

JSOMTC

JOINT SPECIAL OPERATIONS MEDICAL TRAINING CENTER

TRANSFORMATION & MODERNIZATION



SCHOFIELD BARRACKS, HAWAII, UNITED STATES - Operators assigned to 10th Special Forces Group (Airborne) conduct medical evacuation training at Oahu, Hawaii, Aug. 9, 2024. This was part of Joint Training Exercise NAKOA FLEEK which saw 10th SFG(A) Operators train and evaluate Soldiers of 25th Infantry Division on warrior tasks and battle drills. (Photo by Cpl. Alec Brueggemann)

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The United States Army special operations forces (SOF) operate in a near continuous state of transformation and modernization. During the last two decades of conflicts in the Middle East and the wider world, these transformations happened at a rapid pace, often placing significant strain on force generators, such as the U.S. Army John F. Kennedy Special Warfare Center and School (USAJFKSWCS) and the U.S. Army Training and Doctrine Command (TRADOC). Now, the U.S. military is requiring its commands to dramatically change their tactics and training in anticipation of large-scale combat operations (LSCO) against peer and near-peer adversaries.

As a part of this transformation, SOF must refocus education and training efforts to operate in large areas of denied space, likely without air cover or reliable communications. This change in operating environment will require SOF medical training to adjust how it produces and prepares SOF medics to perform in austere and denied areas—from point of injury to evacuation.

Indeed, while SOF medics have pioneered much of the prolonged field care concept, they must now be prepared to hold a patient for much longer than the standard 72 hours.

The Joint Special Operations Medical Training Center (JSOMTC) is the primary medical training center for enlisted special operations medical providers within the United States Army Special Operations Command (USASOC), and Marine Special Operations Command (MARSOC). The schoolhouse teaches multiple courses to include Special Operations Combat Medic, Special Forces Medical Sergeant, Special Operations Civil Affairs Medical Sergeant, and two sustainment courses: Special Operations Combat Medic Skills Sustainment Course and Special Forces Medical Sergeant Skills Sustainment Course.

This article will focus on each course within Joint Special Operations Medical Training Center and how they are transforming to produce a modern special operations medic prepared to overcome the challenges of current and future SOF operational environments, to include LSCO and Irregular Warfare.



A student in the Special Operations Combat Medic Course at the U.S. Army John F. Kennedy Special Warfare Center and School treats a simulated patient during field training at Fort Bragg, North Carolina February 23, 2023. Enlisted service members who completed the course specialize in trauma management, infectious diseases, cardiac life support and surgical procedures and qualify as highly trained combat medics with the skills necessary to provide initial medical and trauma care and to sustain a casualty for up to 72 hours. (U.S. Army photo illustration by K. Kassens)

SPECIAL OPERATIONS COMBAT MEDIC

The Joint Special Operations Medical Training Center is an Army run medical school located at Fort Bragg, N.C., home of Army special operations. Army combat medics, Rangers, Special Operations Aviation Regiment flight medics, Civil Affairs medics, Special Forces medics, and Navy Special Amphibious Reconnaissance Corpsman all attend the Special Operations Combat Medic Course of instruction for their next level of training to becoming a special operations combat medic.

The Special Operations Combat Medic course is a nine-month rigorous foundation course on which all other Joint Special Operations Medical Training Center courses are based. Special operations combat medics are then either sent to their gaining unit for additional pipeline-specific medical training (75th Ranger Regiment, 160th Special Operations Aviation Regiment, or USASOC) or stay at the Joint Special Operations Medical Training Center for follow-on education in the Special Forces Medical Sergeant or the Special Operations Civil Affairs Medical Sergeant courses. Special operations combat medics have seen many changes over the last decade and continue to evolve to meet the rapidly changing needs of the force while keeping pace with advances in medical technology.

Since the COVID-19 pandemic, recruitment into SOF medical pipelines has decreased, leading to fewer students. To combat the reduction in the number of applicants, the Special Operations

Combat Medic Course started to utilize human performance enablers within USAJFKSWCS to coach students on interpersonal relationships, teamwork, managing conflict, study design, and lifestyle changes. The Special Operations Medic Course enhances student performance through personal and educational coaching strategies, resulting in more competent medics. The course plans to formalize training in these key areas to build on this success.

Over the last year, the Special Operations Medic Course reorganized its trauma-specific training blocks to teach DoD-specific tactical combat casualty care with the addition of advanced lifesaving surgical skills. Prior to this change, a version of advanced trauma life support was combined with informal tactical combat casualty care training, which produced exceptional medics, but there were concerns about the interoperability with international and partner forces. The move to formal Defense Health Agency (DHA) tactical combat casualty care education helps SOF medics speak a common language with conventional forces, international allies, and partner forces. In the future, the Special Operations Combat Medic Course will continue to update the curriculum along with the DHA tactical combat casualty care guidelines and assist in creating and teaching an advanced provider tactical combat casualty care, which includes surgical skills already taught in the course.

As seen in the Ukraine conflict and extrapolated to a wider consideration of large-scale combat operations, prolonged field care and prolonged casualty care will play a large part in how

casualties are treated—especially in the denied environment where SOF may operate. This part of casualty care has always been taught to SOF providers as they often treat patients with prolonged evacuation times, resulting in long periods of patient care prior to moving patients to a higher-level of definitive care. However, there has been new focus among conventional forces and the emerging Irregular Warfare curriculum on the importance of long-term care of patients. Given this increased prioritization, the Special Operations Combat Medic Course adjusted curriculum to include more prolonged field care education and training. Part of this adjustment was a focus on telemedicine and technological adjuncts, which ground force medics can use to communicate with higher levels of care while treating a critical medical or trauma patient. In the future, when more guidelines are available from the Joint Trauma System and United States Special Operations Command (USSOCOM), prolonged field care training will be further expanded and emphasized within the context of deployed medicine.

