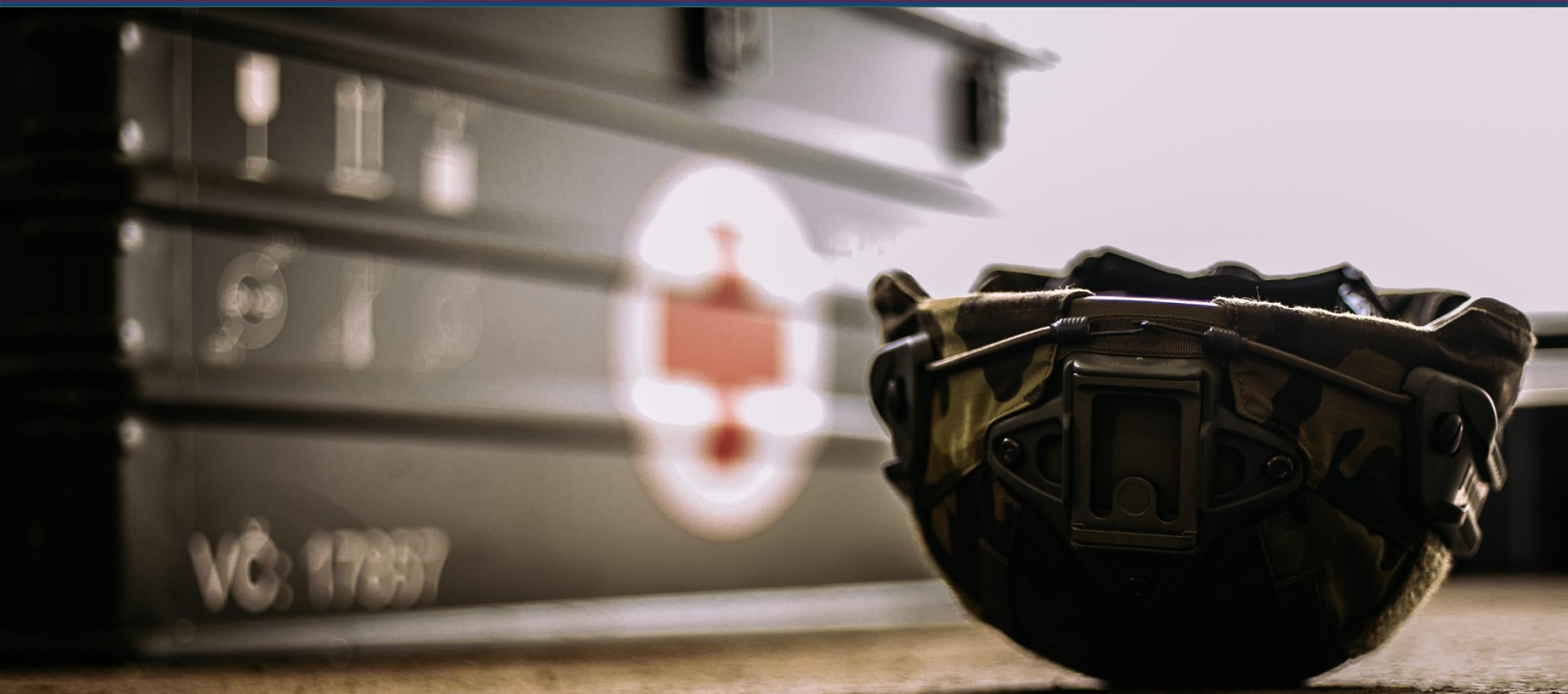
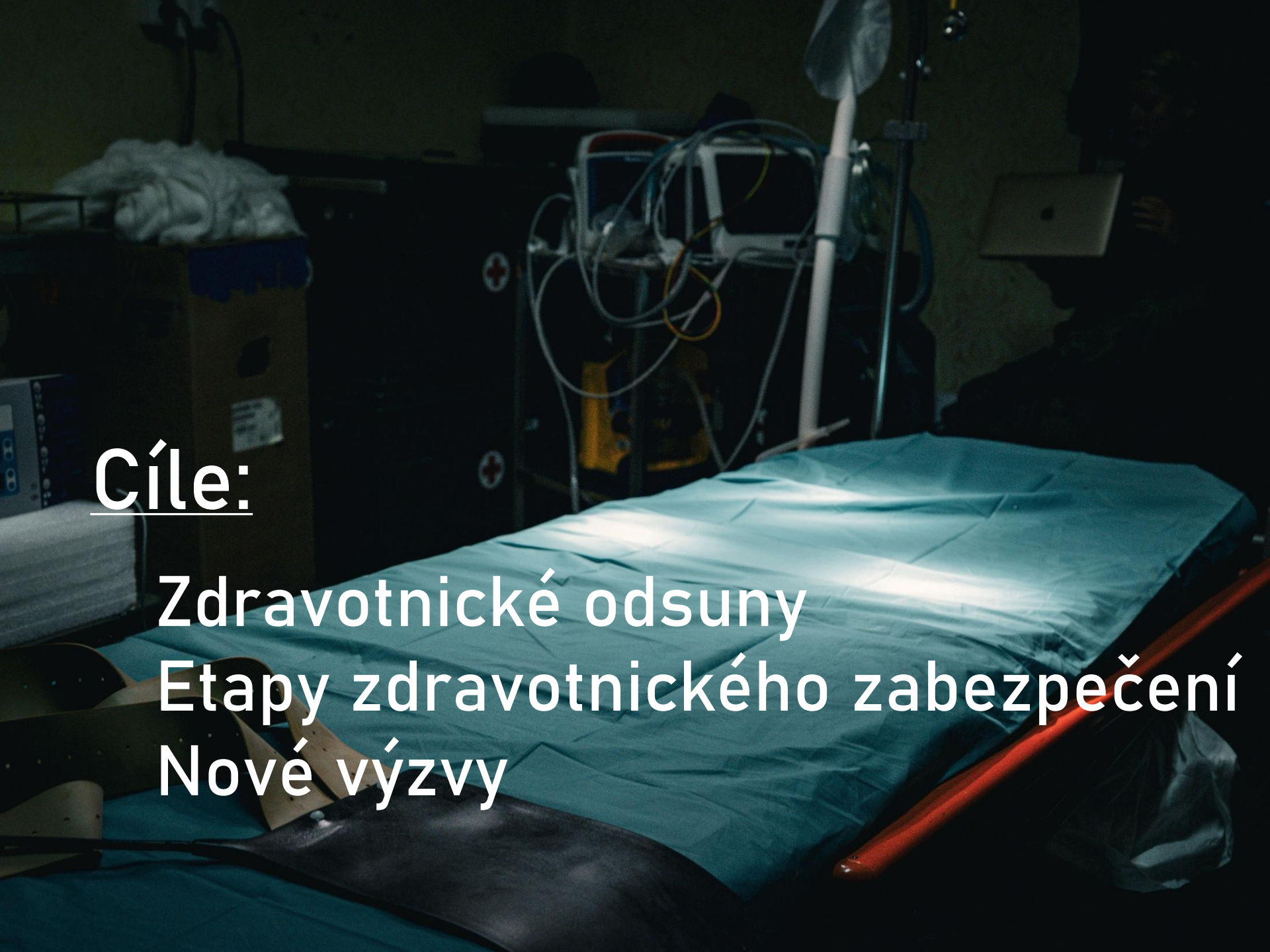


