INDEX

References are to paragraph numbers except where specified otherwise.

ADMIN/LOG plan/order, 2-24a(2)—(3)
example HSS portion, 2-25c, Appendix C
admission rates, 3-9a—c
DNBI, 3-9a
estimation, 3-10a—d(2)
WIA, 3-9a

AE system, 2-36j, 4-24
crews, 2-36j(2), 4-24f(1)—(2)
AECC, 2-36j(2), 4-24a(1)—(8)
AECE, 2-36j(2), 4-24b(1)—(6)
AELT, 2-36j(2)(3), 4-24c(1)—(3)
ASF, 2-36j(2), 4-24e
equipment, 2-36j(5), 4-24f(1), 6-51—52
MASF, 2-36j(2) and (4), 4-24d(1)—(3)(c)

AJ BPO, 2-30c(11), 2-30e, 2-36i
AJ MRO, 2-30c(11), 2-36h
AOR, 2-29b
area medical support, 13-1a—b
command and technical relationships, 13-5a—c
HSC, medical battalion, area support (support
command, corps, or COMMZ), TOE 08-456LO,
13-3a—d
medical battalion, area support (support command,
corps, or COMMZ), TOE 08-455LO,
13-2a—d
medical company, area support, medical bat-
talion, area support (support command, corps,
or COMMZ), TOE 08-457LO, 13-4a—d

Army Blood Program, 8-5a—c
Army Blood Support System, 8-6a—e, 8-7d
Echelon I, 8-6a, 8-7a
Echelon II, 8-6b, 8-7b(1)—(4)
Echelon III, 8-6c(1)—(2), 8-7c(1)—(2)(c)
Echelon IV, 8-6d(1)—(2), 8-7c(1)—(2)(c)
Level V, 8-6e, 8-8a

Army Operations, 1-3, 1-3a(2)
force projection, 1-3a(1)
global HSS, 1-4
HSS system, 1-4, 1-6
keystone doctrine, 1-3b
OOTW, 1-1
conflict, 1-2a(2)
peacetime, 1-2a(1)
power projection, 1-3a(1)
strategic end-state, 1-2b
war, 1-1, 1-2a(3)

Army Veterinary Service, 10-1
ASBP, 8-1
ASBPO, 8-2a—d, 8-3b, 8-8a
ASMRO, 2-30d, 4-19a—b
ASWBPL, 8-8c
AWOL, 3-3

battle fatigue, 12-4a—b
PIES, 12-9
treatment experience in, 12-8
treatment methods, 12-10a—d(4)
treatment results, 12-11a—d
triage, 12-5

BDP, 2-16, 2-18
base, 2-16
considerations, 2-20a—j
construction requirements, 2-21a—c
construction standards, 2-21c
planner’s responsibilities, 2-22a—f
planning sequence, 2-17
planning staff, 2-19

blood estimate, 8-11a—d
host-nation support, 8-12a—b
logistical considerations, 8-13a—c

blood reporting system, 8-18
BLDREP, 8-18, 8-19a—h(11)
BLDSHIPREP, 8-18, 8-20a—d

blood management, 8-9
allied support agreements, 8-16
conflict, 8-14b
peacetime, 8-14a
planning factors for, 8-10a—e
planning for, 8-9a—d
war, 8-15

