CHAPTER 13

AREA MEDICAL SUPPORT

13-1. Combat Zone and Communications Zone Area Medical Support

Units which lack an organic HSS capability are provided routine and emergency medical treatment on an area support basis. Within corps, this support is provided by divisional medical companies and medical battalions, area support. In EAC, it is provided by medical battalions, area support. The battalion is modular in design and consists of a battalion headquarters, an HSC, and three ASMCs. The medical battalion, area support incorporates modular systems that are found in the division medical structure. (See Appendix A.) The medical companies have a treatment platoon (area support squad, treatment squad, and holding squad) and an ambulance platoon. In addition to a normal battalion staff, the headquarters has optometry, PVNTMED, and MH sections, and a medical supply element.

- a. In operation, each company is assigned an AOR to ensure all personnel receive adequate medical care. Within each company sector, the treatment platoon with its treatment, dental x-ray, laboratory, and patient-holding capability forms the core of the company's support scheme. The treatment squads are employed geographically to best support the troop population. Company ambulances are collocated with medical support elements to provide area patient evacuation or to evacuate patients to the area support section for further treatment or holding.
- b. The modular design of the battalion and its ASMCs permits their employment across the operational continuum. For a comprehensive discussion pertaining to the mission, deployment, employment, and operations of the medical battalion, area support, refer to FM 8-10-24.

13-2. Medical Battalion, Area Support (Support Command, Corps, or Communications Zone), TOE 08-455L0

- a. Mission. This unit provides Echelons I and II HSS to units located in its AO. It provides command and control and medical staff advice and assistance for all assigned and attached elements of the corps and COMMZ operating in its AO. A secondary mission of this unit is to provide rapid rein forcement/replacement of standardized, like-modules to the division medical structure.
- b. Assignment. The unit is assigned to the Medical Brigade, TOE 08-422L0, or the Medical Group, TOE 08-432L0, depending on the density of medical organizations in a TO.
- *c.* Capabilities. Specific functions of the battalion include—
- Planning and coordinating Echelons I and II HSS operations in an AO, to include staff advice on an area basis for corps and COMMZ units without organic medical assets.
- $\label{eq:Z} \check{Z} \qquad \text{Advising commanders and staff} \\ \text{of supported units on the health of their command.} \\$
- Providing current information concerning HSS to higher headquarters.
- Ž Operating clearing stations (Echelon H).
- Ž Reinforcing or reconstituting Echelons I or II medical elements, to include technical supervision for physicians assistants in Echelon I MTFs without assigned physicians.

- Providing ground ambulance evacuation of patients.
- Ž Providing health service logistics, to include medical equipment maintenance services.
- Ž Providing laboratory, pharmacy, and radiological services commensurate with Echelon II medical treatment.
- Ž Providing emergency dental care, to include stabilization of maxillofacial injuries, sustaining dental care designed to prevent or intercept potential dental emergencies, and limited preventive dentistry.
- Ž Providing limited MH services and management of battle fatigue and stress-related casualties. (It also coordinates operations of attached CSC unit teams.)
- Providing optometry services, to include fabrication of finished prescription lenses, spectacle repair services, and emergency treatment and routine care.
- Ž Providing PVNTMED consultation and support, to include medical intelligence

- and technical control of attached PVNTMED detachments.
- Ž Providing patient-holding for up to 160 patients who will RTD within 72 hours.
- Ž Providing Echelon I (treatment station) HSS on an area basis to units without organic medical elements.
- Ž Providing consultation service for patients referred from Echelon I medical treatment elements.
- $\check{\mathbf{Z}}$ Providing daily sick call for supported units.
- Ž Performing organizational maintenance on the battalion's wheeled vehicles. (The battalion maintenance section uses contact teams to provide unit maintenance to assigned subunits.)
- d. Basis of Allocation. The medical battalion, area support provides support for approximately 50,000 nondivisional troops. It is allocated on the basis of .018 per 1,000 non-divisional troops supported in the corps and COMMZ. Figure 13-1 depicts the organization of the medical battalion, area support.

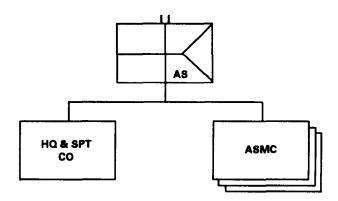


Figure 13-1. Area support medical battalion.

