

# 2019 SOMSA Program – Full Schedule (Mon-Fri)

## Day 1: Monday, May 6, 2019 - LABS

Time	Lab Title	Lab Director
0800 - 1700	<p><b>K9 Tactical Emergency Casualty Care</b></p> <p>The K9 Tactical Emergency Casualty Care (K9-TECC) course is an 8 hour course that focuses on prehospital tactical casualty care for the injured Operational K9. The goal of prehospital interventions is to eliminate THE MAJOR PREVENTABLE CAUSES OF DEATH with the intent of only providing the medical or surgical procedures necessary to manage problems that immediately threaten life, limb, or eyesight, and to prepare the dog for evacuation to definitive veterinary care. The course incorporates current TCCC and TECC guidelines using the M3ARCH2 PAWS approach with adaptations relative to canine anatomy and physiology.</p>	<p>Lee Palmer Nell Dalton Bruce Carleton Melissa Edwards Sean Smarick</p>
1000 - 1200	<p><b>Introduction to REBOA for Medics</b></p> <p>A practical and theoretical session aimed to introduce medics to the use of REBOA. The theoretical portion incorporates real world case studies and will be followed by a practical exercise on simulators that will allow attendees to place an ultrasound assisted REBOA.</p>	<p>Michael Turconi Carmine Della Vella Justin Rapp Kari Jerge Cornelius Powell</p>
1000 - 1500	<p><b>Wilderness &amp; Austere Medicine</b></p> <p><b>No onsite registrations for this lab. Maximum of 45 attendees</b></p> <p>This lab will involve hands on training in 3 distinct aspects of Wilderness and Austere Medicine. It will be held at the US National Whitewater Center, a world renowned location with access to varied environments for training. Instructors will be experts in their field with experience in training special operations medics, law enforcement and paramedics. Expect to be in three small groups moving between 3 unique stations that will hone your skills and knowledge. The stations will cover an intro to swift water rescue; 3:1 high angle rescue system overview and practice; and wilderness survival basics and techniques.</p> <p>Lab participants will be welcome to stay and enjoy the many outdoor activities offered that the White Water Center offers such as climbing, mountain biking, hiking, zip line, rafting, etc. The lab should conclude no later than 1500 and the park is open until 1800. Those who choose to stay will be required to purchase a pass. Pass Options that will be in addition to lab fee:</p> <p>Day Pass - \$59 per person and good for all activities - <a href="https://usnwc.org/visit/passes-tours/">https://usnwc.org/visit/passes-tours/</a></p> <p>Single Activity Pass - \$25 - \$30 per person. Good for one activity for the day.</p> <p>Those staying after the lab should also plan for their own transportation back to town either by Uber or taxi.</p> <p><b>BUS TRANSPORTATION</b> will be supplied to and from the Charlotte Convention Center to the whitewater center. The bus will load outside the Martin Luther King St. entrance to the convention center at 8:30 am SHARP with arrival at the center at 9:45 am for check-in. The bus will depart the whitewater center at 3:30 pm with arrival back at the convention center at 4:15 pm. If you miss the bus, it will be up to you to find transportation to the whitewater center via Uber or taxi. The address is: 5000 Whitewater Center Parkway, Charlotte, NC 28214.</p> <p><b>DRESS CODE:</b> "Roughs" field/outdoor work clothes appropriate for the weather and outdoor wear. You will have the opportunity to participate in the water rescue training which will involve getting in the water. If you would like to participate in this hands-on training, I suggest packing clothes you are ok with getting wet and a change of clothes. Bring sun protection and water. There will be food and water available there for purchase as well.</p>	<p>Hunter Winegarner Daniel Burgess Jon Christensen</p>

1000 - 1200	<p><b>PFC Package in INDOPACOM: Utilizing Existing SOF MES Sets to Repurpose for PFC Capabilities during VIP Support Missions</b></p> <p>A SOF Truth is that the human is more important than any piece of equipment and the prolonged field care problem set has focused on training these concepts in recent years, given our unsustainable CENTCOM MEDEVAC model. This hands-on laboratory session will focus on how to use existing SOF MES sets and a few adjunct Class 8, in order to provide a PFC capable Role 1(-). Proof of concept was executed from 2017-2018 during several VIP support missions throughout INDOPACOM. Second half of the session will focus on round table discussion of other ideas of equipping SOF units for PFC training events.</p>	Andrew Oh Benjamin Chi Michael Van Gent
1000 - 1200	<p><b>SOFSono in PFC and Sick-Call Medicine: An Ultrasound Interpretation Lab</b></p> <p>This lab will focus on PFC and sick-call relevant case interpretation and clinical/operational decision-making process of a SOF medic, rather than technical skills of scanning. During this case-based 2-hour lab, an international team of 2 SOF Medics (USA, Poland) and an emergency physician (USA/Poland) will lead you through a large number of SOF-pertinent ultrasound cases and stimulate a discussion on clinical and operational decisions which can be aided by application of ultrasonography in austere environments. Each case will be led in by a short presentation, i.e. chief complaint, limited history of present illness, pertinent clinical exam findings and vital signs. This will be followed by the ultrasound exam with actual images and/or video clips of pathology and normal findings. We will engage the lab participants in interpretation of all the information obtained, and we will prompt them to discuss patient management, minding any operational limitations in denied areas. We will work interactively with all the participants.</p>	Kasia Hampton Christopher Dare
1000 - 1200	<p><b>Women's Health Care in an Austere Environment</b></p> <p>Using a combination of lecture, visuals and hands-on practice with manikins the students will learn how to respond to common obstetrical and gynecological emergencies that they may encounter in remote, austere locations. These emergencies will include postpartum hemorrhage, retained placenta, obstructed labor, postpartum infection and ectopic pregnancy.</p>	David Ludlow Mike Mori
1200 - 1300	Lunch on Your Own	
1200 - 1400	<p><b>Teleflex Prehospital Emergency Care Procedure Cadaver Lab</b></p> <p>The purpose of this session, presented by Teleflex, is to provide a unique opportunity to review relevant anatomy associated with critical care and lifesaving emergency procedures. Participants will enhance their understanding of the various procedures and the associated risks and benefits through the hands-on practicum. The relevant review of the anatomy will include airway, chest cavity and vascular access landmarks. Under expert instruction, participants will have the opportunity to practice the following procedural skills: basic airway management, direct and video laryngoscopy, intraosseous access, hemorrhage control and various other emergency procedures.</p>	Dan Smith Jim Blosser
1300 - 1700	<p><b>Critical Care and Prolonged Field Management (CCPFM) Procedure Cadaver Course</b></p> <p>The CCPFM procedure course is specifically developed to enhance your understanding of high value, low frequency skills in the emergent and prolonged field care setting. These skills include: Hemorrhage Control (digital, packing, tourniquets, and REBOA); Thoracic Injury Management (chest seals, needle decompression, finger and tube thoracostomy); Airway and Ventilation Management (positioning, BLS, ALS, surgical and exchange); Vascular Access (peripheral, intraosseous, central venous, cut-down and fluid delivery), Expedited Amputations, Fundamental Suturing and Securing, as well as a dissection of an entire specimen for in-depth gross and procedural anatomy (inclusive of conversations that derive from these dissections). This course is dramatically enhanced by nationally recognized experts (military and civilian) who impart procedure pearls and methods to effectively use human specimens in your team's pre-deployment preparations. In short, the CCPFM course gives you an unobstructed procedural view for moments when borders fade and life cannot.</p>	Scotty Bolleter