BTCs, 8-8d
captured medical supplies and equipment, 8-17b
casualty, 3-2
battle casualty, 3-3
captured, 3-3e
conflict, 3-3b
DOW, 3-3a(2), 3-3b
interned, 3-3f
KIA, 3-3a(1), 3-3c, 3-8g
MIA, 3-3d
WIA, 3-3a(1)
disease, 3-4
dying from, 3-4
casualty (continued)
nonbattle casualty, 3-4
nonbattle injury, 3-4
dying from, 3-4
CINC, 2-29a—b, 8-8a
CJTF, 2-29b
combat stress behaviors, 12-3
command and control
COMMZ, 14-3a—b
corps, 14-2a—c
terms, 14-1
command, 14-1a
operational control, 14-1b
technical control, 14-1c
units, 14-4
HHC, MEDCOM, TOE 08-611L000, 14-5a—d
HHC, medical brigade (corps, TOE MM22L100,
or COMMZ, TOE 08-422 L200), 14-6a—d
medical group, TOE 08-432 L000, 14-7a—d
communications, 14-8—9
computer models, 5-4
MPM, 5-4, 5-4a(1)—(2)
PFM, 5-4, 5-4b(1)—(2)
CSC assets in TOE units
division mental health section, 12-13a
hospital staff neuropsychiatric personnel, 12-13h
medical company, CSC, TOE 08-467L000, 12-13d(1)—(6)
medical detachment, CSC, TOE 08-567 LA, 12-13e(1H5)(b)
mental health section, area support medical battalion (HSC), 13-1
mental health section, medical company, separate brigade, 12-13b
small mental health staff or consultant sections in MEDCOM, medical brigade (corps and COMMZ), and medical group headquarters, 12-13g
CSC estimate, 12-15a—c(7)
estimating casualty work load, 12-16a—b
estimating substance abuse and misconduct stress behaviors, 12-17a—c
CSC functions, 12-14a—f(6)
CSC plan, 12-18
briefing the CSC plan, 12-24a—d
CSC plan (continued)
considerations in deployment and combat, 12-19a—b
in OOTW, 12-21a—d
in peacetime, 12-23a—c(2)
in war, 12-20a—j(3)
when units or individual soldiers redeploy home (after military operations), 12-22a—b
CSC services, leaders’ responsibility in, 12-2
dental estimate, 9-18
factors and premises, 9-17
format, 9-19a—e(3)
dental plan, 9-20
format, 9-21a—b(6)
dental staff, 9-14—16
dental support in the continuum of care, 9-2, 9-4, 9-6—b, 9-7, 9-9
categories of dental support, 9-3
comprehensive care, 9-3d
emergency care, 9-3a
maintaining care, 9-3c
sustaining care, 9-3b
mission, 9-1
organization, 9-5a—c, 9-8
unit TOES
HHD, medical battalion (dental service), TOE 08476L, 9-10a—e
medical company (dental service), TOE 08478L, 9-11a—e
medical detachment (dental service), TOE 08479L, 9-12a—e
medical team (prosthodontics), TOE 08588L, 9-13a—e
DTF, 3-7
EPW, 2-11d, 2-36g, 4-5d(2), 5-13—14, 5-40, 6-33d(1)(c)2, 8-17, 9-19b(4), Table 5-24
examples for:
plans, orders, and annexes to plans and orders, Appendix C
intelligence annex (medical group), Example C-12
JTF HSS planning checklist, Example C-19
NBC annex, Example C-15
OPLAN/OPORD (medical brigade), Example C-7
Index-2
examples for:
  plans, orders, and annexes to plans and orders, (continued)
  operation plan/order (medical group), Example C-10
  personnel annex (medical group), Example C-12
  service support annex (medical brigade), Example C-9
  service support annex (medical group), Example C-14
  task organization annex (medical brigade), Example C-8
  task organization (medical group), Example C-11
field sanitation team, 11-26
fielding the organization, E-6
FMC, 5-37—38
formats for:
estimates, Appendix B
  CSC estimate, Example B-5
dental estimate, Example B-2
HSS estimate, Example B-1
PVNTMED estimate, Example B-4
veterinary estimate, Example B-3
plans, orders, and annexes to plans and orders, Appendix C
  CSC portion of the HSS plan, Example C-6
dental service portion of the HSS plan, Example C-2
fragmentary order, Example C-16
HSS appendix to Annex P (Personnel) to the division tactical SOP, Example C-17
JTF OPORD Annex Q, Example C-18
plan for PVNTMED teams, Example C-4
PVNTMED portion of the HSS plan (medical section of a unit), Example C-5
veterinary service portion of the HSS plan, Example C-3
