Uploaded to VFC Website
~October 2012~

This Document has been provided to you courtesy of Veterans-For-Change!

Feel free to pass to any veteran who might be able to use this information!

For thousands more files like this and hundreds of links to useful information, and hundreds of "Frequently Asked Questions, please go to:

Veterans-For-Change

Veterans-For-Change is a 501(c)(3) Non-Profit Corporation
Tax ID #27-3820181

If Veteran's don't help Veteran's, who will?

We appreciate all donations to continue to provide information and services to Veterans and their families.

https://www.paypal.com/cgi-bin/webscr?cmd=_s-xclick&hosted_button_id=WGT2M5UTB9A78

Note: VFC is not liable for source information in this document, it is merely provided as a courtesy to our members.

ARCENT MEDCOM MED MANAGEMENT OF COMBAT CHEM AND BIO CASUALTIES

Subject: ARCENT MEDCOM MED MANAGEMENT OF COMBAT CHEM AND BIO CASUALTI

Unit: ARCENT

Parent Organization: CENTCOM

Box ID: BX000481

Folder Title: COMMAND REPORTS 244TH MEDICAL GROUP COMMAND REPORT

Document Number: 20

Folder SEQ #: 13

ARCENT MEDCOM MEDICAL 14ANAGEMENT OF COMBAT
CHEMICAL AND BIOLOGICAL CASUALTIES

I.	INTRODUCTION COURSE OVERVIEW STAFF INTRODUCTION	LTC BAUER	0830-0845,
II.	NBC OVERVIEW	lLT ROKKE	0845-0935
III.	COFFEE BREAK		0935-0945
IV.	THE PHYSIOLOGICAL EFFECTS OF NBC AGENTS	LTC ELLIS	0945-1115
V.	NBC CASUALTY DECONTAMINATION	SSG DOLPH	1115-1205
VI.	LUNCH		1205-1300
VII.	THE EMERGENCY MEDICAL CARE AND TREATMENT OF NBC CASUALTIES	LTC BAUER	1300-1430
VIII.	QUESTIONS AND ANSWERS	STAFF	1430-1500
IX.	SUMMARY	LTC BAUER	1500-1515

Document 1 f:/Week-32/BX000481/COMMAND REPORTS 244TH MEDICAL GROUP COMMAND REPORT/arcent medcom med management of combat chem and :1011961540133
Control Fields 17
File Room = aug96_declassified
File Cabinet = Week-32
Box ID = BX000481
Unit = ARCENT
Parent Organization = CENTCOM
Folder Title = COMMAND REPORTS 244TH MEDICAL GROUP COMMAND REPORT
Folder Seq # = 13
Subject = ARCENT MEDCOM MED MANAGEMENT OF COMBAT CHEM AND
Document Seq # = 20
Document Date =
Scan Date =
Queued for Declassification = 01-JAN-1980
Short Term Referral = 01-JAN-1980
Long Term Referral = 01-JAN-1980
Permanent Referral = 01-JAN-1980
Non-Health Related Document = 01-JAN-1980
Declassified = 11-OCT-1996

**

Bauer's Raiders: Preparing Medical Personnel for War

Captain (Dr.) Doug Rokke
Fall 1992
330th Medical Brigade, U.S. Army Reserve

The preparations for war take many forms. Infantry soldiers learn and practice their combat skills, truck drivers practice maneuvering their rigs to make sure they can deliver supplies, and medical personnel prepare to treat the expected combat casualties. In many cases the selected preparations are driven by intelligence reports. Prior to the start of Operation Desert Storm military intelligence reports and threats issued by President Saddam Hussein suggested that the potential existed for use of nuclear, biological, and chemical (NBC) chemicals.

As we prepared for the battle in the Deserts of Saudi Arabia, Kuwait, and Iraq, Col. D.G. Tsoulos, Commander 3d U.S. Army Medical Command and other unit commanders recognized the need to ensure that their personnel could provide adequate emergency medical care to conserve the fighting strength in an NBC environment. This need required an assessment of medical capabilities. Four areas were identified in which additional training was needed.

Identification of Training Needs

First, an assessment of emergency medical response capabilities in the staging areas located within Saudi Arabia indicated the need to develop and implement a plan to respond to medical emergencies resulting from combat or disease and non-battle injuries (DNBI). Second, an assessment of medical personnel arriving in Southwest Asia indicated that many medical personnel did not have the knowledge, skills, and attitudes needed to provide medical care for the expected nuclear, biological, and chemical (NBC) warfare casualties. Third, the need to provide a NBC defense refresher course for operations personnel that was designed specifically for the expected NBC problems in the Persian Gulf was identified. Fourth, the need to design and construct decontamination facilities, prepare standard operating procedures, and train personnel to provide decontamination was identified. In order to provide the identified training a special operations team was authorized.

