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Out of the Crucible: How the US Military Transformed Combat Casualty Care in Iraq and Afghanistan Arthur L. Kellermann 2017-12-01 Out of the Crucible: How the U.S. Military Transformed Combat Casualty Care in Iraq and Afghanistan edited by Arthur L. Kellermann, MD and MPH, and Eric Elster, MD is now available by the US Army, Borden Institute. This comprehensive resource, part of the renowned Textbooks of Military Medicine series, documents one of the most extraordinary achievements in the history of American medicine – the dramatic advances in combat casualty care developed during Operations Enduring Freedom and Operation Iraqi Freedom. Each chapter is written by one or more military health professionals who played an important role in bringing the advancement to America's military health system. Written in plain English and amply illustrated with informative figures and photographs, Out of the Crucible engages and informs the American public and policy makers about how America's military health system, devised, tested and widely adopted numerous inventions, innovations, technologies that collectively produced the highest survival rate from battlefield trauma in the history of warfare. Journal of Special Operations Medicine 2008

Medical Response to Terror Threats Aaron Richman 2010 The twelve chapters of this book were written by the subject matter experts who led the NATO workshop 'Terror Medicine' in Jerusalem in 2008 This book is an important resource for all those for whom training and information is essential to the mounting of a successful medical response to terror threats, wherever they occur

Front Line Surgery Matthew J. Martin, MD, FACS 2010-11-24 Both editors are active duty officers and surgeons in the U.S. Army. Dr. Martin is a fellowship trained trauma surgeon who is currently the Trauma Medical Director at Madigan Army Medical Center. He has served as the Chief of Surgery with the 47th Combat Support Hospital (CSH) in Tikrit, Iraq in 2005 to 2006 and most recently as the Chief of Trauma and General Surgery with the 28th CSH in Baghdad, Iraq in 2007 to 2008. He has published multiple peer-reviewed journal articles and surgical chapters. He presented his latest work analyzing trauma-related deaths in the current war and strategies to reduce them at the 2008 annual meeting of the American College of Surgeons.

Beekley is the former Trauma Medical Director at Madigan Army Medical Center. He has multiple combat deployments to both Iraq and Afghanistan, and has served in a variety of leadership roles with both Forward Surgical Teams (FST) and Combat Support Hospitals (CSH).

Orthopaedic Trauma in the Austere Environment Juan de Dios Robinson 2016-05-19

Orthopaedic trauma represents 75% of the casualties in a disaster. Many of these patients will be cared for by international volunteers, but good intentions are not always matched by good preparation. This book explains how best to prepare for missions, how to deal with injuries in austere conditions, how to ensure a positive legacy, and the need for cultural, political, and legal awareness. All of the most common orthopaedic presentations encountered in the austere environment are covered. In addition to evidence-based research, cases and actual experience from the authors' missions are included to illustrate and bring to life key points. This book, written by a team of international experts with extensive experience of challenging field missions, will be an ideal practical guide for volunteers and health care workers, helping them to deal with confusing, chaotic, and distressing situations with greater confidence and efficacy.?

The Palgrave Handbook of the History of Surgery Thomas Schlich 2017-12-12 This handbook covers the technical, social and cultural history of surgery. It reflects the state of the art and suggests directions for future research. It discusses what is different and specific about the history of surgery - a manual activity with a direct impact on the patient's body. The individual entries in the handbook function as starting points for anyone who wants to obtain up-to-date information about an area in the history of surgery for purposes of research or for general orientation. Written by 26 experts from 6 countries, the chapters discuss the essential topics of the field (such as anaesthesia, wound infection, instruments, specialization), specific domains areas (for example cancer surgery, transplants, animals, war), but also innovative themes (women, popular culture, nursing, clinical trials) and make connections to other areas of historical research (such as the history of emotions, art, architecture, colonial history). Chapters 16 and 18 of this book are available open access under a CC BY 4.0 license at link.springer.com

