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Postgraduate Certificate in Military Trauma Care

## Expeditionary Medicine

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**Expeditionary Medicine:** Expeditionary medicine refers to medical care provided in austere or remote environments, often in the context of military operations, humanitarian missions, or disaster relief efforts. This specialized field focuses on delivering healthcare in challenging conditions where resources may be limited, and medical personnel must adapt to unique circumstances.

**Military Trauma Care:** Military trauma care encompasses the management of injuries sustained in combat or other high-risk environments. It involves rapid assessment, stabilization, and treatment of traumatic injuries to maximize outcomes and minimize morbidity and mortality among military personnel.

**Postgraduate Certificate:** A postgraduate certificate is a qualification typically obtained after completing a bachelor's degree. It provides advanced knowledge and skills in a specific area of study, such as military trauma care, and is designed to enhance professional expertise and career opportunities.

Key Terms in Expeditionary Medicine and Military Trauma Care:

- 1. Triage:** Triage is the process of prioritizing patients based on the severity of their injuries and the available resources. It helps medical personnel allocate care efficiently and effectively, ensuring that those with the greatest need receive treatment first.
- 2. Hemorrhage:** Hemorrhage refers to excessive bleeding, which can be life-threatening if not controlled promptly. In military trauma care, controlling hemorrhage is a critical priority to prevent hypovolemic shock and improve outcomes for injured individuals.
- 3. Airway:** The airway is the passage through which air enters and leaves the lungs. Maintaining a patent airway is essential in trauma care to ensure adequate oxygenation and ventilation, especially in cases of severe injuries or compromised respiratory function.
- 4. Breathing:** Breathing involves the process of inhaling oxygen and exhaling carbon dioxide. Monitoring and supporting respiratory function is crucial in trauma care to address airway obstructions, chest injuries, or respiratory distress that can compromise oxygen delivery to tissues.
- 5. Circulation:** Circulation refers to the movement of blood through the body, delivering oxygen and nutrients to tissues and removing waste products. Assessing and optimizing circulation is vital in trauma care to prevent shock, organ failure, and other complications associated with inadequate perfusion.
- 6. Shock:** Shock is a life-threatening condition characterized by inadequate tissue perfusion and oxygen delivery. In trauma care, prompt recognition and management of shock are essential to stabilize patients and prevent further deterioration.
- 7. Hypothermia:** Hypothermia is a decrease in body temperature below normal levels, often resulting from

exposure to cold environments or prolonged immobility. Preventing and treating hypothermia is crucial in expeditionary medicine to minimize the risk of complications and improve patient outcomes.

8. **Head Injury:** Head injuries can range from mild concussions to severe traumatic brain injuries, posing significant challenges in trauma care. Early assessment, monitoring, and appropriate interventions are essential to prevent secondary brain damage and optimize neurological recovery.

9. **Blast Injury:** Blast injuries result from the rapid release of energy in an explosion, causing a range of traumatic effects on the body. Military personnel are at risk of blast injuries in combat settings, necessitating specialized training and equipment to manage these complex injuries effectively.

10. **Tactical Combat Casualty Care (TCCC):** TCCC is a set of guidelines for providing prehospital trauma care in tactical and combat environments. It emphasizes rapid assessment, hemorrhage control, and airway management to improve survival rates among injured individuals before they reach definitive care facilities.

11. **Damage Control Surgery:** Damage control surgery is a surgical approach aimed at stabilizing critically injured patients quickly and addressing life-threatening injuries in a time-sensitive manner. It focuses on controlling hemorrhage, restoring physiological stability, and postponing definitive repair until the patient is more stable.

12. **Prolonged Field Care:** Prolonged field care refers to the provision of advanced medical care beyond the initial phases of trauma management in austere environments. It involves sustaining patients for an extended period until evacuation or definitive care is possible, often requiring improvisation and resourcefulness.

13. **Field Expedient Care:** Field expedient care involves using creative solutions and adapting medical techniques to overcome challenges in resource-limited settings. It may involve improvising medical equipment, modifying treatment protocols, or employing unconventional approaches to meet patient needs effectively.

14. **Mass Casualty Incident (MCI):** An MCI is an event resulting in a large number of casualties that exceed the capacity of local healthcare systems to manage effectively. Responding to MCIs requires coordinated triage, resource allocation, and medical interventions to maximize survival and minimize morbidity among affected individuals.

