

Chapter 4

Logistics

HSS logistics encompasses the procurement, initial issue, management, resupply, and disposition of material required to support medical and dental elements organic to the MARFOR. Requisitions for Class VIIIA (consumable and equipment) material follow the same channels as other classes of supply. Guidance for planning and procuring Class VIIIB (blood products) is found in DOD Instruction 6480.4, *Armed Services Blood Program Operational Procedures*.

As with all classes of supply, careful consideration should be given to stockage levels of Class VIIIA material. Commanders should not be burdened with moving and maintaining excess material, nor should the need for support ever be delayed because of inadequate access or lack of responsiveness. When the medical planner is developing and planning for appropriate levels of Class VIIIA support, the following information is crucial to ensuring that the entire HSS system is responsive to the commander:

- Concept of operation/scheme of maneuver.
- Combat intensity.
- Duration of the operation.
- Casualty estimates.

4001. Allowance and Source of Logistics

The MAGTF surgeon advises the MAGTF commander regarding medical and dental material support. Allocation of material is documented in the table of equipment (T/E); the AMALs/ADALs; and the normal replenishment supply support. The total T/E and AMALs/ADALs are designed to support a MEF in an estimated worst case scenario for a 60-day period of combat. The quantity of AMALs/ADALs required to support a MEF is determined by the mission requirements of that force. The AMALs/ADALs are to be allocated to support specific requirements. The authorizing commander is responsible for funding AMALs/ADALs above the level prescribed by the Marine Corps order 4400 series.

Table of Equipment

A unit's T/E includes items necessary for basic support of the organization. Examples of this type of equipment include—

- Tentage.
- Vehicles.
- Tools.
- Communications equipment.
- Nuclear, biological, and chemical (NBC) gear.
- Specialized clothing.
- Office equipment.
- Other equipment and supplies, as required.

AMALs and ADALs

AMALs and ADALs are specialized equipment and supply assemblages for medical and dental elements to provide combat HSS. The medical and dental elements have the capability to provide the following services:

- Trauma management.
- Resuscitative surgery.
- Expeditionary laboratory.
- Pharmacy.
- X-ray.
- Dental.
- Preventive medicine.
- NBC treatment.
- Patient holding.
- Sick call.
- Environmental supplements.
- HSS test and repair systems.

See appendix B for a detailed description of AMALs and ADALs.

Normal Replenishment Supply Support

HSSEs deploy with their initial issue and the days of supply prescribed by the MAGTF commander. For the first 60 days of operations, Class VIIIA material beyond this level for the MEF is maintained by the CSSE and provided to supported units as required. For operations more than 60 days, medical resupply is

generally provided to the using HSS unit by the CINC's designated single integrated medical logistics manager (SIMLM) via the CSSE.

Single Integrated Medical Logistics Manager

HSS logistics is normally a Service responsibility. However, in joint operations, a SIMLM system may be designated to provide central logistical support to all participating Services in the combatant CINC's area of responsibility. As the dominant user, the U.S. Army has been formally tasked by the DOD to perform the peacetime SIMLM mission in the European and Korean theaters. Under wartime or crisis conditions, the U.S. Army will usually be the dominant Class VIII user and must plan for the SIMLM mission.

The SIMLM system encompasses the provision of medical supplies, medical equipment maintenance and repair, blood management, and optical fabrication to all joint forces within the theater of operations, except Navy combatant ships.

HSS logistics can be provided to Navy hospital ships for common, demand-supported medical supplies in the later stages of theater development. Activation of the SIMLM mission depends on the time-phased force and deployment list supporting the contingency. Air delivery of emergency medical supplies can be used where and when tactically supportable. The CSSE supply detachment, which may include portions of Med Log Co, provides Class VIIIA single-item resupply and, eventually, limited medical repair capabilities to all HSS units of the MAGTF. Supporting combat service support detachments provide medical resupply to medical units of other MAGTF elements.

4002. Individual HSS Equipment

Hospital corpsmen assigned to combat support units of the MAGTF are assigned a complete first aid kit as part of their field gear. These kits may be held by the unit organic supply section and issued on an as needed basis. The corpsmen's parent unit supply section is responsible for ensuring that contents of the first aid kit are maintained in good condition, and that medications have not exceeded their shelf life. Dental officers will be issued a dental instrument and supply set (unit-2).

4003. Routine Resupply

HSS personnel needing resupply will forward requisitions to their unit's supply section. The supply section will, in turn, pass the requisition to the supported activities supply system management unit, or if deployed, the supply section of the CSSE. The CSSE orders, receives, and distributes the required material. While HSS personnel may be of help in identifying alternate doses or approved substitutes, care is required in using alternate sources of supply, other than those already approved by the Defense Medical Standardization Board or Navy Medical Logistics Command. HSS personnel may also assist in identifying the location of other U.S. medical facilities where required items may be obtained.

4004. Combat Resupply

During embarkation planning, HSS planners determine the number and type of AMALs/ADALs required to support the assault phase of the operation. Additional Class VIIIA consumable

material will be positioned for deployment with the supply section of the CSSE. After the consumable AMALs/ADALs modules are issued and expended, or when directed, resupply will be accomplished by normal line item requisition from the supporting CSSE. When stockpiles of MAGTF Class VIIIA are expended, Class VIIIA will be obtained through the designated SIMLM provider.

4005. Patient Movement Items

Patient movement items (PMI) are the medical equipment and supplies required to support the patient during evacuation, e.g., ventilators, vital sign monitors, and blankets. Handling and return of equipment to the aeromedical evacuation (AE) system requires a reliable supporting logistics infrastructure to ensure that PMI are available and serviceable. The plan for a PMI exchange system and the return of AE equipment and PMI to the originating MTF should be addressed in the respective operation plan (OPLAN).

When a patient requires evacuation, the originating MTF has responsibility to provide the PMI. These items accompany a patient throughout the chain of evacuation from originating MTF to destination MTF, whether it is an intra- or intertheater transfer.

The Services will include and maintain initial quantities of PMI in the appropriate medical assemblages.

4006. Disposal of Materials

Disposal of soiled, contaminated, or other unserviceable Class VIIIA items must be accomplished with due consideration for the safety of U.S. forces and local civilian populations.

Disposal must also be in compliance with local and international laws, ordinances, or customs governing such disposal whenever operations allow. When disposal takes place in the U.S. or its territories, Class VIIIA disposal is coordinated with the local office of the Defense Reutilization Marketing Office. Peacetime disposal overseas is coordinated under the guidance of the Defense Reutilization Marketing Office or supporting CSSE.

When the tactical situation permits during combat operations, the safest method of field disposal is burning, followed by deep burial (over 6 feet). The burial site must be located at a safe distance from watersheds and populated areas. Responsibility for neutralization and disposal of clothing, equipment, and dressings removed during NBC decontamination processes resides with the command's NBC officer.

Disposal of body parts, tissues, and Class VIIIB blood and blood products obtained during operative or diagnostic procedures is, preferably, accomplished in the same manner as used by local medical facilities. Alternative disposal by burning or deep burial requires prior authorization and specific guidance of higher authority. Prior coordination with local health authorities and religious leaders should be accomplished whenever possible.

4007. Protection of Medical Supplies

Medical material and supplies are protected under the law of land warfare and the Geneva Conventions. However, when medical material and supplies are mixed with combat supplies, they lose the protection afforded by these covenants. Marking of medical material and supply storage areas with the red cross of the Geneva Conventions is a tactical decision to be made by the area commander. The Geneva Conventions and the law of land warfare prohibit the destruction of medical material and supplies that must be abandoned in a retrograde movement occasioned by enemy action or other tactical considerations.