



DEPARTMENT OF THE NAVY  
BUREAU OF MEDICINE AND SURGERY  
7700 ARLINGTON BOULEVARD  
FALLS CHURCH, VA 22042

IN REPLY REFER TO  
BUMEDNOTE 1500  
BUMED-M7  
14 Jan 2016

BUMED NOTICE 1500

From: Chief, Bureau of Medicine and Surgery

Subj: PHASED MEDICAL READINESS TRAUMA TRAINING REQUIREMENTS

Ref: (a) OPNAVINST 6320.7A/MCO 6320.4  
(b) COMNAVSURPACINST 5450.6/COMNAVSURLANTINST 5450.6  
(c) BUMEDINST 1500.15E  
(d) BUMEDINST 1510.25  
(e) USCENTCOM 241645Z Mar 15, Fiscal Year 15-16 Theater Training Requirements  
(f) USFOR-A 211117Z Mar 14, FRAGO 14-067  
(g) BUMED memo 6000 Ser M9/I11UN093000775 of 9 Sep 2011  
(h) MCCDC ltr C134 of 13 Nov 2013  
(i) DoD Instruction 6495.02 of 29 March 2013

Encl: (1) Trauma Training Requirements for Deploying Navy Medical Department Personnel  
(2) Acronyms

1. Purpose. To meet the training requirements of the Combatant Commands (CCMDs), as well as all deploying medical staff in direct patient care areas. Navy Medicine is issuing core requirements for platform training per references (a) through (i). The goal is to delineate training that proactively and adequately prepares our personnel for the mission, while minimizing time spent away from their parent commands.
2. Cancellation. BUMEDNOTE 1500 of 27 Aug 2014.
3. Applicability. This notice applies to all Navy Medical Department personnel.
4. Policy. This policy establishes minimum Navy Medicine core trauma training requirements for phased medical platform readiness training. Additional requirements based on the specific platform and planned utilization may exist above the common minimum requirements for all platforms.
5. Navy Medical Readiness Trauma Training. Training will be coordinated and conducted in three phases:
  - a. Phase I. Phase I trauma training requirements have been identified and apply to all Navy Medicine personnel assigned to or deploying with an operational medical platform or sourced globally for missions across the full range of military operations. Command leadership is responsible for ensuring the member's completion of all Phase I trauma training requirements specific to their corps, i.e. Advance Trauma Life Support, Trauma Nurse Core Course or Tactical

Combat Casualty Care (TCCC). Phase I trauma training requirements include individual medical and trauma skills training that can be met by formal course attendance, completion of approved computer based courses and/or participation in clinical cross training. Navy Medicine Operational Training Center (NMOTC) will be responsible for funding and quota management of the TCCC courses.

b. Phase II. Phase II trauma training requirements are platform specific and include training that occurs in the environment, on the equipment and with the unit construct similar to what the member is expected to encounter when deployed on that platform. Command leadership is responsible for ensuring the member's completion of all Phase II trauma training requirements specific to their assigned platform, i.e., Expeditionary Medical Facility Training at the Naval Expeditionary Medical Training Institute or simulated operational surgical team training. NMOTC will be responsible for funding and quota management of the Navy Trauma Training Center (NTTC) courses.

c. Phase III. Phase III training is mission specific training as defined by the CCMD. This training is provided, whenever possible and usually just in time to those individuals deploying to an identified area of responsibility (AOR) or area of operations (AO). Phase III training will not always be possible; therefore, it is imperative that emphasis be placed on meeting a substantial readiness posture through the completion of Phase I and II training and designating Phase III training to provide refresher and/or mission specific training. NMOTC will be responsible for funding and quota management of Phase III NTTC courses quota management of the Joint Enroute Care Course (JECC). JECC funding is provided by the member's command.

6. The special information/comments section, contained within enclosure (1), provides additional guidance for course coordination. Enclosure (1) delineates phased trauma training courses that are required to be completed prior to the member reporting to the receiving command for pre-deployment training. A list of acronyms is provided in enclosure (2).

7. The commander, commanding officer (CO), or officer in charge (OIC) of the member's command is responsible for ensuring completion of all Phase I and Phase II requirements for all deploying personnel. The member's commander, CO, or OIC will ensure the most current version of NAVPERS 1300/22, Expeditionary Screening Checklist, is completed. Training identified as not mandatory, but strongly recommended, must be supported to the fullest extent possible.

8. Command staff education and training budgets cover these training requirements. Enclosure (1) special information/comments section provides additional guidance for course coordination.

9. Effective immediately, all Navy Medicine commands will implement this policy for all Navy Medical Department personnel in their AOR who are globally sourced or assigned to an operational platform. Additionally, commands will take proactive action to ensure personnel maintain their basic specialty skills training as part of their overall medical readiness whether

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assigned to a platform or not. Tracking training completion/compliance is required using the Defense Medical Human Resources System – internet and/or the Expeditionary Medical Platform Augmentation, Readiness, and Training System.

10. Phased Medical Readiness Trauma Training requirements include Reserve Component medical personnel assigned to operational platforms. Funding sources and documentation of completed phased medical readiness training will be coordinated with Bureau of Medicine and Surgery (BUMED) Reserve Policy and Integration (BUMED-M10), Commander, Navy Reserve Forces Command, and other key stakeholders. All efforts will be made to implement a total force solution to address business process and database interoperability challenges.

11. Records Management. Records created as a result of this notice, regardless of media format, must be managed per SECNAV Manual 5210.1 of January 2012.

