



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
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IN REPLY REFER TO:
BUMEDINST 1510.23C
BUMED-M00F
24 Jun 2009

BUMED INSTRUCTION 1510.23C

From: Chief, Bureau of Medicine and Surgery

To: Ships and Stations Having Medical Department Personnel

Subj: HOSPITAL CORPSMAN SKILLS BASIC (HMSB)/TACTICAL COMBAT
CASUALTY CARE (TCCC) PROGRAM

Ref: (a) NAVMED Policy 07-016 of 10 May 2007

Encl: (1) Bureau of Medicine and Surgery (BUMED) HMSB/TCCC Objectives
(2) Acronyms

1. Purpose. To establish guidelines to enhance operational readiness by ensuring Hospital Corpsmen (HM) (Active and Reserve) possess the basic skills required in a hospital, operational, or tactical setting. This is a complete revision and must be read in its entirety.

2. Cancellation. BUMEDINST 1510.23B.

3. Background. This instruction establishes training requirements for the HMSB/TCCC program (see enclosure (1)). Enclosure (2) is a list of acronyms.

a. Clinical Basic Skills and Maintenance in HMSB:

- (1) Medication Administration.
- (2) Venipuncture.
- (3) Intravenous (IV) Therapy.
- (4) Hemorrhage Control and Bleeding.
- (5) Patient Assessment.

b. Tactical Basic Skills in (TCCC). Expeditionary Medicine Web Based Training (EMWBT) (reference (a)), available at: <https://wwwa.nko.navy.mil/portal/home/>

- (1) Log into Navy Knowledge Online (NKO).
- (2) Select "Navy e-learning online courses."
- (3) In the advanced search catalog description, type in "TCCC," then click search.
- (4) Select and enroll in EMWBT – NMEMTCCC61.

4. Scope. Clinical basic skill 3a(1) through 3a(5) HMSB applies to all HMs in paygrades E-1 through E-7, except Independent Duty Corpsmen (IDC) assigned to Budget Submitting Office (BSO) 18 activities. The TCCC applies to all HMs including IDC.

5. Policy

a. Skill Set. All HMs will be enrolled in the standardized HMSB/TCCC program provided by the Navy Medicine, Manpower, Personnel, Education and Training (NAVMED MPT&E) Command upon reporting to their first BSO-18 activity as an HM.

(1) The clinical skills (HMSB) shall be validated within 90 days of reporting to their first BSO-18 activity.

(2) The tactical skills EMWBT shall be completed within 90 days of reporting to their first BSO-18 activity, if not already completed. The TCCC course shall be completed within 180 days of deployment notification to an Individual Augmentee (IA) or a Health Service Augment Program (HSAP) assignment.

(3) For Reserve component personnel: the clinical skills (HMSB) and the tactical skills EMWBT shall be achieved within 1 year of reporting to the command. The TCCC course shall be completed within 180 days of deployment to an IA or an HSAP assignment.

(4) The clinical basic skills outlined in HMSB will be re-validated 90 days prior to deployment (Active and Reserve).

b. Evaluators. Professional licensed health care personnel (Medical Doctor (MD), Doctor of Osteopathy (DO), Registered Nurse (RN), Physician Assistant (PA), Nurse Practitioner (NP)), HM, Navy Enlisted Classification (NEC) 8425, HM NEC 8402, HM NEC 8403, HM NEC 8493 (Surface, Submarine, Recon, and Dive IDC), or personnel with verified competency in the skill area they are evaluating may evaluate the clinical skills portion of HMSB.

c. Skill Demonstration. The use of direct patient care is preferred and shall be used whenever possible. Use of medical training simulations is authorized when the technology is available and appropriate.

d. Documentation. The five clinical skill areas of HMSB shall be documented in the Defense Medical Human Resources System *internet* (DMHR*Si*). Completion of the EMWBT shall be documented in NKO Navy eLearning. Completion of TCCC course shall be documented in Corporate Enterprise and Training Activity Resource System (CeTARS). These electronic databases will feed into the electronic training jacket for verification of the training.

e. Failure to demonstrate skill. Members who have difficulty in demonstrating skills shall be given remedial training before administrative action is taken. Remediation shall be documented in the local training record.

f. Program review. As part of internal review programs, sponsoring commands will continually assess and monitor the management and readiness of the HMSB/TCCC program, and comprehensively review their entire program on an annual basis.

g. Inspection. HMSB/TCCC management and readiness is a special interest item for the Medical Inspector General (MED IG).