13-3. Headquarters and Support Company, Medical Battalion, Area Support (Support Command, Corps, or Communications Zone), TOE 08-456L0

- a. Mission. The mission of the HSC is to provide command and control for the medical battalion, area support and to provide Echelons I and II HSS to units assigned in the battalion's AO.
- *b. Assignment.* The HSC is organic to the Medical Battalion, Area Support, TOE 08-455L0.
 - c. Capabilities. This unit provides—
- Command and control of organic or attached units, to include medical planning, policies, and support operations within the hattalion's AO.
- Information to commanders and their staffs on the health of their command and on medical aspects affecting CSS.
- Current information concerning medical aspects of the CSS situation to higher headquarters.
- Ž Allocation of medical resources (personnel and equipment) to ensure adequate medical treatment to all assigned or attached units operating in the battalion's AO in either the corps or the COMMZ.

Triage and treatment to patients generated in the HSC AO.

• Evacuation of patients from units within the HSC's AO to the treatment squads of the HSC.

- Treatment squads which are capable of operating independently of the HSC for limited periods of time to provide trauma and sick call medical care to forces involved in combat, or to perform reinforcement, reconstitution, or replacement to forward medical units.
- Ž A 3-day level of supplies for all subelements of the HSC upon deployment and during routine operations.
- Laboratory, pharmacy, and radiological services commensurate with Echelon II medical treatment.
- Ž Emergency dental care to include stabilization of maxillofacial injuries, sustaining dental care designed to prevent or intercept potential dental emergencies, and limited preventive dentistry.
- \dot{Z} Patient-holding for up to 40 patients who will RTD within 72 hours.
- \check{Z} Outpatient consultation services for patients referred from Echelon I HSS facilities.
- Ž Unit administration for elements of the battalion.
- Ž Food service support to staff and patients of the HSC and to other medical elements dependent upon the HSC for mess support.
- d. Basis of Allocation. One HSC per medical battalion, area support. Figure 13-2 depicts the organization of the HSC, medical battalion, area support.

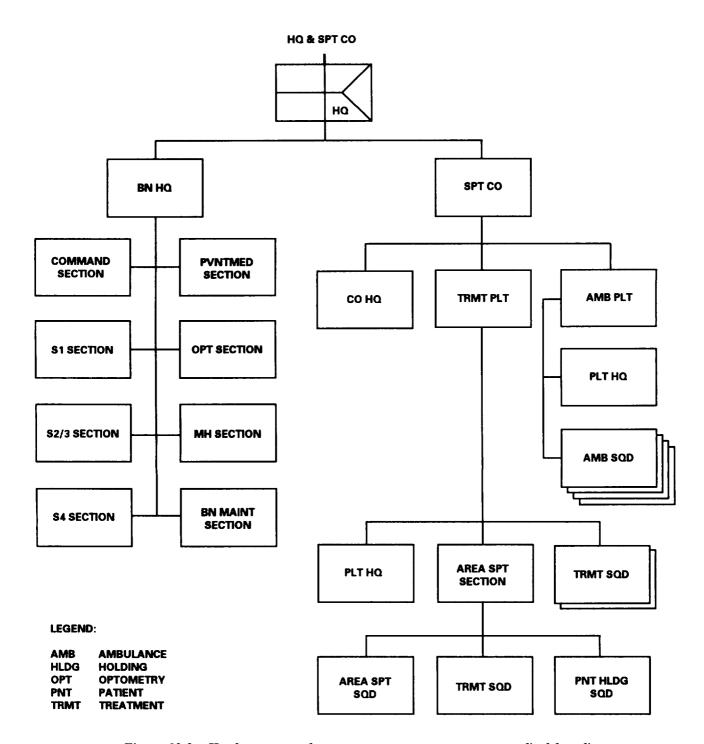


Figure 13-2. Headquarters and support company, area support medical battalion.

