



# A Deployed Combat Support Hospital & A Civilian Level I Trauma Center: What's the Difference?

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# Disclaimer



# PRIMARY TF 399<sup>th</sup> CSH MISSION

TF 399 will deploy to the Iraqi Theatre of Operations IOT provide Comprehensive Level III Combat Health Service Support to Coalition and Iraqi Forces on an area basis in MND-North and MNF-W.

- Save lives.
- Provide 'state-of-the-art' medical care.
- Maximize early Return To Duty.

***"CONSERVE THE FIGHTING STRENGTH"***



# The Hospitals

- Boston Medical Center
  - Level One Trauma Center
  - ~500 Inpatient Beds,  
50 ED Bays
  - 130,000 Pt. Encounters
  - ~ 2000 Admissions/year
  - 2066 Surgical Procedures
- 399<sup>th</sup> Combat Support Hospital
  - Echelon III MTF
  - 32 & 28 Bed Split Based Units,  
16 ED Bays
  - 30,000 Patients Seen
  - Over 2200 Patients Admitted
  - Over 3000 Surgical Procedures
  - Transported 207 Pts. on 176 Flights
  - 12 Military Working Dogs





TURKEY

**TF 399th CSH (Mosul and Al Asad)** 12 ICU beds  
20 ICW beds



**TF 399th CSH (Tikrit)**  
8 ICU beds  
20 ICW beds

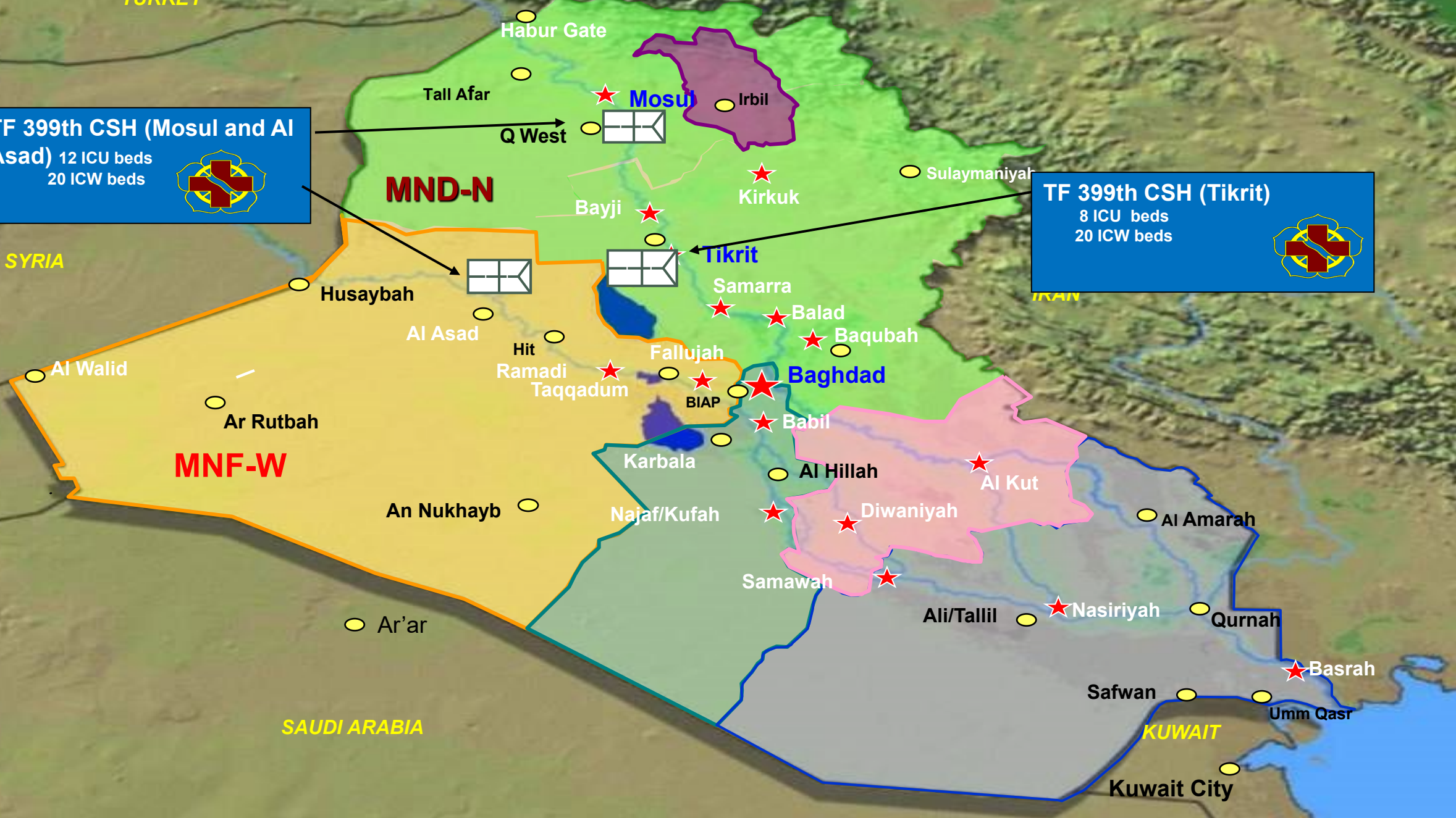


SYRIA

IRAN

SAUDI ARABIA

KUWAIT



# Hospital Configuration – Split Based Ops

- Mosul/Al Asad – 32 beds
  - 12 ICU, 20 ICW, 4 ORs, 10 Trauma Bays
  - Out pt. Clinic, PT/OT, MH, CH
- Tikrit – 28 beds
  - 8 ICU, 20 ICW, 3 ORs, 6 Trauma Bays
  - Out pt. Clinic, PT/OT, MH, CH
- Flight Nurse Capability
  - 6 at each site



# Capabilities

- Boston Medical Center

- 64 slice 3D capable CT
- CT angiography
- MRI/A
- Interventional Radiology
- CVVH/Hemodialysis
- ICP/EVD/Licox
- Rotobed/Prone positioning
- Pos/Neg pressure rooms

- 399<sup>th</sup> Combat Support Hospital

- 6 slice Toshiba CT scanner
- Ultrasound
- Drager Ventilator
- Alaris Pumps
- Pt. Controlled Analgesia (PCA)
- No angiography
- No MRI
- No Neurosurgery
- No Isolation



# Physician Specialties

## Medical

- Emergency Medicine
- Family Practice
- Internal Medicine
- Critical Care
- Pediatrics
- Psychiatry
- Radiology
- Pulmonology
- Cardiology

## Surgical

- General Surgery
- Vascular/Thoracic Surgery
- Orthopaedic Surgery
- Orthopaedic Hand Surgery
- Oral Maxillofacial Surgery
- Obstetrics/Gynecology
- Anesthesiology







OR

EMT

ICU

ICW

MAERSK





ICW

OR

ICU

EMT

AWAY  
ARMY





CSH

LSA



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# Mortar Strikes – Indirect Fire (IDF)



