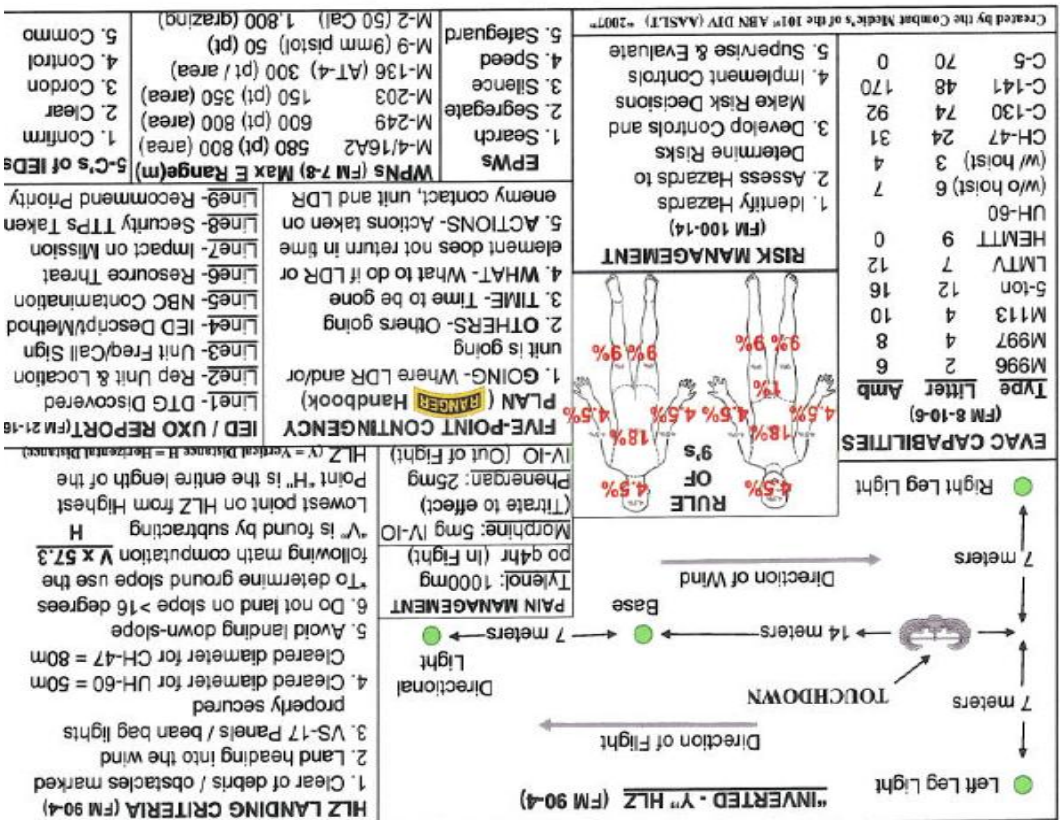

101st Airborne Division
"Air Assault"
Combat Medic Reference Card

GLASCOW COMA SCALE

Eye Opening	Spontaneous	4
	To Verbal Stimuli	3
	To Pain	2
	No Response	1
Best Verbal Response	Oriented/Talking	5
	Confused Talking	4
	Confused Words	3
	Sounds Only	2
	No Response	1
Best Motor Response	Obeys Commands	6
	Localizes Pain	5
	W/draws From Pain	4
	Flexed Elbows	3
	Extended Elbows	2
	No Response	1

ROLES (LEVELS) OF CARE (FM 4-02)
LEVEL 1: Med Txt & Evac, (-)Medlog
LEVEL 2: Med Txt & PT Hold (40 Bed) Evac, PAD, C4I, Dental, X-Ray, Lab, PM CSC, Medlog, Poss Forward Surg Tm
LEVEL 3: All the Above & Surgery

TROOP LEADING PROCEDURES
(FM 7-8)
1. Receive mission
2. Issue warning order
3. Make a tentative plan
4. Start movement
5. Reconnoiter
6. Complete the plan
7. Issue the plan
8. Supervise

METT-TC ANALYSIS
(FM 7-8)
1. Mission
2. Enemy
3. Terrain
4. Troops
5. Time
6. Civilians

MILITARY ASPECTS OF TERRAIN (OCOKA)
(FM 7-8)
1. Observation and Fields of Fire
2. Cover and Concealment
3. Obstacles
4. Key Terrain
5. Avenues of Approach

PRINCIPLES OF HSS
(FM 4-02.6)
1. Conformity
2. Continuity
3. Control
4. Proximity
5. Flexibility
6. Mobility

SPOT REPORT
S- Size (FM 21-75)
A- Activity
L- Location
U- Unit/Uniform
T- Time
E- Equipment

9 – LINE MEDEVAC REQUEST
(FM 8-10-6)
Line 1- Location of pickup site
Line 2- Radio call sign & frequency
Line 3- # of patients by precedence
a. Urgent b. Urgent Surgical (2hrs)
c. Priority (4hrs) d. Routine (24hrs)
e. Convenience
Line 4- Special equipment needed
a. None b. Hoist
c. Extraction equipment
d. Ventilator
Line 5- # of patients by type
L- # of Litter patients
A- # of Ambulatory patients
Line 6- Security of pickup site (war)
N- No enemy troops in area
P- Possible enemy troops in area
E- Enemy troops in area
X- Enemy troops in area
Line 6- Number and type of wound injury or illness (peace)
Line 7- Method of marking at HLZ
a. Panels b. Pyro c. smoke
d. None e. Other
Line 8- Patient Nationality & Status
a. US Military b. US Civilian
c. Non US Military
d. Non US Civilian e. EPW
Line 9- NBC (war)
N- Nuclear B- Biological C- Chem
Line 9- Terrain description (peace)

TACTICAL COMBAT CASUALTY CARE
Care Under Fire: Return fire, Seek cover, Keep casualty in fight, Stop arterial bleed w/ Tourniquet (CAT), Direct Pressure/HEMCON for heavy torso bleeding
Tactical Field Care: Jaw Thrust-NPA-Surgical-A, Asherman chest seal for Open Chest Wound-Needle "D" for Tension Pneumo-Check Bleeds-Position Casualty
CASEVAC Care: Consider fluids-Saline Lock-Check dressings-Splint-Analgesia