound.</li> <li>• YOU are the person providing medical care for this casualty.</li> <li>• What do you do?</li> </ul>	<p>Read the text.</p>






<p>58.</p>	 <p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• What phase are you in?             <ul style="list-style-type: none"> <li>– Care Under Fire</li> </ul> </li> <li>• What should you do for the casualty?             <ul style="list-style-type: none"> <li>– Yell at him to get under cover if he can.</li> <li>– Tell him to put a tourniquet “high and tight” on his wounded leg.</li> </ul> </li> <li>• If he can’t control the bleeding, you may have to help him.             <ul style="list-style-type: none"> <li>– If you do, consider a movement plan, suppression of fire, etc.</li> </ul> </li> </ul>	<p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• What phase are you in?             <ul style="list-style-type: none"> <li>– Care Under Fire</li> </ul> </li> <li>• What should you do for the casualty?             <ul style="list-style-type: none"> <li>– Yell at him to get under cover if he can.</li> <li>– Tell him to put a tourniquet “high and tight” on his wounded leg.</li> </ul> </li> <li>• If he can’t control the bleeding, you may have to help him.             <ul style="list-style-type: none"> <li>– If you do, consider a movement plan, suppression of fire, etc.</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>59.</p>	 <p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• Should he take his Combat Wound Medication Pack meds now?             <ul style="list-style-type: none"> <li>– No. You are still in Care Under Fire.</li> <li>– Your priorities are to get to cover and return fire if possible.</li> </ul> </li> </ul>	<p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• Should he take his Combat Wound Medication Pack meds now?             <ul style="list-style-type: none"> <li>– No. You are still in Care Under Fire.</li> <li>– Your priorities are to get to cover and return fire if possible.</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>60.</p>	 <p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• Scenario continues:</li> <li>• The casualty has moved behind a vehicle.</li> <li>• All hostiles are eliminated or have retreated.</li> <li>• The platoon establishes a secure perimeter.</li> <li>• The platoon leader tells you that you have only one casualty, and that you have a few minutes to work on him before the platoon will have to move.</li> </ul>	<p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• Scenario continues:</li> <li>• The casualty has moved behind a vehicle.</li> <li>• All hostiles are eliminated or have retreated.</li> <li>• The platoon establishes a secure perimeter.</li> <li>• The platoon leader tells you that you have only one casualty, and that you have a few minutes to work on him before the platoon will have to move.</li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>61.</p>	 <p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• What phase are you in now?             <ul style="list-style-type: none"> <li>– Tactical Field Care.</li> </ul> </li> <li>• Your casualty is alert, in moderate pain, and clutching his right leg. There is blood all over his leg and hands, and a tourniquet is in place on his right thigh.</li> </ul>	<p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• What phase are you in now?             <ul style="list-style-type: none"> <li>– Tactical Field Care.</li> </ul> </li> <li>• Your casualty is alert, in moderate pain, and clutching his right leg. There is blood all over his leg and hands, and a tourniquet is in place on his right thigh.</li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>



