



323rd Parachute Ranger Squadron, FJS

PHASE 1

BASIC KNOWLEDGE

Issued: 23/10/2023

RULES OF ENGAGEMENT

→ WHEN and HOW enemy forces can engage each other.

Universal ROE **apply at all times**:

1. Always act in defence of yourself and your teammates.
2. Always return fire when fired upon, but always identify first.
3. When you can, request clearance.



LAWS OF ARMED CONFLICT

BREACHING THESE RULES IS PUNISHABLE

LOAC or International Humanitarian Law (IHL) are part of the ROE.

- Persons outside of combat and not directly participating are protected.
- Do not kill or injury enemies who surrender.
- Marked medical personnel and resources are protected. DO NOT MISUSE.



- Captured combatants are protected and must be given medical attention.
- Physical and mental torture are forbidden.
- Methods that cause unnecessary damage or suffering are forbidden.
- Do not attack civilians and their property.



CAPTURED PERSONS (CPERS)

Prisoners of War:

- Identifiable by clothing or gear. Accountable to international law and LOAC.
- Immune to punishment for acts committed within LOAC before capture.
- Includes visually distinguishable guerrillas and militias if they adhere to LOAC.

Internees:

- Civilians apprehended temporarily for security reasons.
- Must be released ASAP.
- CANNOT BE SEARCHED.

Detainees:

- Civilians who have committed or are suspected of having committed a crime.
- Mercenaries and anyone who is not PoW or Internee is considered Detainee.



CAPTURED PERSONS (CPERS) CONT.

Controlling a CPERS (“Three Ss”):

- **STOP:** Apply best methods to stop and restrain, e.g. cable ties.
- **SEARCH:** Remember who can be searched and what can be confiscated.
- **SAFEGUARD:** You are directly responsible for a CPERS safety.

Guard as regularly as possible and do not move unless strictly necessary.

PROHIBITED ACTIONS:

- Any sort of violence.
- Interrogation (questioning ok).
- Unjustified confiscations.
- Unauthorised trials.

DO CONFISCATE:

- Explosives, weapons.
- Maps, intel, comms equipment.

DO NOT CONFISCATE:

- Protective equipment, clothing.
- Personal items.

WORKING AS A SECTION



Company Commander → Platoon Leader → Section Leader → 7 subordinates

Basic Responsibilities:

- Know your Section, your Leader and your Buddy.
- Follow the Section Leader and their directions.
- Know and abide by ROE.
- Maintain situational awareness.
- Accurately identify and call out enemy targets.
- Use comms appropriately.
- Mind the lines of fire.
- Work with your Buddy.



BUDDY TEAMS



Working with your Buddy:

- Stick together.
- Talk to each other.
- Maintain accountability.
- Aid each other in combat.

If your Buddy goes down:

- **DO NOT PUT YOURSELF AT RISK.**
- Assess their status before acting.
- Communicate to your Section and seek help.





ROLES AND RESPONSIBILITIES

- **Section Leader:** lead from the front and be an example, keep the Section safe and effective.
- **Assistant Section Leader:** 2IC, ready to take over if needed.
- **Radio Telephone Operator:** carry and operate the Long Range Radio, handle comms.
- **Marksman:** support at longer distance using optics, overwatch, high-priority targets.
- **Support Rifleman:** work together to operate heavy weapons.
- **Breacher/Explosives Expert:** use and disable explosives e.g. mines and breaching charges.

- **Combat Medic:** provide basic medical care to teammates and occasionally other elements.

1st Ranger Section

Rank	Assignment
Sergeant	▼ Section Leader
Corporal	▼ Assistant Section Leader
Private	▼ Radio Telephone Operator
Private	▼ Marksman
Private	▼ Support Rifleman
Private	▼ Support Rifleman
Private	▼ Explosives Specialist/Breacher
Lance Corporal	▼ Combat Medic (Adv)

GEAR AND READINESS



March readiness	Meaning
Ready for march	The unit is ready to march, meaning: <ul style="list-style-type: none"> - Personal equipment is organised and packed. - Other equipment is loaded and prepared for the march. - Vehicles are ready to move, and engine tests have been conducted. - Camouflage should be broken. - Personnel are on board (including sentries and scouts). - The vehicle commander may, as determined by the commander, remain outside to provide clearance and guide the vehicle onto the road.
Command: “Ready for march!”	
00 min (h) march readiness	The march should be able to commence no later than within the specified time after receiving the order.

