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*Army Regulation 672–10

Effective 15 JULY 1984

Headquarters Department of the Army Washington, DC 15 JUNE 1984

Decorations, Awards, and Honors

14/ aug 1985

Expert Field Medical Badge Test

Contents

Summary. This revision of AR 672-10 updates the regulation and standardizes the Expert Field Medical Badge (EFMB) requirements and testing procedures. New, standardized, written tests and specific performance tests are prescribed. This regulation governs all testing required to qualify for the EFMB.

Applicability. This regulation applies to the Active Army, the Army National Guard, and the US Army Reserve.

Impact on New Manning System. This regulation does not contain information that affects the New Manning System.

Supplementation. Supplementation of this regulation is prohibited without prior approval from HQDA(DASG-PTB), WASH DC 20310.

interim changes. Interim changes to this regulation are not official unless they are authenticated by The Adjutant General. Users will destroy interim changes on their expiration dates unless sooner superseded or rescinded.

Suggested improvements. The proponent agency of this regulation is the Office of The Surgeon General. Users are invited to send comments and suggested improvements on DA Form 2028 (Recommended Changes to Publications and Blank Forms) directly to HQDA(DASG-PTB), WASH DC 20310.

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This regulation supersedes AR 672-10, 14 December 1977.

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Chapter 1 Testing Responsibilities and Policy

1-1. Purpose

This regulation prescribes policies, procedures, and responsibilities for the testing requirements for award of the Expert Field Medical Badge (EFMB).

1-2. References

Required and related publications are listed in appendix A.

1-3. Explanation of abbreviations and terms

Abbreviations and special terms used in this regulation are explained in the glossary.

1-4. Responsibilities

a. The Surgeon General has Army Staff responsibility for the EFMB.

b. The Commandant, Academy of Health Sciences (AHS), United States Army, will-

(1) Act as the executive agent for conduct of the EFMB Program.

(2) Have approval authority for test content exceptions. (See para 2-6.)

(3) Provide EFMB test packets upon request from authorized unit commanders.

(4) Standardize all EFMB tests worldwide.

(5) Select units for standardization reviews. These will be units that are administering the EFMB test. The Commandant, AHS, will insure that approximately 50 percent of the tests being conducted during each fiscal year are reviewed.

(6) Fund trips for standardization reviews.

(7) Select and place on official orders at least one EFMB test control officer (TCO). The role of the TCO is described in e below.

c. Commanders of Active Army, US Army Reserve (USAR), and Army National Guard (ARNG) field medical units who are assigned to positions in the grade of O5 or above, and who have the resources and facilities for conducting all test phases prescribed by this AR, will—

(1) Submit the request for EFMB materials in accordance with paragraph 2-3.

(2) Establish an EFMB test board under the provisions of AR 15-1.

(3) Appoint representatives to an EFMB test board (para 2-2b).

(4) Award the EFMB badge.

d. Unit commanders of candidates will-

(1) Arrange for the weapons qualification requirement for the EFMB test.

(2) Report the weapons qualification score of EFMB candidates to the EFMB test board chairperson. (See fig 1-1 for a sample report using DA Form 2496 (Disposition Form).)

e. The TCO, who must be in the grade of E7 or above and hold either the Combat Medical Badge (CMB) or EFMB, will—

(1) Observe units during the conduct of the EFMB test to determine if the test is being conducted in compliance with this regulation.

(2) Report to the test board chairperson all observed test deviations. The TCO may recommend—

(a) Changes in the conduct of the test.

(b) Necessary corrective action.

(c) Cancellation of testing.

(3) Submit a Report of Test Deviation (RTD), in accordance with paragraph 2-6, in cases of unresolved deviations from EFMB test standards.

1-5. Purpose of the EFMB

The EFMB is intended to—

a. Recognize medical personnel who attain a high degree of professional skill and proficiency as field medics.

b. Reward medical personnel who can expertly do (1) and (2) below.

(1) Perform common soldier tasks.

(2) Apply the principles of basic medical care in a field environment.

c. Promote esprit de corps and provide an incentive for greater effort by Army Medical Department (AMEDD) personnel.

d. Provide quality training for AMEDD personnel.

1-6. Unit awards

Per AR 672-5-1, paragraph 9-32, when the required percentage of an eligible medical unit is awarded the EFMB, the unit will be awarded an Expert Medical Streamer.

1-7. Eligibility requirements

AR 672-5-1, paragraph 5-10, prescribes eligibility requirements for the EFMB. The badge may be awarded only to personnel who meet those requirements and pass all test components prescribed by chapter 3. Individuals classified as 1-A-O, conscientious objector, are exempted from weapon requirements as noted in table 3-1. Competing for the badge is voluntary.