6. a 7. zdravotnický prapor



LDUM - Liberec
28. 5. 2026

A dimly lit operating room with medical equipment, including monitors and a surgical light, in the background. A patient is lying on a table covered with a blue sterile drape. The text is overlaid on the left side of the image.

Cíle:

Zdravotnické odsuny

Etapy zdravotnického zabezpečení

Nové výzvy



Disclaimer



Prosba



**TCCC
(T3C)**

**Tactical Combat
Casualty Care**



6. a 7. zdravotnícký prapor



TCCC

All Service Members

Combat Life Saver (CLS)

Combat Medic (CM)

Combat Para-Medic (CPM)

= medical provider



* www.naemt.org

Skill	All	CLS	CM	CPM
<u>Overview of Tactical Medicine</u>	X	X	X	X
<u>Hemostasis</u>				
Apply Tourniquet	X	X	X	X
Apply Direct Pressure	X	X	X	X
Apply Bandage	X	X	X	X
Apply Combat Gauze	X	X	X	X
Apply Pressure Dressing	X	X	X	X
Apply Junctional Tourniquets			X	X
Use XStat			X	X
Apply pelvic compression devices			X	X
<u>Casualty Movement Techniques</u>	X	X	X	X
<u>Airway</u>				
Chin lift/Jaw Thrust Maneuver	X	X	X	X
Nasopharyngeal Airway	X	X	X	X
Recovery Position	X	X	X	X
Sit Up/Lean Fwd Airway Position	X	X	X	X
Extraglottic airway			X	X
Surgical Airway			X	X
Endotracheal Intubation				X
<u>Breathing</u>				
Treat Sucking Chest Wound	X	X	X	X
Needle Thoracostomy		X	X	X
Pulse Oximetry Monitoring			X	X
Administer Oxygen			X	X
Chest Tube				X



Joint Trauma System

TCCC GUIDELINES 2024

25 JAN 2024



Joint Trauma System

PROLONGED CASUALTY CARE (PCC)

21 DEC 2021



TCCC

**Tactical combat
casualty care**

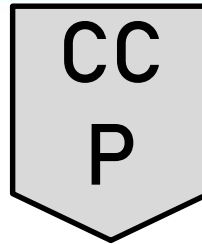
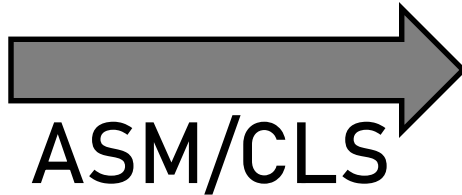
DCR