1300 - 1700	<p><b>Moulage Basic Theory and Practice</b></p> <p>In this four-hour course you will learn the theory and basics to acquire, create and apply moulage to guide learners in a disaster/ trauma/ active shooter type educational event. Good for novice and established Moulage Specialists. We will be going over the various makeup mediums and what works best and sets us apart from movie style makeup. This class will be quick paced for maximum effectiveness. Please be prepared to have makeup applied to yourself. Bring a change of clothes, or at a minimum, different shirt. We will go over topics from bruising, improvisational silicone build-ups, some prosthetics, and some basic bleeding.</p>	David Shablak David Cherolis Lish Robinson
1300 - 1500	<p><b>Introduction to REBOA for Medics</b></p> <p>A practical and theoretical session aimed to introduce medics to the use of REBOA. The theoretical portion incorporates real world case studies and will be followed by a practical exercise on simulators that will allow attendees to place an ultrasound assisted REBOA.</p>	Michael Turconi Carmine Della Vella Justin Rapp Kari Jerge Cornelius Powell
1300 - 1700	<p><b>Introduction to Combat and Tactical Ultrasound Workshop for Tactical Operators and Providers</b></p> <p>Designed for novices to combat and tactical uses of ultrasound by special operators, or those interested in honing their basic ultrasound skills and learning how handheld ultrasound devices can improve medical care in far forward and tactical environments. Instead of feeling or listening for injuries, literally see through the body and identify life-threatening injuries like never before. This course will have brief lectures, followed by hands-on ultrasound scanning of each other (please be sure to wear loose fitting clothing).</p>	Eric Chin Kristine Jeffers John Knight Brian Hall Ryan Curtis Aaron Cronin Melissa Myers Jared Cohen
1300 - 1700	<p><b>Fresh Whole Blood Transfusions &amp; Freeze-Dried Plasma (Practical)</b></p> <p>Use the latest gear in whole blood transfusion process and receive a lecture and hands-on instruction in fresh whole blood transfusions. You will be able to type and collect your partner's blood and transfuse it back to him/her. Get familiarized with freeze-dried plasma.</p>	Shane Kronstedt Sean Leibrock
1300 - 1700	<p><b>Fundamentals of Simulation for Prehospital Provider Education</b></p> <p>The Fundamentals of Simulation course is a 4-hour immersive course meant to establish and enhance a participants' understanding about simulation theory, practice and research. The course will provide the educator with a solid foundation based on research and best practice to integrate and deliver and manage quality simulation activities within an initial or continuing educational program. This course is geared toward the new and mid-level educators.</p>	Tim Whitaker Matthew David Charnetski
1300 - 1700	<p><b>Non Trauma Modules: Preventive Medicine, Veterinary Medicine and Mental Health</b></p>	Eli Edmonds Marcus Wisner Mark Evans Brian Larsen Chris Larsen David Wood Chris Beisinger Sean Conorch
1300 - 1700	<p><b>Tactical Medicine Review &amp; Exam</b></p> <p>18D, SOCM medics, NSOCM medics and paramedics are allowed to sit the IBSC board certification for Tactical Paramedic. Additionally, medical doctors and physician assistants can sit this exam. This workshop will provide two hours of tactical medicine review followed by the IBSC board exam. This exam will be the paper based exam which has a higher pass rate than the computer based exam. Additionally, any of the IBSC exams can be taken during this workshop. That includes: Flight Paramedic, Critical Care Paramedic or Tactical Responder. Exam fees are \$325</p>	Aebhric O'Kelly Kyle Faudree

1430 - 1630	<p><b>Teleflex Prehospital Emergency Care Procedure Cadaver Lab</b></p> <p>The purpose of this session, presented by Teleflex, is to provide a unique opportunity to review relevant anatomy associated with critical care and lifesaving emergency procedures. Participants will enhance their understanding of the various procedures and the associated risks and benefits through the hands-on practicum. The relevant review of the anatomy will include airway, chest cavity and vascular access landmarks. Under expert instruction, participants will have the opportunity to practice the following procedural skills: basic airway management, direct and video laryngoscopy, intraosseous access, hemorrhage control and various other emergency procedures.</p>	Dan Smith Jim Blosser
1500 - 1700	<p><b>SOFsono in PFC and Sick-Call Medicine: An Ultrasound Interpretation Lab</b></p> <p>This lab will focus on PFC and sick-call relevant case interpretation and clinical/operational decision-making process of a SOF medic, rather than technical skills of scanning. During this case-based 2-hour lab, an international team of 2 SOF Medics (USA, Poland) and an emergency physician (USA/Poland) will lead you through a large number of SOF-pertinent ultrasound cases and stimulate a discussion on clinical and operational decisions which can be aided by application of ultrasonography in austere environments. Each case will be led in by a short presentation, i.e. chief complaint, limited history of present illness, pertinent clinical exam findings and vital signs. This will be followed by the ultrasound exam with actual images and/or video clips of pathology and normal findings. We will engage the lab participants in interpretation of all the information obtained, and we will prompt them to discuss patient management, minding any operational limitations in denied areas. We will work interactively with all the participants.</p>	Kasia Hampton Christopher Dare
1500 - 1700	<p><b>Women's Health Care in an Austere Environment</b></p> <p>Using a combination of lecture, visuals and hands-on practice with manikins the students will learn how to respond to common obstetrical and gynecological emergencies that they may encounter in remote, austere locations. These emergencies will include postpartum hemorrhage, retained placenta, obstructed labor, postpartum infection and ectopic pregnancy.</p>	David Ludlow Mike Mori
1700 – 2100	<p><b>Dentistry for the SOF Operator</b></p> <p>This lab will review the diagnosis and treatment of common dental pathologies and dental emergencies in the austere setting utilizing minimal equipment. Hands on review of dental blocks, temporary fillers and other techniques will be taught. Besides teaching dental skills for attendees, course will also review use of simple dental procedures in running a UW medical/dental program for host nation civilians in contested areas. Course repeated on second day. This is now a 4-hour lab.</p>	Robert Harrington Jerold Kouchi

