

tactical combat casualty care training

tactical combat casualty care training is a critical discipline that equips military personnel and first responders with the skills necessary to provide effective medical care in combat environments. This specialized training focuses on life-saving techniques that are applicable under fire or in hostile conditions where traditional medical support may not be immediately available. Emphasizing rapid assessment, hemorrhage control, airway management, and evacuation procedures, tactical combat casualty care training aims to reduce preventable deaths on the battlefield. The curriculum integrates principles of trauma care with tactical awareness, ensuring that care providers can operate safely and efficiently in high-stress situations. This article explores the core components, benefits, and implementation strategies of tactical combat casualty care training. Additionally, it examines the evolving nature of the training in response to modern combat challenges and technological advancements.

- Understanding Tactical Combat Casualty Care Training
- Core Components of Tactical Combat Casualty Care Training
- Benefits and Importance of Tactical Combat Casualty Care Training
- Implementation and Training Methods
- Advancements and Future Trends in Tactical Combat Casualty Care Training

Understanding Tactical Combat Casualty Care Training

Tactical combat casualty care training is designed to prepare individuals for medical emergencies

encountered in combat zones or tactical operations. It combines medical knowledge with tactical skills to ensure that care providers can deliver effective treatment without compromising their safety or mission objectives. The training is structured around a phased approach to care, addressing the priorities of hemorrhage control, airway and breathing management, circulation, and evacuation. Unlike conventional medical training, tactical combat casualty care emphasizes care under fire, tactical field care, and tactical evacuation care, reflecting the unique challenges of battlefield medicine.

History and Development

The concept of tactical combat casualty care originated from the need to reduce preventable deaths during military engagements. Early military conflicts demonstrated that many fatalities resulted from treatable injuries when timely care was unavailable. Over time, military medical organizations developed standardized protocols and training programs to improve survival rates. These programs have evolved in response to lessons learned from recent conflicts, incorporating advances in medical technology and battlefield tactics.

Target Audience

Tactical combat casualty care training is primarily intended for military personnel, including combat medics, infantry soldiers, special operations forces, and other tactical operators. Additionally, law enforcement officers, emergency medical technicians (EMTs), and paramedics involved in high-risk operations may also receive this training to enhance their capabilities in hostile environments.

Core Components of Tactical Combat Casualty Care Training

The training curriculum covers a comprehensive range of skills and knowledge areas essential for effective combat casualty care. These core components ensure that trainees can perform critical interventions rapidly and efficiently in the field.

Hemorrhage Control

Controlling severe bleeding is the highest priority in tactical combat casualty care. Trainees learn to apply tourniquets, hemostatic dressings, and pressure bandages to prevent exsanguination. The use of modern hemorrhage control devices is emphasized to save lives during the critical minutes following injury.

Airway Management

Maintaining a patent airway is essential for casualty survival. Training includes techniques such as the head-tilt-chin-lift maneuver, insertion of nasopharyngeal airways, and basic airway adjuncts.

Understanding how to manage airway obstructions in austere environments is a key skill taught in the program.

Breathing and Circulation

Assessment and management of breathing and circulation involve identifying chest injuries, providing chest decompression for tension pneumothorax, and ensuring adequate circulation through intravenous or intraosseous access. These interventions are critical in stabilizing casualties before evacuation.

Tactical Evacuation Care

Once immediate life threats are managed, tactical combat casualty care training covers evacuation procedures, including casualty packaging, movement under fire, and communication with medical evacuation assets. Efficient evacuation protocols increase the likelihood of survival during transport to higher-level care facilities.

Additional Skills

- Recognition and management of traumatic brain injuries
- Burn care and shock management
- Environmental considerations such as hypothermia prevention
- Documentation and communication of casualty status

Benefits and Importance of Tactical Combat Casualty Care Training

Implementing tactical combat casualty care training yields significant benefits for military and tactical teams. The primary advantage is the reduction of preventable deaths through rapid and effective medical interventions. The training also enhances team readiness and confidence, fostering a culture of preparedness and resilience.