1-8. EFMB test prerequisites

EFMB candidates must—

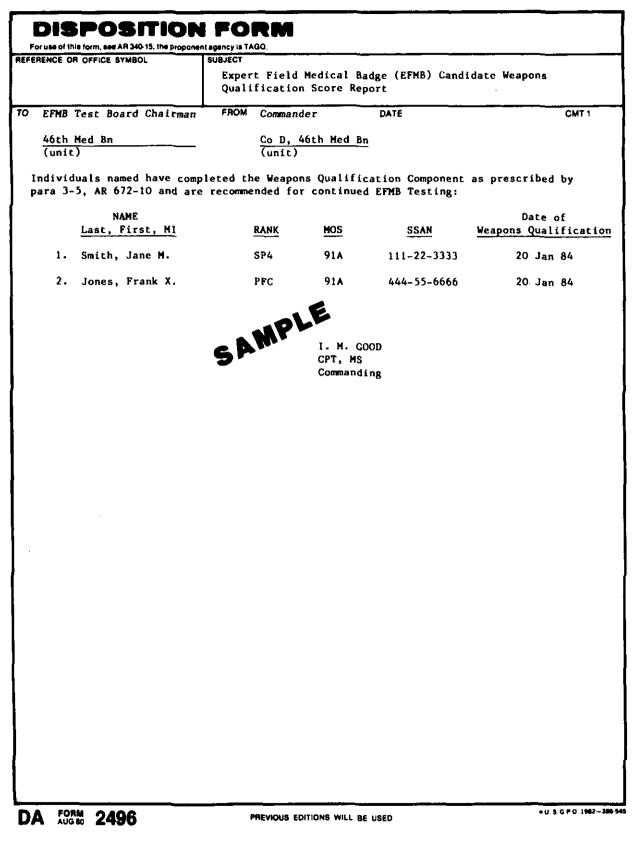
- a. Volunteer for EFMB testing.
- b. Be recommended by their unit commanders.

c. Qualify with the M16A1 rifle or assigned weapon. (See table 3-1.)

1-9. Requests for exception to policy

Every effort should be made to preserve the integrity and continuity of the test. When necessary, an exception to

policy concerning test content may be requested. Send requests to Commandant, Academy of Health Sciences, US Army, ATTN: HSHA-TIP, Fort Sam Houston, TX 78234. However, under no circumstances will a greater degree of difficulty be required instead of or in addition to the test standards described in chapter 3.





Chapter 2 Procedures for Testing

2–1. Commanders' and candidates' preparation for testing

a. Commanders are encouraged to integrate EFMB test requirements into their training programs.

b. EFMB candidates should prepare throughout the year for the EFMB test by using—

(1) This regulation.

(2) The publications listed in table 3-1.

c. Consolidation of testing by organizations on the same or adjacent installations is encouraged. Administration of the EFMB test requires a large commitment of equipment and personnel, and every effort should be made to conserve medical resources and allow the best use of qualified personnel.

d. Commanders are encouraged to use non-AMEDD subject matter experts to conduct the performance tests for the nonmedical subjects.

2-2. Conduct of test

a. Testing prescribed by this regulation will be conducted under direct supervision of the EFMB Test Board. The test board—

(1) Supervises the EFMB test.

(2) Completes and forwards DA Forms 3085-R (Expert Field Medical Badge Qualification Record) to unit commanders (para 2-7).

b. The commanders authorized to conduct the EFMB test and award the EFMB (para 1-4c) will select three or more members to serve on the board. Board requirements are listed below.

(1) All members will be either AMEDD officers or noncomissioned officers (NCOs).

(2) At least one member will be a field grade officer.

(3) NCOs will be in the grade of E7 or above.

(4) At least one member will have been awarded the EFMB or CMB.

(5) The senior member of the board will serve as test board chairperson.

c. Additional AMEDD officers and NCOs can be used to assist in testing as members of an EFMB test committee.

d. Test board members who do not hold the EFMB are ineligible to compete for the badge in a test supervised by a test board they serve on.

e. The tests prescribed in chapter 3 will be conducted. by the EFMB test board and EFMB test committee. The test board chairperson will insure that the following requirements are met. (1) The appropriate fatigue or battle dress uniform will be worn during the test. Individual field equipment portrayed in figure 2-1 will be carried during all phases of the test, except as follows:

(a) The PT (physical training) uniform of shorts (or sweatsuit), running shoes, and undershirt, without equipment, will be worn during the Army Physical Readiness Test (APRT).

(b) The All-Purpose Light Individual Carrier, Equipment (ALICE) pack or rucksack may be substituted for a field pack. This exception is to accommodate local CTA 50-900 issue policies.

(2) All EFMB testing, except the weapons qualification, written test, and APRT, will be conducted in a field environment. If possible, candidates will be billeted in tents for the entire duration of the test.

(3) Moulage and pyrotechnics will be used to create a realistic combat environment during the medical performance test phase.

2-3. Test materials

The medical unit commander (para 1-4c) will submit a request for EFMB test materials to the Commandant, Academy of Health Sciences, US Army, ATTN: HSHA-TIP, Fort Sam Houston, TX 78234. The request will be in the letter format specified in figure 2-2. The commander will send the request so the AHS receives it no later than 60 days prior to the EFMB start date. The AHS will forward an EFMB test packet to the commander. This packet will consist of the following materials:

a. Answer form.

b. Grade card for each critical performance test area.

c. Test control forms and end-of-test questionnaire.

d. One copy of the written test and answer key. Listed below are procedures for handling the written test and key.

(1) A test board member will reproduce sufficient copies of the test and answer key for use in administering the test. Copies of the written tests and answer keys will be secured by the EFMB test board chairperson prior to and following testing. Except during administration and grading of the test, contents of the written test will not be divulged to any instructor, evaluator, or candidate.

(2) All tests and answer keys must be destroyed within 2 days of completion of testing. Unit or individual file copies of the written tests or answer keys are prohibited.

2-4. Test period and sequence

a. The EFMB test is designed to be physically and mentally demanding. The EFMB test will be conducted during 4 consecutive days, except as indicated in b and c below. Table 2-1 shows a recommended test sequence. The test board chairperson is authorized to modify this test sequence.