12. Forms. NAVPERS 1300/22 (Rev. 02-2015), Expeditionary Screening Checklist is available from the Navy Personnel Command Web site at:  
<http://www.public.navy.mil/bupers-npc/reference/forms/NAVPERS/Pages/default.aspx>

  
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Distribution is electronic only via the Navy Medicine Web site at  
<http://www.med.navy.mil/directives/Pages/default.aspx>

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## TRAUMA TRAINING REQUIREMENTS FOR DEPLOYING NAVY MEDICAL DEPARTMENT PERSONNEL

Physicians/ Oral Surgeons	Course	Timing	Requirement*	Special Information/ Comments	Acceptable Alternatives
All	Combat Casualty Care Course (C4)  Phase I Training	Once in career, preferably within 2 years of accession	<b>Mandatory</b> OPNAVINST 6320.7A/MCO 6320.7A	Advanced Trauma Life Support (ATLS) is included in C4 for physicians. Naval Medicine quota managed and funded by Navy Medicine Operational Training Center (NMOTC)	1. Bushmaster Course (Bushmaster is conducted at Uniform Services University)  2. Prior deployed "combat care" experience with Fleet Hospital/Expeditionary Medical Facility (EMF)/Duty with United States Marine Corps (USMC) or Army.
All Dental Corps officers assigned to outside contiguous United States (OCONUS) duty stations, operational assignments or to Health Services Augmentation Platforms (HSAP)	C4  Phase I Training	Prior to assignment	<b>To the greatest extent possible</b>  BUMEDINST 1500.15E	ATLS is included in C4. Naval Medicine quota managed and funded by NMOTC; however, training requirements for physicians makes it difficult to train large numbers of non-physician providers.	Pre-Hospital Trauma Life Support (PHTLS) course
Medical Corps (MC) specific designators established by BUMEDINST 1500.15E CH-1, Medical Corps officers assigned to HSAP billets, as individual augmentees, or in other contingency billets	ATLS and Advanced Cardiovascular Life Support (ACLS)  Phase I Training	Complete training preferably within 6 months of assignment. Maintain current through deployment	<b>Mandatory</b> BUMEDINST 1500.15E	Provider status good for 4 years  Executive Sponsors: American College of Surgeons (ACS) American Heart Association (AHA)	None
All other Navy Medical Department dentists (active duty, Reserve, civilian, contract)	ATLS and ACLS  Phase I Training	Complete training preferably within 6 months of assignment to OCONUS duty stations, operational assignments, or to HSAP platforms	<b>Mandatory</b> BUMEDINST 1500.15E	Provider status good for 4 years  Executive Sponsor: ACS and AHA	None
Those assigned to: Forward Resuscitative Surgical System and Shock Trauma Platoon (FRSS/STP) USMC Billets  Other Forward Resuscitative Care/Role 2 Assignments (i.e., Fleet Surgical Team (FST))	Navy Trauma Training Center (NTTC)  Phase II or III Training	Within 2 years prior to deployment	<b>Mandatory</b> for FRSS/STP USMC Billets regardless of theater location - Marine Corps Combat Development Center (MCCDC) ltr C134 of 13 Nov 2013  United States Central Command (USCENTCOM) Area of Responsibility (AOR): <b>Mandatory</b> One- time Experience if going to Role 2 Light Maneuver (LM) units  USCENTCOM FY 15-16 Theater Training Requirements DTG 241645Z Mar 15	This training meets the Emergency War Surgery Course (EWSC) requirement for Surgeons and Combat Extremity Surgery Course (CESC) requirement for Orthopedic Surgeons (Navy quota management provided by Specialty Leader) Carries Additional Qualification Designator (AQD) which is good for 2 years.  NTTC holds 11 iterations/year and has 24 seats/class (6 medical corps (MC) seats, 3 nurse corps (NC) seats, and 15 hospital corpsman (HM) seats) Navy Medicine quota managed and funded by NMOTC  Will earn approximately 65 Continuing Medical Education (CME) credits  Highly recommended for other appropriate specialties.	1. Other Service Trauma Training Center completion. 2. Completed Trauma Fellowship within last 3 years. 3. Actively engages in ongoing care of trauma patients (moonlighting as defined by Parent Command). 4. Theater Trauma Systems Clinical Practice Guidelines (CPGs) familiarization training within past 3 months.