A National Trauma Care System National Academies of Sciences, Engineering, and Medicine 2016-09-12 Advances in trauma care have accelerated over the past decade, spurred by the significant burden of injury from the wars in Afghanistan and Iraq. Between 2005 and 2013, the case fatality rate for United States service members injured in Afghanistan decreased by nearly 50 percent, despite an increase in the severity of injury among U.S. troops during the same period of time. But as the war in Afghanistan ends, knowledge and advances in trauma care developed by the Department of Defense (DoD) over the past decade from experiences in Afghanistan and Iraq may be lost. This would have implications for the quality of trauma care both within the DoD and in the civilian setting, where adoption of military advances in trauma care has become increasingly common and necessary to improve the response to multiple civilian casualty events. Intentional steps to codify and harvest the lessons learned within the military's trauma system are needed to ensure a ready military medical force for future combat and to prevent death from preventable, survivable injuries in both military and civilian systems. This will require partnership across the military and civilian sectors and a sustained commitment from trauma system leaders at all levels to assure that the necessary knowledge and tools are not lost. A National Trauma Care System defines the components of a learning health system necessary to enable continued improvement in trauma care in both the civilian and the military sectors. This report provides recommendations to ensure that lessons learned over the past decade from the military's experiences in Afghanistan and Iraq are sustained and built upon for future combat operations and translated into the U.S. civilian system.

Current Therapy of Trauma and Surgical Critical Care E-Book Donald D. Trunkey 2015-04-20
Demanding surgical situations require expert advice from pioneers in the field as well as from those on the front lines of trauma care. Practical and evidence-based, Current Therapy of Trauma and Surgical Critical Care, 2nd Edition, draws on the experience of Drs. Juan A. Asensio and Donald D. Trunkey to offer a comprehensive, contemporary summary of the treatment and postoperative management of traumatic injuries. The concise format makes it ideally suited for everyday use, and new, full-color illustrations highlight the most important aspects of urgent surgical care, including ventilator management, damage control, noninvasive techniques, imaging, infection control, dealing with mass casualties, and treating injuries induced by chemical and biological agents. Prepare for the unexpected with practical, concise coverage of major surgical problems in trauma and critical care. Get expert and up-to-date guidance on ventilator management, damage control, noninvasive techniques, imaging, infection control, dealing with mass casualties, treating injuries induced by chemical and biological agents, and much more. Find the information you need quickly and easily through numerous illustrations, key points boxes, algorithms, and tables. Get up to date with current developments in the use of endovascular therapy for thoracic aortic injuries; the diagnosis of peripheral vascular injuries; new interventional imaging techniques and new uses for ultrasound; and new ventilator techniques such as HFJV and APRV. Make the most of new antibiotics to improve control of surgical infection, learn to use antifungal agents, and implement innovative therapies to combat both methicillin- and oxacillin-resistant organisms. Benefit from tremendous recent advances in the field (often as a result of experience gained by military and civilian surgeons), including the development of damage control.

Afghan CultureSource Wikipedia 2013-09 Please note that the content of this book primarily consists of articles available from Wikipedia or other free sources online. Pages: 140. Chapter 1: Afghan clothing, Afghan cuisine, Afghan holidays, Afghan literature, Afghan media, Afghan music, Afghan rugs and carpets, Books about Afghanistan, Cinema of Afghanistan, Flags of Afghanistan, Languages of Afghanistan, Libraries in Afghanistan, Marriage, unions and partnerships in Afghanistan, Museums in Afghanistan, National symbols of Afghanistan, Orders, decorations, and medals of Afghanistan, Photography in Afghanistan, Religion in Afghanistan, Sport in Afghanistan, Theatre in Afghanistan, Tobacco in Afghanistan, Persian language, Eagle, Brahui language, Nasreddin, Loya jirga, Pashto language, Buzkashi, Burqa, Nowruz, Chris Steele Perkins, Pashto media, The Kite Runner, Shia Family Law, Dardic languages, Culture of Afghanistan, Fighter kite, Media of Afghanistan, Biryani, Hinduism in Afghanistan, Shahada, Paul Seawright, Taqiyah, Etymology of Kapisa, Music of Afghanistan, Flag of Afghanistan, Sh mei T matsu, A Thousand Splendid Suns, Pashtunwali, Freedom of religion in Afghanistan, Bach bazi, Baha'i Faith in Afghanistan, Gender roles in Afghanistan, Naan, 16 Days in Afghanistan, Yoshino ishi, Afghan Girl, Purdah, List of Afghan submissions for the Academy Award for Best Foreign Language Film, Bactrian language, Kurta, Shalwar kameez, Nuristani languages, Afghan National Anthem, Manti, Domari language, Afghan wedding, Larry Towell, Afghanistan at the 2009 Asian Martial Arts Games, Pakora, Raising My Voice, Steve McCurry, Afghanistan at the Olympics, Kabul Museum, Malek Shafi'i, Pre-Islamic scripts in Afghanistan, War Surgery in Afghanistan and Iraq: A Series of Cases, 2003-2007, AINA, Afghan Muscles, Mikhail Evstafiev, Pajhwok Afghan News, Karakul, The Dressmaker of Khair Khana, Tim Hetherington, Shamshad TV, The Bookseller of Kabul, War rugs, Turkmen rug, Radio Kabul, Naswar, Tursu, Kabul Golf Club, ...