Bauer's Raiders

Consequently, Bauer's Raiders, the 3d U.S. Army Medical Command theater nuclear, biological, and chemical warfare special operations planning and teaching team was formed. Bauer's Raiders was led by COL (Dr.) Ulrich Bauer, currently 42d Division surgeon. The other members included COL.(Dr.)Andras Korényi-Both, a physician; COL. (Dr.) Thomas Little, a physician; LTC (Dr.) Harry Ellis, a toxicologist; Major John Shanks, a registered nurse; CPT (Dr.) Doug Rokke, a technology educator and physicist; CPT (RET) Charles Blisset, an engineer; MSG Charles Fails, 3rd U.S. Medical Command NBC Operations Section Chief; and SFC Rolla Dolph, a combat medic and NBC operations sergeant. Each team member had

prior combat experience and was a qualified medical and NBC instructor.

The first priority was to provide emergency medical care for units as they arrived and prepared for combat in echelon above corps areas near Riyadh, Saudi Arabia. In response, Bauer's Raiders developed and implemented an emergency medical response force at Eskan Village and in the vicinity of Riyadh. Civilian emergency medical personnel who were now on active duty and active component counterparts were identified and emergency medical sites were identified, supplied, and staffed to ensure rapid delivery of emergency medical care.

The second priority was to develop and provide the identified training. The training covered four areas. Bauer's Raiders developed and taught the Operation Desert Storm combat lifesaver short course; the medical management of chemical, and biological casualties course (a modified Aberdeen Proving Grounds course); and the Operation Desert Storm NBC defense/ 54B refresher course. They developed standard operating procedures for decontamination of and treatment of NBC casualties. This team also designed and supervised the construction of the NBC decontamination facilities and provided operations assistance throughout the echelons above corps, corps, and coalition forces.

Combat Lifesaver Course

The Desert Storm combat lifesaver course was designed around the standard emergency medical technician refresher course approved by the American College of Orthopedic Surgeons and Department of Transportation. The objective was to provide non-medical personnel with the skills necessary to sustain life until advanced medical care could be obtained. U.S. Army and U.S. Air Force personnel stationed in the vicinity of Riyadh, Damaam, King Kahlid Military City, and along the Tap Line Road completed the course. Mission and time constraints necessitated that the course length not exceed one duty day. Consequently, instruction focused on essential emergency medical skills. An introduction to intravenous therapy and emergency first aid related specifically to problems in Southwest Asia were also included. After action reports indicate that seven out of ten casualties were initially treated by soldiers who had completed the combat lifesaver course.

Medical Management of Chemical and Biological Combat Casualties Course

The medical management of chemical, and biological casualties course (M^2 C^3) was based on the course taught at Aberdeen Proving Grounds. The course consisted of a theater specific threat briefing; discussion of the signs, symptoms, and consequences of chemical and biological agents; an overview of decontamination procedures; and an in depth discussion of emergency medical care procedures. Over 800 medical personnel completed the ten hour course prior to initiation of the ground war phase of Operation Desert Storm.

NBC Refresher Course

The 54B / NBC defense refresher course was modeled after the course developed by the 5035th USARF school and 4th U.S. Army Readiness Group. The sixteen hour course consisted of an introduction to projected Operation Desert Storm NBC tasks; a theater specific threat briefing; anatomy and physiology; detection; NBC reporting procedures; decontamination; sustainment training; equipment maintenance; NBC supplies; development, distribution, and use of standard operating procedures; questions and answers; and a summary. Approximately 100 NBC operations personnel assigned to the 3d U.S. Army Medical Command (MEDCOM), 3d U.S. Army Personnel Command (PERSCOM), and the U.S. Central Command (CENTCOM) completed the refresher course.

Decontamination

The need to ensure adequate decontamination resulted in the development of a standard operations procedure (enclosed) consisting of an introduction and sections on (a) medical support in chemical operations, (b) planning for the management and treatment of contaminated casualties, (c) site selection, (d) identification of decontamination supplies (medical and non-medical), (e) specific decontamination procedures, and (f) fabrication of the decontamination stretcher. The objective of this SOP was to provide medical personnel with the guidance needed to complete gross decontamination and provide emergency medical stabilization of NBC casualties. Over 1200 medical personnel were trained and certified to staff NBC decontamination stations prior to the initiation of the ground phase of Operation Desert Storm.