Combat readiness	Meaning
1	Entire unit is ready for battle.
2	Half the unit is ready for battle.
3	Sentry/support gunner is ready for battle.
4	Sentry is ready for battle

LOADOUT REQUIREMENTS



→ M90 Uniform

- Body Armor or Chest Rig
- Headgear
- Map
- Compass
- Night Vision Device
- Radio
- Watch

In Uniform:

- 2x Tourniquet
- 1x Earplugs
- 2x Cable Ties
- 1x IR Strobe
- 2x Bandages

In Vest:

- Ammunition
- 2x Frag Grenades
- 1x White Smoke
- 5x Green Chemlight
- 5x Red Chemlight
- 4x Bandages
- 2x Chest Seals
- 1x Painkillers
- 2x Splints

MAX WEIGHT 40KG TOTAL - BE AS LIGHT AS POSSIBLE

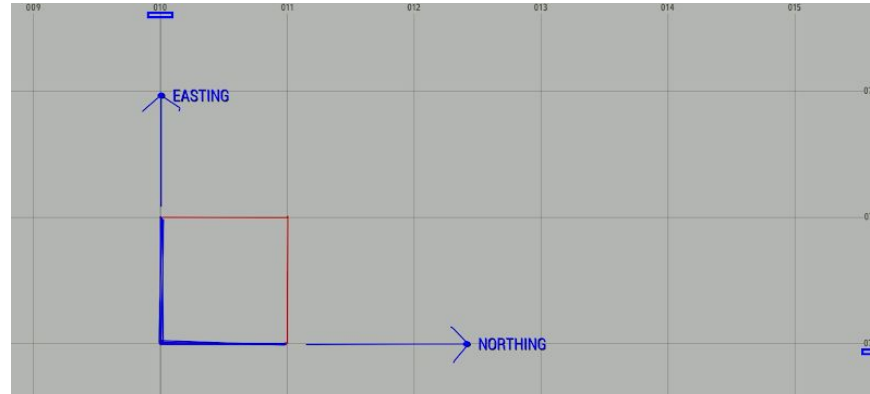
CHECK YOUR PHASE 0 REQUIREMENTS



LAND NAVIGATION

Giving map coordinates:

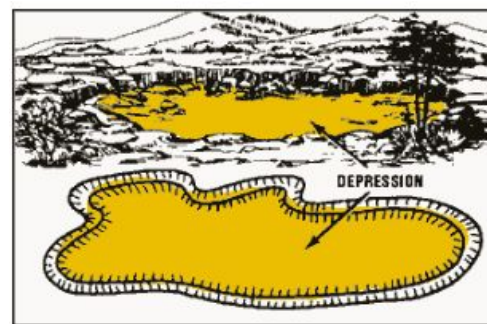
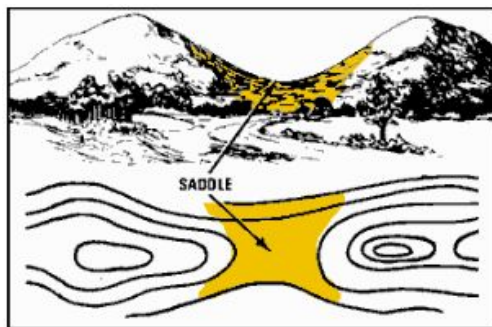
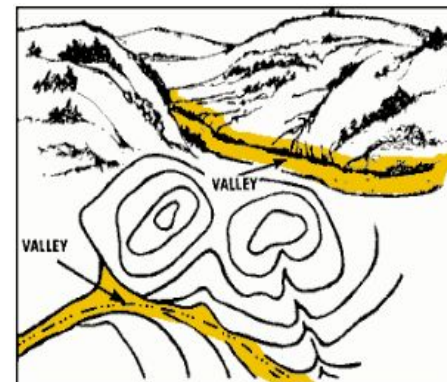
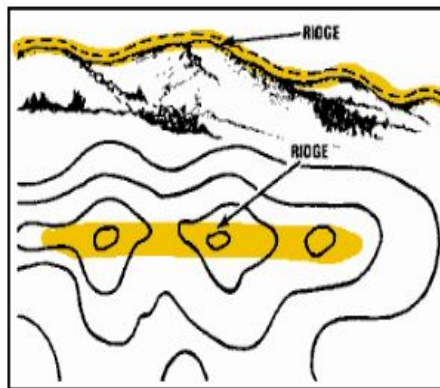
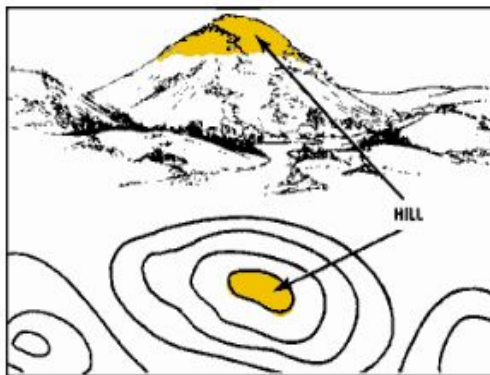
- 4 to 10 digits, generally 6 is enough.
- Eastings, then Northings (X, Y) - 010 074