47th CSH Mosul

IDF 12 OCT 06

12 OCT 06  
IDF 12 OCT 06

IDF 12 OCT 06

IDF 12 OCT 06

DFAC  
IDF 12 OCT 06

? OCT 06  
UXO

IDF 12 OCT 06  
IDF 12 OCT 06

IDF 12 OCT 06



38SLF 33777 20884

Iraq

Baghdad / Taji

2D View

3D View

Connect



# Mortar Strikes – Indirect Fire (IDF)



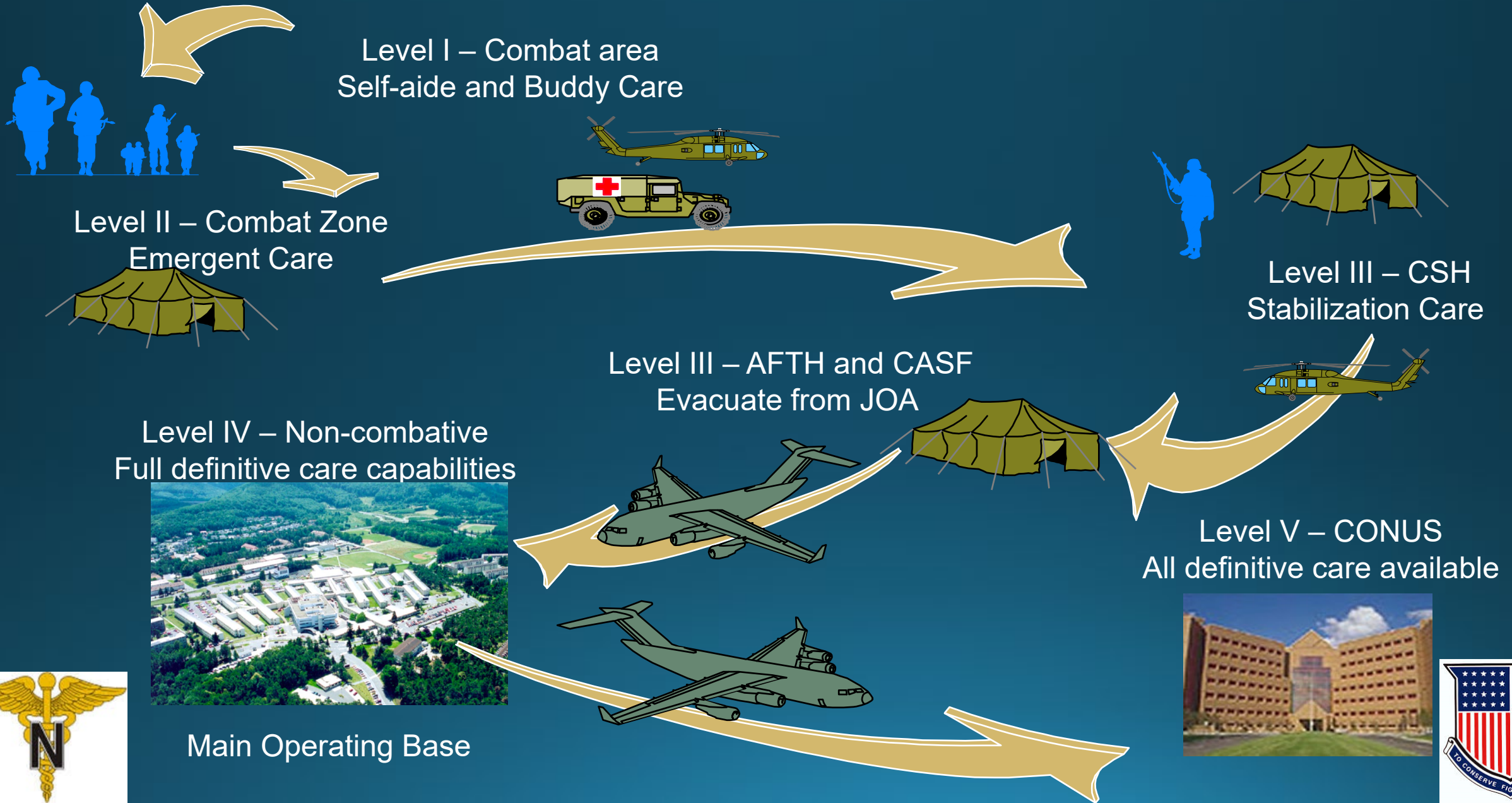


# Airfield Mortar Strike





# Levels of Care Overview



Level I – Combat area  
Self-aid and Buddy Care

Level II – Combat Zone  
Emergent Care

Level III – CSH  
Stabilization Care

Level III – AFTH and CASF  
Evacuate from JOA