**Day 2: Tuesday, May 7, 2019 - LABS**

Time	Lab Title	Lab Director
0800 – 1700	<p><b>SOMA/NAEMSP Military Medical Director Overview Course</b></p> <p>This is a high-yield exposure to the dynamic world of the EMS medical director. With a unique emphasis on military-specific issues, this course will introduce the participant to the history of EMS, foundational concepts of EMS medical direction, military-unique issues in medical oversight, EMS resiliency, and a case-based discussion with a panel of military EMS experts.</p>	Elliot Ross Jeffrey Siegler
0800 – 1700	<p><b>K9 Tactical Emergency Casualty Care</b></p> <p>The K9 Tactical Emergency Casualty Care (K9-TECC) course is an 8 hour course that focuses on prehospital tactical casualty care for the injured Operational K9. The goal of prehospital interventions is to eliminate THE MAJOR PREVENTABLE CAUSES OF DEATH with the intent of only providing the medical or surgical procedures necessary to manage problems that immediately threaten life, limb, or eyesight, and to prepare the dog for evacuation to definitive veterinary care. The course incorporates current TCCC and TECC guidelines using the M3ARCH2 PAWS approach with adaptations relative to canine anatomy and physiology.</p>	Lee Palmer Nell Dalton Bruce Carleton Melissa Edwards Sean Smarick

0800 – 1700	<p><b>CONTOMS Medical Directors Course</b>  The Medical Directors Course is an eight-hour course designed for <i>physicians and others who provide medical control for pre-hospital personnel operating with tactical law enforcement teams</i>. This course details the rationale and scientific basis for modified standards and scope of practice in the tactical environment. Key topics include:  Background for TEMS practice  Modifications in medical procedures and philosophy for care in the tactical environment  TEMS Protocol development  Step-by-step development of a TEMS program  Quality assurance mechanisms  Role of the physician in TEMS  Controversial issues in TEMS  Tactical Commander's perspective on TEMS</p>	Greg Smith Mike Buffum Jeffery Schneider Denis Fitzgerald Richard Thomas
0800 – 1700	<p><b>Prolonged Field Care - SOF Training, Medicine Included</b>  Designed as an immersive lab experience with shared best practices from PFC Master Trainers, the participant will gain exposure to recent PFC guidelines, technology, and updates. The format is minimally didactic with emphasis on discussion, case examples, sharing how participants' units train PFC, and demonstrations of principles and technology in a small group format.</p>	Jaime Riesberg Steve Koplín Grigory Charny
0800 – 1000	<p><b>SOFSono in PFC and Sick-Call Medicine: An Ultrasound Interpretation Lab</b>  This lab will focus on PFC and sick-call relevant case interpretation and clinical/operational decision-making process of a SOF medic, rather than technical skills of scanning. During this case-based 2-hour lab, an international team of 2 SOF Medics (USA, Poland) and an emergency physician (USA/Poland) will lead you through a large number of SOF-pertinent ultrasound cases and stimulate a discussion on clinical and operational decisions which can be aided by application of ultrasonography in austere environments. Each case will be led in by a short presentation, i.e. chief complaint, limited history of present illness, pertinent clinical exam findings and vital signs. This will be followed by the ultrasound exam with actual images and/or video clips of pathology and normal findings. We will engage the lab participants in interpretation of all the information obtained, and we will prompt them to discuss patient management, minding any operational limitations in denied areas. We will work interactively with all the participants.</p>	Kasia Hampton Christopher Dare
0800 – 1100	<p><b>Improvised Extremity and Improvised Junctional Tourniquets</b>  This lab will provide insight and experience on the application, use, benefits, and training methodologies for improvised tourniquets to be used operationally in the SOF, Law Enforcement Agencies, Non-Governmental Organizations, and EMS communities. Impact is to increase therapeutic, operational, and logistical understanding of improvised extremity and junctional tourniquets to educate the benefits, principles of use, and considerations in austere, emergency, or limited environments.</p>	Mike Hetzler Win Kerr Tim Plackett
0800 - 1200	<p><b>Critical Care and Prolonged Field Management (CCPFM) Procedure Cadaver Course</b>  The CCPFM procedure course is specifically developed to enhance your understanding of high value, low frequency skills in the emergent and prolonged field care setting. These skills include: Hemorrhage Control (digital, packing, tourniquets, and REBOA); Thoracic Injury Management (chest seals, needle decompression, finger and tube thoracostomy); Airway and Ventilation Management (positioning, BLS, ALS, surgical and exchange); Vascular Access (peripheral, intraosseous, central venous, cut-down and fluid delivery), Expedited Amputations, Fundamental Suturing and Securing, as well as a dissection of an entire specimen for in-depth gross and procedural anatomy (inclusive of conversations that derive from these dissections). This course is dramatically enhanced by nationally recognized experts (military and civilian) who impart procedure pearls and methods to effectively use human specimens in your</p>	Scotty Bolleter

	team's pre-deployment preparations. In short, the CCPFM course gives you an unobstructed procedural view for moments when borders fade and life cannot.	
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0800 – 1200	<p><b>Fresh Whole Blood Transfusions &amp; Freeze-Dried Plasma (Practical)</b></p> <p>Use the latest gear in whole blood transfusion process and receive a lecture and hands-on instruction in fresh whole blood transfusions. You will be able to type and collect your partner's blood and transfuse it back to him/her. Get familiarized with freeze-dried plasma.</p>	Shane Kronstedt Sean Leibrock
0800 – 1200	<p><b>Battlefield Auricular Acupuncture (Certification Course)</b></p> <p>Didactics and hands-on skills lab for certification in Battlefield Acupuncture, an auricular acupuncture protocol for the treatment of acute and chronic pain.</p>	Dean Hommer David Djuric
0800 – 1200	<p><b>Moulage Advanced Theory and Practice</b></p> <p>A continued class to Moulage Basic (but not required). We will continue with advanced materials and applications for truly dramatic effects including Prosthetics, and advanced bleeding effects. This class will use more complicated prosthetics. Materials such as, Pros Aide transfers, encapsulated silicone, dirt effects, and blood layering techniques to name a few.</p>	David Shablak David Cherolis Lish Robinson
0800 – 1200	<p><b>Advanced Combat and Tactical Ultrasound Workshop for Tactical Operators and Providers</b></p> <p>This HANDS-ON workshop (i.e., no formal lectures) is designed for tactical operators and providers interested in learning specific ADVANCED tactical ultrasound skills for use in far forward and tactical environments. Choose up to four different ultrasound skills to master with an expert by rotating to a different skills station every 60 mins. Topics covered include: Trauma-based E-FAST, ocular ultrasound, ultrasound-assisted regional anesthesia, modified Rapid Ultrasound for Shock and Hypotension (Modified RUSH exam), musculoskeletal and soft tissue (fracture, abscess, joint injections, tendon ruptures, etc.), focused cardiac ultrasound and hemodynamic assessment (echo, pericardiocentesis, IVC), and scan with an expert. This is a hands-on and interactive workshop where you will be scanning models and/or each other (please be sure to wear loose fitting clothing). No prior experience is necessary, however, the introductory ultrasound workshop is highly recommended for those completely new to ultrasound.</p>	Eric Chin Kristine Jeffers John Knight Brian Hall Ryan Curtis Aaron Cronin Melissa Myers Jared Cohen
0800 – 1200	<p><b>Osteopathic Manipulative Medicine</b></p> <p>Musculoskeletal pain is a common occurrence for operators and desk jockeys alike. Pain experienced can range from a minor annoyance to downright debilitating. This lab will teach you the skills to diagnose skeletal dysfunction and the techniques to fix them. You will also enhance your physical exam assessment with the palpatory skills that you will gain.</p>	Michael Mack Greg Hawkesworth
0800 – 1200	<p><b>Portable Mechanical Ventilation Techniques for the Prehospital Trauma Patient</b></p> <p>This lab reviews the respiratory physiology for invasive and non-invasive mechanical ventilation of patient's affected by trauma in the pre-hospital setting. This lab also includes hands on demonstrations of common portable ventilators and techniques for</p>	Seth Assar Jason Richard Randel Davis