ACE Interact > Map Tools > Show Small Map Tool.

Left Click and drag to move it around and ALT + LMB to rotate it

LAND FEATURES

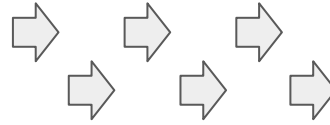




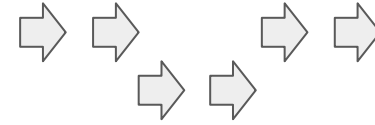
MOVING AS A UNIT



File



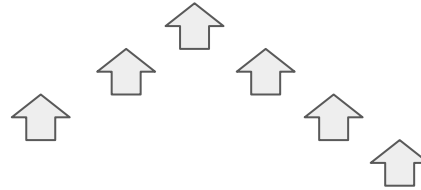
Column



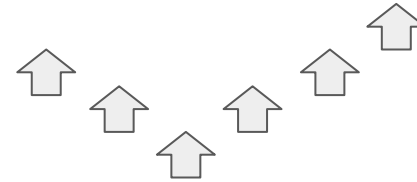
Double Column



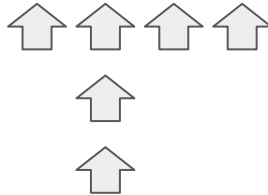
Line



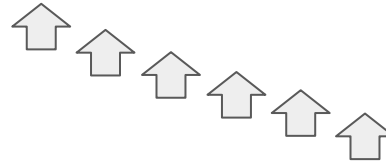
Wedge



Y or Vee



T-Formation



Echelon

**ALWAYS MAINTAIN 360°
MIND YOUR SECTORS**





COMMUNICATIONS

The key principles of proper communications use are:

- **Brevity:** Do not use more words than necessary.
- **Clarity:** Use proper tactical language.
- **Confirmation:** Confirm you have understood or read your orders back.
- **Alert and Identify:** Use keywords and state your callsign and the recipient's.
- **Formats:** Know your standard reports and requests.
- **Caution:** Use voice comms carefully around enemies and during CQC.



BASIC FORMATS

“EA - this is AQ - RADIO CHECK - OVER”

“EA - ROGER - OVER”

“AQ - 5 by 5 - OUT”

- State who you are speaking to.
- Identify yourself - not necessary if no ambiguity is possible but good practice.
- Transmit your message - try to keep it under 20 seconds.
- Use prowords “OVER” or “OUT” - NEVER USE TOGETHER.

Quick callouts for sighting and contacts:

- **ALERT:** “Contact” if engaging or “Sighting” if seen but not engaging.
- **ORIENT:** Directions relative to movement or bearing, range.
- **DESCRIBE:** Type of enemy, size or amount, any specific equipment.
- **EXPOUND:** Further specifics, exact range and bearings, activity, positioning.



KEY KNOWLEDGE

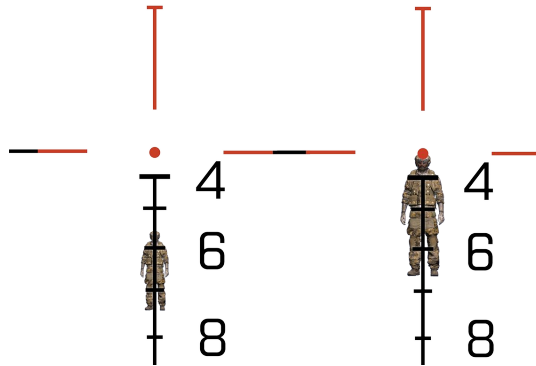
Required communications knowledge:

- Calling and answering, calling multiple stations and excluding stations.
- Signing into net, conducting radio checks.
- Indicating pauses, using preliminary calls, breaks and requesting repetitions.
- NATO Phonetic Alphabet.
- Prowords.
- Date Time Groups and Grid Coordinates.
- LOCSTAT, SITREP, CASREP, LACE, MEDEVAC.

