- 24. Ground military vehicles used to transport casualties are referred to as CASEVAC. When nonmedical military vehicles are used, medical equipment and oftentimes medical personnel are not present.
- *Note 1.* Nonmedical military vehicles may be used to evacuate casualties when no medical evacuation vehicles are available.
- *Note 2.* If medical personnel are present, follow their instructions for loading, securing, and unloading casualties.
- 25. The following are guidelines for loading casualties into a ground evacuation vehicle:
 - When loading casualties into the vehicle, load the most seriously injured last.
- When the casualty is loaded lengthwise, load the casualty with his head pointing forward, toward the direction of travel.
 - Ensure each casualty is secured to the litter. Use litter straps if available.
 - Secure each litter to the vehicle as it is loaded into place. Make sure each litter is secured.

Note. Unload casualties in reverse order, most seriously injured casualty first.

SECTION IX – REQUEST MEDICAL EVACUATION (ATP 4-02.02)

- a) Collect all applicable information needed for the MEDEVAC request.
 - 1. Determine the grid coordinates for the pickup site.
 - 2. Obtain radio frequency, call sign, and suffix.
 - 3. Obtain the number of patients and precedence.
 - 4. Determine the type of special equipment required.
 - 5. Determine the number and type (litter or ambulatory) of patients.
 - 6. Determine the security of the pickup site.
 - 7. Determine how the pickup site will be marked.
 - 8. Determine patient nationality and status
- 9. Obtain pickup site nuclear, biological, and chemical (CBRN) contamination information, normally obtained from the senior person or medic.

Note: CBRN line 9 information is only included when contamination exists.

b) Record the gathered MEDEVAC information using the authorized brevity codes.

Note: Unless the MEDEVAC information is transmitted over secure communication systems, it must be encrypted, except as noted in step 3b(1).

- 1. Location of the pickup site (line 1).
- 2. Radio frequency, call sign, and suffix (line 2).
- 3. Numbers of patients by precedence (line 3).
- 4. Special equipment required (line 4).
- 5. Number of patients by type (line 5).
- 6. Security of the pickup site (line 6).
- 7. Method of marking the pickup site (line 7).
- 8. Patient nationality and status (line 8).
- 9. CBRN contamination (line 9).

c) Transmit the MEDEVAC request.

- 1. Contact the unit that controls the evacuation assets.
 - (1) Make proper contact with the intended receiver.
 - (2) Use effective call sign and frequency assignments from the SOI.
- (3) Give the following in the clear "I HAVE A MEDEVAC REQUEST;" wait one to three seconds for a response. If no response, repeat the statement.
 - 2. Transmit the MEDEVAC information in the proper sequence.
- (1) State all line item numbers in clear text. The call sign and suffix (if needed) in line 2 may be transmitted in the clear.

Note: Line numbers 1 through 5 must always be transmitted during the initial contact with the evacuation unit. Lines 6 through 9 may be transmitted while the aircraft or vehicle is en route.

- (2) Follow the procedure provided in the explanation column of the MEDEVAC request format to transmit other required information.
 - (3) Pronounce letters and numbers according to appropriate radio/telephone procedures.
 - (4) Take no longer than 25 seconds to transmit.
 - (5) End the transmission by stating "Over."
- (6) Keep the radio on and listen for additional instructions or contact from the evacuation unit.

Line	ltem	Explanation	Where/how obtained	Who normally provides	Reason
1	Location of pickup site.	Grid coordinates of the pickup site should be sent by secure communication. To prevent confusion the grid zone letters are included in the message.	From map or navigational device determine the military grid reference system six-digit grid coordinates of the pickup site.	Unit leader(s).	Required so evacuation vehicle knows where to pick up the patient/ casualty. Also, so that the unit coordinating the evacuation mission can plan the route for the evacuation vehicle (if the evacuation vehicle must pick up from more than one location).
2	Radio frequency, call sign and suffix.	Frequency of the radio at the pickup site, not a relay frequency. The call sign (and suffix if used) of person to be contacted at the pickup site may be transmitted in the clear.	From automated net control device or other approved means.	Radio transmission operator.	Required so that evacuation vehicle can contact requesting unit while en route (obtain additional information or changes in situation or directions).
3	Number of patients by precedence.	A—URGENT B— URGENT-SURG C—PRIORITY D— ROUTINE E— CONVENIENCE If two or more categories must be reported in the same request, insert the word "BREAK" between each category.	From evaluation of patients.	Medic or senior person present.	Required by unit controlling vehicles to assist in prioritizing missions.
4	Special equipment required.	A—None B—Hoist C—Extraction equipment D—Ventilator	From evaluation of patient/ situation.	Medic or senior person present.	Required so that the equipment can be placed on board the evacuation vehicle prior to the start of the mission.
5	Number of patients by type.	Report only applicable information, if requesting medical evacuation for both types, insert the word "BREAK" between the litter entry and ambulatory entry. L+# of patients—Litter A+# of patients— Ambulatory (sitting)	From evaluation of patients.	Medic or senior person present.	Required so that the appropriate number of evacuation vehicles may be dispatched to the pickup site. They should be configured to carry the patients requiring evacuation.