TRAUMA TRAINING REQUIREMENTS FOR DEPLOYING NAVY MEDICAL DEPARTMENT PERSONNEL

Physicians/ Oral Surgeons	Course	Timing	Requirement*	Special Information/ Comments	Acceptable Alternatives
Physicians, (Surgeons and Non-Surgeons) assigned to patient care delivery positions in a Role 1; Role 2 Light Manuever (Forward Surgical Teams); Role 2 plus and Role 3 Hospitals.	EWSC  Phase I Training	Within 180 days prior to deployment.	<b>Mandatory</b> USCENTCOM FY 15-16 Theater Training Requirements DTG 241645Z Mar 15	EWSC is offered through Defense Medical Readiness Training Institute (DMRTI) and is open to Surgeons, physicians, nurses, advanced practice registered nurses (APRNs), and physician assistants (PAs).  Quota management provided by surgery specific Specialty Leader.	<ol style="list-style-type: none"> <li>1. Joint Forces Combat Trauma Management Course (JFCTMC) offered through the Army Medical Department Center and School (AMEDDC&amp;S).</li> <li>2. NTTC or other service trauma training program (i.e., Army Trauma Training Center (ATTC)/Center for Sustainment and Trauma Readiness Skills (CSTARS)).</li> <li>3. Completed Trauma Fellowship within last 3 years.</li> <li>4. Actively engaged in the ongoing practice of Trauma Surgery (moonlighting at Level 1 Trauma Center, as defined by Parent Command).</li> </ol>
All	Concussion/Mild Traumatic Brain Injury (mTBI) in the deployed setting  Phase I Training	Within 3 months of deployment	<b>Mandatory</b> BUMED Policy Memo 6000 Ser M9/I11UN093000775 of 9 Sep 2011	N/A	<p><b>Courses offered on Navy Knowledge Online (NKO):</b></p> <ol style="list-style-type: none"> <li>1. Traumatic Brain Injury 201: "Overview for Health Care Personnel" (NM-12-TBI201-1.0) <u>Target Audience:</u> All active duty providers and clinical support staff working in direct patient care areas where initial diagnosis and/or treatment of TBI may occur.</li> <li>2. Traumatic Brain Injury 301: "Battlefield Management for Mild Traumatic Brain Injury" (NM-12-TBI301-1.0) <u>Target Audience:</u> All deploying medical personnel.</li> <li>3. Traumatic Brain Injury 401: "Primary Care, Assessment and Management for Concussion" (NM-12-TBI401-1.0) <u>Target Audience:</u> All primary care managers, all mental health providers and other providers involved with traumatic brain injury (TBI) care.</li> </ol>
All Deploying Providers including Deploying Dental Officers	Military Acute Concussion Evaluation (MACE)/CPG/ Department of Defense Instruction (DoDI) Course  Phase II Training	Within 3 months of deployment	<b>Mandatory</b> USCENTCOM FRAGO 09-1734 Concussion/mTBI Management and Tracking USCENTCOM FY 15-16 Theater Training Requirements DTG 241645Z Mar 15	<p>Training should be completed at parent command.</p> <p><u>Target Audience:</u> Deploying providers (physician, nurse practitioner (NP), PA, nurse, psychologist, occupational therapist (OT), physical therapist (PT), social worker (SW), speech language pathologist (SLP), and PT technician) and those who train deployers or hold key positions at the school houses.</p> <p>**Commands wanting MACE trainers to be trained should contact Navy Medicine East (NME)/Navy Medicine West (NMW) Wounded, Ill, and Injured (WII) representatives: <b>NMW-CAPT Jay Chambers</b>, 619-767-6664, Jay.E.Chambers.mil@mail.mil; <b>NME-CAPT Gail Manos</b>, 757-953-0464, Gail.Manos@med.navy.mil</p>	<ol style="list-style-type: none"> <li>1. TBI for Deploying Providers: A 2-day, tri-service, "train-the-trainer" course sponsored by the Army.</li> <li>2. TBI for Deploying Providers course is a "train-the-trainer" course, offered quarterly at the National Intrepid Center of Excellence (NICoE).</li> </ol>

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Physicians/ Oral Surgeons	Course	Timing	Requirement*	Special Information/ Comments	Acceptable Alternatives
All Deploying Providers involved in direct patient care deployed to combined joint operations	Tactical Combat Casualty Care (TCCC) Phase I Training	Within 180 days of deployment	<b>Mandatory</b> BUMEDINST 1510.25 USCENTCOM FY15-16 Theater Training Requirements DTG 241645A Mar 15 USFOR-A 211117Z Mar 14 FRAGO 14-067	Provides standardized training for all trauma care at the point of injury and for tactical evacuation. Training should be completed at parent command or Naval Expeditionary Medical Training Institute (NEMTI) by TCCC Trainers.  **Commands needing TCCC trainers, or for questions or concerns, please contact Ms. Bettye Love at 760-725-7121 x222 or Bettye.J.Love.civ@mail.mil.	1. Supervising Physicians throughout the Combined/Joint Operations Area - Afghanistan (CJOA-A) will ensure all physicians, PAs, NPs, nurses, medics, and HMs are familiar with the current TCCC Guidelines of 7 May 2015. 2. Only Regional Medical Advisors have the authority to exempt medical providers from the course. 3. Every effort needs to be made to attend TCCC; however, if training cannot be completed, alternative courses are available: the EWSC, JTCTMC, Expeditionary Medical Systems Training, training conducted at any Service specific trauma training center, or other equivalent course that meets minimum core requirements as determined through the Combat Trauma Surgery Committee of the DMRTI prior to deployment.
All Orthopedic Surgeons	CESC Phase I Training	New Orthopedic Surgeons: within their 1st year.  Current Orthopedic Surgeons: Every 3 years	Strongly Recommended - Not Required	<b>CESC is offered at:</b> 1. ATTC 2. Society of Military Orthopedic Surgeons Conference  Quota management provided by Orthopedic Specialty Leader.	1. NTTC 2. EWSC 3. Completed Orthopedic Trauma Fellowship in last 3 years. Actively engaged in the ongoing practice of Orthopedic Trauma Surgery (moonlighting as defined by Parent Command). 4. Theater Trauma Systems CPGs familiarization training within past 3 months.
Nurses	Course	Timing	Requirement*	Special Information/ Comments	Acceptable Alternatives
All deployment critical subspecialties (primary, secondary, tertiary) of 1945, 1950, 1960 and 1972	Trauma Nurse Core Course (TNCC) Phase I Training	Maintain current through deployment	<b>Mandatory</b> All 1945, 1950, 1960 and 1972 Specialty Codes  BUMEDINST 1500.15E	Executive Sponsor: Emergency Nurses Association (ENA)  Registration good for 4 years  For Certified Registered Nurse Anesthetists and NPs, ATLS is preferred.  Strongly Recommended for all others	1. Advanced Trauma Nurse Course, Sponsored by: Society of Trauma Nurses 2. Actively engaged in the on-going practice of Emergency Trauma Resuscitation Nursing (moonlighting at a Level I Trauma Center, as defined by Parent Command).
All deployment critical subspecialties (primary, secondary, tertiary) of 1945, 1950, 1960 and 1972	ACLS Phase I Training	Maintain current through deployment	<b>Mandatory</b> All 1945, 1950, 1960 and 1972 Specialty Codes  BUMEDINST 1500.15E	Executive Sponsor: AHA  Registration good for 4 years	None

