



COMBAT MEDIC/CORPSMAN
TACTICAL COMBAT CASUALTY CARE

MODULE 04:
PRINCIPLES
AND APPLICATION
OF TACTICAL
FIELD CARE
SKILL INSTRUCTIONS

30 MAY 2026



**Committee on
Tactical Combat
Casualty Care
(CoTCCC)**

SKILL INSTRUCTIONS

COMMUNICATION OF CASUALTY INFORMATION INSTRUCTION

TASK:	Communicate casualty information
CONDITION:	Given a Tactical Field Care setting, and a casualty that has sustained one or more injuries
STANDARD:	Communicate casualty information in accordance with Service and/or unit standard operating procedures
EQUIPMENT:	Casualty's DD Form 1380, 9-Line Medical Evacuation (MEDEVAC) Report, communication equipment, paper, and writing instrument

PERFORMANCE MEASURES: STEP-BY-STEP INSTRUCTIONS

- 01 Communicate:** Transmit the 9-Line Medical Evacuation (MEDEVAC) information in the proper sequence (see Prepare and Transmit 9-Line MEDEVAC and Mechanism of Injury, Injuries, Symptoms, and Treatment Report instructions).
- 02** Communicate with the **casualty**, if possible. Encourage, reassure, and explain care.
- 03** Communicate with **tactical leadership** as soon as possible and throughout casualty treatment as needed. Provide leadership with casualty status and evacuation requirements to assist with coordinating evacuation assets.
- 04** Communicate with the **evacuation system** (the Patient Evacuation Coordination Cell) to arrange for tactical evacuation.
- 05** Communicate with **medical providers** on the evacuation asset (if possible) and relay mechanism of injury, injuries sustained, signs/symptoms, and treatments rendered. Provide additional information as appropriate.
- 06 Document:** Record all findings and treatments on a DD Form 1380 TCCC Casualty Card and attach it to the casualty.

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TACTICAL FIELD CARE CASUALTY COLLECTION POINT (CCP)

TASK:	Consolidate and triage casualties in a CCP
CONDITION:	Triage casualties while establishing a CCP in Tactical Field Care
STANDARD:	Successfully establish a CCP for the rapid triage, assessment, treatment, and staging of casualty(s) for evacuation; perform all steps and performance measures without causing further injury to the casualty(s)
EQUIPMENT:	Appropriate marking materials (chem lights, signs, etc.), medical equipment (aid bag, etc.), litters

PERFORMANCE MEASURES: STEP-BY-STEP INSTRUCTIONS

NOTE: CCPs may vary depending on the tactical situation, operational plans, and unit-specific tactics, techniques, and procedures.

NOTE: Consider body substance isolation.

NOTE: If a Combat Lifesaver is available, direct them to assist.

NOTE: Conduct frequent casualty re-evaluation and update triage categories as conditions and resources changes.

- 01** Select the site. The CCP should:
 - a.** Be reasonably close to the fight.
 - b.** Be near areas where casualties are most likely to occur.
 - c.** Be close to natural terrain "lines of drift".
 - d.** Provide cover and concealment from enemy threat.
 - e.** Have access to evacuation assets and routes (foot, vehicle, aircraft, boat).
 - f.** Allow for expansion if the casualty load increases.
- 02** Assign responsibilities for non-medical and medical personnel supporting the CCP.
- 03** Establish the CCP with day/night marking systems.

NOTE: Use Color-coded signs during daylight hours or color-coded chemical lights at night.
- 04** Establish a separate triage/treatment area with day and night marking systems, if appropriate and feasible.
- 05** Establish a killed in action (KIA) area away from the other casualties.

NOTE: Leadership will establish casualty flow and everything **outside** the CCP. Medical personnel are responsible for everything **inside** the CCP.
- 06** Establish casualty movement flow for entry and exit of the CCP for tracking and access control.

NOTE: This location is where casualties are triaged.
- 07** Conduct **First Pass Triage** at the entry point (Rapid Triage/Sort):
 - a.** Identify **Urgent** casualties; perform immediate lifesaving intervention(s), as feasible.
 - b.** Identify **Non-Urgent** casualties, direct to the designated area for delayed care and monitoring.
- 08** Conduct **Second Pass Triage** (Deliberate Triage/Sort) and organize casualties in the CCP by UPR categories:
 - a.** Identify **Urgent** casualties; requires evacuation as soon as possible.

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- b. Identify **Priority** casualties; requires evacuation but can tolerate delay.
 - c. Identify **Routine** casualties; minor injuries; includes expectant casualties when resources are limited.
- 09 Establish a Tactical Evacuation Point staging area in accordance with unit policies.
- 10 Execute Medical Evacuation by precedence:
 - a. **Urgent:** within 2 hours
 - a. Loaded onto asset **last**, so they are **first off** at the medical destination
 - b. **Priority:** within 4 hours
 - a. Loaded onto asset before “urgent”
 - c. **Routine:** within 24 hours
 - a. Loaded onto asset first
- 11 Establish a medical resupply area.
- 12 Transition to Tactical Evacuation Care, if appropriate.

Developed by the

JOINT TRAUMA SYSTEM