HSS plan, Example C-1
funds and valuables, 5-41
Geneva Conventions, 2-30c(10), 6-1c
health records, 5-33a—d, 5-34
field file, 5-33a(3), 5-35-36
health service logistics activities, 6-40a—6-50e(4)
health service logistics activities (continued)
distribution company, medical battalion, logistics (forward), TOE 08-488LO, 6-44a—e
distribution company, medical battalion, logistics (rear), TOE 08-698LO, 6-48a—e
DMSO, 6-40 a—c
HHD, medical battalion, logistics (forward), TOE 08-486LO, 6-42a—e
HHD, medical battalion, logistics (rear), TOE 08-496LO, 6-46a—e
logistics support company, medical battalion, logistics (forward), TOE 08-487LO, 6-43a—e
logistics support company, medical battalion, (logistics) (rear), TOE 08-6970, 6-47 a—e
medical battalion, logistics (forward), TOE 08-485LO, 6-41a—f
medical battalion, logistics (rear), TOE 08-695LO, 6-45a—f
medical detachment (logistics support), TOE 08-909LO, 6-50a—e
medical supply officer, 6-40
theater medical materiel management center, TOE 08-697LO, 6-49a—f
computing DOS, 6-13a—c
developing theater requirements, 6-11a
  coordination, 6-11d
  line item requisitioning, 6-11e
  planning, 6-11b(1)(—3)
disposal planning, 6-29a—g
estimate, 6-31a—d
  analysis, 6-34a—b
  COA, 6-35
  conclusions, 6-37a—d
  evaluation and comparison of COA, 6-36a—b
  mission, 6-32
  situation and considerations, 6-33 a—d(2)(c)
general requirements for developing/mature theater, 6-10a
  basic loads, 6-10c(1)
follow-on resupply, 6-10c(3)
medical resupply planning, 6-10c(3)
resupply, 6-10c(2)
resupply/throughput, 6-10c(4)
throughput, 6-10c(5)
health service logistics (continued)
mature theater requirements, 6-12
resupply, 6-12a—b
unit basic loads, 6-12a
war reserve stockpiles, 6-12a—b
medical assemblages, 6-17a—b(2)
accounting, 6-18b
maintenance, 6-18c
requisition, 6-18a
medical equipment maintenance, 6-19a—b
depot, 6-22d
DS, 6-22b
GS, 6-22c
organization, 6-23a-b
planning, 6-19c, 6-21a—h(4)
policy, 6-20a—b
unit, 6-22a(1)—(2)
mission, 6-1
plan, 6-38a—b
format, 6-39a—i
planning considerations, 6-28a—d(10)
request flow, 6-8a—d
RO, 6-15a
OL, 6-15a
OST, 6-15a
ROP, 6-16
SL, 6-15a
supply flow, 6-9a—c
staff relationships, 6-30a—e
theater stockage objective, 6-14
historical data
AMEDD experience factors, D-1—6
dental experience factors, D-7—11
hospital beds, 5-1
calculation (manual procedure), 5-5
application of methodology, 5-6a—g
example problem, 5-8a—c
methodology for the COMMZ, 5-10a—d
methodology for the CONUS, 5-11a—d
methodology for the CZ, 5-9a—c
terms used, 5-7a—i
calculation. See computer models, PFM and MPM.
determining requirements, 5-1a—b, 5-3
factors influencing number of, 5-2a—e
hospital system, 5-19
CSH, TOE 08-705L000, 5-21a—e
Echelon III, 5-19a
Echelon IV, 5-19b
FH, TOE 08-715L000, 5-22a—e
GH, TOE 08-725L000, 5-23a—e
hospital configurations, 5-19, 5-25
HUB, TOE 08-736L000, 5-26a—c
HUH, TOE 08-739L000, 5-29a—e
HUM, TOE 08-738L000, 5-28a—e
HUS, TOE 08-737L000, 5-27a—e
MASH, TOE 08-765 L000, 5-20a-f
HSS, A-1
HSS estimate of the situation, 2-8a
analysis, 2-12a—d
commander’s responsibility, 2-8c—d
conclusions, 2-14a—c
considerations, 2-11a—g
evaluation and comparison of COA 2-13
format, 2-9a—c
host-nation support, 5-17
surgeon’s responsibility, 2-8a—b
HSS planning, 2-1
characteristics of, 2-5
commander’s intent, 1-5d, 2-6
considerations, 2-1a, 2-7
coordination, 2-4
guidance, 2-6
proactive, 2-1b, 2-2
timely, 2-1c, 2-3
HSS plan/order, 2-23, 2-24a(1)
execution, 2-28
format for plan, 2-25b, 2-26a—d
modification of plan, 2-27
preparation, 2-23
purpose and scope, 2-25a
responsibility, 2-24a—b
ITR, 5-37a—b
J BPO, 2-30e, 2-36i, 8-3b, 8-4a—b
JOA, 2-29c, 2-30b and d
joint hospital agreements, 5-18
J TF operations, 2-29a—b
surgeon’s responsibilities, 2-30a—c(11)
planning considerations, 2-31a