<p>62.</p>	 <p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• What is your first concern?             <ul style="list-style-type: none"> <li>– Should you disarm the casualty and take his comms gear?</li> <li>– Yes. He is already distracted by the pain and you anticipate he will soon need strong pain relief.</li> </ul> </li> <li>• What's next?             <ul style="list-style-type: none"> <li>– Is massive hemorrhage controlled?</li> </ul> </li> </ul>	<p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• What is your first concern?             <ul style="list-style-type: none"> <li>– Should you disarm the casualty and take his comms gear?</li> <li>– Yes. He is already distracted by the pain and you anticipate he will soon need strong pain relief.</li> </ul> </li> <li>• What's next?             <ul style="list-style-type: none"> <li>– Is massive hemorrhage controlled?</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>63.</p>	 <p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• What do you do to assess hemorrhage control?             <ul style="list-style-type: none"> <li>– Expose the wound.</li> </ul> </li> <li>• Blood is oozing from the wound. What next?             <ul style="list-style-type: none"> <li>– Check the tourniquet to make sure it is tight.</li> </ul> </li> <li>• It is tight. What next?             <ul style="list-style-type: none"> <li>– Apply another tourniquet next to the first one.</li> </ul> </li> <li>• The bleeding has now stopped and distal pulse has been eliminated.</li> </ul>	<p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• What do you do to assess hemorrhage control?             <ul style="list-style-type: none"> <li>– Expose the wound.</li> </ul> </li> <li>• Blood is oozing from the wound. What next?             <ul style="list-style-type: none"> <li>– Check the tourniquet to make sure it is tight.</li> </ul> </li> <li>• It is tight. What next?             <ul style="list-style-type: none"> <li>– Apply another tourniquet next to the first one.</li> </ul> </li> <li>• The bleeding has now stopped and distal pulse has been eliminated.</li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>64.</p>	 <p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• What's next?             <ul style="list-style-type: none"> <li>– You search quickly for any other life-threatening bleeding, and find none.</li> </ul> </li> <li>• Next concern?             <ul style="list-style-type: none"> <li>– Airway management                 <ul style="list-style-type: none"> <li>• He is conscious and talking – his airway is OK.</li> </ul> </li> </ul> </li> </ul>	<p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• What's next?             <ul style="list-style-type: none"> <li>– You search quickly for any other life-threatening bleeding, and find none.</li> </ul> </li> <li>• Next concern?             <ul style="list-style-type: none"> <li>– Airway management                 <ul style="list-style-type: none"> <li>• He is conscious and talking – his airway is OK.</li> </ul> </li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>65.</p>	 <p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• Next?             <ul style="list-style-type: none"> <li>– Breathing                 <ul style="list-style-type: none"> <li>• Breathing is rapid from pain and the situation, but not labored.</li> </ul> </li> </ul> </li> <li>• What next?             <ul style="list-style-type: none"> <li>– Check for shock.                 <ul style="list-style-type: none"> <li>• Mental status is normal. Radial pulse is strong.</li> </ul> </li> </ul> </li> </ul>	<p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• Next?             <ul style="list-style-type: none"> <li>– Breathing.                 <ul style="list-style-type: none"> <li>• Breathing is rapid from pain and the situation, but not labored.</li> </ul> </li> </ul> </li> <li>• What next?             <ul style="list-style-type: none"> <li>– Check for shock.                 <ul style="list-style-type: none"> <li>• Mental status is normal. Radial pulse is strong.</li> </ul> </li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>

<p>66.</p>	 <p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• Next?             <ul style="list-style-type: none"> <li>– Prevent hypothermia?</li> <li>• Yes.</li> <li>• Use the platoon’s HPMK if available, or alternative materials if it is not.</li> </ul> </li> </ul>	<p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• Next?             <ul style="list-style-type: none"> <li>– Prevent hypothermia?                 <ul style="list-style-type: none"> <li>• Yes.</li> <li>• Use the platoon’s HPMK if available, or alternative materials if it is not.</li> </ul> </li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>67.</p>	 <p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• Next?             <ul style="list-style-type: none"> <li>– Inspect and dress his leg wound.</li> <li>– Reassess for hemorrhage control.</li> </ul> </li> <li>• Next?             <ul style="list-style-type: none"> <li>– Assess for other wounds.                 <ul style="list-style-type: none"> <li>• You discover tenderness over his anterior lower right chest.</li> <li>• You check his body armor and find corresponding damage compatible with a bullet strike.</li> <li>• The medic needs to know about this and you should monitor his breathing.</li> </ul> </li> </ul> </li> </ul>	<p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• Next?             <ul style="list-style-type: none"> <li>– Inspect and dress his leg wound.</li> <li>– Reassess for hemorrhage control.</li> </ul> </li> <li>• Next?             <ul style="list-style-type: none"> <li>– Assess for other wounds.                 <ul style="list-style-type: none"> <li>• You discover tenderness over his anterior lower right chest.</li> <li>• You check his body armor and find corresponding damage compatible with a bullet strike.</li> <li>• The medic needs to know about this and you should monitor his breathing.</li> </ul> </li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>68.</p>	 <p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• Scenario continues:</li> <li>• Your platoon leader tells you the unit will move in 10 minutes to a CASEVAC location.             <ul style="list-style-type: none"> <li>– No enemy contact is expected.</li> <li>– CASEVAC should take about 45-60 minutes.</li> </ul> </li> <li>• What’s next?             <ul style="list-style-type: none"> <li>– Analgesia                 <ul style="list-style-type: none"> <li>• CWMP</li> </ul> </li> </ul> </li> </ul>	<p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• Scenario continues:</li> <li>• Your platoon leader tells you the unit will move in 10 minutes to a CASEVAC location.             <ul style="list-style-type: none"> <li>– No enemy contact is expected.</li> <li>– CASEVAC should take about 45-60 minutes.</li> </ul> </li> <li>• What’s next?             <ul style="list-style-type: none"> <li>– Analgesia                 <ul style="list-style-type: none"> <li>• CWMP</li> </ul> </li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>