**Damage
Control
Resuscitation**

DCS

**Damage
Control
Surgery**

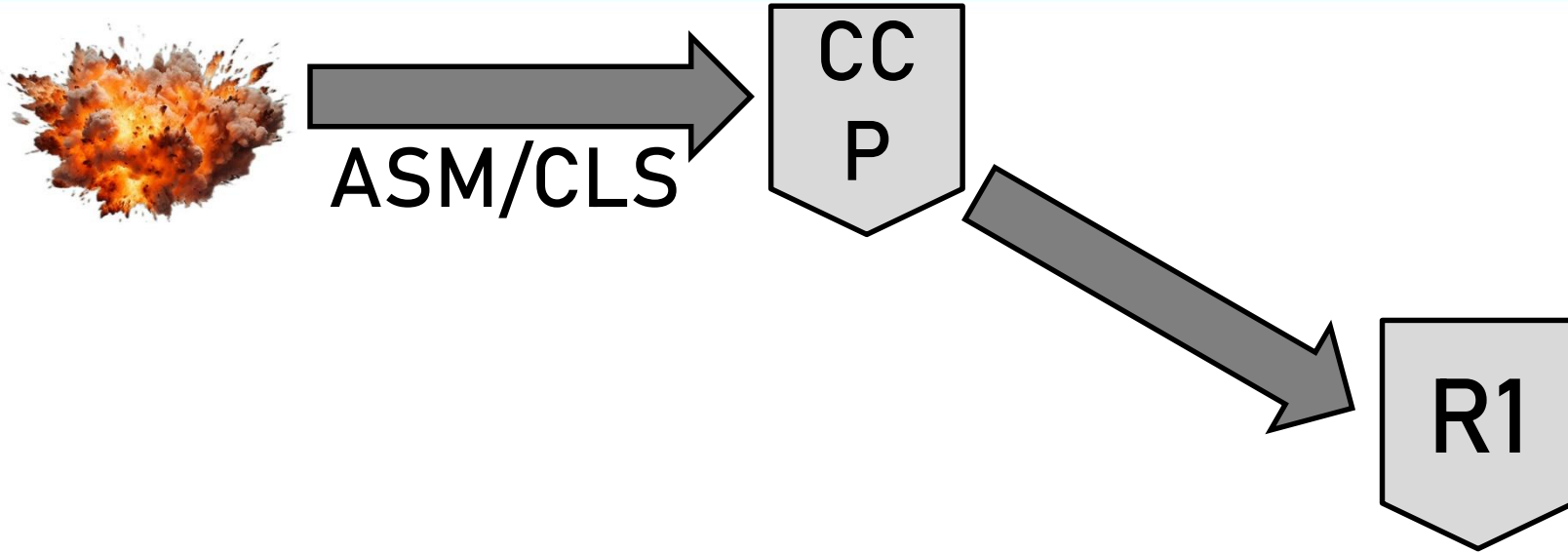
6. a 7. zdravotnický prapor





UKR 6 100

6. a 7. zdravotnický prapor



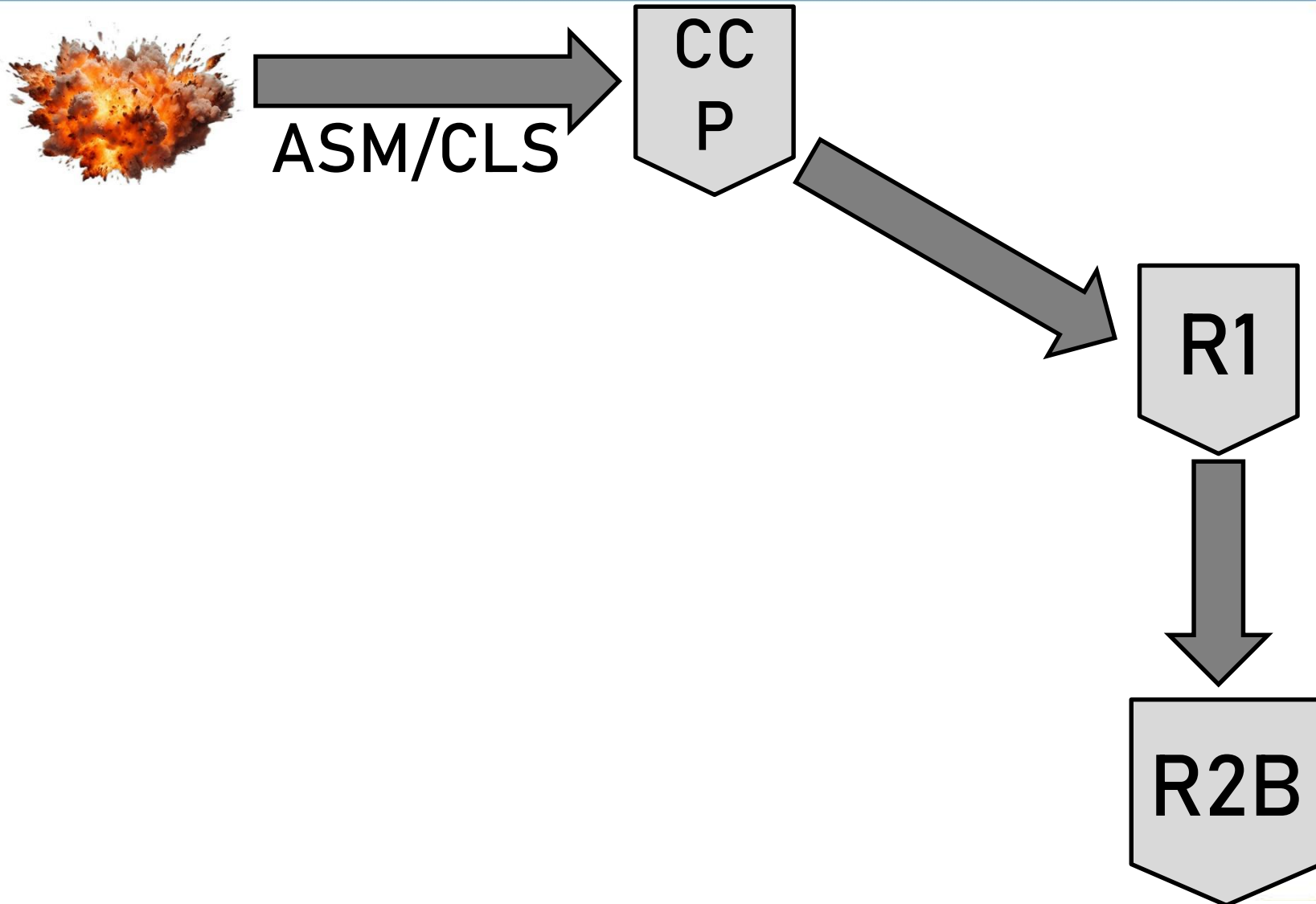
ROLE 1





III ОКРЕМА
ШТУРМОВА
БРИГАДА

6. a 7. zdravotnický prapor



ROLE 2B (BASIC)



credits: Western Shelter Uganda

<https://www.africom.mil/Story/31872/new-mobile-hospital-enhances-ugandan-military-capacity>