Index-4
J TF operations
planning considerations (continued)
   CAP, 2-31a, 2-31—36
   medical Annex Q, 2-38-39
   NEO, 2-31b(1)c, 2-33a—e
   planning for, 2-31a—d
Law of Land Warfare, 2-30c(10)
mass casualties, 15-1a—e
   biological, 15-1b
   chemical, 15-1c
command surgeon’s responsibilities, 15-4a—f
commander’s planning responsibilities, 15-3a—d
directed energy, 15-1d
nuclear attacks, 15-1a
reference information, 15-5
medical battlefield rules, 1-4, 1-5a(1)—(5)
   application, 1-5b
   conflict resolution, 1-5d
   rationale, 1-5c(1)—(3)
medical care
   Echelon I (Level I), A-4a—d
   Echelon II (Level II), A-5a—c
   Echelon III (Level III), A-6a—b
   Echelon IV (Level IV), A-7a—b
   Level V, A-8
medical company, holding, TOE 08-455L000,
   5-24a—e
medical detachment, surgical, TOE 08-407L100,
   and medical detachment, surgical (airborne),
   TOE 08-407L200, 5-32a—e
medical evacuation units
   medical battalion (evacuation), TOE 08-446L000,
   4-20a—d
   medical company (air ambulance) (UH-1V or
   UH-60A Aircraft), TOE 08-447L100 and
   TOE 08-447L200, 4-21a—d
   medical company (ground ambulance), TOE
   08-449L000, 4-22a—d
medical force planning, E-1
   formulation of troop list, E-2
      calculation, E-2b
      estimation, E-2a
      modification/refinement, E-2c
   personnel and unit requirements, E-1
medical intelligence, F-1a—i
   EEl, 2-30c(8)
   RFI, 2-30c(8)
significance, F-2a—b(4)
sources, F-3a—e(9)
medical laboratory, 7-1,
   area medical laboratory, TOE 08-657L000, 7-2c,
   7-6e(1)—(4)
   Echelon I support, 7-3
   Echelon II support, 7-4
   Echelon III support, 7-5a—b(2)
   Echelon IV support, 7-6a—e(4)
   planning for, 7-2a—c
   theater procedures, 7-7a—c
medical materiel procedures, 6-2
cross-supply procedures, 6-2a
   interface under QSTAG 291, 6-2
liaison, 6-2b
SIMLM, 6-3
medical records and forms for EPW and RP, 5-40
medical records and morbidity reports, 3-3a(3)
medical regulating, 4-13
   intertheater, 4-17a—m
   intratheater, 4-16a—e
JMRO, 2-30d, 2-36h, 4-18a—c(8)
   planning for, 4-14a—b(8)
   responsibility for, 4-15a—b
medical service teams, 5-31a—b
   medical team, infectious disease, TOE 08-537LC00,
   5-31c(3)(a)—(b)
   medical team, pathology, TOE 08-537LA00,
   5-31c(1)(a)—(b)
   medical team, renal dialysis, TOE 08-537LB00,
   5-31c(2)(a)—(b)
medical threat, 11-2a—b
   categories, 11-3a—g
METT-T, 2-15a—e
misconduct stress behaviors, 12-6
modular medical system, A-9
   Echelons I and H, A-9a—b
MTF, 3-6
neuropsychiatric disorders, 12-7
OPLAN, 2-25c