Day number	Morning	Afternoon	Night
Day 1	Administration	Written test and APRT	
Day 2	Day compass course	Soldier performance tasks	Night compass course
Day 3	Medical performance tasks	Litter obstacle course	
Day 4	12-mile forced road march	Award ceremony	

b. The test board chairperson is authorized to administer the written test and APRT within 30 days immediately preceding the EFMB test start date. If the written test and APRT are not administered prior to the start of the test cycle, they must be administered during the test cycle.

c. USAR and ARNG units may conduct EFMB testing during Annual Training (AT) periods provided that all necessary unit training is performed. Units unable to complete testing during AT may conduct the test during no more than two consecutive Multiple Unit Training Assemblies (MUTAs). The testing may be accomplished during Regularly Scheduled Training or Equivalent Training periods (for example, one MUTA 2 and one MUTA 6).

2-5. Retesting

A candidate is disqualified from further testing or awarding of the badge if he or she fails any critical performance area (paras 3-2 through 3-12). The test board cannot retest the candidate during the current sequence. After failing the test, a candidate must wait 30 days before taking the test again. Passed events from the current sequence cannot be used during future tests.

2-6. Report of Test Deviation (RTD)

a. In all cases of unresolved deviation from EFMB test standards, the TCO submits an RTD to the commander of the administering unit or the next senior commander, as appropriate. The TCO must submit the RTD within 15 days of identifying the deviation. The RTD is Requirement Control Symbol (RCS) exempt under AR 335-15, paragraph 5-2g.

b. Although the unit may complete the EFMB test events, the unit is not authorized to award any EFMBs until the issues outlined in the RTD have been resolved.

c. Within 15 days after receiving the RTD, the commander of the administering unit will submit to AHS a recommendation on whether the test deviation should be approved. This recommendation will go through the unit's next higher commander to the Commandant, Academy of Health Sciences, US Army, ATTN: HSHA-TIP, Fort Sam Houston, TX 78234.

d. Upon receipt of the commander's recommendation, the Commandant, AHS, will make the final decision.

2-7. Record of test results

Test results for all candidates will be recorded in duplicate on DA Form 3085-R. DA Form 3085-R will be reproduced on 8-1/2- by 11-inch paper. A copy for local reproduction is located at the back of this regulation. The test board chairperson will keep the duplicate copy and will forward the original of the form to the candidate's commander.

2-8. Awarding the EFMB

a. The badge will be presented at an appropriate ceremony and worn in accordance with AR 670-1.

b. Award of the EFMB will be announced in orders. The orders will—

(1) Cite this AR as authorization.

(2) Be recorded in each recipient's DA Form 2-1 (Personnel Qualification Record—Part II) and Official Military Personnel File (OMPF).

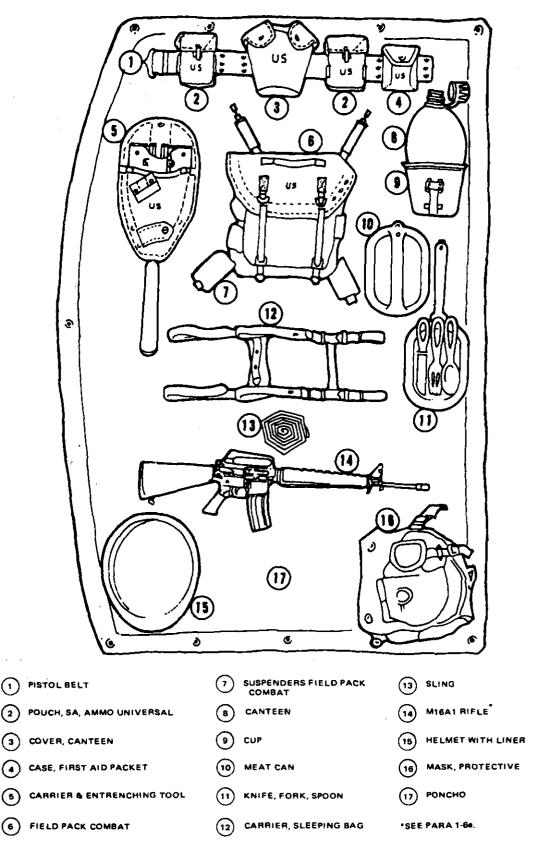


Figure 2-1. Individual field equipment

LETTERHEAD

File Symbol

Date

SUBJECT: Request for EFMB Test Materials

Commandant Academy of Health Sciences, US Army ATTN: HSHA-TIP (EFMB) Fort Sam Houston, TX 78234

1. Under the provisions of AR 672-10, paragraph 1-4c, I request that material to administer the EFMB test be furnished to this organization.

The following information is provided:

a. Test dates:

b. Location of field test site:

c. Number of soldiers scheduled to take the test:

d. Name, address, and AUTOVON telephone number of EFMB Test

Board chairperson:

2. This headquarters will provide security for the written test in accordance with AR 672-10, paragraph 2-3d(1) and (2).

Signature Unit commander's name and title

Figure 2-2. Format for requesting EFMB test materials

Chapter 3 Qualifying for the Expert Field Medical Badge

3-1. Qualifications

To qualify for the EFMB, candidates must successfully complete the required number of tasks in each of the 11 critical performance areas outlined in this chapter (paras 3-2 through 3-12 and table 3-1). All candidates, except for conscientious objectors, must be tested on all tasks within a critical performance area. Table 3-1 shows the exceptions for conscientious objectors.

3-2. Comprehensive written test

Each candidate must pass a written test consisting of 100 performance-oriented multiple choice questions. The test is divided into six major areas (table 3-1). Two hours will be allowed for the written test, and candidates must answer correctly a minimum of 75 questions to pass the written test.

