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Tactical Combat Casualty Care *A life-saving toolbox*

By Airman 1st Class Lauren Jacoby
86th Airlift Wing/Public Affairs

RAMSTEIN AIR BASE, Germany – Ramstein Airmen are now able to take advantage of the Tactical Combat Casualty Care training program, which was recently implemented by the U.S. Air Force, giving multi-capable Airmen the tools to provide life-saving trauma care, both in combat, and on the home front.

Tactical Combat Casualty Care, also known as TCCC or TC3, is the new standard across the Department of Defense for first response care as a Secretary of Defense initiative. As of June 1, 2022, the TCCC program has completely replaced Self-Aid Buddy Care, also known as SABC.

TCCC is broken into four tiers: All Service Members Course, Combat Lifesaver Course, Combat Medic/Corpsman Course and Combat Paramedic/Provider Course.

Currently, only tiers one through three are published through the Defense Health Agency. All service members are expected to be certified in the tier one component by April 2023. Depending on a member's Air Force Specialty Code, members may need to certify in additional tiers by August 2023.

Members will be taught five life-saving skills

See TCCC, Page 2



U.S. Air Force photo by Airman 1st Class Lauren Jacoby
U.S. Air Force Tech. Sgt. Adam Cardoza, 86th Medical Squadron Pulmonary Clinic, cardiopulmonary section chief, demonstrates various methods to check an airway on a mannequin during a Tactical Combat Casualty Care All Service Members course at Ramstein Air Base, Germany, July 27. Students must show their understanding of the life-saving concepts taught during TCCC with a hands-on assessment given at the end of the course.

Life-saving rescue near Gilbert Peak conducted by USAAAD-YTC

By Capt. Kyle Abraham
16th Combat Aviation
Brigade

YAKIMA TRAINING CENTER, Wash. – Soldiers assigned to the United States Army Air Ambulance Detachment-Yakima (USAAAD), 2-158 Assault Helicopter Battalion, 16th Combat Aviation Brigade performed an aeromedical evacuation of a civilian near Gilbert Peak, Wash. on Sept. 21.

The mission started when the Lewis County Sheriff's Office requested federal support through the Washington State Emergency Operations Center for a high-powered helicopter with hoist capability to recover an ill hiker in the Goat Rocks Wilderness.

At 3:37 p.m., a USAAAD UH-60L Black Hawk helicopter departed Yakima Training Center.

"We had to fly near the outer edge of an FAA restricted flying area due to the nearby Goat Rocks Fire," said Chief Warrant Officer 2 William Craven, pilot in command for the mission. "The air was full of smoke, but we were able



U.S. Army Photo by Capt. Kyle Abraham, 16th Combat Aviation Brigade

A UH-60L Black Hawk crew chief assigned to U.S. Army Air Ambulance Detachment-Yakima, 2-158 Assault Helicopter Battalion, 16th Combat Aviation Brigade looks out of the helicopter during training at Yakima Training Center, Wash. on Aug. 28. USAAAD-YTC is responsible for aeromedical evacuation coverage for Yakima Training Center in addition to supporting local civilian authorities in central Washington.

to spot the patient waving a white sheet; fortunately, we found a place to land about 100 meters away and did not need the hoist."

At approximately 4 p.m. the helicopter landed and deployed their critical care flight paramedic.

"This was a fairly

straightforward mission," said Maj. Alec DeGroat, USAAAD commander. "We've had several technical hoist rescues this year but our crew was able to land which makes this difficult work a little bit easier for our aircrews and the patient."

The flight paramedic was able to assist the

patient, a 58-year-old male that had begun suffering fatigue and dehydration from getting ill, to the Black Hawk helicopter for transport to Yakima Valley Memorial Hospital. The patient is expected to make a full recovery.

See RESCUE, Page 5

INDEX

Commander receives top honor for 'groundbreaking' physical therapy career....Page 3
Air Force medical history of POWs; Operation HomecomingPage 5
Career opportunities.....Pages 5-8

• TCCC (Continued from front page)

through classroom instruction and hands-on training. TCCC instructors emphasize the importance of the use of the MARCH algorithm: massive bleeding, airway, respiration, circulation and hypothermia/head injuries. MARCH provides the order in which the life-saving skills should be applied. This also affords a better opportunity to work as a team to make sure combat injuries are treated both quickly and properly.