<https://westernshelter.com/role-ii-field-hospital>



- BASIC
- Obsahuje 7 základních modulů:
 - Příjímací a třídící oddělení
 - Základní chirurgický modul
 - Modul zobrazovacích a diagnostických metod (lab, X-Ray, Sono)
 - Lůžkový modul
 - Modul pooperační péče
 - Velitelský modul - C4I
 - Podpůrný modul (farma.)

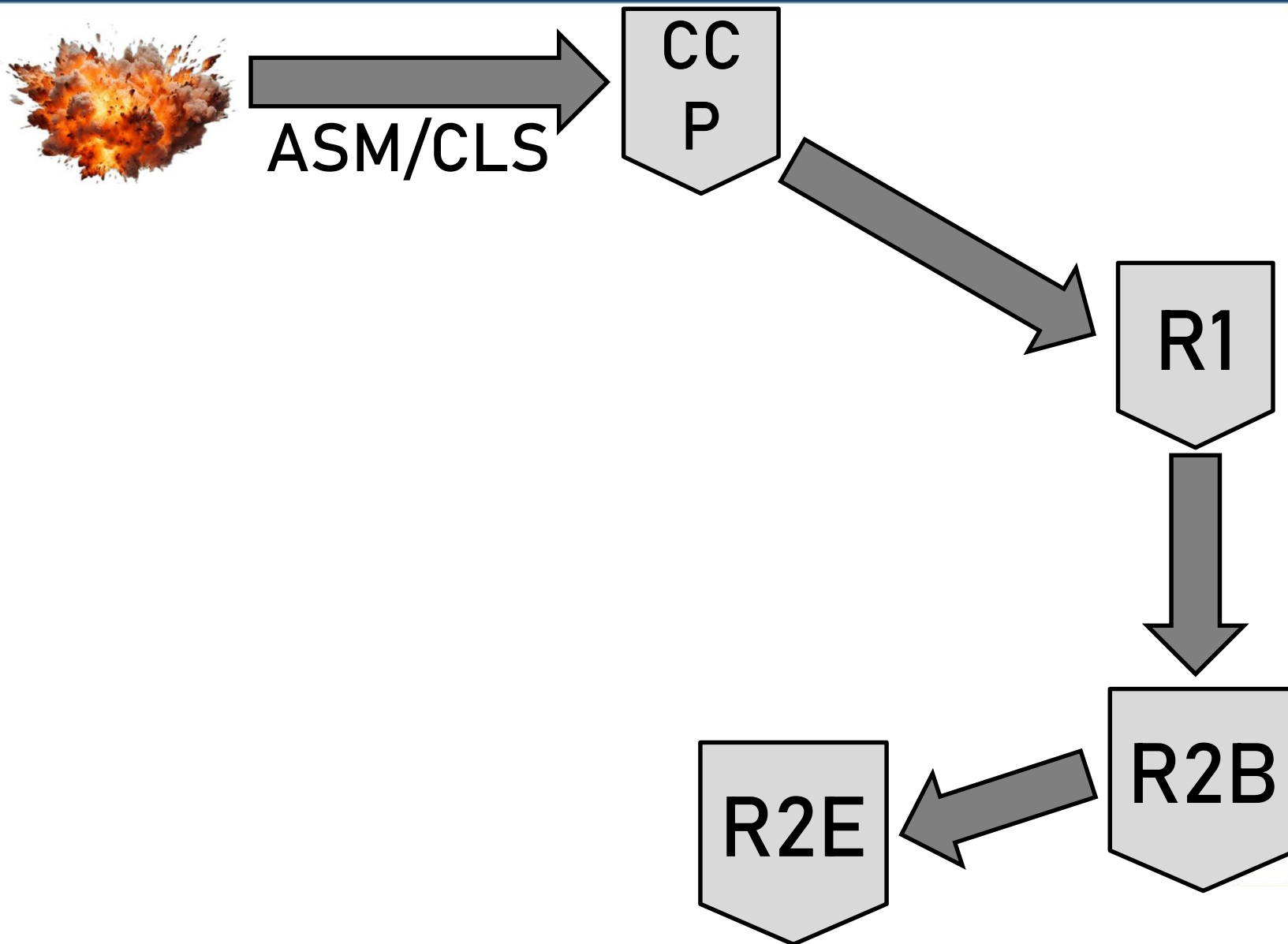


ROLE 2B (BASIC)



- credits: IT defence (FB)
- <https://www.italiandefencetechnologies.com/>

6. a 7. zdravotnický prapor



CZE ROLE 2E (Enhanced)