3–3. Army Physical Readiness Test (APRT)

The APRT consists of three events: Pushups, situps, and a 2-mile run. Substitution of test events is not authorized. Procedures for the APRT are listed below. (Make sure a current copy of FM 21-20, to include all changes, is used.)

a. The APRT will be administered in accordance with AR 350-15 and FM 21-20. The minimum passing score is established in FM 21-20.

b. Personnel 40 years of age or older must be evaluated by a physician and be granted medical clearance in accordance with AR 350-15. They will be scored in accordance with FM 21-20.

3-4. Land navigation

Each candidate must successfully complete a day and a night compass course. Candidates must negotiate both the day and the night courses on their own.

a. The candidate must complete the day course within a 3-hour time limit and the night course within a 4-hour time limit.

b. The day compass course will be from 2,000 to 2,500 meters in length. The course will include at least two changes in direction.

c. The night compass course will be from 1,500 to 2,000 meters in length. The course will include at least two changes in direction.

d. Each course, day and night, will have at least three legs (two changes) and will be designed to test the candidate's ability to navigate using a map and compass and

travel from a starting point to an end point. (Examples of starting and end points are battalion aid stations and medical evacuation (MEDEVAC) sites.)

3-5. Weapons qualification

A soldier must qualify with the M16A1 rifle or weapon as assigned by the table of organization and equipment (TOE) or table of distribution and allowances (TDA) in accordance with the appropriate field manual. Qualification must have been completed within the 12 months immediately preceding the EFMB test end date.

3-6. Communications

A candidate must successfully complete three of the four performance tasks listed below.

a. Install and operate a field telephone. The candidate will be given a field telephone set (TA-1/PT or TA-312/PT with batteries), pliers (TL13A) or a knife, and an already installed field wire line with a telephone or switchboard operator at the other end. The candidate must perform the steps to install and operate a field telephone. The candidate will then be required to establish communication. This task must be completed in 2 minutes or less.

b. Prepare and/or operate FM radio set. The candidate will be given an FM radio set (AN/PRC-77 or AN/PRC-25) with handset, antenna, antenna base, battery, an operating frequency, his or her call sign, and the receiving station's call sign. The candidate must assemble the radio, set the correct operating frequency, perform a radio check, and establish communication within 5 minutes.

c. Enter radio net and authenticate. The candidate will be given a unit's communications-electronics operating instruction (CEOI), KTC 1400 tables, FM radio set, and a requirement to enter the net. The candidate must then authenticate and challenge the net control station (NCS), using correct procedures, in 1 minute.

d. Prepare an evacuation request. The candidate will be given a situation requiring the evacuation of three to six litter and ambulatory patients. At least one patient will require air evacuation. Enough information will be provided so the candidate can extract all pertinent items for an evacuation request. The candidate will be situated at a place suitable for air and/or ground evacuation. The candidate will be required to choose the proper mode of evacuation for each patient (air or ground). Those patients with life-threatening injuries are to be evacuated by air and the remainder are to be evacuated on the ground. The candidate will be required to know, at a minimum, the first four lines of the standard MEDEVAC request. These lines are listed below. Information must be accurate. Extraneous information will not be included.

(1) Location and pickup site.

- (2) Radio frequency, call sign, and suffix.
- (3) Number of patients by precedence.
- (4) Special equipment required.

3-7. Survival

A candidate must successfully complete seven of the nine performance tasks listed below while being tested under simulated conditions in a battlefield scenario. Conscientious objectors are not required to complete tasks h and i below, but must complete a through g.

a. Put on an M17-series protective mask with hood. The candidates will be carrying an M17-series protective mask with hood in its carrier. Candidates will be required to put on, clear, and check their mask with hood within 15 seconds.

b. Decontaminate skin. Candidates, while wearing an M17-series protective mask with hood attached, will be required to decontaminate their hands using decontamination equipment and methods currently authorized. Candidates must complete the decontamination within 8 minutes.

c. Put on protective clothing. The candidate, while wearing an M17-series protective mask with hood, must correctly put on all protective clothing (consisting of trousers, blouse, overboots, and protective gloves) within 8 minutes.

d. Decontaminate individual equipment. The candidate, while wearing all protective clothing and an M17series protective mask, will be required to change and decontaminate individual clothing and equipment using currently authorized Army decontamination equipment and methods. The candidate must complete the decontamination process within 30 minutes.

e. Replace filters in an M17-series protective mask. The candidate will be given an M17-series protective mask, a pair of replacement filters, and a mask carrier. The candidate must properly replace the filters within 10 minutes.

f. Store an M17-series protective mask. The candidate will be given an M17-series protective mask with hood and carrier. The candidate will be required to store the mask and hood in its carrier correctly within 2 minutes.

g. Camouflage self and equipment. The candidate will have the equipment described in paragraph 2-2e(1). Candidates, using paint sticks, burnt cloth residue, or whatever is available, must camouflage their exposed skin and change the outline and pattern of their clothing, equipment, and weapon so that they blend into the background in the area. The candidate will be required to complete this task in 15 minutes.

h. Load, reduce a stoppage, and clear an M16A1 rifle. The candidate will be given an assembled M16A1 rifle and magazine loaded with eight blank rounds and one dummy round. The candidate will be required to load the magazine, fire all rounds, apply immediate action when the rifle fails to fire, and clear the M16A1 rifle within 30 seconds.

i. Disassemble and assemble the M16A1 rifle. The candidate will be given an M16A1 rifle with magazine. The candidate will be required to clear and disassemble the rifle into 16 component parts, reassemble, and perform a functions check within 4 minutes. (See fig 3-1.)

3-8. Forced road march

Each candidate must complete a 12-mile (19.3-kilometer) road march within 3 consecutive hours while carrying the individual field equipment portrayed in figure 2-1. Proposed changes to equipment must be made in writing according to paragraph 1-9.