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Nurses	Course	Timing	Requirement*	Special Information/ Comments	Acceptable Alternatives
Those assigned to patient care delivery positions in a Role 1; Role 2 Light Maneuver (Forward Surgical Teams); Role 2 plus and Role 3 Hospitals.	EWSC Phase I Training	USCENTCOM AOR: Within 180 days prior to deployment One-time requirement	<b>Mandatory</b> for USCENTCOM AOR USCENTCOM FY15-16 Theater Training Requirements DTG 241645A Mar 15	EWSC is offered through DMRTI and is open to Surgeons, physicians, nurses, APRNs, and PAs. Quota management provided by surgery specific Specialty Leader.	<ol style="list-style-type: none"> <li>JFCTMC offered through AMEDDC&amp;S Army.</li> <li>NTTC or other service trauma training program (ATTC/CSTARS).</li> <li>Actively engaged in the ongoing practice of Trauma Care (moonlighting at Level I Trauma Center).</li> <li>Theater Trauma Systems CPGs familiarization training within past 3 months.</li> </ol>
Those assigned to EnRoute Care (ERC) roles/billets	Joint EnRoute Care Course (JECC) Phase I or III Training	Within 3 years of deployment	<b>Mandatory</b> for RNs assigned to USMC ERC Billets and the Critical Care Nurse for each of the nine FSTs  USMC ERC: MARADMIN; EnRoute Care Team Training Requirements; DTG 251454Z May 10 and COMNAVSURPACINST5450.6/COMNAVSURLANTINST 5450.6 of Oct 2010	<p>ACLS is a prerequisite for JECC</p> <p>JECC is offered through the U.S. Army School of Aviation Medicine, Fort Rucker, Alabama. Navy registration is through NMOTC, Comm Telephone: (850) 452-2851</p> <p>Class II Aircrew (AC)/Helicopter (HELO) Flight Physical required prior to attending JECC.</p> <p>ERC nurses <b>MUST</b> be Critical Care (1960) or Emergency/Trauma (1945) Specialties. Do not substitute Med-Surg nurses or other nurse specialties.</p> <p>Strongly recommended for other 1960s and 1945s assigned to Fleet and Marine Corps platforms.</p>	<b>Not Waiverable</b> if assigned to USMC ERC billets. Currently, only USMC billets associated with FRSSs/STPs have coded ERC billets.
Those assigned to: FRSS/STP USMC Billets  Other Forward Resuscitative Care/Role 2 Assignments (i.e., FST)	NTTC Phase II or III Training	Within 2 years prior to deployment	<b>Mandatory</b> for FRSS/STP USMC Billets regardless of theater location - MCCDC ltr C134 of 13 Nov 2013.  USCENTCOM AOR: <b>Mandatory Onetime</b> Experience if going to Role 2 LM units.  USCENTCOM FY15-16 Theater Training Requirements DTG 241645A Mar 15	<p>This training meets the EWSC Requirement</p> <p>Carries AQD which is good for 2 years.</p> <p>NTTC holds 11 iterations/year and has 24 seats/class (6 MC seats, 3 NC seats, and 15 HM seats) Navy Medicine quota managed and funded by NMOTC</p> <p>Highly Recommended for other applicable specialty areas.</p>	<ol style="list-style-type: none"> <li>Other Service Trauma Training Center Completion, i.e., ATTC in Miami or the Air Force's CSTARS in Baltimore.</li> <li>Actively engages in ongoing care of trauma patients (moonlighting at Level I Trauma Center as defined by Parent Command).</li> <li>Theater Trauma Systems CPGs familiarization training within past 3 months.</li> </ol>
All	Concussion/mTBI in the deployed setting Phase I Training	Within 3 months of deployment	<b>Mandatory</b> BUMED Policy Memo 6000 Ser M9/I11UN093000775 of 9 Sep 2011	N/A	<p><b>Courses offered on NKO:</b></p> <ol style="list-style-type: none"> <li>Traumatic Brain Injury 201: "Overview for Health Care Personnel" (NM-12-TBI201-1.0) <u>Target Audience:</u> All active duty providers and clinical support staff working in direct patient care areas where initial diagnosis and/or treatment of TBI may occur.</li> <li>Traumatic Brain Injury 301: "Battlefield Management for Mild Traumatic Brain Injury" (NM-12-TBI301-1.0) <u>Target Audience:</u> All deploying medical personnel.</li> <li>Traumatic Brain Injury 401: "Primary Care, Assessment and Management for Concussion" (NM-12-TBI401-1.0) <u>Target Audience:</u> All primary care managers, NPs, all mental health personnel including mental health clinical nurse specialists dealing w/TBI care.</li> </ol>

