CHAPTER 2

UNIT AND DIVISION MEDICAL EVACUATION

2-1. General

a. Medical evacuation support within the division is provided by an element of the modular medical support system. This system standardizes the HSS subunits within the division.

b. The ambulance squad is the basic module for evacuation. This squad provides casualty evacuation throughout the division and ensures continuity of care en route. Ambulance squads are organic to the medical platoon or section in maneuver battalions and to DISCOM medical companies. Medical company ambulance squads are collocated with MTFs in both the BSA and the DSA. The medical platoon ambulance squads are collocated with the BAS for support. Ambulance teams are positioned forward with maneuver elements. This facilitates evacuation and decreases response time.

c. Area medical support is provided to those units operating in the division AO which do not have organic resources. To ensure that adequate HSS is provided, prior planning and coordination must be accomplished.

2-2. Level I Medical Evacuation

a. The medical platoon organic to the headquarters and headquarters company of the combat maneuver battalion provides medical evacuation support for the unit. Their mission is to provide this support for subordinate elements of the battalion. They also provide support to other elements in the sector providing CS to their unit. The medical platoon leader is a physician and also serves as the battalion surgeon. He is assisted by the medical operations officer in the operational, administrative, and logistical support aspects of the platoon. The ambulance section of the medical platoon is organized into ambulance squads and is supervised by the platoon sergeant. Each squad contains a noncommissioned officer (NCO) squad leader, three medical specialists/ambulance drivers, and two ambulances (Figure 2-1).

b. The number of ambulance squads in a section varies and is based on the type of parent organization. The infantry, airborne, and air assault battalions' ambulance sections have two ambulance squads equipped with high mobility multi-purpose wheeled vehicle (HMMWV) ambulances. The mechanized infantry and armor combat maneuver battalions' ambulance sections have four ambulance squads equipped with M-113 track ambulances.

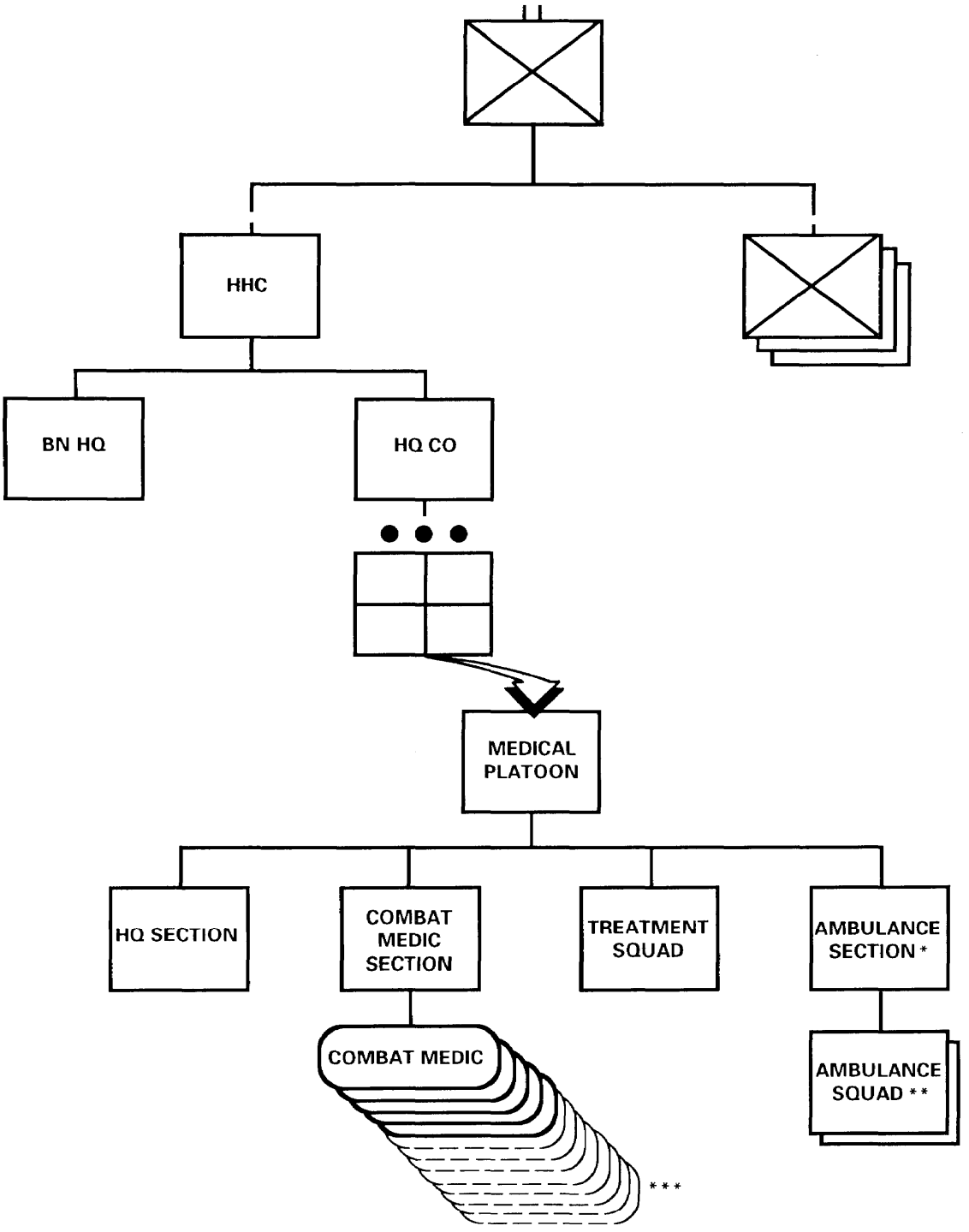
c. Each ambulance team consists of one vehicle and two medics (aide/evacuation NCOs and medical aidmen). Specific duties of the ambulance team are to—