<p>69.</p>	 <p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• Anything else?             <ul style="list-style-type: none"> <li>– Antibiotics</li> <li>• CWMP</li> </ul> </li> <li>• What else do you want to accomplish before TACEVAC?             <ul style="list-style-type: none"> <li>– Reassure the casualty</li> <li>– Document care</li> </ul> </li> </ul>	<p><b>MOUT Scenario 2</b></p> <ul style="list-style-type: none"> <li>• Anything else?             <ul style="list-style-type: none"> <li>– Antibiotics</li> <li>• CWMP</li> </ul> </li> <li>• What else do you want to accomplish before TACEVAC?             <ul style="list-style-type: none"> <li>– Reassure the casualty</li> <li>– Document care</li> </ul> </li> </ul>	<p>Advance through these points sequentially. Read (and discuss if appropriate) each point as it appears.</p>
<p>70.</p>	 <p><b>MOUT Scenario 2</b></p> <p><b>End of Scenario</b></p>	<p><b>MOUT Scenario 2</b></p> <p><b>End of Scenario</b></p>	
<p>71.</p>		<p><b>Questions?</b></p>	
<p>72.</p>	 <p><b>Tactical Combat Casualty Care</b></p> <ul style="list-style-type: none"> <li>• Casualty scenarios on the battlefield usually entail both medical and tactical problems.</li> <li>• Emergency actions must address both.</li> <li>• <b>Medical personnel should be involved in mission planning.</b></li> </ul>	<p><b>Tactical Combat Casualty Care</b></p> <ul style="list-style-type: none"> <li>• Casualty scenarios on the battlefield usually entail both medical and tactical problems.</li> <li>• Emergency actions must address both.</li> <li>• <b>Medical personnel should be involved in mission planning.</b></li> </ul>	<p>In summary:              Good tactical medicine HAS to be a combination of good tactics and good medicine.              Bring your leadership into the medical plan.              Combat leaders must understand combat medicine.</p>

<p>73.</p>	 <p><b>Scenario-Based Planning</b></p> <ul style="list-style-type: none"> <li>• The TCCC guidelines for combat trauma scenarios are advisory rather than directive in nature.</li> <li>• Rarely does an actual tactical situation exactly reflect the conditions described in planning scenarios.</li> <li>• Those providing casualty care will typically need to modify the medical care plan to optimize it for the real scenario.</li> </ul>	<p><b>Scenario-Based Planning</b></p> <ul style="list-style-type: none"> <li>• The TCCC guidelines for combat trauma scenarios are advisory rather than directive in nature.</li> <li>• Rarely does an actual tactical situation exactly reflect the conditions described in planning scenarios.</li> <li>• Those providing casualty care will typically need to modify the medical care plan to optimize it for the real scenario.</li> </ul>	<p>Read the text.</p>
<p>74.</p>	 <p><b>The 3 Objectives of TCCC</b></p> <ul style="list-style-type: none"> <li>• Treat the casualty</li> <li>• Prevent additional casualties</li> <li>• Complete the mission</li> </ul>	<p><b>The 3 Objectives of TCCC</b></p> <ul style="list-style-type: none"> <li>• Treat the casualty</li> <li>• Prevent additional casualties</li> <li>• Complete the mission</li> </ul>	<p>Once more....</p>
<p>75.</p>	 <p><b>Post-Test</b></p> 	<p><b>Post-Test</b></p>	<p>Pass out pre-tests. Collect them when done. Review the test with the students. Compare pre-test grades to post-test grades to gauge assimilation of the information.</p>
<p>76.</p>		<p><b>The End</b></p> <p><b>The U.S.S. Arizona Memorial</b></p>	