Impacts

The training programs developed and taught by Bauer's Raiders contributed to the success of Operation Desert Storm. While many military training programs are not discussed over the civilian and military radio system, the NBC training programs were discussed and many individuals decided to attend the courses as a result of the press releases that were distributed and interviews that were conducted and broadcast by the Armed Forces Radio Network. Some command personnel think that one factor that influenced Iraq not to utilize chemical and biological weapons was the readiness of U. S. military personnel to operate in and provide the necessary medical care in an NBC environment.

Since the end of the Persian Gulf War, Bauer's Raiders and trained medical personnel have trained additional military personnel and many civilian medical, fire, and police personnel. Feedback from U.S. Army, U.S. Air Force, and civilian emergency response personnel obtained during training conferences indicate that the knowledge and skills that were acquired have been beneficial in improving civilian and military emergency response during hazardous materials incidents.

Conclusion

The most important lesson to be learned is that specific training needed to sustain the fighting force must be developed and implemented to meet combat and non-combat needs during any military operation and that this knowledge is useful in military and civilian incidents.

**

OPERATION DESERT STORM:THE 3d U.S. ARMY CAPTURED ENEMY EQUIPMENT PROJECT

CPT DOUG ROKKE

COL DAVID LINDSAY

1992 report

The overwhelming success of combat activities during the 100 hour ground offensive resulted in the capture of Iraqi military equipment by U.S. Army units. As U. S. Army units withdrew from Iraq and Kuwait units brought various pieces of equipment back to cantonment areas and equipment collection points in Saudi Arabia. Theater collection points were established at King Kalid Military City, Bastogne, and King Abduhl Aziz Air Force Base at Dhahran. The collection point personnel were tasked with collecting, inventorying, and forwarding captured equipment to fulfill Department of Defense and Department of the Army requirements.

Department of the Army requirements for use of captured equipment included intelligence analysis, training, historical, and various other programs. The U.S. Army Armament, Munitions, and Chemical Command (AMCCOM) is the responsible agent for the U.S. Army in keeping an audit trail by type and serial number of all captured enemy equipment returned as unit memorabila. All equipment no longer required for intelligence, training, or unit memorabila purposes will be reported to the Center of Military History and shipped to Anniston Army Depot for storage or distribution as directed by the Center of Military History. Although previous procedures for handling captured equipment existed, theater policy evolved to ensure that unit and historical requirements were met. The 22d Support Command (SUPCOM) under the command of LTG "Gus" Pagonis disseminated guidelines for disposal of captured equipment. These guidelines specified the types and quantities of captured equipment that commands and units were permitted. Each Corps headquarters was allowed three items. SUPCOM headquarters was allowed ten items. Each division headquarters was allowed ten items. Each separate brigade/regiment and each Echelons Above Corps major subordinate command were allowed three items. All other units assigned to the 3d U.S. Army that possessed a Unit Identification Code were allowed three items (excluding major end items such as vehicles). Units below battalion size were allowed only to request approval for individual weapons or small unit equipment. Major commands could request approval to retain individual weapons; individual and unit equipment; and major end items such as tanks, armored personnel carriers, trucks, and artillery. Requests to retain the items were initiated by each unit commander, consolidated by their higher headquarters, and forwarded to the 22d SUPCOM for processing and obtaining approval from Headquarters, Department of the Army. Each commander was responsible to ensure that each piece of equipment had been inspected and

cleared by personnel assigned to JCMEC (Joint Captured Materiel and Exploitation Center Personnel), Chemical/Radiological, U. S. Customs, and U. S. Department of Agriculture inspection teams. The preferred inspection sequence was in the order listed. The purpose of this sequence was to reduce loss of equipment of intelligence and technical value, to reduce the probability of exposure to radiological or chemical hazards, to ensure customs requirements were met, and to ensure that all agricultural threats were removed from the equipment prior to shipment.

JCMEC team personnel inspected and retained control of all equipment of intelligence and technical value. This equipment was then forwarded in compliance with DA directives for analysis.

Chemical/radiological team personnel assigned to the Army Materiel Command, Southwest Asia, SWA, performed three functions. The first function was to survey all equipment to ensure that any piece that a unit desired to retain was not contaminated by depleted uranium. The second function was to complete a radiological assessment to identify which, if any, equipment components posed a radiological hazard. The third function was to identify any chemical hazards.