3-9. Emergency medical treatment (EMT)

The candidate will be required to successfully complete 8 of the 11 tasks listed below, while being tested under simulated combat conditions in a battlefield scenario. The candidate must also pack two aid bags in accordance with an EFMB test board committee standing operating procedure which will be furnished to the candidate. The candidate will then be placed in a situation with four or more simulated casualties who have at least two injuries each and who must receive proper triage and treatment within a 1-hour time limit.

a. Survey patients and perform triage. The candidate must perform primary and secondary patient surveys by systematically examining the patients to determine probable injury or illness. The candidate will be required to establish priorities for treatment.

b. Apply a tourniquet. The candidate must treat a casualty with a traumatic amputation of a limb. The candidate must apply a tourniquet to simulate the stoppage of arterial blood flow.

c. Treat a chest wound. The candidate must treat a casualty who has a sucking chest wound. The candidate must make the casualty's wound airtight.

d. Treat an abdominal wound. The candidate must treat a casualty who has an open abdominal wound. The candidate must cover the wound with a sterile dressing and secure the dressing.

e. Apply a pressure dressing. The candidate must treat a casualty who has a bleeding wound of the arm or leg. The candidate must control the bleeding using a pressure dressing to prevent loss of life.

f. Apply a field first aid dressing. The candidate must treat a casualty who has a bleeding wound of either an upper or lower extremity. The candidate must control the bleeding and protect the wound from further contamination.

g. Splint a suspected fracture. The candidate must treat a casualty who has a suspected fracture. The candidate must use available materials to improvise a splint, splint the suspected fracture, and protect the fracture from further injury.

h. Treat for shock. The candidate must treat a casualty who is exhibiting signs and symptoms of shock. The candidate must treat for shock using available materials and without causing further injury to the casualty.

i. Apply a dressing to a head wound. The candidate must treat a casualty who has a wound to the forehead. The candidate must cover the wound with a sterile field dressing without contaminating the wound.

j. Initiate an intravenous (I.V.) infusion. The candidate will be given a casualty with a need for I.V. therapy. Using aseptic techniques, the candidate must establish infusion without causing undue trauma to the casualty's vascular system. Candidates will simulate needle insertion on live patients or on practice devices.

k. Initiate a DD Form 1380 (US Field Medical Card). The candidate must initiate a DD Form 1380 for the casualties treated during the EMT battlefield scenario. The candidate must record the minimum needed information: Name, Social Security Number, grade, unit, a brief description of the medical care given, and the candidate's initials.

3-10. Evacuation of sick and wounded

The candidate will be required to successfully complete six of the eight performance tasks listed below while being tested under simulated combat conditions in a battlefield scenario. The candidate will be required to evacuate casualties by category of precedence.

a. Transport a patient on an improvised litter. The candidate must construct a litter from existing materials that will support the casualty during transportation. The candidate, with assistance from another soldier, will be required to transport a casualty a minimum of 25 meters to an evacuation site, without causing further injury to the casualty.

b. Perform a four-hand seat carry. The candidate, with assistance of another soldier, must move a conscious casualty 25 meters to an evacuation site, without causing further injury to the casualty.

c. Perform a fireman's carry. The candidate must manually transport a casualty 25 meters to an evacuation site, without causing further injury to the casualty.

d. Perform a pistol-belt carry. The candidate, using two pistol-belts, must transport a casualty 25 meters to an evacuation site, without causing further injury to the casualty.

e. Load and unload a front line ambulance (FLA) truck. The candidate must direct the litter team in loading and unloading three patients into an FLA. Loading and unloading must be in the proper sequence. Note: A Gamma Goat, an M151-series vehicle, or a tactical vehicle capable of carrying patients may be substituted for the FLA.

f. Load and unload a 2-1/2-ton cargo truck. The candidate must direct the litter team in the loading and unloading of three patients onto a 2-1/2-ton cargo truck. Loading and unloading must be in the proper sequence.

g. Load and unload a 1-1/4-ton ambulance truck (or the tactical field ambulance replacement). The candidate must direct the litter team in the loading and unloading of three patients into a 1-1/4-ton ambulance truck. Loading and unloading must be in the proper sequence.

h. Load and unload a helicopter. The candidate must direct the litter team in the loading and unloading of three patients into a helicopter. Loading and unloading must be in the proper sequence.

3-11. Litter obstacle course

Candidates will be formed into four-person litter teams. The team must correctly negotiate a litter course that has five obstacles while being tested under simulated combat conditions in a battlefield scenario. To successfully traverse the course, the litter team must correctly negotiate four of the five obstacles without causing any further injury to the casualty. Principles outlined below and in references listed in table 3-1 will be followed.

a. The litter team will be evacuated as a group. The team leader will be changed at each obstacle.

b. A standard Army litter will be used. The casualty will be a soldier with a simulated fractured leg that has been splinted.

c. The casualty to be evacuated will weigh between 150 and 170 pounds and will wear a helmet, protective mask in carrier, and appropriate uniform. Manikins will not be used.

d. Obstacles will conform as closely as practicable to the obstacles depicted in figures 3-2 through 3-6. The order of obstacles in the path and the distance and grade of terrain between them will be determined by the EFMB Test Board. Total distance traversed in the litter obstacle course will not exceed 1 kilometer.

e. The test board chairperson may establish a time limit, depending on the terrain and length of the course.

3–12. Cardiopulmonary resuscitation (CPR) (oneperson method)

Candidates must pass this individual task. CPR will be tested as a separate task and is not to be included in any other test situation or scenario. Candidates are expected to comply with the CPR guidelines as explained in FM 21–2 and FM 21–11.