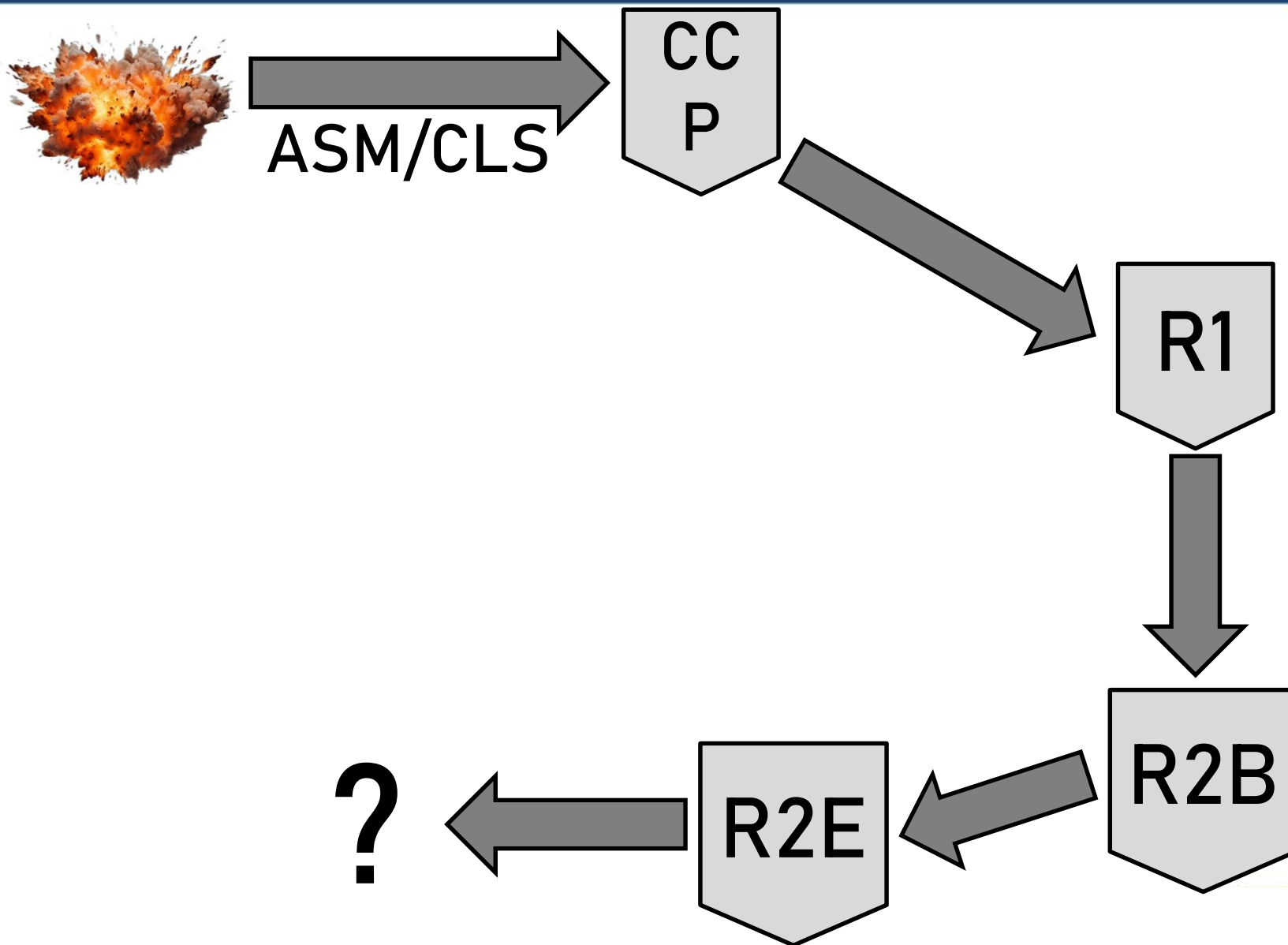






ROLE 2E (Enhanced)