15. **Telemedicine:** Telemedicine utilizes communication technology to connect healthcare providers with patients in remote locations, enabling real-time consultation, diagnosis, and treatment. In expeditionary medicine, telemedicine can facilitate medical support, guidance, and decision-making in challenging environments where access to specialists is limited.

16. **Aeromedical Evacuation:** Aeromedical evacuation involves transporting injured or ill individuals by air to medical facilities for further care. This critical component of expeditionary medicine ensures timely access to advanced treatment and specialized resources, enhancing the continuum of care for military personnel in remote or hostile environments.

17. **Combat Medic:** A combat medic is a trained healthcare provider responsible for delivering medical care to injured individuals in combat settings. Combat medics play a crucial role in triaging, stabilizing, and evacuating casualties, often under challenging conditions that require quick thinking and adaptability.
18. **Tactical Field Care:** Tactical field care refers to the provision of medical treatment in the immediate aftermath of a traumatic event, focusing on addressing life-threatening injuries and stabilizing patients for evacuation. It emphasizes rapid interventions and critical decision-making to optimize outcomes in high-stress environments.
19. **Critical Care Air Transport Team (CCATT):** A CCATT is a specialized medical team that provides critical care during aeromedical evacuation missions. Comprising physicians, nurses, and respiratory therapists, CCATTs deliver advanced medical interventions and monitoring to critically ill or injured patients en route to definitive care facilities.
20. **Point of Injury Care:** Point of injury care involves providing immediate medical attention to injured individuals at the scene of an incident, such as a combat engagement or disaster. This initial care focuses on stabilizing patients, controlling hemorrhage, and preparing for evacuation to higher levels of medical support.
21. **Combat Casualty Care Research Program (CCCRP):** The CCCRP is a research initiative focused on advancing trauma care practices and technologies for military personnel. By conducting clinical studies, developing innovative solutions, and disseminating best practices, the program aims to improve outcomes and reduce the burden of combat-related injuries.
22. **Resuscitative Endovascular Balloon Occlusion of the Aorta (REBOA):** REBOA is a minimally invasive procedure used to control non-compressible hemorrhage in trauma patients by temporarily occluding the aorta. This technique can rapidly stabilize patients with severe bleeding, buying time for definitive surgical intervention and improving survival rates in critical situations.
23. **Tactical Combat Casualty Research (TCCR):** TCCR focuses on advancing trauma care through research and innovation in tactical and combat environments. By investigating new treatments, technologies, and strategies, TCCR aims to enhance the capabilities of military medical personnel and improve outcomes for injured individuals in the field.
24. **Combat Casualty Response System (CCRS):** The CCRS is a comprehensive system of trauma care that integrates prehospital, hospital, and rehabilitative services to support injured military personnel throughout their continuum of care. By coordinating resources, personnel, and processes, the CCRS ensures seamless and effective management of combat casualties from point of injury to recovery.
25. **Tactical Emergency Casualty Care (TECC):** TECC is a framework for providing medical care in high-threat environments, emphasizing rapid assessment, hemorrhage control, and airway management. By training personnel in TECC principles, organizations can enhance their preparedness for responding to trauma incidents and improving outcomes for casualties in challenging settings.
26. **Combat Casualty Simulation Training:** Combat casualty simulation training involves realistic scenarios

and simulations to prepare medical personnel for managing traumatic injuries in combat environments. By practicing triage, treatment, and evacuation procedures in a simulated setting, healthcare providers can enhance their skills, confidence, and readiness to respond effectively to real-life emergencies.

27. Tactical Combat Casualty Management Course (TCCMC): TCCMC is a specialized training program designed to equip military healthcare providers with the knowledge and skills to deliver effective trauma care in combat settings. By focusing on tactical field care, casualty evacuation, and teamwork, TCCMC prepares participants to handle the unique challenges of providing medical support in austere and high-risk environments.

28. Forward Surgical Team (FST): An FST is a mobile surgical unit deployed close to the front lines to provide rapid surgical care to injured military personnel. Comprising surgeons, nurses, and support staff, FSTs deliver advanced trauma interventions in austere environments, helping stabilize patients before they are evacuated to higher levels of medical care.

