



FIELD MEDICAL ASSISTANT COURSE (FMAC)

MODULE 01:

PRINCIPLES AND APPLICATIONS OF TACTICAL FIELD MEDICAL AID (TFMA)

- This course is based heavily on the United States Defense Health Agency, Joint Trauma System, Tactical Combat Casualty Care (TCCC), Combat Lifesavers Course.
- Adjustments have been made to comply with United Nations Policy.
- The UN equivalent to TCCC is <u>Tactical Field Medical Aid</u>
- The UN equivalent to Combat Lifesaver = Field Medical Assistant











TACTICAL FIELD MEDICAL AID (TFMA) ROLE-BASED TRAINING SPECTRUM

ROLE 1 CARE

NONMEDICAL PERSONNEL

- Buddy First Aid
- Field Medical Assistant



MEDICAL PERSONNEL

- Paramedic
- Nurse
- Doctor





PRINCIPLES AND APPLICATIONS OF TACTICAL FIELD MEDICAL AID (TFMA) TERMINAL LEARNING OBJECTIVES

TO1 Given a combat or noncombat scenario, perform Tactical Field Medical Aid (TFMA)

EO1 Demonstrate the application of TFMA skills in a combat or noncombat scenario (Comprehensive Module Practical Exercise)

TO2 Describe the practice of TFMA

EO2 Identify the leading causes of preventable death due to traumatic injuries, and the corresponding interventions to help increase chances of survival

EO3 Describe the TFMA Phases of Care, and how intervention priorities differ in each phase

EO4 Describe the application of TFMA in combat and noncombat settings across different environments

EO5 Describe the role and responsibilities of a nonmedical service member in rendering TFMA care

EO6 Identify the key factors influencing TFMA

EO7 Identify the importance of TFMA training

EO8 Identify three objectives (or goals) of TFMA





UN MANDATE FOR STANDARDIZED TRAINING

- Standardizes Field Medical Aid for all members
- Covers the use of standardized trauma training platforms





TCCC ONLINE RESOURCES

TCCC training and education resource is available at: www.deployedmedicine.com

It contains:

- Videos, podcasts, and resources
- Downloadable Clinical Practice Guidelines (CPGs)





COURSE CONTENTS WHAT THIS COURSE CONTAINS

- Principles and Applications of TFMA
- Medical Equipment
- Care Under Fire
- Principles and Application of Tactical Field Aid
- Tactical Trauma Assessment
- Massive Hemorrhage Control
- Airway Management
- Respiration Assessment and Management
- Circulation/Hemorrhage Control
- Shock Recognition

- Hypothermia Prevention
- Head Injuries
- Eye Injuries
- Wound Management
- Burns
- Fractures
- Casualty Monitoring
- Pre-evacuation Procedures
- Evacuation Procedures





PRINCIPLES AND APPLICATIONS OF TFMA

Video can be found at: www.deployedmedicine.com





PRINCIPLES AND APPLICATIONS OF TFMA

ROLES AND RESPONSIBILITIES OF THE FIELD MEDICAL ASSISTANT (FMA)

In a **Care Under Fire** situation the FMA:

 Must respond to suppression of hostile fire to minimize the risk of injury to personnel and minimize additional injury to previously injured Service members

In **Tactical Field Care** the FMAs:

 Must maintain security and situational awareness while continuing to tend to casualties and prepare for evacuation





PRINCIPLES AND APPLICATIONS OF TFMA ROLES AND RESPONSIBILITIES OF FMA

First Responder Care (Role 1)

The first medical care that military personnel receive is provided at Role 1 (also referred to as unit-level medical care or self-aid, buddy aid, combat lifesaver, and/or medic care). This role of care includes:

 Immediate lifesaving measures and treatment for disease and non-battle injury (DNBI) or degradation of functional capability sustained by personnel and caused by factors other than those directly attributed to enemy action





PRINCIPLES AND APPLICATIONS OF TFMA THE KEY FACTORS INFLUENCING TFMA

- Hostile fire
- Tactical considerations
- Environmental considerations
- Wounding patterns
- Equipment constraints
- Delays in reaching higher levels of care
- Level of first responder training and experience





PRINCIPLES AND APPLICATIONS OF TFMA IMPORTANCE OF TFMA TRAINING

TFMA focuses on identifying and treating the causes of preventable death on the battlefield



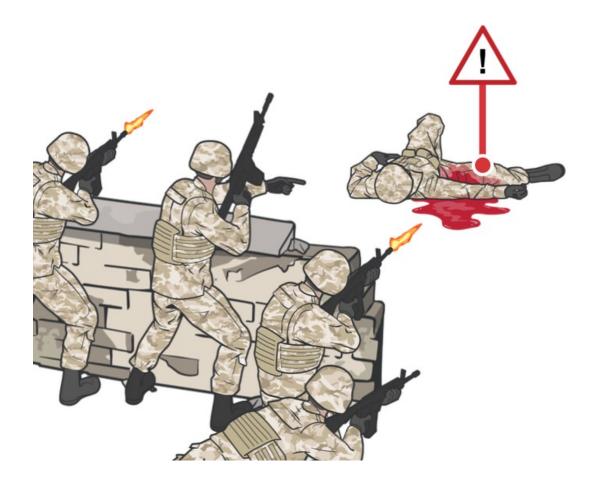
- Bleeding from arm and leg injuries
- Junctional bleeding where an arm or leg joins the torso such as the groin
- Noncompressible bleeding such as a gunshot wound to the abdomen
- Tension pneumothorax (air trapped in the chest that prevents breathing and circulation)
- Airway problems