- Maintain contact with supported elements.
- Find and collect the wounded.
- Perform triage when necessary.
- Administer EMT as required.
- Initiate or complete the field medical card (FMC).
- Evacuate litter patients to the BAS.
- Direct or guide ambulatory patients to the BAS.
- Resupply combat medics with Class VIII supplies.
- Serve as messengers within medical channels.

d. Under the modular medical system, the ambulance squad consists of two ambulance teams.

(1) The aide/evacuation NCO–

- Collects casualties.
- Performs triage and EMT procedures in the care and management of trauma patients.
- Assists in the care and management of combat stress patients.



NOTE:
* MECHANIZED INFANTRY AND ARMOR UNITS HAVE 4 AMBULANCE SQUADS.
** TWO AMBULANCE TEAMS.
*** AIRBORNE OR AIR ASSAULT UNITS HAVE 12, ARMOR UNITS HAVE 5, AND MECHANIZED INFANTRY UNITS HAVE 13.

Figure 2-1. Medical platoon.

- Prepares patients for movement.
- Provides en route patient care.
- Acts as vehicle commander and navigator.
- Maintains contact with supported units.
- Performs NBC detection procedures.
- Assists the platoon leader and platoon sergeant in selecting medical evacuation routes.
- Regulates the backhaul of medical supplies for his squad.

(2) The medical specialist/ambulance driver is trained in EMT procedures. He operates and maintains the ambulance and all of its on-board equipment. He also assists the aide/evacuation NCO in the care and handling of patients.

e. The ambulance team is essentially a mobile combat medic team. Its principal function is to collect and treat the sick, injured, and wounded on the battlefield and to safely evacuate them. The patients may be evacuated to the nearest patient collecting point, ambulance exchange point (AXP), or to the BAS site. For communications, the ambulance team employs vehicular-mounted tactical radios on its assigned ambulance. The ambulances will be equipped with navigational aids (NAVAIDS). In the future, the ambulances will be equipped with the Global Positioning System (GPS). The GPS has the capability of instantly providing ambulance crews with their location by eight-digit grid coordinates. It also provides correct route selection for traveling to a designated point. The team normally operates in the same net as the BASS.