Nine-Line medical evacuation request

Line	Item	Explanation	Where/how obtained	Who normally provides	Reason
6	Security of pickup site (wartime).	N—No enemy troops in area. P—Possibly enemy troops in area (approach with caution). E—Enemy troops in area (approach with caution). X—Enemy troops in area (armed escort required).	From evaluation of situation.	Unit leader.	Required to assist the evacuation crew in assessing the situation and determining if assistance is required. More definitive guidance can be furnished to the evacuation vehicle while it is en route (specific location of enemy to assist an aircraft in planning its approach).
6	Number and type of wound, injury or illness (peacetime).	Specific information regarding patient wounds by type (gunshot or shrapnel). Report serious bleeding, along with patient's blood type, if known.	From evaluation of patients.	Medic or senior person present.	Required to assist evacuation personnel in determining treatment and special equipment needed.
7	Method of marking pickup site.	A—Panels B— Pyrotechnic signal C—Smoke signal D— None E—Other	Based on situation and availability of materials.	Medic or senior person present.	Required to assist the evacuation crew in identifying the specific location of the pickup. Note that the color of the panel or smoke should not be transmitted until the evacuation vehicle contacts the unit (just prior to its arrival). For security, the crew should identify the color and the unit verifies it.
8	Patient nationality and status.	The number of patients in each category need not be transmitted. A—U.S. military B— U.S. citizen C—Non- U.S. military D— Non-U.S. citizen E—enemy prisoner of war	From evacuation platform.	Medic or senior person present.	Required to assist in planning for destination facilities and need for guards. Unit requesting support should ensure that there is an Englishspeaking representative at the pickup site.
9	Chemical, Biological, Radiological, and Nuclear contamination (wartime).	Include this line only when applicable C—Chemical B—Biological R—Radiological N—Nuclear	From situation.	Medic or senior person present.	Required to assist in planning for the mission. (Determine which evacuation vehicle will accomplish the mission and when it will be accomplished.)
9	Terrain description (peacetime).	Includes details of terrain features in and around proposed landing site. If possible, describe relationship of site to prominent terrain feature (lake, mountain, tower).	From area survey.	Personnel present.	Required to allow evacuation personnel to assess route/avenue of approach into area. Of particular importance if hoist operation is required.

Nine-Line medical evacuation request (continued)

MEDEVAC REQUEST CARD—FRONT

MEDEVAC REQUEST CARD

GTA 08-01-004

LINE	ITEM	EVACUATION REQUEST MESSAGE
1	Location of Pickup Site.	
2	Radio Frequ., Call Sign, & Suffix.	
3	No. of Patients by Precedence.	
4	Special Equipment Required.	
5	Number of Patients by Type.	
6	Security of Pickup Site (Wartime).	
6	Number and Type of Wound, Injury, or Illness (Peacetime).	
7	Method of Marking Pickup Site.	
8	Patient Nationality and Status.	
9	CBRN Contamination (Wartime).	
9	Terrain Description (Peacetime).	

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MEDEVAC REQUEST CARD—BACK

LINE ITEM	EXPLANATION			
1. Location of Pickup Site.	Encrypt grid coordinates. When using DRYAD Numeral Cipher, the same SET line will be used to encrypt grid zone letters and coordinates. To preclude misunderstanding, a statement is made that grid zone letters are included in the message (unless unit SOP specifies its use at all times).			
2. Radio Frequency, Call Sign, Suffix.	Encrypt the frequency of the radio at the pickup site, <i>not</i> a relay frequency. The call sign (and suffix if used) of person to be contacted at the pickup site may be transmitted in the clear.			
3. No. of Patients by Precedence.	Report only applicable info & encrypt brevity codes. A = Urgent, B = Urgent-Surg, C = Priority, D = Routine, E = Convenience. (If 2 or more categories reported in same request, insert the word "break" btwn. each category.)			
4. Spec Equipment.	Encrypt applicable brevity codes. A = None, B = Hoist, C = Extraction equipment, D = Ventilator.			
5. No. of Patients by Type.	Report only applicable information and encrypt brevity code. If requesting MEDEVAC for both types, insert the word "break" between the litter entry and ambulatory entry: L + # of Pnt -Litter; A + # of Pnt - Ambul (sitting).			
6. Security Pickup Site (Wartime).	N = No enemy troops in area, P = Possibly enemy troops in area (approach with caution), E = Enemy troops in area (approach with caution), X = Enemy troops in area (armed escort required).			
6. Number and type of Wound, Injury, Illness (Peacetime).	Specific information regarding patient wounds by type (gunshot or shrapnel). Report serious bleeding, along with patient blood type, if known.			
7. Method of Marking Pickup Site.	Encrypt the brevity codes. A = Panels, B = Pyrotechnic signal, C = Smoke Signal, D = None, E = Other.			
8. Patient Nationality and Status.	Number of patients in each category need not be transmitted. Encrypt only applicable brevity codes. A = US military, B = US civilian, C = Non-US mil, D = Non-US civilian, E = EPW.			
9CBRNContami- nation, (Wartime).	Include this line only when applicable. Encrypt the applicable brevity codes. N = nuclear, B = biological, C = chemical.			
9. Terrain Description (Peacetime).	Include details of terrain features in and around proposed landing site. If possible, describe the relationship of site to a prominent terrain feature (lake, mountain, tower).			

Reference: ATP 4-02.2, Medical Evacuation.