Table 3–1 Performance Tests			
Critical performance areas and tasks	Objectives	Requirements	References
Comprehensive written test	100 questions	75 questions	
a. Map reading			FM 21-26, chaps 1 through 6
b. Nuclear, biological, and chemical (NBC) opera- tions			FM 3-12, para 6-4 FM 21-2, task nos. 031-503-1002, 031-503-1004, and 031-503-1006 FM 21-3, task nos. 031-503-3003 and 031-503-3009 FM 21-40, chaps 3, 4, and 5; fig A-1; and app B TM 8-215, para 40 <i>a</i> (1) and tables 16 and 18
c. Emergency medical treatment (EMT)			AR 40–66, chap 8 FM 8–36, chaps 3, 4, 5, 8, and 11 FM 8–91B/CM, task no. 081–91B–1202 FM 21–11, chaps 3, 4, 6, 7, 8, 9, and 11 FM 21–40, table 1–2 TM 8–230, chap 4, sec IV; chap 5, sec VI; chap 6, secs IV and V; chap 8
d. Evacuation of sick and wounded			FM 8–15, paras 2–18, 6–5, and 8–5 FM 8–35, chaps 2, 3, 4, and 5 FM 8–91B/CM, task no. 081–91B–1202
e. Field hygiene and sanitation			FM 21-10, chaps 2 through 9, 11, and 14 Policy Itr DASG-PSP, subject: Field Latrines
f. General subjects	<u></u>		FM 20–32, para 13–3 FM 21–2, task nos. 113–571–1016, 181–906–1504, and 181–906–1505 FM 21–76, chap 14 FM 24–18, chap 7, sec IV FM 27–10, chaps 3 and 4
Army physical readiness test (ARPT)	300 points	See FM 21-20	FM 21-20
Land navigation a. Day compass course b. Night compass course	2 tasks	2 tasks	FM 21–26 FM 21–26
Weapons qualification (See note.)	1 task	1 task	FM 23-9
Communications a. Install and operate a field telephone b. Prepare and/or operate an FM radio	4 tasks	3 tasks	FM 21-3 FM 21-3, task.no. 113-600-1015 FM 21-3, task no. 113-587-2043
c. Enter radio net and authenticate d. Prepare an evacuation request			FM 21–3, task no. 113–573–8006 FM 8–15, chap 6

b. Perform a four-hand seat

c. Perform a fireman's carry d. Perform a pistol-belt

e. Load and unload an FLA

f. Load and unload a 2-1/2-

ton cargo truck

carry

carry

truck

Oritical a ofference of			
Critical performance areas and tasks	Objectives	Requirements	References
Survival	9 tasks	7 tasks	FM 21-2
			FM 21-40
a. Put on an M17-series			FM 21-2, task no. 031-503-1002
protective mask with hood			
b. Decontaminate skin			FM 21-2, task no. 031-503-1007
c. Put on protective clothing			FM 21-2, task no. 031-503-1015
d. Decontaminate individual			FM 21-40, chap 5, see "First Aid and
equipment			Individual Decontamination"
e. Replace filters in an M17-series protective mask			FM 21~2, task no. 031-503-1010
f. Store an M17-series protective mask			FM 21~2, task no. 051-503-1003
g. Camouflage self and equipment			FM 21-2, task no. 051-191-1361
h. Load, reduce a stoppage, and clear an M16A1 rifle (See note.)			FM 21-2, task no. 071-311-2003
(See note.) (See note.)			FM 21~2, task no. 071-311-2001
Forced road march	12 miles	3 hours	FM 21-18
ЕМТ	11 tasks	8 tasks	FM 81~91B/CM (Tasks below are in FM 81–91B/CM)
a. Survey patients and perform triage			Task nos. 081–91B–1067 and 081–91B–1202
 Apply a tourniquet 			Task no. 081–91B–1037
c. Treat a chest wound			Task no. 081-91B-1201
d. Treat an abdominal wound			Task no. 081–918–1075
e. Apply a pressure dressing			Task no. 081-91B-1010
f. Apply a field first aid dressing			Task no. 081-91B-1010
g. Splint a suspected			Task nos. 081-91B-1006, 081-91B-1007
fracture			and 081-91B-1008
h. Treat for shock			Task no. 081–91B–1019
 Apply a dressing to a head wound 			Task no. 081–91B–1039
i. Initiate an I.V. infusion			Task no. 081–91B–1207
k. Initiate a DD Form 1380 (US Field Medical Card)			Task no. 081–91B–1009
Evacuation of sick and wounded	8 tasks	6 tasks	FM 8-35 (Tasks below are in FM 8-35)
a. Transport a patient on an improvised litter			Para 2-4
b Dorform o four bond post			Boro 2 4

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3–5

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Para 2-4

Para 2-4

Para 2-4

Para 4-8

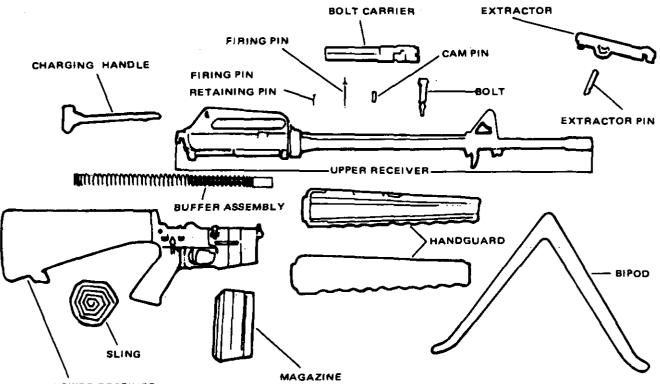
Para 4-17

Tε	ble	B 3-	1			
Pe	orfe	orma	апсе	Test	ta-co	nt

Performance Tests-continued				
Critical performance areas and tasks Objectives Requirements		Requirements	References	
g. Load and unload a 1-1/ 4-ton ambulance truck			Para 4-5	
h. Load and unload a helicopter			Para 5-23	
Litter obstacle course	5 obstacles	4 obstacles	FM 8–35, chap 3, sec III TM 8–230, chap 5, sec VI;'chap 6, secs IV and V; and chap 8	
CPR	1 task	1 task	FM 21-11, chap 1, sec V FM 21-2, task no. 081-831-1002	