Level IV – Non-combative  
Full definitive care capabilities

Level V – CONUS  
All definitive care available

Main Operating Base





# Ground Ambulance





# Air Ambulance

















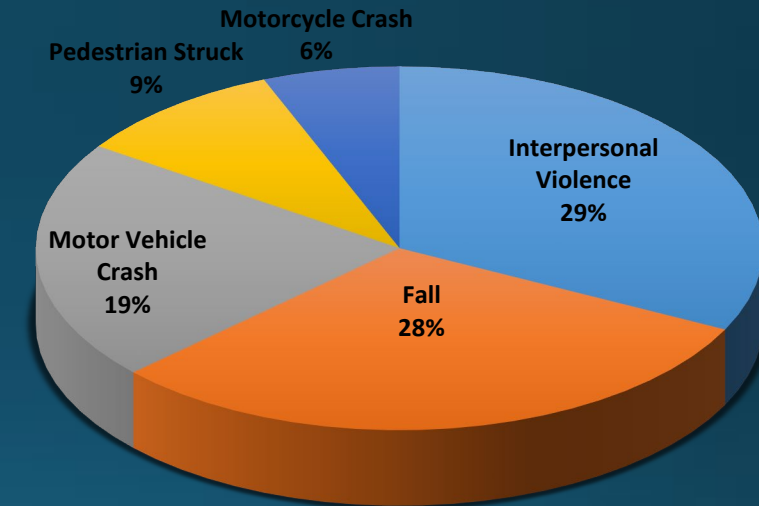
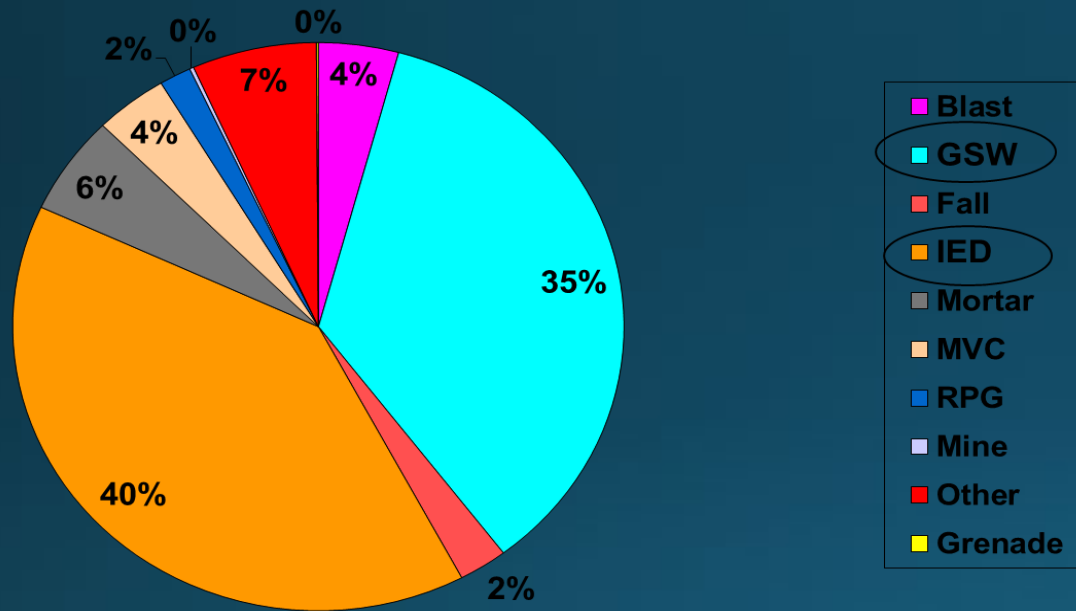
# Military

# vs.

# Civilian

## Mechanisms of Injury

### Trauma Top 5 Mechanisms



# Mechanism of Injury



# Mechanism of Injury

## **Suicide bomber detonates two bombs in Tal Afar; 22 dead, 30 wounded**

BAGHDAD (CNN) -- A suicide bomber killed 22 and wounded 30 at a car lot in the