“In the all service members course, we teach you five life-saving skills,” said Master Sgt. Caige Chapman, 86th Medical Squadron Maternal Services flight chief. “Although we say they are basic skills, when you look at a maintainer, who is going to be first at the point of injury if something were to occur on the flightline, them being trained to the standard affords them the knowledge to use those learned skills until medical professionals are able to show up and do their jobs.”

TCCC aims to help close the gap of preventable deaths to the goal of zero by

teaching the total force the five life-saving skills, as well as applying those learned skills with hands-on training.

“Being someone who has been around Self-Aid Buddy Care and the skills you learn, it was like a check-box that was missing the hands-on piece,” said Tech. Sgt. Nova Benington, 86th Medical Squadron Podiatry Clinic noncommissioned officer in charge. “The performance piece is what prepares you to use those five life-saving skills to get your patient to the next echelon of care; to ultimately get them home.”

Unlike SABC, TCCC will not be a yearly requirement. With the exception of medical AFSCs, service members will need the initial TCCC course, and then would not need to renew their certification until the member is due for a permanent change of station, or has been tasked with a deployment.

Another benefit to TCCC is the team aspect MARCH algorithm - massive bleeding, airway, respiration, circulation, hypothermia - provides. This will be used by all tier levels for point of injury care.

“Something Tech. Sgt. Benington and I would like to highlight is that this can’t be a one and done mindset when it comes to this care,” said Chapman. “Even if you decide to grab a tourniquet or combat gauze and integrate it into training day, staying ready with these skills is something that needs to be implemented. Staying competent in these skills will save lives.”



U.S. Air Force photo by Airman 1st Class Lauren Jacoby
U.S. Air Force Senior Airman Jordan Minta, 86th Operational Medical Readiness Squadron bioenvironmental engineering craftsman, applies a tourniquet to his dominant arm as part of a hands-on assessment to complete the TCCC All Service Members Course. In order to certify in the course, students must show proficiency in properly applying a tourniquet to the instructed area in less than one minute.

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U.S. Air Force photo by Airman 1st Class Lauren Jacoby
Students attending the TCCC All Service Members course participate in a simulated combat-related incident. Students are taught, and then must demonstrate, various life-saving techniques such as applying hemostatic dressing, pressure bandages and tourniquets.

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Commander receives top honor for 'groundbreaking' physical therapy career

By Lori Newman

Brooke Army Medical Center Public Affairs

JOINT BASE SAN ANTONIO-FORT SAM HOUSTON, Texas — Brooke Army Medical Center Commanding General U.S. Army Brig. Gen. Deydre Teyhen recently received the Catherine Worthingham Fellow of the American Physical Therapy Association, the association's highest membership category.

This honor is eligible to APTA physical therapists who have demonstrated unwavering efforts to advance the physical therapy profession for more than 15 years, prior to the time of nomination.

"I was really surprised, honored, and humbled to receive the Catherine Worthingham Fellow of the APTA recognition," said Teyhen, who started her Army Physical Therapy career in 1993. "They have given out less than 300 of these recognitions — for an organization that is over 100 years old. It was completely unexpected.

"I was surprised because only a few military physical therapists have received this recognition and most have received it after they retired from the military and were on their second careers post-military," she added. "I am incredibly humbled to join a group of amazing physical therapists that have really shaped our profession."

Teyhen received her Bachelor of Arts in Sports Science at Ohio Wesleyan University. She earned her master's degree in Physical Therapy from the U.S. Army-Baylor University, completed her Ph.D. in Biomechanics from the University of Texas, and earned her Doctor of Physical Therapy from Baylor University.

"I knew I wanted to go into health-care, but I was not sure which field," Teyhen said. "I loved fitness, athletics, and sports and found physical therapy to be a perfect fit."

The general said she decided to join the Army after visiting the physical therapy clinic at Fort Campbell, Kentucky, during her undergraduate program.

"I realized there would be nothing more fulfilling than to serve America's finest — so I joined the Army so I could both be a physical therapist and serve our nation's best," she said.

For more than 29 years, Teyhen has served in positions of leadership in and out of military treatment facilities and research labs, in the United States



U.S. Army courtesy photo

Then U.S. Army Maj. Deydre Teyhen, physical therapist, served as the officer-in-charge of Task Force 10 Delta Med in Al Kut, Iraq, from December 2008 to June 2009. She is currently the commanding general at Brooke Army Medical Center and recently received the Catherine Worthingham Fellow of the American Physical Therapy Association, the association's highest membership category.

and overseas, as well as in a combat zone in Iraq.