2-3. Medical Evacuation in the Division

a. The ambulance platoon of the medical companies organic to the division (Figures 2-2 and 2-3) provides—

- Level I evacuation support on an area support basis for all units without organic evacuation assets operating within the division AO.
- Level II medical evacuation support for the entire division.

b. The mission of the ambulance platoon is to–

- Provide ground evacuation and en route medical care for patients from the BAS, from the supported units in the BSA and DSA, and, when necessary, from the forward support medical company (FSMC) in the BSA to the medical company in the DSA.
- Reinforce and reconstitute ambulance support forward.
- Provide medical resupply through the backhaul method using returning ground ambulances.

c. Under the modular medical system, the ambulance platoon consists of a platoon headquarters module and multiple ambulance squad modules.

(1) *Platoon leader*. This officer directs, coordinates, and supervises the platoon and plans for its employment. Further, he—

- Establishes and maintains contact with supported treatment squads.
- Makes route reconnaissances.
- Develops and issues strip maps.
- Allocates mission requirements based on priority.
- Designates patient collecting points, AXPs, and develops medical-specific situational overlays.

(2) *Platoon sergeant*. This NCO assists the platoon leader in planning the employment of platoon assets. He provides direct supervision and

training of enlisted personnel to include operator maintenance.

(3) *Aide/evacuation NCOs.* These NCOs supervise ambulance squads and serve as ambulance team leaders. They perform triage, provide EMT, and assist in evacuating patients.

(4) *Aide/ambulance drivers.* They provide EMT necessary to prepare patients for movement and operate ambulances. They also perform preventive maintenance on their assigned ambulances and associated equipment.

d. The ambulance platoon headquarters normally collocates with the treatment platoon headquarters for mutual support and area support taskings. The ambulance platoon may be totally deployed at one time. The platoon of the DSA medical company normally places one ambulance team in support of each FSMC and in support of units in the division rear area. The remaining teams are used for task force operations, augmentation, or establishment of an ambulance shuttle. The FSMC ambulance platoon establishes contact and may locate one ambulance team with the medical platoon of each maneuver battalion.

e. The number of ambulance squads in a platoon varies and is based on the type of parent division. The infantry and airborne medical companies each have ambulance platoons with four ambulance squads (only three squads in the air assault division) equipped with HMMWV ambulances. The mechanized infantry and armor divisions' medical companies also have five squads per platoon, but two squads are equipped with HMMWV ambulances and three squads with M-113 ambulances.

f. For communications, the ambulance platoon employs vehicular-mounted tactical radios in the platoon headquarters vehicle and each ground ambulance. The platoon operates on the medical evacuation frequency and monitors the company's operations net.