northern Iraqi city of Tal Afar after simultaneously detonating explosives strapped to his body and in a car, authorities in the city said.

A hospital official released the casualty figures. Police said the double bombing took place around 11 a.m. (3 a.m. ET).

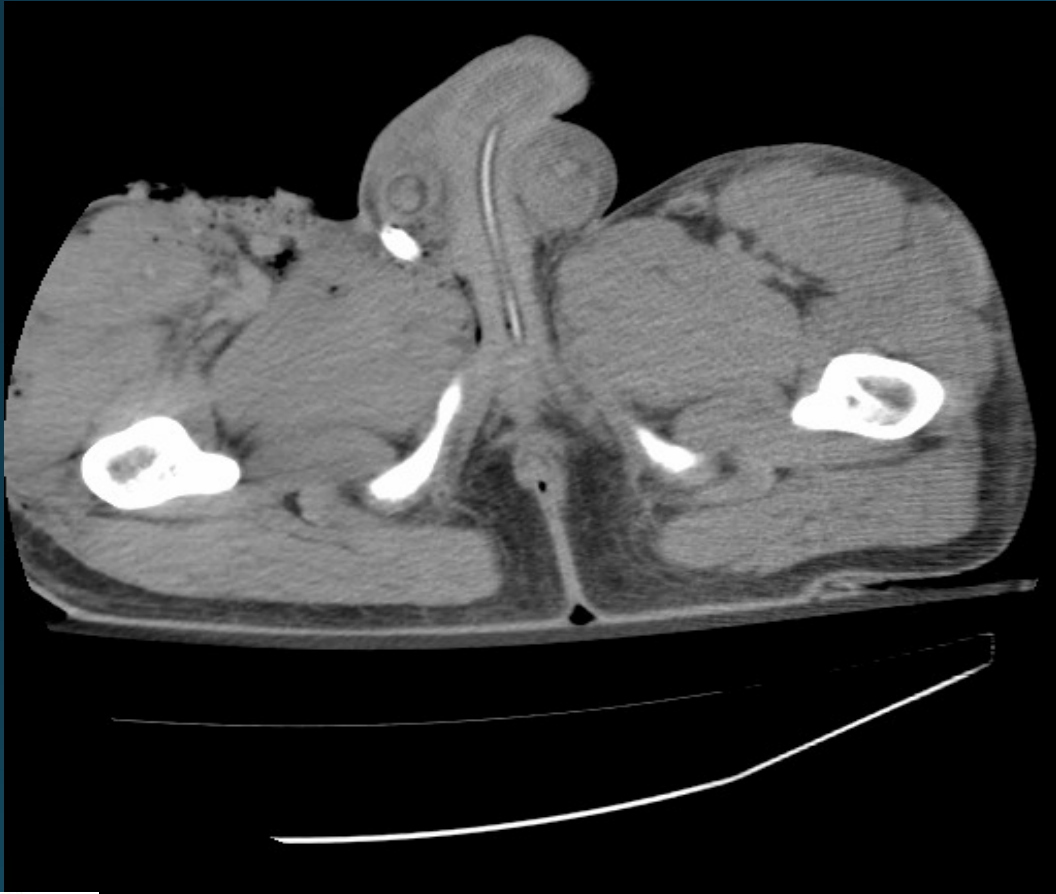
Police said the attacker parked his car and then got out. He detonated himself after he set off the car bomb. Like Baghdad and other cities in Iraq, Tal Afar has endured Sunni-Shiite sectarian fighting. However, it isn't clear what the motive was for this attack.

