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THE MEDICAL COMPANY

TACTICS, TECHNIQUES, AND PROCEDURES

AUGUST 2002

HEADQUARTERS, DEPARTMENT OF THE ARMY

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PREFACE

This field manual (FM) provides information on the employment, functions, and operations of divisional and nondivisional medical companies of Army of Excellence (AOE) and Army XXI divisions to include separate brigades, the interim brigade combat team, and the armored cavalry regiment. It is intended to serve as doctrine and a primary reference publication for medical planners and the medical commander and his staff.

Users of this publication are encouraged to submit comments and recommendations to improve the publication. Comments should include the page, paragraph, and line(s) of the text where the change is recommended. The proponent for this publication is the United States (US) Army Medical Department Center and School (AMEDDC&S). Comments and recommendations should be forwarded directly to Commander, AMEDDC&S, ATTN: MCCS-FCD-L, 1400 East Grayson Street, Fort Sam Houston, Texas 78234-5052.

The staffing and organizational structure presented in this publication reflects those established in AOE and Force XXI tables of organization and equipment (TOEs). However, such staffing is subject to change to comply with manpower requirements criteria and can be subsequently changed by your modified table of organization and equipment (MTOE).

As the Army Medical Department (AMEDD) transitions to the 91W military occupational specialty (MOS), positions for 91B and 91C will be replaced by 91W when new unit MTOE take effect.

This publication implements and/or is in consonance with the following North Atlantic Treaty Organization (NATO) Standardization Agreements (STANAGs), American, British, Canadian, and Australian (ABCA) Quadripartite Standardization Agreements (QSTAGs), and Air Standardization Agreements (AIR STDs).

TITLE	STANAG	QSTAG	AIR STD
Regulations and Procedures for Road Movements and Identi- fication of Movement Control and Traffic Control Per- sonnel and Agencies	2454		
Medical Employment of Air Transport in the Forward Area	2087	529	
Documentation Relative to Medical Evacuation, Treatment and Cause of Death of Patients	2132	470	
Orders for the Camouflage of the Red Cross and Red Crescent on Land in Tactical Operations	2931		
Aeromedical Evacuation	3204		
Aeromedical Evacuation by Helicopter			44/36A
Selection, Priorities, and Classes of Conditions for Aero- medical Evacuation			61/71

Unless this publication states otherwise, masculine nouns and pronouns do not refer exclusively to men.

Use of trade or brand names in this publication is for illustrative purposes only and does not imply endorsement by the Department of Defense (DOD).

CHAPTER 1

COMBAT HEALTH SUPPORT SYSTEM

Section I. OVERVIEW OF COMBAT HEALTH SUPPORT

1-1. General

The combat health support (CHS) system is a continuum from the forward edge of the battle area (FEBA) through the continental United States (CONUS) sustainment base. It is a system that provides medical management throughout all echelons of care. The challenge is to simultaneously provide medical support to mobilizing and deploying forces, establish a CHS system within the theater, and continue to provide health care services to the CONUS base. Additionally, there will be a requirement to provide medical support to redeployment and demobilization operations at the conclusion of operations. The basic tenets of CHS for a Force Projection Army involve strict adherence to AMEDD battlefield rules. These battlefield rules provide the basis for the development of medical organizations and force structure. Table 1-1 lists these rules in order of precedence.

Table 1-1. Army Medical Battlefield Rules

BE THERE (MAINTAIN A MEDICAL PRESENCE WITH THE SOLDIER)

MAINTAIN THE HEALTH OF THE COMMAND

SAVE LIVES

CLEAR THE BATTLEFIELD OF CASUALTIES

PROVIDE STATE-OF-THE-ART-MEDICAL CARE

ENSURE EARLY RETURN TO DUTY OF THE SOLDIER

1-2. Theater of Operations

A theater of operations (TO) is that portion of an area of war necessary for military operations and for the administration of such operations. The scenario depicts the size of the TO and the US forces to be deployed. The theater is normally divided into a combat zone (CZ) and a communications zone (COMMZ). The CZ begins at the Army/corps rear boundary and extends forward to the extent of the commander's area of influence. The COMMZ begins at the corps rear boundary and extends rearward to include the areas needed to provide support to the forces in the CZ. In some instances, the COMMZ may be outside the TO.

NOTE

The area encompassed by the COMMZ is often referred to as echelons above corps (EAC), as the COMMZ is no longer routinely established for all operations.