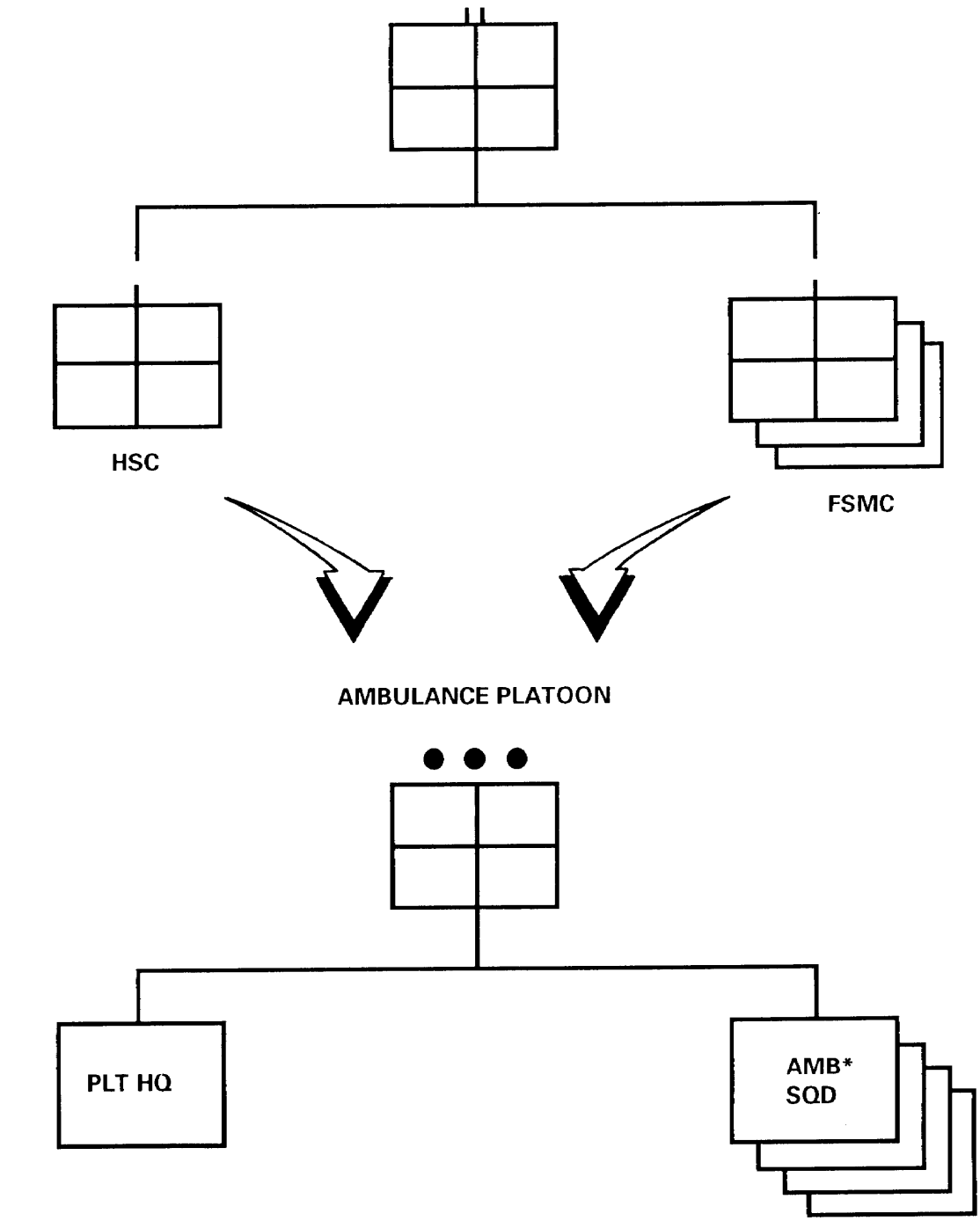
2-4. Level I Medical Evacuation in the Corps

a. Unit-level medical evacuation support to the corps is provided by the medical companies of the corps ASMB (Figure 2-4). The area support medical company (ASMC) is structured like the division medical companies with its ambulance platoon providing evacuation support on an area basis to all corps units in the corps support area (CSA).