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Nurses	Course	Timing	Requirement*	Special Information/ Comments	Acceptable Alternatives
All Assigned to Theater Hospitals/Role 2E/Role 3 Units	MACE/CPG/DoDI Course Phase II Training	Within 3 months of deployment	<b>Mandatory</b> CENTCOM FRAGO 09-1734 Concussion/mTBI Management and Tracking USCENTCOM FY15-16 Theater Training Requirements DTG 241645A Mar 15	Training should be completed at parent command.  <u>Target Audience:</u> Deploying providers (physicians, NP, PA, nurse, psychologist, OT, PT, SW, SLP, OT, and PT technician) and those who train deployers or hold key positions at the school houses.  **Commands wanting MACE trainers to be trained should contact our BUMED regional NME/NMW WII representatives: <b>NMW</b> -CAPT Jay Chambers, 619-767-6664, Jay.E.Chambers.mil@mail.mil <b>NME</b> -CAPT Gail Manos, 757-953-0464, Gail.Manos@med.navy.mil	1. TBI for Deploying Providers: A 2-day, tri-service, "train-the-trainer" course sponsored by the Army. 2. TBI for Deploying Providers course is a "train-the-trainer" course, offered quarterly at the NICoE.
All Advanced Practice Nurses (APNs) and Nurse generalists	TCCC Phase I Training	Within 180 days prior to each Individual Augmentee (IA) or Health Services Augmentation program (HSAP) deployment	<b>Mandatory</b> BUMEDINST 1510.25 USFOR-A 211117Z Mar 14 FRAGO 14-067	This training provides standardized training for all trauma care at the point of injury and for tactical evacuation. Training should be completed at parent command or NEMTI by TCCC Trainers.  **Commands needing TCCC trainers, or for questions or concerns, please contact Ms. Bettye Love at 760-725-7121 x222 or Bettye.J.Love.civ@mail.mil.	1. Supervising Physicians throughout the CJOA-A will ensure all physicians, PAs, NPs, nurses, medics, and HMs are familiar with the current TCCC Guidelines of 7 May 2015. 2. Only Regional Medical Advisors have the authority to exempt medical providers from the course. 3. Every effort needs to be made to attend TCCC; however, if training cannot be completed, alternative courses are available: the EWSC, JFCTMC, Expeditionary Medical Systems Training, training conducted at any Service specific trauma training center, or other equivalent course that meets minimum core requirements as determined through the Combat Trauma Surgery Committee of the DMRTI prior to deployment.
All	C4 Phase I Training	Once in career, preferably within 2 years of accession	Strongly Recommended BUMEDINST 1500.15E	TNCC is included for nurses. Naval Medicine quota managed and funded by NMOTC	Prior deployed "combat care" experience with Fleet Hospital/EMF/Duty with USMC or Army.
All deployment critical subspecialties (1945s, 1950s, 1960s)	Emergency Nursing Pediatrics Course Phase I Training	Within 2 years prior to deployment	Strongly Recommended - Not Required	Registration good for 4 years Executive Sponsor: ENA, see ENA Web site ( <a href="http://www.ena.org">http://www.ena.org</a> ) to find a list of courses offered by State.	None
All deployment critical subspecialties (1945s, 1950s, 1960s)	Advanced Burn Life Support (ABLS) Phase I Training	Within 2 years prior to deployment	Strongly Recommended - Not Required	ABLS is offered through DMRTI Exportable Training. For list of courses contact DMRTI ABLS Section, (210) 295-0358 E-mail Address: ABLS@amedd.army.mil Registration good for 4 years	None

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Physician Assistants	Course	Timing	Requirement*	Special Information/ Comments	Acceptable Alternatives
All	C4 Phase I Training	Once in career, preferably within 2 years of accession	Strongly Recommended - Not Required	PHTLS or ATLS is included in C4 for PAs. Naval Medicine quota managed and funded by NMOTC  Not required, but strongly recommended for PAs assigned to operational/USMC Operational Stress Control and Readiness billets	Prior deployed "combat care" experience with Fleet Hospital/EMF/Duty with USMC or Army
All	ATLS and ACLS Phase I Training	Maintain current through deployment	<b>Mandatory</b> BUMEDINST 1500.15E	Provider status good for 4 years  Executive Sponsor: ACS and AHA	None
Physician Assistants (PAs) assigned to patient care delivery positions in a Role 1; Role 2 Light Manuever (Forward Surgical Teams); Role 2 plus and Role 3 Hospitals.	EWSC Phase I Training	USCENTCOM AOR: Within 180 days prior to deployment One-time requirement	<b>Mandatory</b> for USCENTCOM AOR USCENTCOM FY15-16 Theater Training Requirements DTG 241645A Mar 15	EWSC is offered through DMRTI and is open to Surgeons, physicians, nurses, APRNs, and PAs. Quota management provided by surgery specific Specialty Leader.	1. JFCTMC offered through AMEDDC&S Army. 2. NTTC or other service trauma training program (ATTC/CSTARS). 3. Actively engaged in the ongoing practice of Trauma Care (moonlighting at Level I Trauma Center). 4. Theater Trauma Systems CPGs familiarization training within past 3 months.
Those assigned to: FRSS/STP USMC Billets  Other Forward Resuscitative Care/Role 2 Assignments (i.e., FST)	NTTC Phase II or III Training	Within 2 years prior to deployment	1. <b>Mandatory</b> for FRSS/STP USMC Billets regardless of theater location - MCCDC ltr C134 of 13 Nov 2013. 2. USCENTCOM AOR: <b>Mandatory</b> One-time experience if going to Role 2 LM units USCENTCOM FY15-16 Theater Training Requirements DTG 241645A Mar 15	This Training Meets the EWSC Requirement  Carries AQD which is good for 2 years.  NTTC holds 11 iterations/year and has 24 seats/class (6 MC seats, 3 NC seats, and 15 HM seats). PAs may fill any of the empty class seats. Navy Medicine quota managed and funded by NMOTC  Will earn approximately 65 CME credits.  Highly recommended for other applicable specialty areas.	1. Other Service Trauma Training Center Completion 2. Theater Trauma Systems CPGs familiarization training within past 3 months.
All	Concussion/mTBI in the deployed setting Phase I Training	Within 3 months of deployment	<b>Mandatory</b> BUMED Policy Memo 6000 Ser M9/I11UN093000775 of 9 Sep 2011	N/A	<b>Courses offered on NKO:</b> 1. Traumatic Brain Injury 201: "Overview for Health Care Personnel" (NM-12-TBI201-1.0) <u>Target Audience:</u> All active duty providers and clinical support staff working in direct patient care areas where initial diagnosis and/or treatment of traumatic brain injury may occur. 2. Traumatic Brain Injury 301: "Battlefield Management for Mild Traumatic Brain Injury" (NM-12-TBI301-1.0) <u>Target Audience:</u> All deploying medical personnel. 3. Traumatic Brain Injury 401: "Primary Care, Assessment and Management for Concussion" (NM-12-TBI401-1.0) <u>Target Audience:</u> All primary care managers, all mental health providers, and other providers involved with TBI care.