13-4. Medical Company, Area Support, Area Support Medical Battalion (Support Command, Corps, or Communications Zone), TOE 08-457L0

- a. Mission. The mission of the ASMC is to provide Echelons I and II HSS to units assigned in the AO of the ASMC.
- *b. Assignment.* The ASMC is organic to the Medical Battalion, Area Support, TOE 08-455L0.
 - c. Capabilities. This unit provides—
- Treatment of patients with disease and minor injuries, triage of MASCAL, initial resuscitation and stabilization, ATM, and preparation for further evacuation of ill, injured, and wounded patients who are incapable of returning to duty within 72 hours.
- Treatment squads which are capable of operating independently of the ASMC for limited periods of time.
- Evacuation of patients from units within the ASMC's AO to the treatment squads of the ASMC.
- Emergency medical supply and resupply to units operating within the AO of the ASMC.
- \dot{Z} A 3-day level of supplies for all elements of the ASMC upon deployment and during routine operations.
- Laboratory, pharmacy, and radiological services commensurate with Echelon II HSS treatment.
- Emergency dental care, to include stabilization of maxillofacial injuries, sustaining dental care designed to prevent or

intercept potential dental emergencies, and limited preventive dentistry.

- Patient-holding for up to 40 patients per ASMC.
- Outpatient consultation services for patients referred from Echelon I HSS facilities.
- Food service support to staff and patients of the ASMC and to other medical elements dependent upon the ASMC for mess support. This unit also performs unit maintenance on organic power generation and communications and electronic equipment.
- d. Basis of Allocation. Three ASMCs are allocated per medical battalion, area support. Figure 13-3 depicts the organization of the ASMC.

13-5. Command and Technical Relationships

The medical battalion, area support commander exercises command and control over the battalion and over medical units/elements attached or assigned to the battalion. He exercises command and control over subordinate elements according to the mission assigned within the framework of the intentions of the next higher command. The medical battalion, area support is under the overall command of the medical brigade or the medical group. The medical battalion, area support commander, his staff, and subordinate medical commanders employ direct channels of communications on technical and clinical matters. The medical battalion, area support commander makes all fundamental decisions in his area of responsibility.

a. Headquarters and Support Company Commander. Headquarters and support company commander exercises command and

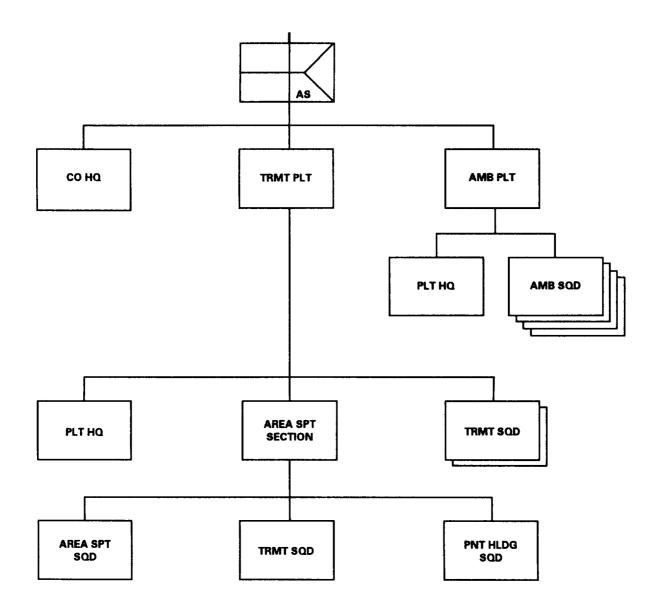


Figure 13-3. Area support medical company.

control over all elements assigned to his company, less OPCON of the battalion headquarters elements.

b. Area Support Medical Company Commander. The ASMC commander exercises command and control over all elements of the ASMC. He serves as the staff surgeon for supported units and provides technic-al guidance and assistance when required. He provides technical guidance to any Echelon I medical elements operating within his AO. He advises

commanders of units without organic HSS on the health and welfare of their commands.

c. Medical Battalion, Area Support Staff. The medical battalion, area support staff provides the commander with factual and timely information. Staff personnel prepare, analyze, estimate, and recommend feasible courses of action. The staff translates the commander's decisions into instructions and orders, issues

those orders, and supervises their execution. Staff members resolve the problems and make decisions within their functional areas based on the commander's guidance and TSOPs. An efficient well-organized, and highly motivated staff can accomplish routine things smoothly and effectively. The commander, however, identifies goals, and announces what must be done; the staff supports his decisions and ensures they are carried out.