b. The mission of the ambulance platoon is to–

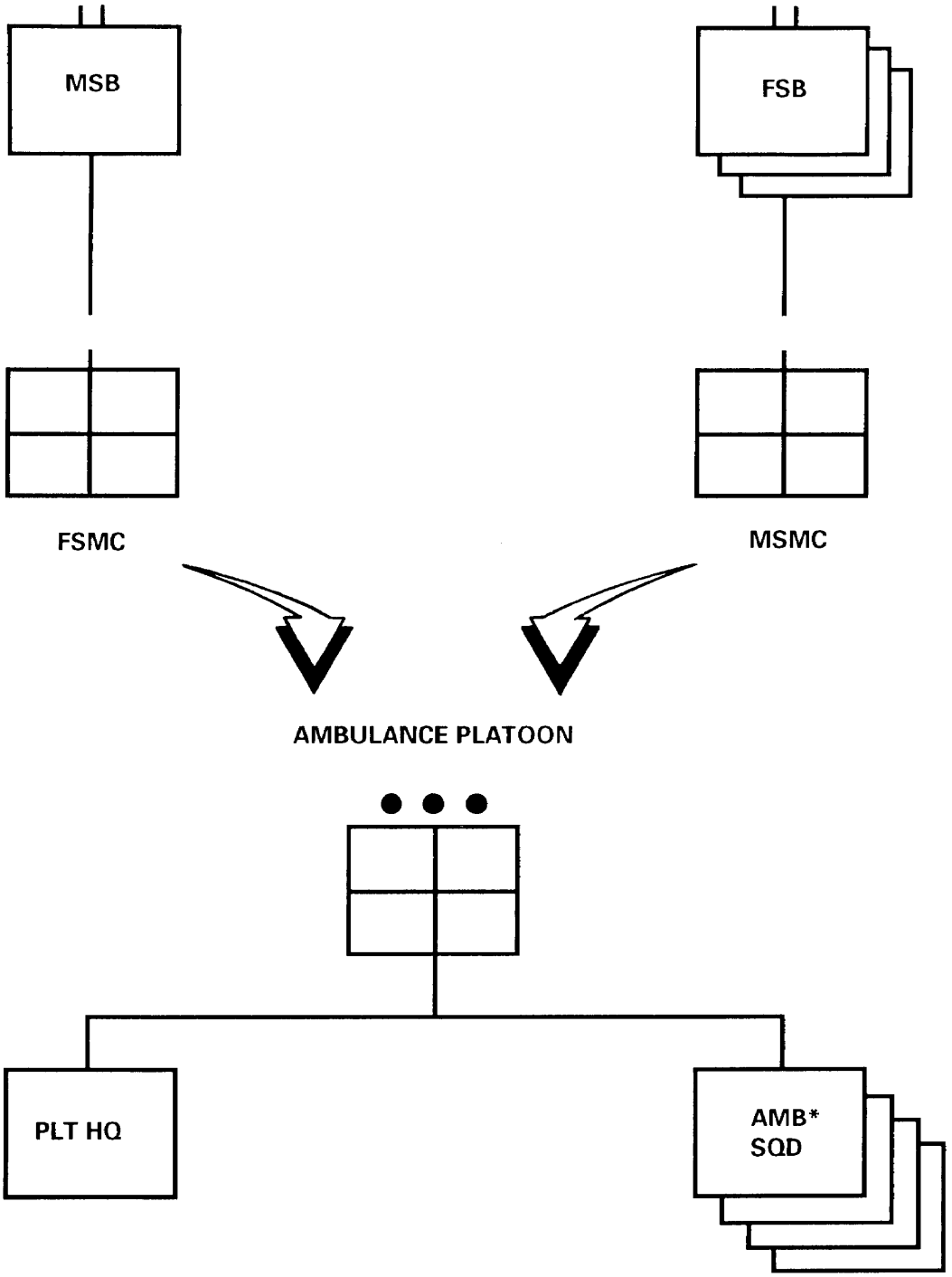
- Provide ground evacuation and en route medical care for patients from the site of injury to an ASMC.
- Provide medical resupply through the backhaul method using returning ambulances.
- Act as a carrier of medical records and resupply requests.
- Provide transportation of medical personnel and equipment.

c. The organization and staffing of the ASMC ambulance platoon is similar to the ambulance platoon in the division-level medical companies. The platoon has four ambulance squads equipped with commercial utility cargo vehicle (CUCV) wheeled ambulances. The ambulance platoon collocates with the clearing station. The ambulance teams are collocated with MTFs and hospitals, as required.



* AIR ASSAULT HAS THREE SQUADS.

Figure 2-2. Ambulance platoon (airborne, air assault, and light infantry divisions).



* MAIN SUPPORT BATTALION (MSB) HAS FIVE AMBULANCE SQUADS WITH WHEELED VEHICLES. FORWARD SUPPORT BATTALION (FSB) HAS FIVE AMBULANCE SQUADS WITH TWO SQUADS OF WHEELED VEHICLES AND THREE SQUADS OF TRACK VEHICLES.