Note: Conscientious objectors are not required to complete weapons qualification tasks and tasks h and i under "Survival." However, they must complete all other critical performance areas and tasks.

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3-7

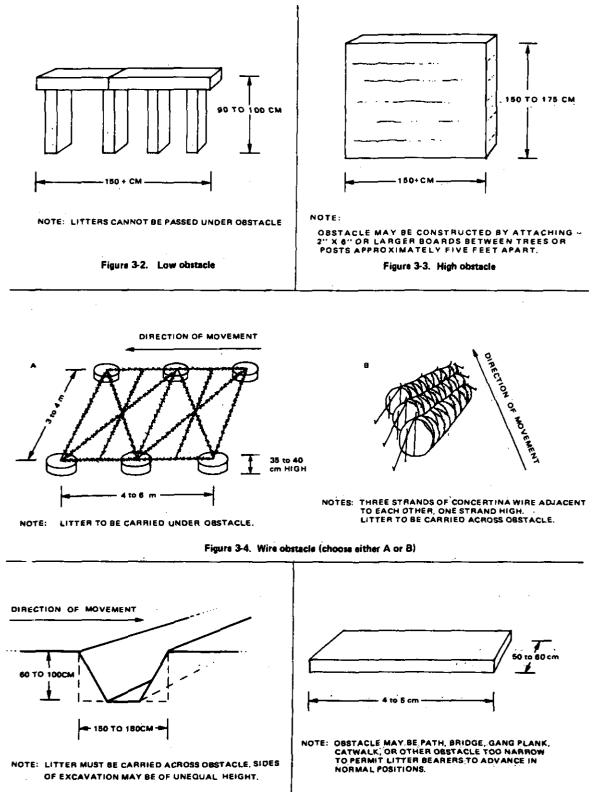


Figure 3-5. Trench, gully, excevation type obstacle

Figure 3-8. Narrow obstacle

Appendix A References

Section I Required Publications

Commanders should insure that adequate copies of these references are available in the unit's military occupational specialty (MOS) libraries for review by test candidates. Also, appropriate Training Extension Course (TEC) lessons on subjects covered by the test should be provided. Local reproduction of this regulation is authorized.

- AR 40-66 (Medical Record and Quality Assurance Administration). Cited in table 3-1.
- AR 350-15 (Army Physical Fitness Program). Cited in paragraph 3-3.
- CTA 50-900 (Clothing and Individual Equipment). Cited in paragraph 2-2.
- FM 3-12 (Operational Aspects of Radiological Defense). Cited in table 3-1.
- FM 8-15 (Medical Support in Divisions, Separate Brigades, and the Armored Cavalry Regiment). Cited in table 3-1.
- FM 8-35 (Evacuation of the Sick and Wounded). Cited in table 3-1.
- FM 8-36 (The Aidman's Medical Guide). Cited in table 3-1.
- FM 8-91B/ (Commander's Manual 91B, Medical Spe-CM cialist). Cited in table 3-1.
- FM 20-32 (Mine/Countermine Operations at the Company Level). Cited in table 3-1.
- FM 21-2 (Soldier's Manual of Common Tasks (Skill Level 1)). Cited in paragraph 3-12 and table 3-1.
- FM 21-3 (Soldier's Manual of Common Tasks (Skill Levels 2, 3, and 4)). Cited in table 3-1.

- FM 21-10 (Field Hygiene and Sanitation). Cited in table 3-1.
- FM 21-11 (First Aid for Soldiers). Cited in paragraph 3-12 and table 3-1.
- FM 21–18 (Foot Marches). Cited in table 3–1.
- FM 21-20 (Physical Readiness Training). Cited in paragraph 3-3 and table 3-1.
- FM 21-26 (Map Reading). Cited in table 3-1.
- FM 21-40 (NBC (Nuclear, Biological, and Chemical) Defense). Cited in table 3-1.
- FM 21-76 (Survival, Evasion and Escape). Cited in table 3-1.
- FM 23-9 (M16A1 Rifle and Rifle Marksmanship). Cited in table 3-1.
- FM 24-18 (Field Radio Techniques). Cited in table 3-1.
- FM 27-10 (The Law of Land Warfare). Cited in table 3-1.

Policy DASG-PSP, Subject: Field Latrines, dated 26 Oct 78. Cited in table 3-1. (This letter is available from the Academy of Health Sciences, HSHA-TIP(EFMB), Fort Sam Houston, TX 78234.)

- TM 8-215. (Nuclear Handbook for Medical Service Personnel). Cited in table 3-1.
- TM 8-230 (Army Medical Department Handbook of Basic Nursing). Cited in table 3-1.

Section II Related Publications*

AR 15-1(Committee Management)AR 335-15(Management Information Control System)AR 670-1(Wear and Appearance of Army Uniforms and Insignia)AR 672-5-1(Military Awards)

*A related publication is merely a source of additional information. The user does not have to read it to understand this regulation.