	<p>optimizing the ventilation of your patient as they transition to a higher level of care. Participants in this discussion should have a prerequisite foundation of respiratory physiology and experience with the nomenclature and common modes of mechanical ventilation.</p>	
0800 – 1200	<p><b>Detection and Mitigation of Malaria in the Austere Setting</b>  Malaria continues to be a major threat to deployed personnel and host country nationals, despite technological and pharmaceutical advances. Rapid diagnostic tests (RDTs) are an essential component of the deployed SOF Medic’s kit, but the many limitations of RDTs require proficiency in the gold-standard malaria diagnostic technique: microscopy. This session consists of 2 hours of hands-on labs (blood smears, staining, and microscopy of prepared Plasmodium specimens), and 2 hours of didactic lessons. Up-to-date research on the newly approved drug tafenoquine and emerging simian malaria species will also be presented. Previous Tropical Medicine training and microscope experience is helpful but not required. Limited class size of 12.</p>	<p>Aebhric O'Kelly  Michael Shertz  Jason Jarvis</p>
0800 – 1200	<p><b>Team Health: Core Anatomy Review, Exercise Injury Prevention &amp; Sports Medicine Dirty Tricks to Keep Operators Functional</b>  This lab focuses on core stability and functional exercises. Anatomy review, traditional and non-traditional core exercises including nerf gun shooting, proven sports medicine tricks of the trade keeping operators functional when forward, and a detailed discussion on injury prevention while engaged in high intensity exercise and competition.</p>	<p>A. S. Woody Goffinett  Travis Synder</p>
1200 - 1300	Lunch On Your Own	
1300 - 1500	<p><b>Introduction to REBOA for Medics</b>  A practical and theoretical session aimed to introduce medics to the use of REBOA. The theoretical portion incorporates real world case studies and will be followed by a practical exercise on simulators that will allow attendees to place an ultrasound assisted REBOA.</p>	<p>Michael Turconi  Carmine Della Vella  Justin Rapp  Kari Jerge  Cornelius Powell</p>
1300 – 1600	<p><b>Improvised Extremity and Improvised Junctional Tourniquets</b>  This lab will provide insight and experience on the application, use, benefits, and training methodologies for improvised tourniquets to be used operationally in the SOF, Law Enforcement Agencies, Non-Governmental Organizations, and EMS communities. Impact is to increase therapeutic, operational, and logistical understanding of improvised extremity and junctional tourniquets to educate the benefits, principles of use, and considerations in austere, emergency, or limited environments.</p>	<p>Mike Hetzler  Win Kerr  Tim Plackett</p>
1300 - 1700	<p><b>Critical Care and Prolonged Field Management (CCPFM) Procedure Course</b>  The CCPFM procedure course is specifically developed to enhance your understanding of high value, low frequency skills in the emergent and prolonged field care setting. These skills include: Hemorrhage Control (digital, packing, tourniquets, and REBOA); Thoracic Injury Management (chest seals, needle decompression, finger and tube thoracostomy); Airway and Ventilation Management (positioning, BLS, ALS, surgical and exchange); Vascular Access (peripheral, intraosseous, central venous, cut-down and fluid delivery), Expedited Amputations, Fundamental Suturing and Securing, as well as a dissection of an entire specimen for in-depth gross and procedural anatomy (inclusive of conversations that derive from these dissections). This course is dramatically enhanced by nationally recognized experts (military and civilian) who impart procedure pearls and methods to effectively use human specimens in your team’s pre-deployment preparations. In short, the CCPFM course gives you an unobstructed procedural view for moments when borders fade and life cannot.</p>	<p>Scotty Bolleter</p>
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	them. You will also enhance your physical exam assessment with the palpatory skills that you will gain.	
1300 – 1700	<p><b>Practical Case-based Tactical Ultrasound Workshop</b></p> <p>Back by popular demand!!! This HANDS-ON workshop is designed for tactical operators and providers interested in learning how to integrate the use tactical ultrasound in various trauma and medical scenarios – undifferentiated shock, chest trauma, abdominal trauma, head injuries, extremity injuries, etc. This workshop will allow you to choose a number stations with different tactical scenarios, discuss the case, and then learn how to apply specific ultrasound evaluations to better care for injured or ill patients. This is a hands-on and interactive workshop where you will be scanning each other (please be sure to wear loose fitting clothing). No prior experience is necessary, however, the introductory ultrasound workshop is highly recommended for those completely new to ultrasound.</p>	Eric Chin Kristine Jeffers John Knight Brian Hall Ryan Curtis Aaron Cronin Melissa Myers Jared Cohen
1300 – 1700	<p><b>Fresh Whole Blood Transfusions &amp; Freeze-Dried Plasma (Practical)</b></p> <p>Use the latest gear in whole blood transfusion process and receive a lecture and hands-on instruction in fresh whole blood transfusions. You will be able to type and collect your partner’s blood and transfuse it back to him/her. Get familiarized with freeze-dried plasma.</p>	Shane Kronstedt Sean Leibrock
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1300 – 1700	<p><b>Battlefield Auricular Acupuncture (Certification Course)</b></p> <p>Didactics and hands-on skills lab for certification in Battlefield Acupuncture, an auricular acupuncture protocol for the treatment of acute and chronic pain.</p>	Dean Hommer David Djuric
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1300 – 1700	<p><b>Detection and Mitigation of Malaria in the Austere Setting</b></p> <p>Malaria continues to be a major threat to deployed personnel and host country nationals, despite technological and pharmaceutical advances. Rapid diagnostic tests (RDTs) are an essential component of the deployed SOF Medic’s kit, but the many limitations of RDTs require proficiency in the gold-standard malaria diagnostic technique: microscopy. This session consists of 2 hours of hands-on labs (blood smears, staining, and microscopy of prepared Plasmodium specimens), and 2 hours of didactic lessons. Up-to-date research on the newly approved drug tafenoquine and emerging simian malaria species will also be presented. Previous Tropical Medicine training and microscope experience is helpful but not required. Limited class size of 12.</p>	Aebhric O'Kelly Michael Shertz Jason Jarvis
1300 – 1700	<p><b>Fundamentals of Simulation for Prehospital Provider Education</b></p> <p>The Fundamentals of Simulation course is a 4-hour immersive course meant to establish and enhance a participants' understanding about simulation theory, practice and research. The course will provide the educator with a solid foundation based on research and best practice to integrate and deliver and manage quality simulation</p>	Tim Whitaker Matthew David Charnetski