Figure 2-3. Ambulance platoon (mechanized infantry and armor divisions).

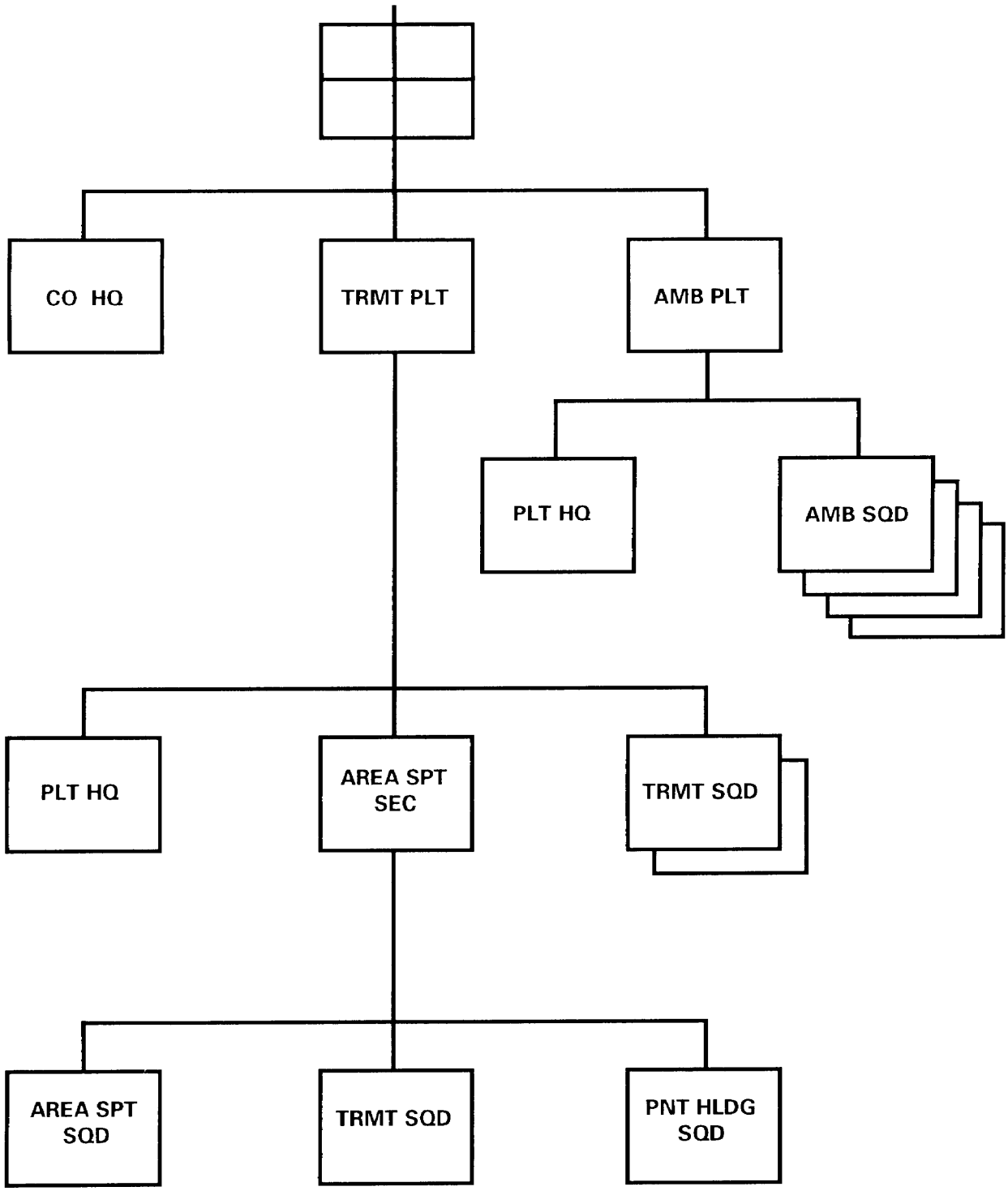


Figure 2-4. Area support medical company.