PRINCIPLES AND APPLICATIONS OF TFMA THREE GOALS OF TFMA

- Treat the casualty
- Prevent additional casualties
- Complete the mission







ENTER PEACEKEEPING OPERATIONS





Three PHASES of TFMA

1 CARE UNDER FIRE

2 TACTICAL FIELD CARE

3 TACTICAL EVACUATION CARE (TACEVAC)

RETURN FIRE AND TAKE COVER

COVER AND CONCEALMENT

Quick decision-making:

- Consider scene safety
- Identify and control lifethreatening bleeding
- Move casualty to safety

Basic Management Plan:

- Maintain tactical situational awareness
- Triage casualties as required
- MARCH PAWS assessment

More deliberate assessment and treatment of unrecognized lifethreatening injuries:

- Pre-evacuation procedures
- Continuation of documentation

NOTE: This is covered in more advanced TFMA training!





PHASE 1: CARE UNDER FIRE

RETURN FIRE AND TAKE COVER

- Never attempt to rescue a casualty until hostile fire is suppressed
- Using available resources, ensure scene safety

DIRECT CASUALTY TO REMAIN ENGAGED

APPLY SELF-AID AND MOVE TO COVER (if able)

GAIN FIRE SUPERIORITY

MOVE TO CASUALTY (if casualty is unable to

move to cover)





PHASE 1: CARE UNDER FIRE

APPLY TOURNIQUET TO CONTROL LIFETHREATENING BLEEDING

For life-threatening bleeding, place a tourniquet "high and tight" above the wound

CONTINUE TO MAINTAIN FIRE SUPERIORITY

MOVE CASUALTY



IMPORTANTCONSIDERATIONS:

Continuously assess risks and make a plan before moving a casualty





TACTICAL FIELD AID

MARCH PAWS

DURING LIFE-THREATENING AFTER LIFE-THREATENING

MASSIVE BLEEDING PAIN

AIRWAY ANTIBIOTICS

RESPIRATION WOUNDS

CIRCULATION SPLINTING

HYPOTHERMIA / HEAD INJURIES





PHASE 2: OTHER CONSIDERATIONS OF TACTICAL FIELD CARE

TFC

- The casualty and the person rendering care are not under direct fire
- Intervention priorities should follow MARCH PAWS

LIMITED SUPPLIES

 Medical equipment and supplies awareness are limited to what is carried into the field by the FMA and the individual Service member

REMEMBER:

- Always use the casualty's Buddy First Aid Kit (BFAK) first
- TFC can turn into a CUF situation unexpectedly
- Personnel should maintain their situational awareness





PHASE 3: TACTICAL EVACUATION CARE

CASUALTY MONITORING

Continue to reassess and monitor casualty

EVAC REQUEST

Use UN Evacuation 4 Liner

COMPLETE REPORT

- Mechanism of injury
- Injuries
- Symptoms
- Treatment

CASUALTY PREP

- Prep Litter
- Prep Evac Equipment
- Pack Casualty
- Secure Items

PRE-EVAC PROCEDURES

Complete Casualty Card

(4 Line Format)

_	UN CASEVAC 4-LINE ALERT MESSAGE		
Line	DTG:		
1	LOCATION AND CALL SIGN	PLACE NAME / DESCRIPTION	Α
		GPS GRID REFERENCE	В
		CALL SIGN OF INCIDENT SITE COMMANDER	С
2	INCIDENT DETAILS	WHAT HAS HAPPENED? (Shooting, road accident, explosion etc).	D
		HOW MANY CASUALTIES ARE THERE?	E
3	ACTIONS BEING TAKEN AT SCENE	TREATMENT BEING GIVEN AND PREPERATIONS FOR EVACUATION	
4	RESOURCES REQUIRED AT SCENE TO TREAT AND EVACUATE PATIENT	GROUND AMBULANCE, AIR EVACUATION, AMET	





IN SUMMARY

GOALS

Treat the casualty

Prevent additional casualties

Complete the mission

Three PHASES of TFMA

1 CUF

RETURN FIRE AND TAKE COVER

Quick decision-making:

- Consider scene safety
- Identify and control lifethreatening bleeding
- Move casualty to safety

2 TFC

COVER AND CONCEALMENT

Basic Management Plan:

- Maintain tactical situational awareness
- Triage casualties as required
- MARCH PAWS assessment

3 TACEVAC

More deliberate assessment and treatment of unrecognized lifethreatening injuries:

- Pre-evacuation procedures
- Continuation of documentation





CHECK ON LEARNING

- What factors influence TFMA?
- What are the phases of care in TFMA?
- What is the most essential treatment task in CUF?
- What is every first responder's role in CUF?
- What does MARCH PAWS stand for?





ANY QUESTIONS?