Improved Survival Rates

Studies have demonstrated that casualties receiving timely tactical combat casualty care have markedly improved survival rates. Early hemorrhage control, airway management, and rapid evacuation are pivotal factors in these outcomes.

Enhanced Tactical Effectiveness

By integrating medical skills with tactical awareness, personnel can maintain operational effectiveness

even when managing casualties. This dual focus minimizes mission disruption and supports overall unit performance.

Preparedness for Diverse Scenarios

Tactical combat casualty care training prepares individuals to handle a variety of injury mechanisms and environmental conditions, ensuring adaptability across different combat and tactical scenarios.

Implementation and Training Methods

Effective tactical combat casualty care training employs a variety of instructional methods to ensure practical skill acquisition and retention. Training programs are often modular, combining classroom instruction with hands-on practice and realistic simulations.

Classroom Instruction

Theoretical knowledge is delivered through lectures, presentations, and discussion sessions covering anatomy, physiology, injury patterns, and treatment protocols. This foundational knowledge supports practical skill application.

Hands-On Training

Practical exercises include applying tourniquets, airway adjuncts, and chest seals on mannequins or simulated casualties. These sessions reinforce muscle memory and procedural competence.

Simulation and Scenario-Based Training

Realistic scenarios replicate combat conditions, including live-fire exercises and stress-inducing

environments. Simulation-based training enhances decision-making under pressure and teamwork during casualty care.

Assessment and Certification

Participants are evaluated through written exams, practical skill tests, and performance during simulated scenarios. Successful completion results in certification, validating proficiency in tactical combat casualty care.

Advancements and Future Trends in Tactical Combat Casualty Care Training

As combat environments and medical technology evolve, tactical combat casualty care training continues to adapt. Innovations aim to improve training efficacy and casualty outcomes.

Integration of Technology

Modern training incorporates virtual reality (VR) and augmented reality (AR) to create immersive learning experiences. These technologies allow trainees to practice in diverse scenarios without physical limitations.

Advanced Medical Devices

The development of compact, user-friendly medical devices such as automated tourniquets, hemostatic agents, and portable ultrasound units enhances field care capabilities. Training programs are updated to include these tools.

Data-Driven Training Improvements

Utilization of after-action reviews, performance analytics, and feedback mechanisms helps refine training curricula and identify areas for improvement, ensuring training remains relevant and effective.

Expanded Training Populations

There is increasing recognition of the value of tactical combat casualty care training beyond military users, extending to law enforcement agencies, emergency responders, and civilian first aid providers operating in high-risk environments.

Frequently Asked Questions

What is Tactical Combat Casualty Care (TCCC) training?

Tactical Combat Casualty Care (TCCC) training is a specialized program designed to teach military personnel and first responders how to provide lifesaving medical care in combat and tactical environments, focusing on hemorrhage control, airway management, and casualty evacuation.

Why is TCCC training important for military and first responders?

TCCC training is crucial because it equips individuals with the skills to manage traumatic injuries under fire, significantly increasing survival rates by addressing preventable causes of death such as severe bleeding and airway obstruction in high-risk environments.

What are the main phases covered in TCCC training?

TCCC training covers three main phases: Care Under Fire (providing care while under hostile fire), Tactical Field Care (care provided when no longer under direct fire), and Tactical Evacuation Care (care during casualty evacuation to higher medical support).

How has TCCC training evolved with advances in medical technology?

TCCC training has evolved to incorporate modern medical devices like tourniquets, hemostatic agents, and advanced airway management tools, as well as updated protocols based on battlefield medical research to improve outcomes and adapt to new combat scenarios.

Can civilians benefit from Tactical Combat Casualty Care training?

Yes, civilians such as law enforcement officers, paramedics, and even laypersons in high-risk professions can benefit from TCCC training, as the skills taught are applicable to managing traumatic injuries in emergency situations beyond the battlefield.

Additional Resources

1. *Tactical Combat Casualty Care Handbook*

This comprehensive handbook offers an in-depth look at the principles and practices of Tactical Combat Casualty Care (TCCC). It covers crucial topics such as hemorrhage control, airway management, and evacuation protocols. Designed for military medics and first responders, the book emphasizes practical, life-saving techniques in combat environments.