6. a 7. zdravotnický prapor



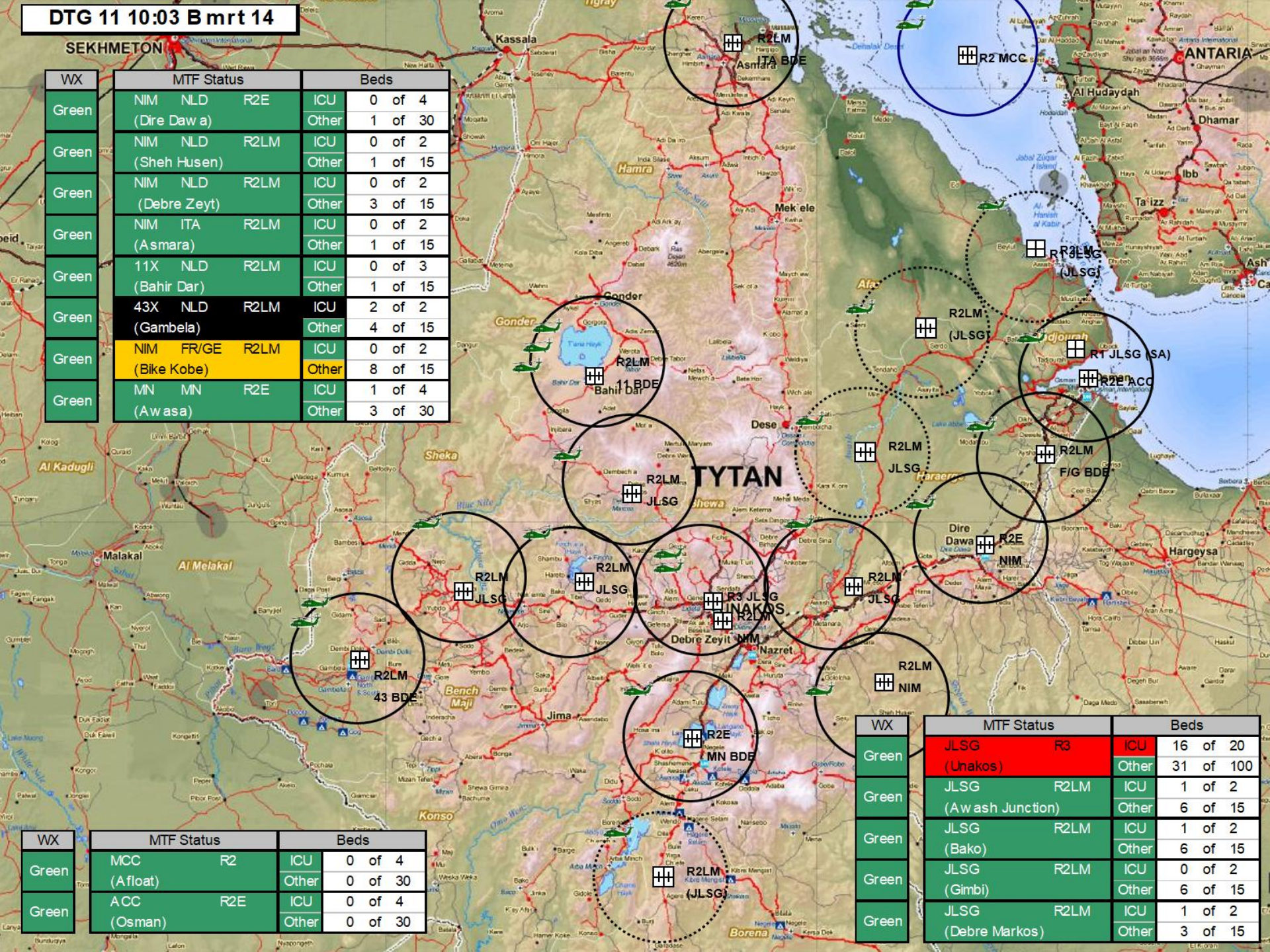
DTG 11 10:03 B mrt 14

SEKHMETON 

WX	MTF Status			Beds	
Green	NIM NLD R2E (Dire Daw a)	ICU	0 of 4		
		Other	1 of 30		
Green	NIM NLD R2LM (Shah Husen)	ICU	0 of 2		
		Other	1 of 15		
Green	NIM NLD R2LM (Debre Zeyt)	ICU	0 of 2		
		Other	3 of 15		
Green	NIM ITA R2LM (Asmara)	ICU	0 of 2		
		Other	1 of 15		
Green	11X NLD R2LM (Bahir Dar)	ICU	0 of 3		
		Other	1 of 15		
Green	43X NLD R2LM (Gambela)	ICU	2 of 2		
		Other	4 of 15		
Green	NIM FR/GE R2LM (Bike Kobe)	ICU	0 of 2		
		Other	8 of 15		
Green	MN MN R2E (Awasa)	ICU	1 of 4		
		Other	3 of 30		

WX	MTF Status		Beds	
Green	MCC	R2	ICU	0 of 4
	(Afloat)		Other	0 of 30
Green	ACC	R2E	ICU	0 of 4
	(Osman)		Other	0 of 30

WX	MTF Status		Beds		
Green	JLSG R3 (Unakos)	ICU	16	of	20
		Other	31	of	100
Green	JLSG R2LM (Awash Junction)	ICU	1	of	2
		Other	6	of	15
Green	JLSG R2LM (Bako)	ICU	1	of	2
		Other	6	of	15
Green	JLSG R2LM (Gimbi)	ICU	0	of	2
		Other	6	of	15
Green	JLSG R2LM (Debre Markos)	ICU	1	of	2
		Other	3	of	15