Glossary

Section I Abbreviations

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AHS Academy of Health Sciences
ALICE All-Purpose Light Individual Carrier,
Equipment
AMEDD Army Medical Department
APRT Army Physical Readiness Test
ARNG Army National Guard
AT Annual Training
CEOI communications-electronics operating
instruction
CMB Combat Medical Badge
CPR cardiopulmonary resuscitation
CTA common table of allowances
EFMB Expert Field Medical Badge
EMT emergency medical treatment
FLA front line ambulance
I.V intravenous
MEDEVAC. medical evacuation
MOS military occupational specialty
MUTA Multiple Unit Training Assembly
NBC nuclear, biological, and chemical
NCO noncommissioned officers
NCS net control station
OMPF Official Military Personnel File
PT physical training
RCS Requirement Control Symbol
RTD Report of Test Deviation
TCO test control officer
TDA table of distribution and allowances

TEC Training Extension Course TOE table of organization and equipment USAR US Army Reserve

Section II

Terms

Moulage

A simulation of a medical wound or injury used as a training aid.

Standardization review

Reviewing EFMB tests approximately every other year to insure they are being administered consistently throughout the Army.

By Order of the Secretary of the Army:

JOHN A. WICKHAM, JR. General, United States Army Chief of Staff

Official:

ROBERT M. JOYCE Major General, United States Army The Adjutant General

Distribution: To be distributed in accordance with DA Form 12–9A, requirements for AR, Decorations, Awards and Honors: Active Army, ARNG, USAR; A.

EXPERT FIELD MEDICAL BADGE QUALIFICATION RECORD For use of this form, see AR 672-10; the proponent agency is the Office of The Surgeon General					
THRU:	TO:	FROM			
NAME (Last, First, MI)	GRADE	MOS		SSN	
UNIT		<u>_</u>		<u> </u>	
CRITICAL PERFORMANCE AREAS AND TASKS	TEST REQUIREMENTS	TEST DATE	GO	NO-GO	CANDIDATE SCORE
COMPREHENSIVE WRITTEN TEST	75 QUESTIONS				
ARMY PHYSICAL READINESS TEST (APRT)	FM 21-20				
LAND NAVIGATION	2 TASKS				
8. DAY COMPASS COURSE					
6. NIGHT COMPASS COURSE					
WEAPONS QUALIFICATION	1 TASK				
COMMUNICATIONS	3 OF 4 TASKS				
a. INSTALL AND OPERATE A FIELD TELEPHONE					
6. PREPARE AND/OR OPERATE FM RADIO					
C. ENTER RADIO NET AND AUTHENTI-					
d. PREPARE AN EVACUATION REQUEST					
SURVIVAL	7 OF 9 TASKS				
a. PUT ON M17-SERIES PROTECTIVE MASK WITH HOOD					
b. DECONTAMINATE SKIN					
c. PUT ON PROTECTIVE CLOTHING					
d. DECONTAMINATE INDIVIDUAL					
REPLACE FILTERS IN M17-SERIES PROTECTIVE MASK					
f. STORE M17-SERIES PROTECTIVE MASK					
g. CAMOUFLAGE SELF AND EQUIPMENT					
h. LOAD, REDUCE A STOPPAGE, AND CLEAR M16A1 RIFLE					
i. DISASSEMBLE/ASSEMBLE MIGA1 RIFLE					
FORCED ROAD MARCH	3 HOURS				

DA FORM 3085-R, APR 84

EDITION OF AUG 77 IS OBSOLETE.

CRITICAL PERFORMANCE AREAS AND TASKS	TEST REQUIREMENTS	TEST DATE	GO	NO-GO	CANDIDATE SCORE
EMERGENCY MEDICAL TREATMENT	8 OF 11 TASKS (1 HOUR LIMIT)				
8. SURVEY PATIENTS AND PERFORM					
b. APPLY A TOURNIQUET					
c. TREAT A CHEST WOUND					
d. TREAT AN ABDOMINAL WOUND					
. APPLY A PRESSURE DRESSING					
F. APPLY A FIELD FIRST AID DRESSING					
g. SPLINT A SUSPECTED FRACTURE					
h. TREAT FOR SHOCK					
I. APPLY A DRESSING TO A HEAD WOUND					
j. INITIATE AN IV INFUSION					
k. INITIATE A DD FORM 1380 (US FIELD MEDICAL CARD)					
EVACUATION OF SICK AND WOUNDED	6 OF 8 TASKS				
A. TRANSPORT A PATIENT ON AN					
6. PERFORM A FOUR-HAND SEAT CARRY					
C. PERFORM A FIREMAN'S CARRY				· · · · · · · · · · · · · · · · · · ·	
d. PERFORM A PISTOL-BELT CARRY				L	
e. LOAD AND UNLOAD A FRONT LINE AMRULANCE (FLA) TRUCK					
f. LOAD AND UNLOAD A 2% TON CARGO				· · · · · · · · · · · · · · · · · · ·	
9. LOAD AND UNLOAD 1% TON AMBULANCE TRUCK					
h. LOAD AND UNLOAD A HELICOPTER					
LITTER OBSTACLE COURSE	4 OF 5 OBSTACLES				
CARDIOPULMONARY RESUSCITATION (OPR)	1 TASK				
QUALIFIED INOT QUALIFIED FOR AWARD OF EFMB (IAW AR 672-10)					
REMARKS					
TYPED NAME, GRADE AND BRANCH OF EFM TEST BOARD CHAIRMAN	AB SIGNAT	IURE		DATE	



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