



DEPARTMENT OF THE ARMY
HEADQUARTERS, UNITED STATES ARMY TRAINING AND DOCTRINE COMMAND
102 MCNAIR DRIVE
FORT MONROE, VIRGINIA 23651-1047

REPLY TO
ATTENTION OF

08 APR 2010

ATBO-MD

MEMORANDUM FOR Deputy Chief of Staff, G-3/5/7 (DAMO-TR), 450 Army Pentagon,
Washington DC 20310-0450

SUBJECT: Improvements to Tactical Combat Casualty Care (TCCC) and the Combat Lifesaver (CLS) Course

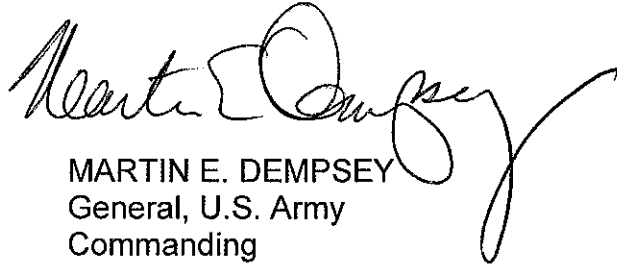
1. Recent adaptations and improvements to TCCC and the CLS Course, in addition to other related initiatives, have driven the need to revise descriptions of CLSs and CLS training sustainment outlined in AR 350-1, Army Training and Leader Development, 18 Dec 09.
2. The proposed revision (enclosure) applies lessons learned in combat to new tactics, techniques, and procedures associated with the CLS skill set including:
 - a. Cautioning leaders on the limitations and proper employment of CLSs.
 - b. Emphasizing the importance of maintaining and recording CLS recertification.
 - c. Providing sustainment training for non-CLSs.
3. In concert with these revisions, we are involved in several supporting initiatives to institutionalize improvements to TCCC and our CLS Course program of instruction.
 - a. We are working with the Army Medical Department to develop Web-based training for the new Warrior task "perform immediate lifesaving measures." This will be a certificate program required of all Soldiers not designated as CLSs.
 - b. We have teamed with the Readiness Core Enterprise to conduct a comprehensive review of unit CLS requirements. Specifically, we are evaluating the efficacy of the requirement for one certified CLS for each squad, crew, or equivalent-sized deployable unit. Given the criticality of TCCC on the battlefield, the current ratio of one CLS per squad may not be sufficient.
 - c. Finally, we are coordinating with the U.S. Army Medical Center and School to address training gaps in the current TCCC capabilities of our small unit leaders. We expect to introduce an additional task in Basic Officer Leadership – B and the Advanced Leader Course entitled, "coordinate tactical combat casualty care" for small-unit leaders. Recent analysis revealed Soldiers in the ranks of E-5 and above are not adequately trained in TCCC, nor are they familiar with the equipment in the improved first aid kit.

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4. We request your cooperation in revising AR 350-1 to reflect these much needed revisions in addition to your support for the other key initiatives we are pursuing to improve the effectiveness of TCCC.

5. Victory Starts Here!



MARTIN E. DEMPSEY
General, U.S. Army
Commanding

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CF:
Office of the U.S. Army Surgeon General
Readiness Core Enterprise
TRADOC DCS, G-3/5/7

Recommended revision to paragraph G-12 (in blue underlined font):

G-12. Combat lifesaver training

a. Immediate, far-forward medical care is essential on a widely dispersed and fluid battlefield to prevent Soldiers from dying of wounds. Medical personnel may not be able to reach and apply lifesaving measures to all wounded Soldiers in a timely manner.

(1) Capabilities. The combat lifesaver is a non-medical Soldier ~~trained to provide lifesaving measures beyond the level of self-aid or buddy-aid~~ designated by his or her Commander for this role; certified in lifesaving skills; and equipped with an aid bag. A properly trained combat lifesaver is capable of stabilizing many types of trauma casualties and can slow the deterioration of a wounded Soldier's condition until medical personnel arrive; deciding the type and level of lifesaving effort appropriate to the tactical scenario (tactical combat casualty care [TCCC]); controlling bleeding by means of advanced technologies; controlling shock and hypothermia by means of advanced technologies; competent use of the improved first aid kit (IFAK); completing the TCCC Card; moving the casualty tactically; and properly treating Soldiers who have been exposed to explosive blasts. Functioning as a combat lifesaver is a secondary mission undertaken when the tactical situation permits. All Soldiers are now provided combat lifesaver training while in IET, and the opportunity to test for certification.