Tal Afar is a largely Turkmen city in Nineveh province, located about 250 miles (400 km) north of Baghdad and about 90 miles from the Syrian border. (Posted 8:46 a.m.)





# Mechanism of Injury





# Multiple Casualties – Multiple Teams



# Civilian/Military Contrasts

## Civilian

- Continuity/Follow Up
- End of Day/Go Home
- Family Life/Diversion
- Relatively Safe Environment
- Plan for career/long term goals

## Military

- Episodic/Quick Evac
- 24/7 Always available
- 2<sup>nd</sup> Family/Closer Bonds
- Physical Danger
- Shared Sacrifice/Shared Success





# Reporting and Accreditation



THE  
**COMMITTEE**  
ON **TRAUMA**

AMERICAN COLLEGE  
OF SURGEONS





“At the beginning of a war, the flow of knowledge is from the civilian world into the military. After a couple of years, it is from the military to civilian.” COL John Holcomb







### PI/CPGs

Performance Improvement

PI Corner: Hot Topics

Patient Safety

Projects & Initiatives

Assessments, Reports, & Surveys

PI services

Clinical Practice Guidelines

Damage Control Resuscitation

JTS Center for COVID-19 Resources

CPG Training Presentations



## JTS Clinical Practice Guidelines (CPGs) Index

CPG Title	Section
Airway Management for Prolonged Field Care, 01 May 2020	Prolonged Casualty Care
Airway Management of Traumatic Injuries, 17 Jul 2017	Surgical Trauma Care
Amputation: Evaluation and Treatment, 01 Jul 2016	Surgical Trauma Care
(High Bilateral) Amputations and Dismounted Complex Blast Injury, 01 Aug 2016	Surgical Trauma Care
Analgesia and Sedation Management during Prolonged Field Care, 11 May 2017	Prolonged Casualty Care
Anesthesia for Trauma Patients, 05 Apr 2021	Surgical Trauma Care
Aural Blast Injury/Acoustic Trauma and Hearing Loss, 27 Jul 2018	Medical Care
(Prehospital) Blunt Thoracic Trauma, 13 Mar 2016	Prolonged Casualty Care Air Transport
Burn Care, 11 May 2016	Surgical Trauma Care
Burn Wound Management in Prolonged Field Care, 13 Jan 2017	Prolonged Casualty Care
CPG Development Process, 01 Dec 2017	Documentation, Other
Catastrophic Non-Survivable Brain Injury, 27 Feb 2017	Surgical Trauma Care
Cervical and Thoracolumbar Spine Injury Evaluation, Transport and Surgery in the Deployed Setting, 19 Jun 2020	Surgical Trauma Care
Chemical, Biological, Radiological and Nuclear (CBRN) Injury Part I: Initial Response to CBRN Agents, 01 May 2018	Chemical/Environmental Care
Chemical, Biological, Radiological and Nuclear (CBRN) Injury Response Part 2: Medical Management of Chemical Agent Exposure, 23 Jan 2019	Chemical/Environmental Care

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CPGs are evidence-based and developed with subject matter experts in the military and civilian communities, deployed clinicians, trauma care physicians, surgical consultants, and JTS leaders. The JTS CPG standards and recommendations have found their way into the civilian medical communities. CPGs are freely available for

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2021 CPGs

Guidelines Jul-Dec 2021



to view »

# Innovations!





















# Thank You!