TRAUMA TRAINING REQUIREMENTS FOR DEPLOYING NAVY MEDICAL DEPARTMENT PERSONNEL

Physician Assistants	Course	Timing	Requirement*	Special Information/Comments	Acceptable Alternatives
All	MACE/CPG/DoDI Course Phase II Training	Within 3 months of deployment	<b>Mandatory</b> USCENTCOM FRAGO 09-1734 Concussion/mTBI Management and Tracking USCENTCOM FY15-16 Theater Training Requirements DTG 241645A Mar 15	Training should be completed at parent command.  <u>Target Audience:</u> Deploying providers (physician, NP, PA, nurse, psychologist, OT, PT, SW, SLP, OT, and PT tech) and those who train deployers or hold key positions at the school houses.  **Commands wanting MACE trainers to be trained should contact NME/NMW WII representatives: <b>NMW-CAPT Jay Chambers</b> , 619-767-6664, Jay.E.Chambers.mil@mail.mil; <b>NME-CAPT Gail Manos</b> , 757-953-0464, Gail.Manos@med.navy.mil	1. TBI for Deploying Providers: A 2-day, tri-service, "train-the-trainer" course sponsored by the Army.  2. TBI for Deploying Providers course is a "train-the-trainer" course, offered quarterly at the National Intrepid Center of Excellence.
All Deploying Providers involved in direct patient care deployed to combined joint operations, Afghanistan	TCCC Phase I Training	Within 180 days of deployment	<b>Mandatory</b> BUMEDINST 1510.25 USFOR-A 211117Z Mar 14 FRAGO 14-067	This training provides standardized training for all trauma care at the point of injury and for tactical evacuation. Training should be completed at parent command or NEMTI by TCCC Trainers.  **Commands needing TCCC trainers, or for questions or concerns, please contact Ms. Bettye Love at 760-725-7121 x222 or Bettye.J.Love.civ@mail.mil.	1. Supervising Physicians throughout the CJOA-A will ensure all physicians, physician assistants, nurse practitioners, nurses, medics, and corpsmen are familiar with the current TCCC Guidelines of 7 May 2015.  2. Only Regional Medical Advisors have the authority to exempt medical providers from the course.  3. Every effort needs to be made to attend TCCC; however, if training cannot be completed, alternative courses are available: the Emergency War Surgery Course, Joint Combat Trauma Management Course, Expeditionary Medical Systems Training, training conducted at any Service specific trauma training center, or other equivalent course that meets minimum core requirements as determined through the Combat Trauma Surgery Committee of the Defense Medical Readiness Training Institute (DMRTI) prior to deployment.
All	ABLS Phase I Training	Within 2 years prior to deployment	Strongly Recommended - Not Required	Registration is good for 4 years  Course is offered through DMRTI Exportable Training.	None
All Orthopedic PAs	CESC Phase I Training	Within 2 years prior to deployment	Strongly Recommended - Not Required	Applies ONLY to PAs holding the 6HL AQD.	None
Hospital Corpsmen	Course	Timing	Requirement*	Special Information/Comments	Acceptable Alternatives
All	TCCC Phase I Training	Within 180 days of deployment	<b>Mandatory</b> BUMED INST 1510.25 USFOR-A 211117Z Mar 14 FRAGO 14-067	Provides standardized training for all trauma care at the point of injury and for tactical evacuation. Training should be completed at parent command or NEMTI by TCCC Trainers.  **Commands needing TCCC trainers, or for questions or concerns, please contact Ms. Bettye Love at 760-725-7121 x222 or Bettye.J.Love.civ@mail.mil.	1. <b>NOT Waiverable</b>  2. Supervising Physicians throughout the CJOA-A will ensure all physicians, PAs, NPs, nurses, medics, and HMs are familiar with the current TCCC Guidelines of 7 May 2015.
All	Field Medical Service Technician (FMST) School Phase I or III Training	Once in career, preferably within 2 years of accession	<b>Mandatory</b> for assignment with USMC  Strongly Recommended for all others.	FMST is currently 8 weeks of training and is held at the Field Medical Training Battalions at Camp Pendleton and at Camp Lejeune.	<b>NOT Waiverable</b>