29. Combat Casualty Evacuation Care: Combat casualty evacuation care involves transporting injured individuals from the point of injury to definitive care facilities for further treatment. This critical phase of trauma management focuses on maintaining patient stability, managing pain, and preventing complications during aeromedical evacuation or ground transport.

30. Battlefield Acupuncture: Battlefield acupuncture is a non-pharmacological pain management technique that involves inserting small needles into specific points on the body to alleviate pain and promote relaxation. Widely used in military trauma care, battlefield acupuncture provides rapid relief for acute injuries and chronic pain conditions, enhancing patient comfort and recovery.

31. Forward Resuscitative Surgical System (FRSS): An FRSS is an advanced medical facility deployed close to the front lines to provide surgical and critical care to injured military personnel. Equipped with operating rooms, intensive care units, and resuscitation capabilities, FRSSs enhance the capacity to deliver timely and specialized medical interventions in combat environments.

32. Remote Damage Control Resuscitation (RDCR): RDCR involves providing early blood transfusions and resuscitative interventions to critically injured patients in remote or austere settings. By initiating damage control resuscitation strategies before reaching definitive care facilities, RDCR aims to improve outcomes for trauma patients and reduce the risk of complications associated with hemorrhagic shock.

33. Expeditionary Resuscitative Surgery (ERS): ERS refers to surgical interventions performed in austere environments to stabilize critically injured patients before evacuation to higher levels of care. By providing rapid access to surgical expertise and life-saving procedures, ERS enhances the survivability of combat casualties and improves the continuum of trauma care in expeditionary settings.

34. Forward Aeromedical Evacuation (FAE): FAE involves transporting injured or ill individuals by air from the point of injury to forward medical facilities for initial stabilization and treatment. This rapid evacuation method ensures timely access to advanced medical care, supporting the continuum of trauma management and enhancing outcomes for military casualties in high-threat environments.

35. Expeditionary Medical Support (EMS): EMS encompasses a range of medical services and resources deployed to support military operations in remote or austere environments. From field hospitals and medical supplies to specialized personnel and telemedicine capabilities, EMS plays a critical role in ensuring the health and readiness of military forces operating in challenging conditions.
36. Austere Environment Medicine: Austere environment medicine focuses on providing healthcare in resource-limited or challenging settings, such as deserts, jungles, or conflict zones. By adapting medical practices, utilizing innovative technologies, and fostering resilience, austere environment medicine enables medical personnel to deliver effective care in diverse and demanding conditions.
37. Combat Casualty Care Training: Combat casualty care training involves preparing military personnel and healthcare providers to respond effectively to traumatic injuries in combat environments. By teaching essential skills, protocols, and teamwork strategies, combat casualty care training enhances readiness, proficiency, and confidence in managing casualties under high-stress conditions.
38. Tactical Medic: A tactical medic is a trained healthcare provider specializing in delivering medical support in tactical and high-threat environments. Tactical medics play a vital role in providing immediate care to injured individuals, managing medical emergencies, and coordinating casualty evacuation in challenging operational settings.
39. Expeditionary Health Surveillance: Expeditionary health surveillance involves monitoring and assessing the health status of military personnel deployed to austere or remote locations. By collecting data, conducting assessments, and implementing preventive measures, expeditionary health surveillance enhances the readiness and well-being of service members operating in challenging environments.
40. Forward Medical Support Team (FMST): An FMST is a mobile medical unit deployed to provide frontline medical care and support to military forces in operational environments. Comprising medical personnel, supplies, and equipment, FMSTs deliver rapid medical interventions, triage services, and casualty stabilization to enhance mission success and personnel survivability in austere settings.
41. Battlefield Medicine: Battlefield medicine refers to the practice of delivering medical care in combat environments, focusing on rapid assessment, intervention, and evacuation of injured individuals. By combining trauma care principles with military operational considerations, battlefield medicine ensures effective and timely management of casualties on the battlefield.
42. Tactical Combat Casualty Simulation (TCCS): TCCS involves using realistic scenarios and simulation technology to train military personnel in managing traumatic injuries and medical emergencies in combat settings. By simulating high-stress situations, TCCS prepares individuals to make critical decisions, apply clinical skills, and work effectively as a team in challenging operational environments.