6. Action

a. BUMED MED IG. Ensure that all activities within BSO-18 are in compliance with all aspects of this instruction as part of the MED IG inspection program.

b. NAVMED MPT&E

(1) Provide the standardized performance checklist (PCL) as well as ongoing maintenance of materials and resources needed to conduct HMSB training. The PCL will be available to the Staff Education and Training (SEAT) departments via the SEAT community of practice page on NKO. It is the responsibility of the SEATs to verify with NAVMED MPT&E that the most current version of the PCL is utilized.

(2) Coordinate with the SEAT departments to ensure standard administration of the HMSB program.

(3) Provide the standardized EMWBT available on NKO.

(4) Provide the standardized TCCC Course to all HMs (Active and Reserve) within 180 days of deployment (Just-in-Time training).

c. Commanding Officers and Officers in Charge

(1) Implement a formal HMSB program and exercise overall responsibility for the training. Appoint, in writing, program managers to oversee and coordinate the program.

(2) Ensure all initial assignment and deploying HMs complete competency training in all five basic skills in HMSB.

(3) Ensure standardized training programs include the five clinical basic skills areas in HMSB. Ensure instructors are appropriately trained to deliver the programs. Ensure appropriate documentation of HMSB validation.

(4) Ensure all HMs complete the EMWBT.

(5) Ensure deploying HMs are scheduled to attend the TCCC course.

d. HMSB Program Manager

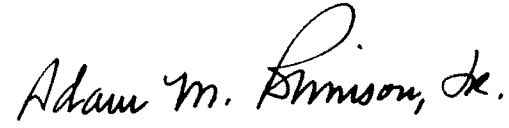
(1) Designate, in writing, all persons who are eligible to evaluate the skills of HMSB program students.

(2) Establish routine and continuous monitoring of each individual's progress through completion of HMSB. Copies of completed PCLs shall be maintained while the member is assigned to the activity.

(3) Ensure deficiencies, which are identified in each individual, are documented and appropriate remediation is taken. Content and related references for individual remediation may be found by consulting the current Naval Hospital Corps School curriculum on NKO as outlined in enclosure (1).

(4) Use direct patient care opportunities whenever possible when evaluating HMSB skills. Use training simulations only when direct patient care is not available.

(5) Ensure documentation of successful completion of HMSB competency training in DMHRSi.


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**BUREAU OF MEDICINE AND SURGERY (BUMED)
HOSPITAL CORPSMAN SKILLS BASIC (HMSB)/
TACTICAL COMBAT CASUALTY CARE (TCCC) OBJECTIVES**

Clinical Skill #1 – Medication Administration. Listed below are the minimum objectives that an HMSB student will complete before receiving written verification of competency in medication administration. Content and related references may be found by consulting the current Naval Hospital Corps School curriculum on NKO.

1. Define medical abbreviations/symbols commonly used for medication administration.
2. State guidelines for safe medication administration to include the seven rights of medication administration.
3. State the procedure for reporting medication errors.
4. Discuss guidelines for administering medications to children, the elderly, and the confused, disoriented, or combative patients.
5. Calculate medication dosage including liquid weights and measures, intravenous (IV) flow rates, and those based on a patient's weight.
6. Demonstrate the preparation, administration, and documentation of medication via the oral, sublingual, topical, and parental routes.

Clinical Skill #2 – Intravenous (IV) Therapy. Listed below are the minimum objectives that an HMSB student will complete before receiving written verification of competency in IV therapy. Content and related references may be found by consulting the current Naval Hospital Corps School curriculum on NKO.

1. Discuss the purposes of IV therapy.
2. Describe common IV fluids and their specific indications.
3. Discuss complications of IV therapy and measures to prevent their occurrence.
4. State equipment needed to perform IV insertion.
5. Demonstrate appropriate selection and preparation of a vein based on prescribed use and type of IV therapy.
6. Calculate IV flow rate within “plus or minus” one drop per minute.