"Her military career has been groundbreaking, becoming the first active duty physical therapist in the U.S. Army's history to be selected for promotion to brigadier general," said U.S. Army Lt. Gen. Raymond Dingle, 45th Surgeon General of the U.S. Army and Medical Command commanding general. "She remains one of my most trusted advisors in the areas of injury prevention, human performance, holistic health and rehabilitation."

"It's this legacy of service, leadership, advocacy and excellence that I ask you to recognize with a Catherine Worthingham Fellowship," he added in his nomination letter. "She is truly deserving of this great honor."

The award was named for Catherine Worthingham, a physical therapist who was effective, respectful, and

honest, and motivated others to make an impact within the physical therapy profession. She was also a visionary who demonstrated leadership across the domains of advocacy, education, practice and research.

The purpose of the Catherine Worthingham Fellow designation, or FAPTA, is to honor recipients and inspire physical therapists to attain the highest level of professional excellence and impact in terms of advancing the profession.

"Dr. Teyhen has truly been a role model within the physical therapy profession who has demonstrated the vision and leadership that honors the memory of Dr. Catherine Worthingham," said Dr. Skip Gill, Baylor University professor. "(She) is truly a nationally recognized leader, researcher and educator who has been instrumental in furthering the practice and vision of physical therapy. Her

contributions have been continuous and substantial across nearly three decades in a career with an increasingly positive trajectory for the betterment of our profession and the patients whom we serve as clinicians, educators, and researchers."

Dr. Dan Rhon, director of Musculoskeletal Research in Primary Care at BAMC, said, "I cannot think of anyone that better espouses the values and vision set forth by Catherine Worthingham and whose career has aligned with a similar impact on our profession."

Teyhen advises the next generation to understand their "why" and then pursue their passion. "As the old saying goes -- life is not a dress rehearsal," she said. "Once you find your passion, you don't have a job -- you have a calling -- and then every day is truly a gift."



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Warrior medics conduct validation exercise

By Spc. Elsi Delgado
3rd Sustainment Brigade

Soldiers assigned to the 14th Field Hospital, 44th Medical Brigade, conducted a validation exercise to validate the unit's essential tasks to deploy a role 3 medical facilities and provide life-saving support from an austere environment. "This validation exercise was unique because we are the only field hospital in the Army that is not co-located with its hospital center," said Maj. Jimmy Pepoon, the 14th Field Hospital's operations officer. "Because of that, we relied on 3rd ID along with other units to execute an effective validation exercise."

The training which took place September 7-19 throughout the Fort Stewart training areas focused on realistic medical simulations including the use of cadavers and mannequins on simulated casualties to ensure the medical personnel were given a wide range of injuries to respond to.

"Despite having very low mobility and other logistical issues, the Soldiers were able to conduct role 1 through role 3 very effectively," said Lt. Col. Edgardo Ramirez, the commander for the 14th Field Hospital. "We were able to simulate a realistic field exercise and we did it safely and efficiently."

The unit conducted air and ground movement from Wright Army Airfield to test the unit's capability to rapidly deploy and set up the field hospital.

"Third Division Sustainment Brigade played a major role in providing and transporting



U.S. Army photo by Spc. Elsi Delgado

Soldiers assigned to the 3rd Combat Aviation Brigade, 3rd Infantry Division provide support to the 14th Field Hospital during a validation exercise at Fort Stewart, Georgia, Sept. 15. The 14th FH validation exercise ensures that their Soldiers are ready to deploy expeditionary role three medical capabilities anytime and anywhere they are needed.

equipment and personnel," said Pepoon, "Seeing everyone play their role and work cohesively was very motivating."

After establishing the field hospital, the unit coordinated with several supporting elements of the 3rd DSB for logistic support and the 385th Military Police Battalion for area security support.

"We were very grateful that we got to work with the Military police," said Maj. Angel Soto, the executive officer of the 14th Field Hospital. "They provided security for us during our validation exercise while conducting their own as well."

Also key to the realism of the training was the inclusion of a forward support medical platoon from 2nd Battalion, 3rd General Support Battalion,

3rd Combat Aviation Brigade who provided a dedicated medical evacuation element.

"Working with the aviation units was unique because it allowed the soldiers to have more realistic training," said Soto. "Being able to stabilize a patient before getting them to a hospital is very important."

