

Team Army Medicine,

It is with great pleasure that LTG Dingle and I announce the 1st Quarter FY 2022 Army Medicine Wolf Pack Award winner, the Combat Medic Specialist Training Program (CMSTP), U.S. Army Medical Center of Excellence (MEDCoE), Joint Base San Antonio-Fort Sam Houston, Texas.

The team of 32 Army Active Duty military and Department of the Army Civilians worked closely through coordination and support from MEDCoE rapidly developed and implemented a Prolonged Casualty Care (PCC) bridge curriculum to meet the demands of future operations while continuing to train over 5,000 medics. The 18-hour PCC bridging solution implemented as part of the 68W Company Field Training Exercise, was scaled and oriented to the capabilities of conventional combat medics, to prepare for Large-Scale Combat Operations. As near-peer threat analysis continues to identify constraints for casualty evacuation, the capabilities of Combat Medics will endure its most significant transition since the start of the Global War on Terrorism.

The CMTSP Team collaborated to research, design, and beta test varying medical skills with Medics during their culminating field training exercise. Elements such as critical care nursing, emergency medicine, nutrition, telemedicine consultation and surgical were introduced and analyzed. The line of effort validated that Army medics receive necessary foundational knowledge during initial entry training to create a baseline understanding of key concepts. What began modestly with operation of a walking blood bank expanded to real-time telemedicine consultation, demonstration of advanced procedures including tube thoracostomy and bladder catheterization, and nursing care with prolonged monitoring and advanced interventions.

The team's relentless efforts to seek out all available training concepts has expanded the knowledge base of CMSTP Instructors. This has been a critical component to adapting the aforementioned skills to the Army's next generation of combat medics. During development, CMSTP Instructors attended Delayed Evacuation Casualty Management, Brigade Combat Team Trauma Training, Tactical Combat Medical Care, Management of Burns and Multiple Trauma Course, and Joint Forces Combat Trauma Management Course. Instructors subsequently consulted the publications of the Committee on Tactical Combat Casualty Care, Special Operations Medical Association, and the Joint Trauma System Clinical Practice Guidelines to construct the PCC training. Working relationships with the Combat Paramedic Course, U.S. Army Institute of Surgical Research Laboratory Operations Course, and the Strategic Trauma Readiness Center of San Antonio helped codify this initiative and enable CMSTP to enact lessons-learned from other departments. The team's collective effort across the MEDCoE resulted in over 1,000 hours of practical and didactic education for the Instructors and over 200 additional hours of development by the MEDCoE resulting in revising the Combat Casualty Assessment and Individual Skills Validation to begin teaching PCC

Please join us in congratulating the Team for their exceptional teamwork and noteworthy outcomes. These efforts illustrate selfless service and dedication reflecting great credit on the Army, Army Medicine and the U.S. Army Medical Center of Excellence epitomizing the highest standards of the Army and Army Medicine.

Congratulations Team!

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Rich

Richard R. Beauchemin  
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