	activities within an initial or continuing educational program. This course is geared toward the new and mid-level educators.	
1500 – 1700	<p><b>PFC Package in INDOPACOM: Utilizing Existing SOF MES Sets to Repurpose for PFC Capabilities during VIP Support Missions</b></p> <p>A SOF Truth is that the human is more important than any piece of equipment and the prolonged field care problem set has focused on training these concepts in recent years, given our unsustainable CENTCOM MEDEVAC model. This hands-on laboratory session will focus on how to use existing SOF MES sets and a few adjunct Class 8, in order to provide a PFC capable Role 1(-). Proof of concept was executed from 2017-2018 during several VIP support missions throughout INDOPACOM. Second half of the session will focus on round table discussion of other ideas of equipping SOF units for PFC training events.</p>	Andrew Oh Benjamin Chi Michael Van Gent
1500 - 1700	<p><b>Women's Health Care in an Austere Environment</b></p> <p>Using a combination of lecture, visuals and hands-on practice with manikins the students will learn how to respond to common obstetrical and gynecological emergencies that they may encounter in remote, austere locations. These emergencies will include postpartum hemorrhage, retained placenta, obstructed labor, postpartum infection and ectopic pregnancy.</p>	David Ludlow Mike Mori

### Day 3: Wednesday, May 8, 2019 - **General Session**

Time	Session Title	Speaker
0750-0800	<b>Opening Remarks</b>	Harold Montgomery Melissa Givens Chetan Kharod
0800-0815	<b>Senior Leader Welcome</b>	TBD
0815-0845	<b>Wounded Warrior Talk</b>	TBD
0845-0915	<b>Combat Medic Vignettes 1 and 2</b>	TBD
0915-1000	<b>Strategic Overview: Embracing the Spectrum of SOF Medicine: Manning and Equipping to Sustain Health, Human Performance, Prehab, Resiliency, Trauma Management, Medical Care and Recovery</b>	Vice Admiral Hugh Wyman Howard, Special Operations Command
1000-1045	<b>Break/Visit Exhibitors</b>	
1045-1130	<b>Tom Deal Memorial Lecture: Go to the End of the World... Then Turn Left and Go a Bit Farther</b>	Olen Netteburg
1130-1200	<b>A British Perspective of SOF Medicine</b>	Robert Poole
1200-1300	<b>Lunch On Your Own/Visit Exhibitors</b>	
1300-1330	<b>Business Meeting</b>	
1330-1400	<b>Research Track: The Role of Technology Research in Enhancing Care in Austere Operational Environments</b>	Jeremy Pamplin
1400-1430	<b>MilSOF Track: Austere Resuscitative and Surgical Care in Support of Forward Military Operations; Austere Surgery JTS CPG</b>	Jay Baker
1430-1500	<b>Human Performance &amp; Resiliency Track: PrTMS Trans-cranial Stimulation to Reduce Depression/Anxiety/Insomnia</b>	Kevin Murphy
1500-1545	<b>Break/Visit Exhibitors</b>	
1545-1615	<b>UW-GHE Track: TBD</b>	Mark Mitchell
1615-1645	<b>TEMS Track: Novel Weapons in Civilian Mass Casualties</b>	Mike Clumpner

1645-1730	<b>US Special Operations Command Mortality Review: 2001-2017</b>	Russ Kotwal Ed Mazuchowski Harold Montgomery
1800-1900	<b>Moderated Poster Session for CME</b>	
1730-1930	<b>Opening Reception - Exhibit Hall</b>	
<b>Day 4: Thursday, May 9, 2019 - Concurrent Tracks</b>		
<b>Time</b>	<b>Session Title</b>	<b>Speaker</b>
<b>0800-1000</b>	<b>Track 1: MilSOF</b>	
0815-0845	<b>UAV/Drone Casevac - The SOF Medical Future?</b>	Paul Parker
0845-0915	<b>Hypocalcemia and the Lethal Triad</b>	Ricky Ditzel
0915-1000	<b>Everybody Lies - Sono Gets the Truth!; SOF Medics without Ultrasound like a Sniper without a Scope</b>	Kasia Hampton Christopher Dare
<b>0800-1000</b>	<b>Track 2: TEMS</b>	
0800-0830	<b>Training Scars – Things We Are Doing with Simulation that May Harm Our Learners</b> The use of simulation to train pre-hospital providers has been shown to be a valuable educational tool when used properly. Used improperly, simulation may imbed behaviors that could harm the provider or much worse, the patient. This presentation will discuss the potential harm we could be doing to our students using simulation in ways that do not follow researched best practices. We will discuss common negative training issues/causes and also ways to mitigate imbedding those into our trainings.	Timothy Whitaker
0830-0930	<b>Novel Weapons in Mass Casualty</b> Attendees will learn about the wounding patterns seen in civilian, mass-casualty, hostile events. The presenter will discuss wounding patterns associated with active shooter events, vehicle-as-a-weapon events, mass stabbing events, and fire-as-a-weapon. Published research shows that the wounding patterns in these events differ from the wounding patterns seen with similar weapons, but in non-mass casualty events. Much of the published data on hostile mass-casualty events focuses on combat research. Recently published data indicates a significant difference in civilian, hostile mass-casualty event wounding compared to combat wounding patterns. Last, the presenter will also discuss multiple prehospital treatment best practices as hostile mass casualty events.	Mike Clumpner
0930-1015	<b>Tactical Medicine: Beyond Boundaries - The Diversity of the Calgary Metro TEMS Unit</b> The Alberta Health Service Emergency Medical Services (AHS EMS) Calgary Metro Tactical Emergency Medical Support (TEMS) Unit understands the importance of preparedness and cross-sector collaboration with the public safety community. We believe that readiness saves lives, and it is this principle that drives our program training, mission-preplanning, preventative care and medical treatment rendered during mission driven, high-risk, large-scale, and extended EMS and law enforcement operations.	Shane Fitzpatrick Jason Zubkowski
<b>0800-1000</b>	<b>Track 3: Human Performance &amp; Resiliency</b>	
0800-0830	<b>Tactical Performance Index (TPI) - Creating a Human Optimizing Culture</b> Dave Barry and Mike Sanders will discuss 7th Special Forces Group's holistic assessment and feedback protocol for capturing and improving the total human performance potential of soldiers. As part of the 7th's Human Performance Optimization Culture, the goal of the Tactical Performance Index is to produce soldiers performing at the highest level mentally, physically, spiritually, and socially.	Mike Sanders Dave Berry
0830-0900	<b>Current Concepts in Injury Prevention and Performance Maximization</b> The USOC has developed several programs to track and monitor the health of elite athletes during their competitive career. This presentation will introduce the Elite Athlete Health Profile, Elite Athlete Monitoring Program, and Return2Performance program.	Dustin Nabhan