Equipment intelligence possessed prior to Operation Desert Storm indicated that Warsaw Pact equipment utilized radiological paints to provide dial and gage illumination and other radiological materials for fire control systems. A decision was made by the U.S. Central Command Radiologist, COL Victor Ghaid, currently Chief of Radiology, Walter Reed Army Medical Center, and 1LT Rokke that radiological components contained in equipment destined for intelligence or training purposes would be encapsulated, while any other radiological components in equipment destined for units or museums would be removed prior to release for shipment to continental United States or locations outside the continental United States. The governing factor was end use and radiological control capabilities of the receiving agency. This decision ensured that the benefits of retaining items of captured equipment would fulfill all needs without endangering personnel, facilities, wildlife, or violating current regulatory guidelines.

The radiological assessment verified that vehicle instrument dials, artillery sighting dials, and various switches contained potentially hazardous levels of radioactive materials such as radium and tritium. One example is the ZSU, 23 MM, 4 barreled antiaircraft gun (see photograph). The azimuth and elevation sighting dials were found to contain a potentially hazardous level of radium paint. Fortunately, the hazard could be minimized by encapsulation or eliminated by removal of the elevation and azimuth dials assemblies. Consequently, all elevation and azimuth dials were removed from ZSU's prior to granting waiver approval except for ZSU's remaining under documented control of qualified radiological protection officers. The radium paint on dials on exempt ZSU's was encapsulated to prevent removal or peeling. All removed components posing any level of radiological hazard were disposed of in accordance with international guidelines for radioactive waste disposal.

Chemical assessment identified asbestos which could be controlled by encapsulation or eliminated by removal. The possibility that vehicle fluids may be hazardous indicated that fluids should be drained prior to shipment. All removed hazards were properly packaged and disposed of in accordance with established guidelines.

Every effort was made to discourage unit personnel from bringing back battle-damaged equipment that was contaminated by depleted uranium. The team inspected each piece of equipment and confiscated any contaminated items. Some units desired to retain battle-damaged equipment, on which the depleted uranium-contamination could not be removed except by specialized personnel utilizing very expensive techniques. Soon, the leaders understood the scope of the problem and opted for safer momentos.

The historical team consisted of experts in military history, weapons design, equipment design, and document analysis. The historical team traveled throughout the theater to identify and collect any items of historical value. The objective of the historical inspection was to identify, collect, and forward at least one example of each piece of individual equipment, unit equipment, clothing, major end item, and pertinent document for display and analysis in the DA museum system. The historical team eventually consolidated their operations at the Port of Damman where they sorted, cleaned, repaired, and packed the equipment for shipment to the continental United States or other approved locations.

After a unit was granted approval to retain a piece of equipment, U.S. Customs (military-police personnel and civilians), and U.S. Department of Agriculture personnel (civilians) inspected each item. Military police personnel verified that all munitions were removed, no other military contraband was present, and that any items of intelligence value were removed and secured for processing. U.S. Customs agents ensured that all documentation for import into the continental United States was completed, each item was inventoried and packaged appropriately, and shipped in accordance with U. S. laws and regulations. The last, and most critical, inspection was completed by U.S. Department of Agriculture agents. The protection of our environment is vital to our national survival. Therefore, each item underwent strict cleaning to remove any soil, pests, and other materials that may endanger civilians, military personnel, our environment, or our agricultural system. Upon completion of all requirements, each unit was permitted to ship the designated equipment, with their other unit equipment, in CONEX containers or as individual items. Captured equipment has been shipped back to the National Training Center, various branch schools and training sites, units, and U.S. Army museums.

Some of the items were antiaircraft guns, tanks, personnel carriers, trucks, missiles and associated launchers, artillery, individual and crew served weapons, command trailers, wheeled vehicles, and individual equipment.

The possible benefits of the captured equipment project are significant. If the items of captured equipment are used properly then they will enhance unit training, esprit de corps, training at the National Training Center and branch schools, and dramatically enhance our intelligence and technical knowledge base. Consequently, the combat readiness of U.S. Army units will be improved.

The greatest chance for success of the project is due to the interaction among personnel assigned to the 22d Support Command Headquarters, 3d U. S. Army Military Intelligence Command, 3d U.S. Army Medical Command, the 144th Heavy Maintenance Company, the 822d Military Police Company, the Army Materiel Command, the U.S. Army Museum, U.S. Customs, and the U.S. Department of Agriculture. The professionalism and technical expertise of everyone involved helped ensure success. The

captured equipment project is one more example of the unique collaboration between units and agencies that made Operation Desert Storm a success.