7. Demonstrate the preparation and perform an IV insertion using the principles of patient safety, privacy, education, and comfort.
8. Discontinue IV therapy and document on appropriate forms.

Clinical Skill #3 – Venipuncture for Blood Collection. Listed below are the minimum objectives that an HMSB student will complete before receiving written verification of competency in venipuncture for blood collection. Content and related references may be found by consulting the current Naval Hospital Corps School curriculum on NKO.

1. Discuss factors involved in patient safety and preparation for venipuncture.
2. State supplies needed to perform venipuncture.
3. Discuss common complications of venipuncture and measures to prevent their occurrence.
4. Demonstrate appropriate selection and preparation of a vein for venipuncture.
5. Perform and document a venipuncture to collect a laboratory blood specimen.

Clinical Skill #4 – Hemorrhage Control and Bleeding. Listed below are the minimum objectives that an HMSB student will complete before receiving written verification of competency in Hemorrhage Control and Bleeding. Content and related references may be found by consulting the current Naval Hospital Corps School curriculum on NKO.

1. Define terms related to soft tissue injuries, bleeding, and shock.
2. Discuss signs and symptoms of closed and open soft tissue injuries.
3. Discuss assessment considerations for bleeding.
4. Discuss mechanisms of injury when internal bleeding should be considered.
5. State the use and procedure for applying a tourniquet to control bleeding.
6. Discuss the primary causes of shock, their signs and symptoms, and the need for urgently transporting a patient who is symptomatic.
7. Perform emergency medical care for a patient with: (1) an open chest wound; (2) an open abdominal wound; (3) an impaled object; (4) an amputation, including the care of the amputated part; (5) emergency bleeding; and (6) shock.

Clinical Skill #5 – Patient Assessment. Listed below are the minimum objectives that an HMSB student will complete before receiving written verification of competency in patient assessment. Content and related references may be found by consulting the current Naval Hospital Corps School curriculum on NKO.

1. Define terms and abbreviations related to patient assessment.
2. Perform a focused physical exam, a rapid trauma assessment, and a detailed physical exam on a trauma patient.
3. Perform an assessment of a medical patient to include vital signs, history, management of secondary injuries, and ongoing assessment.
4. Document patient assessment findings on appropriate forms.

Tactical Skill #1 – Expeditionary Medicine Web Based Training. Listed below is the minimum objective that a student will complete before receiving written verification of training in the tactical care component of TCCC. Content and related references can be found by consulting Navy eLearning on NKO.

1. Complete the Expeditionary Medicine Web Based Training, per reference (a).

Tactical Skill #2 – Tactical Combat Casualty Care (TCCC) course. Listed below is the minimum objective that a TCCC student will complete before receiving written verification of competency in the tactical care component of TCCC. Content and related references can be found by consulting the Naval Operational Medicine Institute (NOMI) medical lessons learned center Web page.

1. Complete the Navy approved or other service equivalent TCCC course.

ACRONYMS

BUMED	Bureau of Medicine and Surgery
BSO	Budget Submitting Office
CeTARS	Corporate Enterprise and Training Activity Resource System
DMHR <i>Si</i>	Defense Medical Human Resources System <i>internet</i>
DO	Doctor of Osteopathy
EMWBT	Expeditionary Medicine Web Based Training
HM	Hospital Corpsman
HMSB	Hospital Corpsman Skills Basic
HSAP	Health Service Augment Program
IA	Individual Augment
IDC	Independent Duty Corpsmen
IV	Intravenous
MD	Medical Doctor
MED IG	Medical Inspector General
NAVMED MPT&E	Navy Medicine Manpower, Personnel, Training and Education
NEC	Navy Enlisted Classification
NKO	Navy Knowledge Online
NOMI	Naval Operational Medicine Institute
NP	Nurse Practitioner
PA	Physician Assistant
PCL	Performance Checklist
RN	Registered Nurse
SEAT	Staff Education and Training
TCCC	Tactical Combat Casualty Care