

March 8, 2009

Local Afghan Doctors, Coalition Medical Teams Render Assistance in Afghanistan Avalanche

455th Air Expeditionary Wing

Story by Staff Sgt. Richard Williams

BAGRAM AIRFIELD, Afghanistan - Afghan doctors, coalition members of Task Force Medical East, 82nd Airborne, 30th Medical Command and the 455th Expeditionary Medical Group along with volunteers from across Bagram Airfield sprang into action rendering medical care and assistance to 276 individuals involved in an avalanche that struck Parwan Province, Afghanistan, Feb. 9.

The initial call was received by the TF-MED-East Tactical Operations Center at 3:28 a.m. notifying personnel here of an avalanche in the Regional Command East area of operations. Approximately 150 people were trapped with helicopter evacuation as the only means of exit, said U.S. Army 1st Sgt. Brian Fassler, TF MED-East.

At 12:49 p.m., 60 to 70 patients were inbound to Bagram Airfield.

They began to prepare for a possible mass casualty situation, and within 45 minutes Craig Joint Theater Hospital went from a 41 bed facility to a more than 100 bed facility equipped and ready to receive patients.

Members of the Craig Hospital, the primary medical treatment facility for the entire country, prepared for surge operations that required a quick reaction force to implement proper security measures for the hospital and to prepare additional assistance areas for a mass influx of patients, said U.S. Air Force Capt. James McDaniel, 455th EMDG/TF-MED, medical readiness officer.

To assess care needs and ensure the hospital was not flooded with a large number of minimal care patients, the 82nd Airborne and 30th MEDCOM set up a triage unit at the 455th Air Expeditionary Wing fixed wing passenger terminal.

Fassler explained once initial assessments were made, individuals requiring medical

attention were loaded onto busses and transported to the hospital. Remaining individuals were transported to a clam shell tent where they received further assistance from coalition personnel.

"We perform various battle drills that prepare us for these types of situations; however, this is a completely unique situation," said Fassler. He points out that normally with a battlefield injury the patient comes directly from the field to the medical facility.

"This is unique because we are receiving patients from an event that happened seven hours ago and they will be clinically cold and some have varying phases of hypothermia and frostbite so this is a complete non-battlefield-related injury situation," he said.

Fassler added that the highly trained staff at the medical facility is prepared to receive as many patients as are sent, and the real challenge is getting the patients from a remote location with avalanche covered roads and no clear places to land helicopters.

In addition to the Craig Hospital staff, medical and nonmedical volunteers flooded the area to assist with patient care, litter carry, security and a host of other duties.

McDaniel pointed out that there was a group of Afghan medical professionals who were vital to assisting the injured.

Local Afghan doctors with varying backgrounds from internal medicine to an orthopedic surgeon were participating in a Trauma Mentorship Program at Craig Joint Theater hospital and jumped in to provide care to the bulk of the patients.

"This experience is important so they can see how we prepare for medical emergencies of this magnitude," said McDaniel.

McDaniel also explained the importance of the Afghan medical professionals as interpreters and liaisons to the patients in a cultural capacity.

"For some of the patients coming from remote areas of Afghanistan, this may be their first and only interaction with coalition forces," he said. "The importance lies in the fact that we are professional and sensitive to their cultural needs. The assistance we receive from the Afghans helps to convey the respect and professionalism these people need and deserve."

The Afghan providers played a vital role in providing medical care to their own people. It was evident the local national patients were more comfortable being treated by their fellow countrymen.

"We have had doctors and medics from all over the post coming to assist, and that is important because this was a Bagram Airfield-wide emergency not just a Craig Joint Hospital issue," said Fassler.

Army Lt. Col. Joe Marsiglia, TF-MED-East tactical operations director, was impressed with not only the response from medical agencies on Bagram but the non-clinicians as well. "I was amazed with the amount of assistance received from all of the units here, not just the medical personnel assigned to the hospital. When the call went out, we had volunteers from everywhere and were having to redirect assistance."

Marsiglia said no matter how much preparation goes into a training scenario, nothing prepares individuals for these types of large scale situation and the response and support from all coalition agencies was top notch.

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