The training was conducted around the clock with simulated casualties transferred by air or ground elements in mass casualty events designed to stress the capabilities of the field hospital personnel to respond to events.

"Having support from additional units throughout the field exercise, simulated a realistic scenario of how deployment would be like," said Ramirez.

See EXERCISE, Page 7



U.S. Army photo by Spc. Elsi Delgado

Soldiers assigned to the 3rd Combat Aviation Brigade, 3rd Infantry Division provide medical evacuation in support of the 14th Field Hospital's validation exercise at Fort Stewart, Georgia, Sept. 15. The Boeing CH-47 Chinook is the U.S. Army's only heavy-lift cargo helicopter supporting combat and other missions. Secondary missions include medical evacuation, search and rescue, parachute drops, disaster relief and aircraft recovery.



U.S. Army photo by Sgt. Adilyah Craven, 3rd Division Sustainment Brigade

U.S. Army Soldiers assigned to the 14th Field Hospital perform medical care on a simulated casualty during a validation field exercise at Fort Stewart, Georgia, Sept. 7. The 14th FH validation exercise ensures that their Soldiers are ready to deploy expeditionary role three medical capabilities anytime and anywhere they are needed.



U.S. Army photo by Sgt. Aallyah Craven, 3rd Division Sustainment Brigade

U.S. Army Soldiers assigned to Alpha Company, 87th Division Sustainment Support Battalion, 3rd Division Sustainment Brigade, 3rd Infantry Division, deliver potable water via a load handling system compatible water tank rack during a validation exercise Fort Stewart, Georgia, Sept. 7. During the 14th Field Hospital validation exercise, the 3rd DSB provided logistic and training support.

Air Force medical history of POWs; Operation Homecoming

Courtesy Story

Air Force Medical Service

The year 1973 saw the end of the Vietnam conflict. Securing the safe release of American Prisoners of War was a vital concern for U.S. leadership, as was the physical and mental well-being of those returning. In late 1972, the Air Force Medical Service began planning for the return of 591 Americans held by the North Vietnamese. When the release finally began in February of 1973, the medical service stood by to provide air evacuation and in-garrison medical care, including nutritional medicine and mental health services.

The first evacuation of former POWs took place on February 14, 1973. The U.S. government had no way of knowing the physical and mental condition of the returning POWs and so medics had to be ready for anything.

Dietitians carefully formulated menus to minimize ill effects on the malnourished men. Air Force medical leadership decided to augment AE crews with physicians in order to deal with any serious medical conditions that might arise. Nine Air Force, three Army, and six Navy flight doctors accompanied the servicemen on these freedom flights. Each team of two flight doctors, three flight nurses, and three medical technicians flew POWs out of Vietnam to Clark Air Base in the Philippines and from there, back to the United States.

At the Clark hospital, medical staff eagerly awaited the first arrivals. They had spent exhaustive hours planning every aspect of the operation from a complete medical evaluation, including history, physical and dental exams, laboratory work-ups, and X-rays. Within 72 hours, each patient underwent a complete physical exam and most were then on their way home. The mission of the medics at Clark was not to provide definitive care, but to do an initial assessment of health and then clear the beds for the next set of POWs released.

The 10th Air Evacuation Group out



Courtesy photo

Above: When the aircraft left the ground, the Prisoners of War knew they really were free and on their way to the U.S. Air Force Base Hospital at Clark Air Base.

of Travis Air Force Base, California had the task of flying POWs back to the United States. Once home, the men went to hospitals near their home stations for further treatments and assessments, including psychological evaluations. Medical units involved with the endeavor included the 19th Aeromedical Staging Facility, 9th Aeromedical Evacuation Group, 10th Aeromedical Evacuation Group, and the USAF Hospital Clark.

Editor's note: Information for this article was adapted from portions of "100 Years of Excellence: The History of the Air Force Medical Service."



• **Rescue** (Continued from front page)

The unit is based out of Yakima Training Center in central Washington. USAAD operates 24 hours a day, seven days a week, to provide aeromedical evacuation support for thousands of service members training at Yakima Training Center each year.

Additionally, the detachment works with the Washington State Emergency Operations Center, local sheriff departments, and civilian volunteers to provide rescue coverage in south-central Washington's remote wilderness areas.

The life-saving aeromedical evacuation is a collaborative effort. As a detachment with 33 personnel and four aircraft, every member of the team is vital to USAAD.