0900-0930	<b>Facts, Fallacies, and the Future: What Works/What Doesn't and the Way Ahead for SOF Nutrition</b> The talk will cover current practices and what we know works and doesn't work in terms of nutrition and supplementation. Lastly we briefly discuss what SOF Nutrition might look like in the future based on current initiatives.	Nicholas Barringer
0930-1000	<b>The Acute and Chronic Cardiovascular Risks of Endurance Exercise: What the Operator Needs to Know</b> This talk will discuss the acute risk-benefit ratio with acute exercise and explore the emerging literature on potential long term harm from excessive endurance exercise. I will describe current "gaps" in the exercise and cardiovascular risks and benefits literature and conclude by discussing considerations in making prudent recommendations.	Francis O'Connor
<b>0800-1000</b>	<b>Track 4: Medical Support Operations for UW-FID</b>	
0800-0830	<b>UW in 2019</b>	Michael Hetzler
0830-0930	<b>Panel: Digital Disruption in the Gray Zone: An Audience-Engaged Discussion on Phase 0-1 UW to Persist, Overcome and Prevail</b> The panel will engage the audience in an interactive dynamic scenario that illuminates gray zone challenges from an aggressive competitor that engages and targets human, economic and infrastructure through cyber means to disrupt, deter and manipulate healthcare, humanitarian assets, decision-making and services. The discussion will focus on the 0-1 phase of unconventional warfare and cascade consequences highlighting cyber and digital disrupters against un-whiting targets.	Joan Myers
0930-1000	<b>UW Training and the Future of SOF Medical Missions</b>	Paul Loos
<b>0800-1000</b>	<b>Track 5: Research Oral Presentations</b>	
0800-0820	<b>Safety Analysis of a New Generation Freeze-dried Plasma Product: Report of a Completed Dose-escalation, Phase 1 Clinical Trial.</b>	Jose Cancelas
0820-0840	<b>Trends in Prehospital Analgesia Administration by US Forces from 2007 through 2016</b>	Mike April
0840-0900	<b>Deployment of Low Titer O-Positive Whole Blood in the Prehospital Environment</b>	Randall Schaefer
0900-0920	<b>Comparison of the Dart Target™ and Traditional Landmark Method for the Placement of Chest Decompression Needles in the Treatment of Tension Pneumothorax.</b>	Paul Allen
0920-0940	<b>The Effects of Concussion History and Resilience on Positive Psychological Outcomes in Active Special Operations Forces (SOF) Combat and Combat Support Soldiers</b>	Nikki Barczak
0940-1000	<b>The Effects of a Novel Checklist on Self-Efficacy for Rapid Sequence Intubation</b>	Kevin Foss
<b>0800-1000</b>	<b>Track 6: International</b>	
0800-0845	<b>Training Doctors for SOF</b>	Dan Pronk Christian Neitzel
0845-0930	<b>Training Paramedics for SOF</b>	Alan O'Brien Kyle Kotze Jens Gessner
0930-1000	<b>The German Approach for Training Doctors for SOF</b> German approach on the Advanced Field Care by TCCC training for Battalion Physicians- Concept and evaluation of the effect of full scale training.	Florent Josse
<b>1000-1045</b>	<b>Refreshment Break/Visit Exhibitors/Poster Viewing</b>	
<b>1045-1215</b>	<b>Track 1: MilSOF</b>	
1045-1115	<b>Diving in Special Operations: A Special Tactics Perspective</b>	H. Leo Tanaka
1115-1145	<b>Robotic Enabled Autonomous and Closed Loop Trauma Care in a Rucksack – TRACIR</b>	Ronald Poropatich
1145-1215	<b>Coffee Ground Hemostasis</b> Case report of a pediatric patient who presented to a U.S. Forward Resuscitative Surgical team with a hemostatic head wound packed using coffee grounds.	Justin Grisham
<b>1045-1215</b>	<b>Track 2: TEMS</b>	

1045-1145	<b>AAR of The Tree of Life Synagogue Shooting</b> Brief description of civilian versus military wounding patterns and mostly After Action Report of the Tree of Life Synagogue Active Shooter event with highlights on the medical side of the operation.	Keith Murray
1145-1215	<b>OHP shooting/ Warrant AAR</b>	Bill Justice
<b>1045-1215</b>	<b>Track 3: Human Performance &amp; Resiliency</b>	
1045-1115	<b>Pearls and Pitfalls in Addressing Common Sports Medicine Complaints in the Special Operations Athlete</b> This lecture will cover an evidence based approach to commonly seen sports medicine issues in the Special Operations community. Frequent mistakes made in the diagnosis and management of these conditions will also be discussed.	Scott Young
1115-1145	<b>Neuromechanical Responsiveness in Traumatic Brain Injury</b> This lecture explores the vulnerabilities in the current practice of sports related concussion care. Evidence suggests an increased risk of MSK injury after sports related concussion which is felt to be due to unrecognized abnormalities that persist beyond the resolution of symptoms and beyond the scope of current return to play testing. We introduce the concept of "neuromechanical responsiveness" which describes how an athlete optimally integrates their neurocognitive and neuromuscular processes. We then will provide data that supports the use of Neuromechanical responsiveness testing for concussion that may translate to a safer return to play.	Chad Prusmack
1145-1215	<b>Pain Management Optimization for SOF</b> New innovations in non-pharmacological approaches to pain management.	Steven Scott
<b>1045-1215</b>	<b>Track 4: Medical Support Considerations for UW-FID</b>	
1045-1115	<b>Civilian Approach to GHE</b>	Erin Noste
1115-1145	<b>CA Approach to GHE</b>	John Schwartz
1145-1215	<b>Show Me the Money: Funding GHE and UW projects</b>	John Trigillio
<b>1045-1215</b>	<b>Track 5: Research Oral Presentations</b>	
1045-1105	<b>Field-Deployable 'Dry Component' Approach to Resuscitation for Hemorrhagic Shock</b>	Jennifer Richards
1105-1120	<b>Prolonged Field Care - The U.S. Air Force Pararescue Experience</b>	Richard Luna
1120-1140	<b>Skills Retention of SWAT Operators Applying the Abdominal Aortic and Junctional Tourniquet</b>	James Vretis
1140-1120	<b>Prehospital Combat Pill Pack Administration in Iraq and Afghanistan: A Department of Defense Trauma Registry Analysis</b>	Jason Naylor
1200-1215	<b>The Role of Oral Progenitor Cells in Wound Repair and Regeneration</b>	Lindsay Davies
<b>1030-1215</b>	<b>Track 6: International</b>	
1030-1130	<b>NSOCMs - How to Manage Continuation Training</b>	Jean Christophe Ceccaldi
1130-1215	<b>Repetitive Sub-concussive Trauma in CANSOF Breachers and Snipers: A Clinical Perspective</b>	Isabelle Vallee
<b>1215-1330</b>	<b>Lunch On Your Own/Visit Exhibitors/Poster Viewing</b>	
<b>1215-1330</b>	<b>The Second-Half Updates: Paths to PA/MD/DO/CRNA/USUHS and Scholarships</b>	
<b>1330-1500</b>	<b>Track 1: MilSOF</b>	
1330-1400	<b>SOF Surgical Support by Non-Surgeons</b> Current operations in AFRICOM and future conflict evacuation times will not be as short as they were during Afghanistan and Iraq. Conventional forces fighting near peer opponents in mega-cities and unconventional warfare teams in resource limited areas will lack rapid evacuation to definitive medical care. Surgical support will need to consist of many small teams of well trained, critical care/surgical specialists that can move to the casualty and provide extended stabilization and resuscitation.	Alex Merkle Josh Randles
1400-1430	<b>SOF CBRN Medical Planning</b>	Jason Lorette