TRAUMA TRAINING REQUIREMENTS FOR DEPLOYING NAVY MEDICAL DEPARTMENT PERSONNEL

Corpsmen	Course	Timing	Requirement*	Special Information/ Comments	Acceptable Alternatives
Those assigned to: FRSS/STP USMC Billets  Other Forward Resuscitative Care/Role 2 Assignments (i.e., FST)	NTTC  Phase II or III Training	Within 2 years prior to deployment	<b>Mandatory</b> for FRSS/STP USMC Billets regardless of theater location - MCCDC Itr C134 of 13 Nov 2013.  USCENTCOM AOR: <b>Mandatory</b> one-time experience if going to Role 2 LM units USCENTCOM FY15-16 Theater Training Requirements DTG 241645A Mar 15	NTTC holds 11 iterations/year and has 24 seats/class (6 MC seats, 3 NC seats, and 15 HM seats) Navy Medicine quota managed and funded by NMOTC  Highly recommended for other applicable specialty areas	<b>1. NOT Waiverable</b> if assigned to FRSS.  2. For E-5 and above, Theater Trauma Systems CPGs familiarization training within past 3 months.
All Deploying HMs	Concussion/mTBI in the deployed setting  Phase I Training	Within 3 months of deployment	<b>Mandatory</b> BUMED Policy Memo 6000 Ser M9/I11UN093000775 of 9 Sep 2011	N/A	<b>Courses offered on NKO:</b> 1. Traumatic Brain Injury 201: "Overview for Health Care Personnel" (NM-12-TBI201-1.0) <u>Target Audience:</u> All active duty providers and clinical support staff working in direct patient care areas where initial diagnosis and/or treatment of TBI may occur.  2. Traumatic Brain Injury 301: "Battlefield Management for Mild Traumatic Brain Injury" (NM-12-TBI301-1.0) <u>Target Audience:</u> All deploying medical personnel.  3. Traumatic Brain Injury 401: "Primary Care, Assessment and Management for Concussion" (NM-12-TBI401-1.0) <u>Target Audience:</u> All primary care managers, all mental health providers, and other providers involved with TBI care.
All Deploying HMs	MACE/CPG/DoDI Course  Phase II Training	Within 3 months of deployment	<b>Mandatory</b> USCENTCOM FRAGO 09-1734 Concussion/ mTBI Management and Tracking USCENTCOM FY15-16 Theater Training Requirements DTG 241645A Mar 15	Training should be completed at parent command.  <u>Target Audience:</u> Deploying providers (physician, NP, PA, nurse, psychologist, OT, PT, SW, SLP, OT, and PT technician) and those who train deployers or hold key positions at the school houses.  **Commands wanting MACE trainers to be trained should contact NME/NMW WII representatives: <b>NMW-CAPT</b> Jay Chambers, 619-767-6664, Jay.E.Chambers.mil@mail.mil; <b>NME-CAPT</b> Gail Manos, 757-953-0464, Gail.Manos@med.navy.mil	1. TBI for Deploying Providers: A 2-day, tri-service, "train-the- trainer" course sponsored by the Army.  2. TBI for Deploying Providers course is a "train-the-trainer" course, offered quarterly at the NICoE.
Those assigned to ERC roles/billets	JECC and Flight Medic Course (FMC)  Phase I or III Training	Within 3 years of deployment	<b>Mandatory</b> for HMs assigned to one of the 33 HM USMC ERC Billets  USMC ERC: MARADMIN; EnRoute Care Team Training Requirements; DTG 251454Z May 10	JECC is offered through the U.S. Army School of Aviation Medicine, Fort Rucker, Alabama. Navy registration is through NMOTC. Comm Telephone: (850) 452-2851 JECC Prerequisites: 1. FMC, a 4-week course also held at Fort Rucker. 2. ACLS. 3. Class II AC/HELO Flight Physical required prior to attending FMC/JECC.	1. <b>Not Waiverable</b> if assigned to one of the 33 HM USMC ERC billets. Currently, only USMC billets associated with STPs/FRSSs have coded ERC billets.  2. Must repeat JECC after 3 years unless actively engaged in the practice of critical care transport nursing (moonlighting as directed by Parent Command).

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## TRAUMA TRAINING REQUIREMENTS FOR DEPLOYING NAVY MEDICAL DEPARTMENT PERSONNEL

Collateral Duty	Course	Timing	Requirement*	Special Information/ Comments	Acceptable Alternatives
Infection Control Officer, as a collateral duty, for one licensed medical provider (Physician, PA, APRN, Registered Nurse) per each Role 2 plus, Role 3 Medical Treatment Facility	Infection Control Officer Training	12 months prior to deployment	<b>Mandatory</b> USCENTCOM FY15-16 Theater Training Requirements DTG 241645A Mar 15	U.S. Army Medical Department (AMEDD) offers a five day course open to all services titled "Infection Control in a Deployed Environment" (6A-F22). Course information available at: <a href="https://www.atrrs.army.mil/atrrscc/course.aspx">https://www.atrrs.army.mil/atrrscc/course.aspx</a> . Select new search and search for "6A-F22" in the course number.	None
Sexual Assault Medical Forensic Examiner (SAMFE) as a collateral duty. A minimum of one per each Role 2 plus and Role 3 Medical Treatment Facility.	SAMFE Course	Within 12 months of deployment	<b>Mandatory</b> DoDI 6495.02 USCENTCOM FY15-16 Theater Training Requirements DTG 241645A Mar 15	SAMFE includes: Sexual Assault Nurse Examiner (SANE), Sexual Assault Forensic Examiner (SAFE), Sexual Assault Examiner (SAE), and Forensic Examiner (FE). Must hold a current, active, valid and unrestricted license as a Physician, PA, APRN or RN. Documentation of 40 continuing education hours (CHE, CME, or CEU) of SAMFE didactic course instruction meeting DoDI 6495.02 and U.S. Department of Justice (DOJ) National Training Standards found at: <a href="http://www.ovw.usdoj.gov/sexualassault.htm">http://www.ovw.usdoj.gov/sexualassault.htm</a> . For course quota management, contact the Regional Sexual Assault Program Manager. <b>NMW</b> - LCDR Jerri Gray (619) 767-6669, <a href="mailto:jerri.m.gray.mil@mail.mil">jerri.m.gray.mil@mail.mil</a> ; <b>NME</b> - LCDR Melissa Kennedy (757) 953-7637, <a href="mailto:melissa.m.kennedy6.mil@mail.mil">melissa.m.kennedy6.mil@mail.mil</a> .	None

These requirements were developed by BUMED per CENTCOM guidance regarding both Standard and Non-Standard Forces deploying to the CENTCOM AOR and supported by BUMEDINST 1500.15E. The purpose of this document is to annotate Trauma Training Requirements needed for deployment and, as such, consist of Medical Readiness Requirements that should be proactively maintained.