2. *Essentials of Tactical Combat Casualty Care*

Essentials of TCCC distills the core knowledge needed for effective battlefield medical intervention. It includes detailed illustrations and step-by-step procedures for treating combat injuries under fire. The book also highlights the latest advancements in trauma care and the importance of rapid decision-making.

3. *Combat Trauma Management: Tactical Combat Casualty Care Techniques*

This text focuses on managing trauma in austere and hostile settings, emphasizing tactical approaches to casualty care. It integrates case studies from recent conflicts to illustrate best practices. Readers gain insights into the coordination between combat medics and evacuation teams.

4. Advanced Tactical Combat Casualty Care Strategies

Aimed at experienced practitioners, this book explores advanced strategies for managing complex injuries on the battlefield. It covers innovations in hemostatic agents, airway devices, and pain management. The content is supported by research findings and scenario-based training exercises.

5. Tactical Combat Casualty Care: A Guide for Military Medics

This guide is tailored specifically for military medics, providing clear instructions on implementing TCCC protocols. It emphasizes the three phases of care: care under fire, tactical field care, and tactical evacuation care. The book also addresses psychological considerations in combat casualty treatment.

6. Field Manual of Tactical Combat Casualty Care

This field manual serves as a quick-reference tool for medics in combat zones. It includes checklists, flowcharts, and concise treatment algorithms for common battlefield injuries. The manual is designed to be portable and durable, suitable for use in high-stress environments.

7. Practical Applications of Tactical Combat Casualty Care

Focusing on real-world application, this book provides practical tips and lessons learned from battlefield experiences. It discusses teamwork, communication, and resource management in casualty care scenarios. The text also covers adaptations needed for different combat theaters and environments.

8. Tactical Combat Casualty Care Training Exercises and Scenarios

This resource offers a collection of training exercises and realistic scenarios to enhance TCCC skills. It is ideal for instructors and trainees aiming to improve decision-making and hands-on proficiency. The scenarios simulate a variety of combat injuries and operational challenges.

9. Integrating Tactical Combat Casualty Care into Civilian Emergency Response

This book explores how TCCC principles can be adapted for civilian emergency medical services, especially in mass casualty and active shooter situations. It discusses cross-training opportunities and collaboration between military and civilian responders. The text underscores the importance of tactical

awareness in civilian trauma care.

Tactical Combat Casualty Care Training

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tactical combat casualty care training: 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](https://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

tactical combat casualty care training: 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 limitation(s) 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).

tactical combat casualty care training: Evaluating Tactical Combat Casualty Care Training Treatments Effects on Combat Medic Trainees in Light of Select Human Descriptive Characteristics Teresita M. Sotomayor, 2008 The use of military forces in urban operations has increased considerably over the past years. As illustrated by the current conflict in Iraq, the Army finds itself fighting its toughest battles in urban areas facing unconventional forces. Soldiers face many threats in hostile fire environments, whether conducting large-scale mechanized warfare, low-intensity conflicts, or operations other than war. Through 1970, there has been no demonstrable reduction in battlefield mortality rate as a percentage of all casualties since data was