As a part of a global modernization and transformation, the Special Operations Combat Medic Course is in the early stages of planning a system-wide curriculum re-organization. Over the years, research has shown more efficient ways of teaching

and learning in an advanced educational environment. Multiple medical schools and institutions of higher learning have moved from traditional didactic and clinical learning environments. Education is now focused on instructor-facilitated small groups, system-based learning, clinical scenarios, and increased use of technological adjuncts. The Special Operations Combat Medic Course plans on moving toward this style of teaching and learning to provide a well-rounded and educated baseline SOF medic.

SPECIAL FORCES MEDICAL SERGEANT

The Special Forces Medical Sergeant Course is the follow-on course for special operations combat medic that produces special forces medical sergeants (18D) and special operations independent duty corpsmen destined for MARSOC duties. The course builds on the Special Operations Combat Medic Course in medical and surgical fields. There is a more focused approach to austere and resource-limited medicine.

As a part of the modernization and transformation of SOF-specific combat medicine and Irregular Warfare, the Special Forces Medical Sergeant Course has increased clinical rotation

A Soldier with 10th Special Forces Group (Airborne) conducts combat casualty care in a training environment at UCHealth Memorial Hospital Central in Colorado Springs, Colorado, Sept. 22, 2023. To keep their medical certification, Special Forces medical sergeants are required to work at a civilian medical center every three years.
(U.S. Army Photo by Staff Sgt. Michael Wood)



sites to austere and resource limited environments. Education focuses more on team health and team operations when outside standard medical facilities.

In the future, some elements of clinical medicine and advanced clinical skills will be pulled from the Special Operations Combat Medic Course and placed into the Special Forces Medical Sergeant Course curriculum. This further delineates the differences in advanced SOF providers, such as 18Ds and special operations independent duty corpsmen, and the special operations combat medic. These curriculum changes will allow a more streamlined course that sends qualified special operations combat medics out to the force in an expedited manner without degrading their training or capabilities.

SPECIAL OPERATIONS CIVIL AFFAIRS MEDICAL

The Special Operations Civil Affairs Medical Sergeant Course is the Civil Affairs follow-on course for special operations combat medics and produces Civil Affairs medical sergeants (38WW1). The Civil Affairs Medical Sergeants Course builds on the Special Operations Combat Medic Course with instruction in population health, crops, veterinary medicine, global health engagement medicine, and preventive medicine.

As a part of the modernization of Special Operations Civil Affairs medical sergeant medics, the course has adapted curriculum to address prolonged field care in a civil affairs working environment. One adaptation unique to special operations Civil Affairs medical sergeant is a full-length prolonged field care scenario during their final training exercise, Operation Sluss-Tiller. In this exercise, the medic must care for a patient from the point of injury while evacuating out of an austere environment, somewhere in Pineland, for a full 48 hours.

In the future, continued emphasis on Irregular Warfare and population health will be utilized as the Special Operations Civil Affairs Medical Sergeant Course re-organizes its education curriculum to better align with future conflicts and the needs of the 95th Civil Affairs Brigade.

MEDICAL SKILLS SUSTAINMENT COURSES

The two sustainment courses at Joint Special Operations Medical Training Center are unique in that they pull students from the entire spectrum of SOF medicine, including NATO partners and federal entities. Most students have already completed the Special Operations Combat Medic, Special Forces Medical Sergeant, or Special Operations Civil Affairs Medical Sergeant courses. These courses refresh providers on up-to-date best practices in military medicine, tactical combat casualty care changes, and renewal of certifications. Refresher courses are also an opportunity to bring information on patient care and challenges faced in the field from the various SOF units in the DoD into one forum. Through this forum, the curriculum can be adjusted in real time to continue providing the SOF enterprise with the most up-to-date combat medic.

As a part of continued modernization in refresher training, these courses integrate newer technologies in ultrasound, ventilators, telemedicine, and prolonged field care, to name a few. One of the more transformative technologies has been the use of

advanced cadavers as training aids for surgical skills and casualty management. Training facility improvements will include additions that support high-angle rescue, atypical casualty evacuation scenarios, subterranean and bunker medicine, and other scenarios relevant to the current Ukraine conflict and other world hot spots.

CONCLUSION

The Joint Special Operations Medical Training Center is a unique schoolhouse and organization that teaches a broad scope of combat medicine to students from multiple specialized medical entities and units. The school is constantly evolving due to the nature of civilian and military medical advances. The adjustment of the Joint Special Operations Medical Training Center's focus from counterterrorism and counterinsurgency medical contexts back to a large-scale combat operations context, with an emphasis on Irregular Warfare, is already occurring with some far-reaching curriculum reforms on the horizon. Focusing on future facilities with 21st century technological capabilities, advancing instructor training on facilitative small group teaching, enhancing the student experience, and enabling more efficient learning will help provide an exceptional SOF medic to the force for future conflict.



Students in the Special Forces Combat Medic Refresher Course at the U.S. Army John F. Kennedy Special Warfare Center and School carry a simulated patient during casualty training at Fort Bragg, North Carolina, Oct. 27, 2020. (U.S. Army photo by K. Kassens)