**Additional medical requirements:**

**Clinical Practice Guidelines (CPGs):** All Medics/Corpsmen/Medical Technicians, Physicians, PA's, APRNs and Nurses will have a working knowledge of current approved CPGs and how to access their location within 180 days prior to deployment. CPGs can be accessed on the NIPR at: <http://www.usaisr.amedd.army.mil/cpgs.html>.

**Fresh Whole Blood Training (FWB):** FWB pre-screening, collections and transfusion training for Corpsmen/Medical Technicians, Nurses, PAs, APRNs, Physicians and any other personnel as identified by CENTCOM components. All CENTCOM components are responsible for ensuring training is completed prior to performance of whole blood collection activities within the AOR.

**Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) Training:** One primary and one alternate for each Role 2 and Role 3 facility.

\* Chief, BUMED has designated Specialty Leaders (SLs) as his agents to adjudicate whether prior training or experience meets requirement. Waivers are intended to allow flexibility in meeting a requirement, since it is the skills we are interested in, rather than the specific course taken to acquire the skill. Waivers are NOT to be used to allow deployment of untrained individuals! CENTCOM requirements cannot be waived by BUMED.

\*\* SL must still grant a waiver. These alternatives simply provide guidance on other courses that may serve as the basis for requesting a waiver. The SL has the final decision regarding the adequacy of medical training of the individual for an assignment. An e-mail from the SL is sufficient evidence for Command to document in DMHRSi that a waiver has been granted.

## TRAUMA TRAINING REQUIREMENTS FOR DEPLOYING NAVY MEDICAL DEPARTMENT PERSONNEL

### **Joint Taxonomy of Care (previously echelons of care)**

Emergency Forward Care - First Responder = Role 1, Basic Emergency/Trauma Care

Forward Resuscitative Care = Role 2 Light Maneuver, resuscitation to damage control surgery. No bed/hold capacity.

Role (2E) is a medical treatment facility capability to stabilize post-surgical cases for evacuation. Casualty Receiving and Treatment Ships, Carriers, and USMC Surgical Companies

Theater Hospitalization = Role 3

ERC

ACRONYMS

ABLS	Advanced Burn Life Support
AC/HELO	Aircrew/Helicopter
ACS	American College of Surgeons
ACLS	Advanced Cardiovascular Life Support
AHA	American Heart Association
AMEDDC&S	Army Medical Department Center and School
AO	Area of Operations
AOR	Area of Responsibility
APRN	Advanced Practice Registered Nurse
AQD	Additional Qualification Designator
ATLS	Advanced Trauma Life Support
ATTC	Army Trauma Training Center
BUMED	Bureau of Medicine and Surgery
C4	Combat Casualty Care Course
CCMD	Combatant Command
CESC	Combat Extremity Surgery Course
CJOA-A	Combined Joint Operations Area - Afghanistan
CME	Continuing Medical Education
CO	Commanding Officer
CPG	Clinical Practice Guideline
CSTARS	Center for Sustainment and Trauma Readiness Skills
DMHRSi	Defense Medical Human Resources System Internet
DMRTI	Defense Medical Readiness Training Institute
DoDI	Department of Defense Instruction
EMF	Expeditionary Medical Facility
ENA	Emergency Nurses Association
ERC	EnRoute Care
EWSC	Emergency War Surgery Course
FMC	Flight Medic Course
FMST	Field Medical Service Technician
FRAGO	Fragmentary Order
FRSS/STP	Forward Resuscitative Surgical System and Shock Trauma Platoon
FST	Fleet Surgical Team
FWB	Fresh Whole Blood
FY	Fiscal Year
HM	Hospital Corpsman
HSAP	Health Services Augmentation Platform
JECC	Joint EnRoute Care Course
JFCTMC	Joint Forces Combat Trauma Management Course
LM	Light Maneuver
MACE	Military Acute Concussion Evaluation

NEMTI	Naval Expeditionary Medical Training Institute
NICoE	National Intrepid Center of Excellence
NC	Nurse Corps
NKO	Navy Knowledge Online
NME	Navy Medicine East
MC	Medical Corps
MCCDC	Marine Corps Combat Development Center
mTBI	Mild Traumatic Brain Injury
NMOTC	Navy Medicine Operational Training Center
NMW	Navy Medicine West
NP	Nurse Practitioner
NTTC	Navy Trauma Training Center
OCONUS	Outside Contiguous United States
OIC	Officer in Charge
OT	Occupational Therapist
PA	Physician Assistant
PHTLS	Pre-Hospital Trauma Life Support
PT	Physical Therapist
RN	Registered Nurse
SAFE	Sexual Assault Forensic Examiner
SAMFE	Sexual Assault Medical Forensic Examiner
SANE	Sexual Assault Nurse Examiner
SL	Specialty Leader
SLP	Speech Language Pathologist
SW	Social Worker
TBI	Traumatic Brain Injury
TCCC	Tactical Combat Casualty Care
TNCC	Trauma Nurse Core Course
USCENTCOM	United States Central Command
USMC	United States Marine Corps
WII	Wounded, Ill, and Injured