kept since before the Civil War. For that period of time, nearly all the reduction in overall mortality rate occurred through reduced mortality in Hospital Chain. As of 1970, about 90 percent of all combat deaths occur before a casualty reaches a definitive care facility. Tactical Combat Casualty Care (TCCC), also known as TC3, is the pre-hospital care rendered to a casualty in a combat environment. The application of TCCC principles during a tactical combat environment has proven highly effective and is a major reason why combat deaths in latest conflicts (Operation Iraqi Freedom and Operation Enduring Freedom) are lower than in any other conflict in the history of the United States. The Army continues to emphasize reducing battlefield mortality rate. Current tools and methods used for initial skills and sustainment training of combat medics throughout the Army are insufficient. New technologies are needed to provide medics with greater opportunities to develop and test their decision making and technical medical skills in multiple, COE-relevant, training scenarios. In order to address some of these requirements, the U.S. Army Research Development and Engineering Command, Simulation and Training Technology Center (RDECOM-STTC) is developing the 68W- Tactical Combat Casualty Care Simulation (TC3 Sim) for the US Army Medical Department (AMEDD) Center & School at Fort Sam Houston. The Army is considering the use of the TC3 Sim game as a tool to improve the training of individual Soldiers as well as improve the readiness of combat medics. It is the intent of this research to evaluate the effectiveness of instructional games in general and the use of the TC3 game in particular for teaching the concepts of tactical combat casualty care. Experiments were conducted to evaluate the training effectiveness of this tool in supporting the 68W10 Healthcare Specialist Course program of instruction (POI). The goal of this research is to address important questions such as: Is this game an effective tool to train Soldiers the aspects of TC3? Can knowledge gain through the use of the simulation be transferred into task related situations? How can this tool be incorporated in the current POI in order to increase training effectiveness?

tactical combat casualty care training: *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.

tactical combat casualty care training: Tactical Combat Casualty Care Handbook United States Army, 2017-05-17 Tactical Combat Casualty Care (TCCC) has saved hundreds of lives during our nation's conflicts in Iraq and Afghanistan. Nearly 90 percent of combat fatalities occur before a casualty reaches a medical treatment facility. Therefore, the prehospital phase of care is needed to focus on reducing the number of combat deaths. However, few military physicians have had training in this area and, at the onset of hostilities, most combat medics, corpsmen, and pararescue personnel in the U.S. military have been trained to perform battlefield trauma care through civilian-based trauma courses. These courses are not designed for the prehospital combat environment and do not reflect current practices in the area of prehospital care. TCCC was created to train Soldiers and medical personnel on current best practices for medical treatment from the point of injury to evacuation to Role 3 facilities

tactical combat casualty care training: 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.

tactical combat casualty care training: Publications Combined: Tactical Combat Casualty Care (TCCC) / Combat Life Saver (CLS) - Trainer Class , 2019-03-05 CONTENTS: Tactical Combat Casualty Care Guidelines for Medical Personnel 03 June 2016 COMBAT LIFESAVER / TACTICAL COMBAT CASUALTY CARE STUDENT HANDOUT (2014) COMBAT LIFESAVER / TACTICAL COMBAT CASUALTY CARE STUDENT HANDOUT (2017) COMBAT LIFESAVER / TACTICAL COMBAT CASUALTY CARE TRAINER COURSE STUDENT HANDBOOK - Combat Lifesaver / Tactical Combat Casualty Care Instructor Course (2014) COMBAT LIFESAVER / TACTICAL COMBAT CASUALTY CARE TRAINER COURSE STUDENT HANDBOOK - Combat Lifesaver / Tactical Combat Casualty Care Instructor Course (2017) CASUALTY EVALUATION AND EVACUATION STUDENT HANDOUT PREVENTION AND TREATMENT OF FIELD RELATED INJURIES B151236 STUDENT HANDOUT COMBAT LIFE SAVING STUDENT HANDOUT

tactical combat casualty care training: U.S. Army 68W Healthcare Provider Job Book, Tactical Combat Casualty Care TCCC Visual Slides & Training Support Package , 2015-07-08 68W Healthcare Provider JOB BOOK This book is designed to help you in maintaining accountability of your training, performance of skills and continuing education requirements for recertification as a Nationally Registered Emergency Medical Technician - Basic. This job book is required to be with you while in the performance of your duties. This will allow senior medical personnel to fill in areas when skills or training have been performed or completed. This will allow you the greatest opportunity for success when it is time to recertify your certification. This is a tool for you to remain successful while as a 68W. Good luck and enjoy your time as an Army Medic! Trained to Save