	1) Why CBRN medicine is different and can be complicated from both a planning and management perspective; 2) Strategic, Operational, and Tactical medical planning considerations; 3) Medical intelligence and CBRN intelligence different yet complementary; 4) Importance of integrating medical approach with operational elements and mission profiles; 5) Integration with LEO/EMS; 6) Medical therapy medico-legal considerations (animal evidence vs high level evidence).	
1430-1500	<b>Tactical Combat Casualty Care Training Innovation: Objective Measurement of Learning &amp; Performance Using AI Augmented Training Platforms &amp; High Fidelity Trauma Simulators</b>	Dan Irizarry
<b>1330-1500</b>	<b>Track 2: TEMS</b>	
1330-1400	<b>RAMP Mass Casualty Triage Technique, A New Answer To An Age Old Problem</b> With poor triage being a common item in after action reviews of many active shooter and terrorism incidents it is time for the community as a whole to move towards a new solution. This talk will discuss the newly developed RAMP Triage Technique and its application in the tactical and mass casualty setting. Using current evidence based methods the technique utilizes the combination of a radial pulse and mental status to place trauma victims into one of three categories. The simplified algorithm allows for a more rapid and accurate identification of critical patients and can reduce overall scene time for critical patients. Flaws in the currently used algorithms such as START and SALT will also be discussed in an effort to open a dialogue on ways to improve current systems.	Brad Keating
1400-1500	<b>Anchorage SWAT Ginami Street Barricade and Shooting - Aggregate TEMS Lessons Learned</b> On September 21, 2016 Anchorage Police Department SWAT responded to Ginami Street in Anchorage for a barricaded military veteran wanted for a shooting. Over the next 24 hours, SWAT engaged in barricade tactics under deteriorating weather conditions, including the use of mechanical and explosive breaching, chemical agents, acoustic and NFDD disruption, negotiations, use of armor, canine, sniper, stealth approaches and finally tactical deconstruction of the structure. The lone suspect demonstrated a propensity for violence by engaging the team in gunfire and showing extensive knowledge of tactics and will to resist. The suspect was finally killed during an exchange of gunfire more than 27 hours after the initial 911 call, but not before injuring two SWAT officers. Hydration, nutrition, field sanitation, sleep/rest cycles, point of wounding care and command monitoring were all significant factors in operational sustainability for a geographically isolated team with limited relief resources. The incident became the pivot point for a shift towards dedicated fire-based TEMS support for APD SWAT, as the culmination of of events truly reflected the motto - "No one else is coming, it is up to us".	Seth McMillan
<b>1330-1500</b>	<b>Track 3: Human Performance &amp; Resiliency</b>	
1330-1400	<b>Use of Artificial Intelligence in Biomarker Testing</b> Nutritional biomarker testing has become somewhat commonplace within the high-performance athletic community. Unfortunately, there's little published research to support which performance-related markers prove to be most useful, as well as any synergy/discord between the nutrients examined. In this presentation, we discuss the application of artificial intelligence in understanding solitary, binary, and ternary performance-enhancing nutritional relationships.	Chris Talley
1400-1430	<b>A Multi-Disciplinary Approach to Neuroendocrine Dysfunction</b> This talk will give an overview of the potential causes of neuroendocrine dysfunction in the SOF community. There are unfortunately multiple issues that may be occurring at once and affecting neuroendocrine function leading to a decrease in recovery and healing from brain injury but also from musculoskeletal injury.	David LeMay

1430-1500	<b>Non-Pharmacological Sleep Modulation</b> Sleep is increasingly regarded as a foundation for performance as well as physical and mental health. With an increased understanding of the side effects of pharmaceuticals commonly utilized to treat disturbed sleep, there is currently a heightened awareness of more naturalistic or behavioral means that can be used when working with elite populations. This presentation will outline what is currently known about these methods and means of utilization of these interventions.	Shona Halson
<b>1330-1500</b>	<b>Track 4: Medical Support Considerations for UW-FID</b>	
1330-1400	<b>International Medical Core Will Discuss Syria and/or DRC</b>	Trevor Rhodes
1400-1430	<b>Underground Surgical Care: Syria</b>	Samer Attar
1430-1500	<b>Planning Medical Support to UW Operations, A Medic's Perspective</b>	Michael Turconi
<b>1330-1500</b>	<b>Track 5: Research Oral Presentations</b>	
1315-1330	<b>Military Prolonged Field Care and Survival in Iraq and Afghanistan</b>	Stacy Shackelford
1330-1345	<b>Movement Screening for Musculoskeletal Injury Risk: Utilization as a Surrogate for Impact Screening</b>	Darren Hearn
1345-1400	<b>Consensus-Based Recommendation for Oxygenation Targets in Critically Injured Patients</b>	Steven Schauer
1400-1415	<b>Norwegian Emergency Medicine System's Training and Equipment for Penetrating Injuries. A National Survey-based Study</b>	Sigurd Blix
1415-1430	<b>First Responder Advanced Life Support Improves Outcomes in the Helicopter Transported Trauma Patient</b>	David Wampler
1430-1445	<b>A Retrospective Review of the Respiratory Effects of Analgesic/Anxiolytic Agents Administered to Traumatically Injured Civilians in the Prehospital Setting</b>	Tasia Long
1445-1500	<b>Description of Penetrating Trauma in Children by Age and Location: A National Trauma Database Review</b>	Joseph Kelly
<b>1330-1545</b>	<b>Track 6: International</b>	
1330-1400	<b>Review on the Prehospital Response to Terrorism</b> Terrorism has increased in frequency over the past decade and prehospital response architecture has been evolving in accordance. Evolution of response requires a robust reporting and critical analysis system to identify lessons from previous attacks, however there is a limited amount of literature published after these events. This systematic review analyses the baseline of reporting on prehospital terrorism response.	Matt Pepper
1400-1500	<b>Civilian, Military Coordination and the Future of Humanitarian Response</b> Global Response Management (GRM) was the first humanitarian organization to respond to civilian trauma needs in the battle of Mosul. Pete Reed and Alex Potter (the Executive Director and Vice President of the Board, respectively) will present on the process of GRM entering the battle, how the organization coordinated between both Iraqi and coalition military partners, report on outcomes, and discuss the moral ambiguities faced as a humanitarian partner in a non-traditional context.	Alex Potter Peter Reed
<b>1500-1545</b>	<b>Refreshment Break/Visit Exhibitors/Poster Viewing</b>	
<b>1545-1715</b>	<b>Track 1: MilSOF</b>	
1545-1615	<b>Project Reach: A Gap Analysis of Telemedical Capabilities of the Special Operations Medic</b>	Grigory Charny
1615-1645	<b>PACE Plan in INDOPACOM: Self-aid, Buddy-aid, and Patient Evacuation in INDOPACOM</b>	Andrew Oh
1645-1715	<b>Initial In-house Critical Care Flight Paramedics Program</b> Role 1 battlefield medical care includes all aid delivered from point of injury until the casualty is delivered to surgical care. Providing paramedic level care to combat wounded improves survival chances. In a military conflict with soldiers experiencing	Lee Hockersmith

