

APPENDIX C

COMBAT LIFESAVER**C-1. Role of the Combat Lifesaver**

a. Immediate far-forward first aid is essential on a widely dispersed and fluid battlefield to prevent soldiers from dying of wounds. Medical personnel may not be able to reach and apply EMT to all wounded soldiers at all points on the battlefield in a timely manner. The CLS is a nonmedical soldier trained to provide advanced first aid/lifesaving procedures beyond the level of self-aid or buddy aid. The CLS is not intended to take the place of medical personnel, but to slow deterioration of a wounded soldier's condition until medical personnel arrive. Functioning as a CLS for the soldier is a secondary mission undertaken only when the tactical situation permits. Even though this is secondary to his primary mission, the CLS has proven to be very effective in saving wounded soldiers lives. The CLS program is implemented according to AR 350-41.

b. The AirLand Battle doctrine was developed for a widely dispersed, rapidly moving battlefield. As was determined for the AirLand Battle doctrine and applicable to the Force XXI doctrine, there are constraints on the rapid acquisition of casualties and medical treatment. These constraints in many cases limit the ability of medical personnel to provide immediate, far-forward medical treatment. The plan developed to provide care for soldiers under AirLand Battlefield doctrine included the CLS. Under Force XXI doctrine, the CLS is an intricate part of providing care for the wounded soldier.

c. The CLS is a bridge between the self-aid/buddy aid training provided all soldiers and the medical training given to the trauma specialist. The CLS is given additional first aid training and training in selected medical tasks (such as initiating an intravenous infusion and providing limited care to a soldier suffering from BF).

C-2. Training the Combat Lifesaver

A correspondence course has been developed for training both active duty and Reserve Component personnel. The course is offered only in a group study mode and with training taking place at the unit level. Classroom instruction is provided by qualified instructors selected by the battalion commander or battalion/squadron surgeon. Testing is performed at the unit level using the written and performance tests furnished in the correspondence course. Training and testing will be conducted according to the tasks, conditions, and standards established by the Academy of Health Sciences, AMEDDC&S, and published in correspondence course training materials. Students who successfully complete the written and performance tests will receive promotion points and be certified as a CLS. The course consists of student subcourse texts, student examination, and an instructor's manual.

C-3. Administering the Combat Lifesaver Course

a. Equipment and Supplies. Arrange for equipment and supplies as early as possible. The purchase of some items, such as intravenous infusion trainers and rescue breathing mannequins, may be required. The local Training and Audiovisual Support Center may have these items available. Training items will not be provided by either the Army Institute for Professional Development (AIPD) or the Academy of Health Sciences, AMEDDC&S.

FM 4-02.4

b. Enrollment. Enrollment request should be sent to AIPD at least 6 weeks prior to beginning of the course according to instructions found in DA Pam 350-59. To establish this group enrollment, AIPD must receive the following:

(1) A request for training should be signed by the battalion commander or an LTC or higher and identify the primary instructor (group leader). All instructors of the Combat Lifesaver Course (Course Number: 081 F11) must meet the following criteria: hold a primary of MOS 91W or 18D, or be a licensed paramedic (state or national), registered nurse, PA, or physician. These requirements reflect the level of expertise necessary to resolve medical emergencies associated with the tasks to be taught.

(2) One DA Form 145 (Army Correspondence Course Enrollment Application) enrolling the primary instructor in IS0826, along with a list of assistant instructors, if any, is included. The DA Form 145 should be signed by a responsible official who has the authority to requisition or acquire the necessary medical supplies to support the training.

(3) A roster of students enrolling in IS0824 and IS0825 is provided. The roster must include each student's full name, rank, social security number, and component code. Ideally, no more than 15 to 20 students should be assigned to each group.

c. Facilities. Facilities must be reserved well in advance. The facilities chosen should allow clear observation of demonstrations and provide room for student practice. Handwashing devices are required.

d. Course Material. The course consists of two subcourses (shipped in one box), 40 credit hours consisting of self-study materials and approximately 3 days of classroom instruction and testing materials. Testing includes both proctored multiple-choice and performance examinations. Only one examination response (IS0827) is returned to AIPD for grading upon completion of IS0824 and IS0825. This is a GO or NO/GO course.

e. Recertification. Combat lifesaver tasks are perishable skills. Combat lifesavers must be recertified every 12 months on the performance-tested tasks in the CLS course. The printed material in the correspondence course can be locally reproduced and used for sustainment training. Do not reenroll soldiers requiring recertification. Unit instructors can accomplish this. The instructor's guide also includes a test appropriate to recertification. It is the responsibility of the S1, not the medical platoon leader, to ensure that personnel matters concerning the CLS program are resolved.

f. Program Managers. Program managers are not authorized to augment correspondence course material, change the length of the course, or increase or delete items contained in the CLS aid bag.

g. Sustainment Training. To the extent needed to sustain skill proficiency, CLS will be exercised during home station training activities (to include field-training exercises) and during deployment for training (to include rotations through combat training centers).

h. Additional Information. For additional information, write to Student Service Division at the Army Institute for Professional Development, US Army Training Support Center, Newport News, VA 23628-0001, or call DSN 927-3322/2127 or commercial 757-878-3322/2127.

C-4. Combat Lifesaver Aid Bag

a. Each certified CLS will be issued a CLS aid bag. The aid bag will be packed in accordance with the prescribed packing list and will be secured as a sensitive item (for example, weapon or night vision devices) at unit level. The aid bags will be issued to the CLS only upon deployment (training and actual).

b. It is the responsibility of each CLS to ensure that—

- (1) His aid bag is stocked according to the prescribed packing list.
- (2) All stocked items are serviceable.
- (3) Items have not exceeded their expiration dates.

C-5. Class VIII Resupply of Combat Lifesaver Aid Bag

a. During garrison operations, Class VIII resupply of the CLS aid bags is conducted in the following manner:

(1) Units with assigned medical personnel will request Class VIII resupply for CLS aid bags.

(2) Divisional, brigade, and regimental units without assigned medical personnel request Class VIII support through the DMSO, brigade medical supply section, or regimental medical supply section. Force XXI units will request Class VIII resupply from either the DSMC medical supply section or the FSMC medical supply section.

(3) Nondivisional units request Class VIII support from the installation medical supply activity, which is normally the medical supply office of the medical department activity or a US Army medical center.

b. During field operations, resupply is accomplished in the same manner as during garrison operations with two exceptions.

(1) Nondivisional units obtain resupply support from the nearest medical unit available.

(2) Emergency resupply is provided to all units by the nearest medical unit capable of doing so.

c. Field medical units maintain stocks of medical material with which to effect resupply of CLS aid bags during field operations.