Training Support Package Contents: Introduction Terminal Learning Objective - Perform Tactical Combat Casualty Care Presentation Enabling Learning Objective A - Describe Care Under Fire, Tactical Field Care, and Tactical Evacuation Care Enabling Learning Objective B - Identify items used in first aid. Enabling Learning Objective C - Perform Care under Fire Enabling Learning Objective D - Perform Tactical Field Care Enabling Learning Objective E - Perform Tactical Evacuation Care Enabling Learning Objective F - Initiate a Field Medical Card and TCCC Card

tactical combat casualty care training: Combat Casualty Care Eric Savitsky, Borden Institute (U.S.), 2012 This book is designed to deliver combat casualty care information that will facilitate transition from a continental US or civilian practice to the combat care environment. Establishment of the Joint Theater Trauma System and the Joint Theater Trauma Registry, coupled with the efforts of the authors, has resulted in the creation of the most comprehensive, evidence-based depiction of the latest advances in combat casualty care. Lessons learned in Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) have been fortified with evidence-based recommendations to improve casualty care. The educational curriculum was designed overall to address the leading causes of preventable death and disability in OEF and OIF. Specifically, the generalist combat casualty care provider is presented requisite information for optimal care of US combat casualties in the first 72 to 96 hours after injury. The specialist provider is afforded similar information, supplemented by lessons learned for definitive care of host nation patients.--

tactical combat casualty care training: 2016-19 Canine K-9 Working Dog Tactical Combat Casualty Care TCCC / T-CCC Manuals Combined U.S. Department Of Defense, 2020-03-30
CONTENTS: 1. U.S. SPECIAL OPERATIONS COMMAND's TACTICAL TRAUMA PROTOCOLS (TTPs) TACTICAL MEDICAL EMERGENCY PROTOCOLS (TMEPs) RECOMMENDED DRUG LIST (RDL) CANINE TACTICAL COMBAT CASUALTY CARE (December 2016), 253 pages 2. TRANSFUSION FOR THE MILITARY WORKING DOG (December 2019), 27 pages 3. General Instructions for Canine Trauma Combat Casualty Care Card (2019), 3 pages 4. General Instructions for Canine Treatment and Resuscitation Record (2019), 11 pages 5. Working Dog Handler Medical Care Manual (2017), 100 pages INTRODUCTION Military Working Dogs (MWDs) are at the same risk for injury as their human counterparts and when they are severely injured, best practice for resuscitation mirrors those recommended for humans.¹ A recent study of trauma in MWDs shows that explosions, gunshot wounds and lacerations account for the vast majorities of injuries sustained within the Central Command area of responsibility. In severe cases, these mechanisms of injuries could require resuscitation with blood products. Hemostatic resuscitation has been shown in a many species to be superior to resuscitation with crystalloids or synthetic colloids and should therefore be considered the first-choice resuscitation product in severely wounded MWDs.

tactical combat casualty care training: TACTICAL COMBAT CASUALTY CARE TCCC TC3 Presentation, INTRODUCTION: What is TCCC and Why Do I Need to Learn about it?? 1. Coalition forces presently have the best casualty treatment and evacuation system in history. 2. TCCC is what will keep you alive long enough to benefit from it. 3. Originally a Special Operations research effort Trauma management plans that take into account the unique challenges faced by combat medical personnel Now used throughout U.S. military and by most allied countries TCCC has helped U.S. combat forces to achieve the highest casualty survival rate in history. TCCC Approach: 1. Identify the causes of preventable death on the battlefield 2. Address them aggressively 3. Combine good medicine with good tactics Phases of Care in TCCC: 1. Care Under Fire Care under fire is the care rendered by the first responder or combatant at the scene of the injury while he and the casualty are still under effective hostile fire. Available medical equipment is limited to that carried by the individual or by the medical provider in his or her aid bag. 2. Tactical Field Care Tactical Field Care is the care rendered by the first responder or combatant once he and the casualty are no longer under effective hostile fire. It also applies to situations in which an injury has occurred, but there has been no hostile fire. Available medical equipment is still limited to that carried into the field by unit personnel. Time to evacuation to a medical treatment facility may vary considerably. 3. 3.

Tactical Evacuation Care Tactical Evacuation Care is the care rendered once the casualty has been picked up by an aircraft, vehicle or boat. Additional medical personnel and equipment that may have been pre-staged should be available in this phase of casualty management.

tactical combat casualty care training: 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.

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