	multiple injuries, head injuries, airway compromise, ventilator insufficiency, and prolonged transport times, the critical care paramedic is a necessity.	
<b>1545-1645</b>	<b>Track 2: TEMS</b>	
1530-1600	<b>Thaum Lung Cave Rescue in Thailand-PJ involvement</b>	Stephen Rush
1600-1630	<b>Low Titer Fresh Whole Blood Transfusion Programs in TEMS</b> This session will provide insight on how to implement a low titer fresh whole blood transfusion program for a tactical team. It will outline the required coordination and steps needed to ensure success. This is also applicable for a community who may wish to implement a program in case of a disaster or mass casualty situation.	Andrew Fisher
1630-1715	<b>Active Threat Response in Nashua, NH: the Process, the Plan &amp; the Test</b> Prior to 2013, the active threat plans in Nashua, New Hampshire consisted of separate responses by law enforcement, fire, and emergency medical services.. There was no coordinated plan. Involvement with area hospitals was not considered other than receiving patients. The Nashua Police SWAT Team and the Nashua Office of Emergency Management recognized this gap. This presentation shares this city's and Southern New Hampshire Medical Center's solution for creating and testing an integrated active threat plan.	Mark Hastings
<b>1545-1715</b>	<b>Track 3: Human Performance &amp; Resiliency</b>	
1545-1615	<b>Suicide Prevention</b> The suicide rate in USASOC is persistently higher than in the conventional Army. Dr. Bacon will discuss suicide trends in general and how USASOC is trying to prevent suicide.	Bryan Bacon
1615-1645	<b>"Ryan's Story" - A Warrior Who Got Left Behind</b> A conversation about special operators who come home with invisible wounds from war. The eroding impact of moral injury and near death experiences as a component of poly-trauma. The complication of blast related TBI.	Frank Larkin
<b>1545-1715</b>	<b>Track 4: Medical Support Considerations for UW-FID</b>	
1545-1615	<b>Global Health Engagement in Asymmetric and Hybrid Conflict: Lessons from Ukraine</b> Current and future strategic threats and challenges require NATO to amplify disaster preparedness policy functions that enable the interoperability of NATO nations with that of NATO partner nations such as Ukraine. We discuss Global Health Engagement from 2014- present day with the Ministry of Defense in Ukraine for warfighting in the Joint Forces Operations (previously the Antiterrorist Operation (ATO)) in Eastern Ukraine. This includes a review of strategies and programming related to mitigation of morbidity from hybrid war, challenges to the Golden Hour, Prolonged Field Care, Blood Far Forward, Telemedicine, Drone Technology and Remote Damage Control Resuscitation and surgery (RDCR/DCS) at the Ukraine-Multi Domain interface.	John Quinn
1615-1715	<b>Panel: Trojan Footprint (CA/SOCEUR)</b>	Geoggrey Washburn Jamie Riesberg
<b>1530-1730</b>	<b>Track 5: Research Oral Presentations</b>	
1545-1600	<b>How Telemedicine Impacts Clinical Decision and Performance In Prolonged Field Care Scenarios: A Preliminary Review</b>	Sena Veazey
1600-1615	<b>Augmented Ultrasound Intelligence Protocol for Detection of Pneumothorax</b>	Sena Veazey
1615-1630	<b>In Vitro Evaluation of RSDL® Product for Efficacy to Select Dermal Toxic Chemical Compounds</b>	Laura Cochrane
1630-1645	<b>Preparing for the Unforeseeable: Validation of a Research-driven Hemorrhage Control Training Protocol in Norway</b>	Erik Dragset
1645-1700	<b>The Role of NCO in Avoiding Heat-induced Adverse Health Effects of Military Recruits during Exercise</b>	Emiel Boers
<b>1545-1715</b>	<b>Track 6: International</b>	

1545-1630	<b>SOF CBRN Medical Planning</b> 1) Why CBRN medicine is different and can be complicated from both a planning and management perspective; 2) Strategic, Operational, and Tactical medical planning considerations; 3) Medical intelligence and CBRN intelligence different yet complementary; 4) Importance of integrating medical approach with operational elements and mission profiles; 5) Integration with LEO/EMS; 6) Medical therapy medico-legal considerations (animal evidence vs high level evidence).	Jason Lorette
1630-1700	<b>TCCC: Lessons from Brazil's Narco Drug War</b> Rio has had for the past two decades a homicide rate higher than any other country in the world, including countries at war like Syria. The same happens with wounded at those firefights. Many of those are related to police operations we are involved in.	Leandro Castro
<b>1800-1830</b>	<b>Mess Night Reception (Ticket Required)</b>	
<b>1830-2100</b>	<b>Mess Night (Ticket Required)</b>	
<b>Day 5: Friday, May 10, 2019 - General Session</b>		
<b>Time</b>	<b>Session Title</b>	<b>Speaker</b>
0800-0830	<b>SOCOM Medical Update</b>	Eveline Yao
0830-0915	<b>DARPA Update</b>	Eric Van Giesen
0915-1000	<b>SOF Combat Medics Vignettes 3, 4, 5</b>	TBD
<b>1000-1030</b>	<b>Refreshment Break</b>	
1030-1100	<b>Meeting the Needs of Our Nation Round 2: Feasibility of Former SOF Medics Serving as Physician Extenders</b>	Arthur Kellerman, Dean of USUHS
1100-1130	<b>PFC Update</b>	Sean Keenan
1130-1230	<b>TCCC Update</b>	Frank Butler
1230-1240	<b>Concluding Remarks</b>	Melissa Givens Chetan Kharod