The 16th Combat Aviation Brigade operates two aeromedical evacuation units that provide defense support to civil authorities: Yakima Dustoff in central Washington and Arctic Dustoff in central Alaska.

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Cutting-edge science featured at symposium

By Rebecca Hill
Military Health System

The 2022 Military Health System Research Symposium, held in Kissimmee, Fla., opened this week after a two-year pandemic hiatus. The audience was enthusiastic as MHS leaders shared their opening remarks.

Under the theme, "Optimizing Readiness: The Power of Military Medical Research," MHSRS showcases advances in military medicine, with sessions discussing new and life-saving solutions to those on the battlefield, as well as enhancing care for warfighters and their families at home. The conference takes place Sept. 12 through 15.

Those providing opening remarks at MHSRS included:

- Ms. Seileen Mullen, acting assistant secretary of defense for health affairs
- Dr. Terry Rauch, acting deputy assistant secretary of defense for health readiness, policy and oversight
- Dr. Jonathan Woodson, president of the Uniformed Services University of the Health Sciences
- Army Lt. Gen. (Dr.) Ron Place, director of the Defense Health Agency
- Army Brig. Gen. Katherine Simonson, DHA acting assistant director for support

Raising Awareness on Health and Science Research

Mullen discussed the different MHS research portfolios and innovations. "What we learn and share here, benefits all of our citizens in countless ways. I also ask you to keep in mind how the research you are doing to support the warfighter also supports our whole of government research agenda," she remarked.

Woodson followed her statement, saying, "Education, leveraging digital learning platforms or immersive VR, assists in research, as the Department of Defense cannot do it alone. We have to learn to leverage the future of the battle space."

Research presented during MHSRS explores a wide range of topics surrounding military medicine and warfighter care. Panel discussions addressed issues such as combat casualty care, clinical and rehabilitative medicine, medical simulation, operational medicine, infectious diseases, and warfighter performance. As the DOD evaluates the recent battlefields, and prepares for upcoming conflicts, "... science and technology need to empower the medics, giving them as much experience and training as possible, while addressing new challenges in combat casualties," Rauch stated.

Highlighting Technology and Science

The symposium highlights new research, while bringing awareness to ongoing studies.

Place offered some words of wisdom, while stating "readiness is at the heart of why we even have a research agenda, and a research portfolio that sits apart from other government missions and other government agencies. Each of these program areas has urgent and compelling requirements that we in the DOD must be ready to address."

The MHSRS discussions emphasized the importance of sharing ongoing research to benefit service members and their providers, giving way to cutting-edge sciences, and providing a venue for the brightest in the field to collaborate and expound upon their research.

Our medical readiness is supported by science, and "... we need to support combat agency roles from the battlefield to the bedside," Simonson remarked. Focusing on the future, and the research, development and care of service members and their families will always remain a top priority for the MHS.



Photo by Robbie Hammer, MHS Communications

Ms. Seileen Mullen, the acting assistant secretary of defense for health affairs, makes opening remarks during the Military Health System Research Symposium at the Gaylord Hotel in Kissimmee, Florida on Sept. 12. MHSRS provides a collaborative setting for the exchange of information between military providers with deployment experience, research and academic scientists, international partners, and industry on research and related health care initiatives, such as Combat Casualty Care, Operational Medicine, Clinical and Rehabilitative Medicine, Medical Simulation and Information Sciences, and infectious Diseases.



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• **Exercise** (Continued from page 4)

The field hospital personnel met this challenge by establishing a facility with a wide range of capabilities from an emergency room designed to stabilize incoming patients to more specialized capabilities including a CT scanner, microbiology lab and operating rooms.

“The support we have had here at Fort Stewart has been amazing,” said Ramirez. “I’m extremely grateful for all the support and effort everyone has put in to make this an effective field exercise.”

Also unique to the training was the incorporation of Modified Table of Organization and Equipment Assigned Personnel. These personnel are assigned to the 14th in specialty roles, but are not co-located with the unit at

Fort Stewart.


“The VALEX was remarkable because the exercise brought health-care providers from around the country together to complete mission essential tasks and execute them proficiently,” said Ramirez.

With the cooperation of the units involved, the 14th Field Hospital was able to conduct a successful validation exercise to sustain the unit’s essential tasks to deploy a role in three medical facilities and provide life-saving support from an austere environment.

“Overall I believe that it was a successful exercise,” said Pepoon. “Being at Fort Stewart provides a capability to 3rd ID to participate in other major exercises and become more of an asset to the Army.”

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