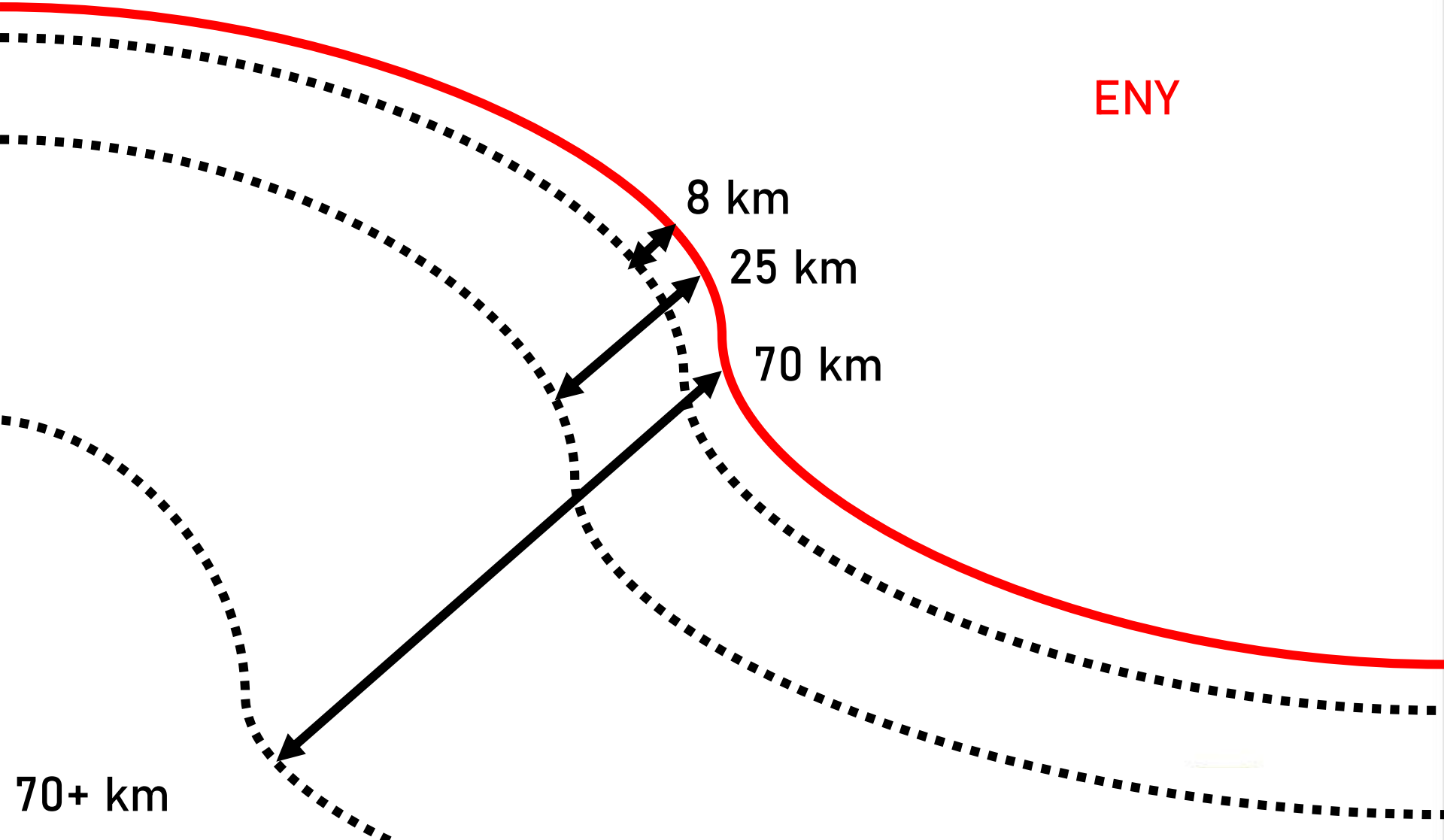
6. a 7. zdravotnický prapor



Grey zone concept



ENY



Grey zone concept

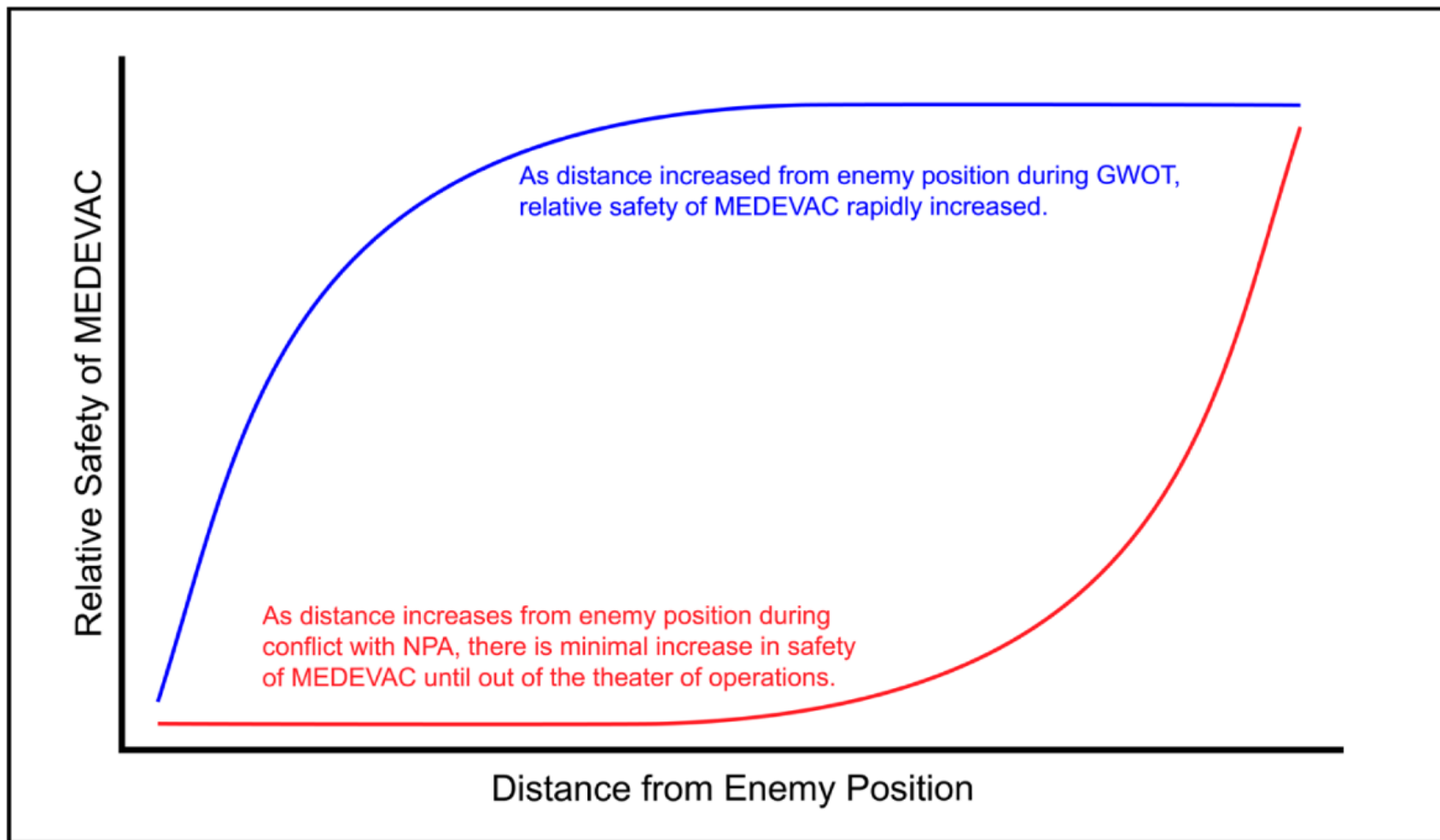
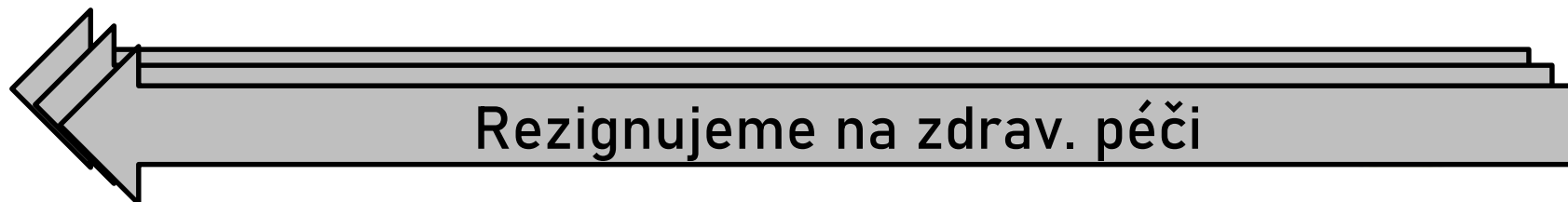