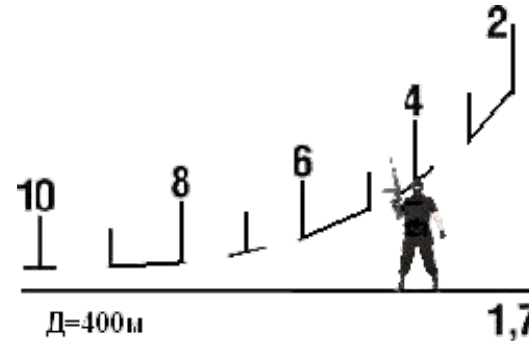


SIGHTS AND BALLISTICS

- Use “offset aiming” and the Bullet Drop Compensator or ironsights adjustment to account for bullet drop, starting low and going up.
- Aim for the upper chest, attempting headshots is not worth it.
- Targets moving at shallow angles require less lead than perpendicular movement.
- Be aware of the vertical distance between some optics and the rifle bore.



Bullet Drop Compensator



Stadiametric Rangefinder



TACTICAL COMBAT CASUALTY CARE (TCCC)

Three stages:

- ➔ **Case Under Fire (CUF):** Obtain fire superiority first then give basic aid.
- ➔ **Tactical Field Care (TFC):** Organize CCP and provide First Aid - NO CPR.
- ➔ **Tactical Evacuation Care (TEC):** Call for TACEVAC (MEDEVAC or CASEVAC).

Triaging:

1. Is the patient **walking**?
 - a. Yes: Mark as **PRIO 3**.
 - b. No: Step 2.
2. Is there a life-threatening **limb bleed**?
 - a. Yes: Use a tourniquet and mark as **PRIO 1**.
 - b. No: Step 3.
3. Is the patient **breathing**?
 - a. Yes: Step 4.
 - b. No: Open and control airways and check for breathing again:
 - i. Breathing: Put in the recovery position and mark as **PRIO 1**.
 - ii. Not breathing: During combat mark as **PRIO 4**, otherwise start CPR and mark as **PRIO 1**.
4. Check **respiratory rate**.
 - a. < 10 or > 30: Mark as **PRIO 1**.
 - b. 10 to 29: Step 5.
5. Check **pulse rate** and **AVPU** (Alert, Voice, Pain, Unresponsive):
 - a. 120+ and PU: Mark as **PRIO 1**.
 - b. < 120 and AV: Mark as **PRIO 2**.



BASIC TREATMENT

- **MARCH:**
 - **Massive Haemorrhage:** Treat any large bleeds first, using **tourniquets** on limbs and **bandages** on head and torso.
 - **Airways:** Place the patient in the recovery position, then check whether the airways are **occluded** or **obstructed**.
 - If **occluded**, use an **Accuvac** if available or **turn the head**.
 - If **obstructed**, stay close to the patient and **hyperextend the head**.
 - Otherwise, if **clear**, a Guedel Tube may be used to maintain.
 - **Respiration:** listen to the patient's breathing to check whether it is **shallow** or whether there is **none**.
 - If **shallow**, apply a **chest seal** to treat pneumothorax. If the patient has a chest wound and you cannot tell whether the breathing is shallow, it is best to apply just in case.
 - If **none**, check whether the patient has a **heart rate** at all and initiate **CPR** if not. Otherwise, return to **Airways** to ensure there are no new obstructions or occlusions. If this does not resolve, there is a possible haemothorax or tension pneumothorax which must be treated by a Medic.
 - **Circulation:** Infuse fluids where needed, performed by Medics.
 - **Hypothermia/Head injuries:** for Arma purposes, **splint** any broken limbs during this phase and provide pain relief if needed.
- **(C)ABCDE:**
 - **Catastrophic Haemorrhage.**
 - **Airway.**
 - **Breathing.**
 - **Circulation.**
 - **Disability:** assess patients using AVPU, check for head injuries.
 - **Exposure:** check for visible injuries and fractures that can be splinted and provide pain relief if needed.