Index-5
optical fabrication support
concept, 6-26
organization, 6-25a—c
responsibilities, 6-24
organization of HSS System, A-3a—b
patient classifications, 3-8a—g
battle casualty (BI or WIA), 3-8
DIS, 3-8
NBI, 3-8
WIA, 3-8
patient evacuation, 4-5a
means, 4-7a, 4-7f
planning for, 4-6a—c
requirements (calculations), 4-8-12
tenets, 4-5a—f
patient status, 3-5
inpatient, 3-5b
outpatient, 3-5a
phases of patient care and treatment, A-10
combat medic (aidman) care, A-11
convalescent care, A-16
definitive treatment, A-15
EMT, A-12
initial resuscitative treatment, A-13
rehabilitative care, A-17a—b
resuscitative surgery, A-14
PVNTMED
coordination, 11-11
estimate, 11-12, 11-14a—e
communicating the, 11-15
measures, 11-4, 11-5a—g, 11-6a—b(5)
mission, 11-1
operational concept, 11-10a—b
operations command and control, 11-9
plan, 11-16
assets' input to HSS plans (medical section of a unit), 11-17a
detachment plans, 11-17a
references, 11-13
support, 11-8a—c
area medical laboratory preventive medicine support, 11-8c(1)—(5)
medical detachment, preventive medicine (entomology), TOE 08-499L000, 11-8a(1)(a)—(d)
PVNTMED support (continued)
medical detachment, preventive medicine (sanitation), TOE 08-498 L000, 11-8a(2)(a)—(d)
preventive medicine section, medical battalion, area support, 11-8b(1)—(2)
technical support, 11-25a—f (2)
coordination, 11-24a—b
force composition, 11-22
theater medical threat, 11-21
theater mission, 11-19
time phase, 11-23
troop requirements, 11-18
troop strength, 11-20
rates, 3-11, 3-13
admission, 3-13a(1)—(2)
calculating, 3-12a—c
case fatality, 3-13f(1)—(2)
incidence, 3-13c
medical noneffective, 3-13e
mortality, 3-13b
prevalence, 3-13d
reequipping of RTD soldiers from MTFs, 2-26c(2), 5-23e
reporting requirements, 5-39a—f
Service blood program, 8-3a—b, 8-8b
special category patients, 5-12
statistics, hospital admissions, 5-15
surgical service teams, 5-30a—b
medical team, eye surgery, TOE 08-527LC00, 5-30c(3)(a)—(b)
medical team, head and neck surgery, TOE 08-527LA00, 5-30c(1)(a)—(b)
medical team, neurosurgery, TOE 08-527 LB00, 5-30c(2)(a)—(b)
TAMMIS, 4-25, 14-10
MEDASM, 6-7a—b(4), 14-11c
MEDMNT, 6-6a—b(6), 14-11c
MEDPAR, 5-39g, 14-11b
MEDREG, 4-26, 14-11a
MEDSUP, 6-5a—b(7), 14-11c
theater evacuation policy, 4-1a—c(5)
adjustments, 4-4
changes, 5-16
Index-6
theater evacuation policy (continued)
  factors determining, 4-2a—e
  impact, 4-3a—b
TO, A-2
TPFDD, E-3a—d
TPFDL, 2-34c, E-4
unit employment, E-6
USTRANSCOM, 4-23
  AMC, 4-23a
  MSC, 4-23b
  MTMC, 4-23c
veterinary
  estimate, 10-4a—d
  analysis, 10-7a—d
  conclusions, 10-9a—d
  evaluation and comparison of COA 10-8a—b
  mission, 10-5a—e
  situation and considerations, 10-6a—g
veterinary (continued)
  plan, 10-2a—f(3), 10-10
  format, 10-11a—f(5)
service
  team basis of allocation, 10-13
  troop requirements, 10-12a—d
  units
    medical detachment, veterinary medicine,
      TOE 08-418L000, 10-16a—e
    medical detachment, veterinary service,
      TOE 08-417L000, 10-15a—e
    medical detachment, veterinary service
      (headquarters), TOE 08-409L000, 10-14a—e
    medical detachment, veterinary service
      (small), TOE 08-419L000, 10-17a—e
  staff relationships, 10-3a—e