Figure 1. Linear effect of distance. This figure highlights the relationship of relative safety of MEDEVAC units as distance from the enemy position changes. The blue line shows the relationship in the GWOT, which highlights the rapid increase in safety with a small amount of distance from the enemy position. The red line shows the relationship in NPA conflict, which highlights that a large amount of distance from the enemy position is needed to achieve significant safety. GWOT, Global War on Terror; MEDEVAC, medical evacuation; NPA, near-peer adversary.



Dilema



Rezignujeme na zdrav. péči

6. a 7. zdravotnický prapor





„Train as you fight“







Prehospital lessons from the War in Ukraine:

Damage Control Resuscitation and Surgery Experiences from Point of injury to Role 2

J Quinn, S Panasenko, Y Leshchenko, K Gumeniuk, A Onderkova, D Stewart, AJ Gimpelson, M Buriachyk, M Martinez, TA Parnell, L Brain, L Sciulli, JB Holcomb

#1 The safety of rescuers and medical personnel is at risk due to multi-domain warfare & a disregard of International Humanitarian Law and the use of deadly weapons. This necessitates adjustments in PPE, contingency and communication planning, and prioritizing scene safety principles.



#2 In modern multi-domain battles and hybrid warfare, traditional triage approaches face challenges due to the lack of resources, training, and access to medical facilities. Adapting to these challenges is crucial to manage overwhelming situations and treat casualties with multiple injuries.



#3 In high patient volume conflict zones like Ukraine, thorough primary and secondary trauma assessments remain essential to identify and treat life-threatening injuries. These must occur in a timely fashion despite operational security challenges, light availability and the frequent need for sound discipline. Coping strategies and improved training for these circumstances are crucial for adequate patient care.



#4 Ensuring proper tourniquet use in conflict zones requires quality control, procurement, training, and best practices. Improvements in prehospital care include phasing out substandard and outdated rubber alternatives, supplying CoTCCC-approved tourniquets, and implementing quality assurance measures for battlefield tourniquet use.



#5 Effective pain management in prehospital settings remains a challenge in Ukraine. Rescuers and providers lack reliable access to adequate pain management resources, such as fentanyl, ketamine, and morphine. Nalbuphine is most frequently used in the field. If the military medical system cannot provide other analgesia in the field, due to potential interactions with morphine and fentanyl, it may be prudent to continue with nalbuphine throughout echelons of care.



#6 Transport immobilization is a crucial aspect of prehospital care, as effective immobilization helps stabilize patients' hemodynamics, reduces nociceptive impulses, prevents secondary tissue and vascular damage, and minimizes the risk of fat embolism.



#7 Ensuring proper patient warming at the point of injury and during transport is vital for patient comfort and stability. While thermal blankets can help maintain body heat passively, active warming methods are essential in severe injuries and critical conditions - as is the use of fresh whole blood.



#8 The proper use of antibiotics is crucial for reducing morbidity and mortality in battlefield injuries. However, limited access to antimicrobial guidance, biogram data, and clinical resources can make it challenging to administer appropriate antibiotic therapy for trauma patients in the conflict zone.



#9 As the conflict plays out in a civilian landscape, medical professionals must be prepared to care for a diverse range of patients, beyond the traditional focus on young, healthy males in wars. Various age groups present unique challenges and require different treatment approaches.



#10 Significant administrative and operational challenges for healthcare professionals, volunteers, NGOs, and public sectors include working within one's scope of practice, accountability, professional roles, documentation, security, and navigating checkpoints.







Děkuji za pozornost

OF-1 Oliver Klíčník
721 215 521