(2) Limitations. Combat lifesavers do not receive additional instruction in treatment of hot and cold weather injuries, treatment of stings and bites, cardiopulmonary resuscitation, or treatment of chemical, biological, radiological, nuclear, and high-yield explosives (CBRNE) injuries. These subjects are trained separately as indicated by mandatory training requirements in units (see table G-1) or by the unit's METL. Initiating intravenous (IV) fluids is no longer within the scope of practice for combat lifesavers.

(3) Employment and recertification.

(a) Each squad, crew, or equivalent-sized deployable unit will have at least one member certified as a combat lifesaver.

(b) ~~Combat lifesavers must be recertified every 12 months at unit level.~~ s certifications are valid for 12 months. The requirements for recertification are outlined in Interschool Subcourse 0873, Combat Lifesaver Course: Instructor Guide, Edition C (available on request through the link shown in paragraph G-12a(3)(e) below). Commanders must record and monitor their Soldiers' CLS certification status in DTMS.

(c) Corps, divisions, and brigades will implement combat lifesaver training within their commands and designate a staff surgeon responsible for supervising their combat lifesaver programs. The primary instructor will be a medical NCO, 68W, current in CLS certification.

(d) Units without qualifying medical personnel will request training instructor support from the next higher command surgeon or local medical treatment facility.

(e) Combat lifesaver training will be conducted during ~~IMT IET (BCT, and OSUT, and BOLC)~~ and in accordance with guidelines contained in this regulation and training materials provided by the Combat Lifesaver Program within the Army Correspondence Course Program (<http://www.cs.amedd.army.mil/CLSP/>). Student and instructor materials for ~~IMT IET~~ are published in the course POIs. Student and instructor materials for units and organizations are printed by the Army Training Support Center and shipped to the primary instructor. Unit training managers are not authorized to augment correspondence course material or change the length of the course. Training and testing will be conducted in accordance with the tasks, conditions, and standards established by MEDCOM; or, in the case of USASOC personnel, established by the USASOC DCS Surgeon.

b. Proof of combat lifesaver course completion will be placed in the Soldier's MPF or MPRJ in accordance with AR 600-8-104. Soldiers who successfully complete CLS in IMT will be issued certificates of training in accordance with this regulation and awarded course credit in RRS.

c. Unit personnel are not authorized to increase or delete items contained in the combat lifesaver aid bag. As an exception, USASOC surgeons are authorized to modify items contained in First Responder aid bags, in accordance with validated mission requirements and with approval of the USASOC Deputy Chief of Staff, Surgeon. All Class VIII supplies and materials required for combat lifesaver training will be requisitioned through normal supply channels.

d. In planning healthcare support to missions, Commanders must exercise composite risk management to ensure that appropriate levels of healthcare support are provided, i.e., that CLSs are not

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employed in the role of 68Ws, and not in the treatment of minor illnesses and injuries. Army Regulation 40-3 charges the Commander of the medical treatment facility with responsibility for standards for pre-hospital treatment of injured and sick individuals.

e. Soldiers who are not designated as combat lifesavers must be trained and certified in the warrior task "Provide immediate lifesaving measures" within a year prior to deployment. This training must be recorded in DTMS.

G-4. Mandatory training in units

Add:

Table G-1 Mandatory training requirements in units			
Subject	Reference	Proponent	Frequency
<u>Perform Immediate Lifesaving Measures</u>	<u>AR 350-1</u>	<u>TRADOC</u>	<u>P</u>

Appendix A References

Section II Related Publications

AR 40-3
Medical, Dental, and Veterinary Care

IS0873
Combat Lifesaver Course: Instructor Guide, Edition C