Burn Support for Operation Iraqi Freedom and Related Operations, 2005-2004

injury historically constitutes approximately 5% to 20% of conventional warfare casualties. This article reviews medical planning for burn care for the war in Iraq and experience with burns during the war at the U.S. Army Burn Center; aboard the USNS Comfort hospital ship; and at Combat Support Hospitals in Iraq and Afghanistan. Two burn surgeons were deployed to the military hospital in Landstuhl, Germany, and to the Gulf Region to assist with triage and patient care. From March 2003 to May 2004, 109 burn casualties from the war were hospitalized at the U.S. Army Burn Center in San Antonio, Texas, and U.S. Army Burn Flight Teams moved 51 critically ill burn casualties to the Burn Center. Ten Iraqi burn patients underwent surgery and were hospitalized for up to 1 month aboard the Comfort, including six with massive wounds. Eighty-six burn casualties were hospitalized at the 28th Combat Support Hospital for up to 5 days. This experience highlights the importance of anticipating the burn care needs of both combatants and the local civilian population during war.

Front Line Surgery Matthew J. Martin, MD, FACS 2010-12-13 Both editors are active duty officers and surgeons in the U.S. Army. Dr. Martin is a fellowship trained trauma surgeon who is currently the Trauma Medical Director at Madigan Army Medical Center. He has served as the Chief of Surgery with the 47th Combat Support Hospital (CSH) in Tikrit, Iraq in 2005 to 2006 and most recently as the Chief of Trauma and General Surgery with the 28th CSH in Baghdad, Iraq in 2007 to 2008. He has published multiple peer-reviewed journal articles and surgical chapters. He presented his latest work analyzing trauma-related deaths in the current war and strategies to reduce them at the 2008 annual meeting of the American College of Surgeons.

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War Doctor David Nott 2019-02-21 'Brave, compassionate and inspiring – it left me in floods of tears' – Adam Kay, author of *This Is Going to Hurt* A powerful and intensely moving memoir by an NHS surgeon who volunteered in war zones, operating under the most extreme circumstances. For more than twenty-five years, David Nott has taken unpaid leave from his job as a general vascular surgeon with the NHS to volunteer in some of the world's most dangerous war zones. From Sarajevo under siege in 1993, to clandestine hospitals in rebel-held eastern Aleppo, he has carried out life-saving operations and field surgery in the most challenging conditions, and with none of the resources of a major London teaching hospital. The conflicts he has worked in form a chronology of twenty-first-century combat: Afghanistan, Sierra Leone, Liberia, Darfur, Congo, Iraq, Yemen, Libya, Gaza and Syria. But he has also volunteered in areas blighted by natural disasters, such as the earthquakes in Haiti and Nepal. Driven both by compassion and a desire to help others and the thrill of extreme personal danger, he is now widely acknowledged to be the most experienced trauma surgeon in the world. But as time went on, David Nott began to realize that flying into a catastrophe – whether war or natural disaster – was not enough. Doctors on the ground needed to learn how to treat the appalling injuries that war inflicts upon its victims. Since 2015, the foundation he set up with his wife, Elly, has disseminated the knowledge he has gained, training other doctors in the art of saving lives threatened by bombs and bullets. *War Doctor* is his extraordinary story.

Specialty Clinical Publications Daniel E. Banks 2008 "The Borden Institute was established in 1987 at Walter Reed Army Medical Center in Washington, DC, to foster and promote excellence in military academic medicine through the development and publication of military medical scholarship. The Borden Institute is an agency of the US Army Medical Department Center and School and, following the closure of Walter Reed, it has relocated to Ft Sam Houston, Texas, v

an office at Ft Detrick, Maryland. In addition to the 'Textbooks of Military Medicine' series and series on military medical history, the Institute also publishes specialty titles, such as the award-winning 'War Surgery in Afghanistan and Iraq: A Series of Cases, 2003-2007' and 'Pediatric Surgery and Medicine for Hostile Environments.'"--From the publisher.

Emergency War Surgery, 5th US Revision Miguel A. Cubano 2018-10-01 Updated from the 2013 edition, this volume reflects lessons learned from recent US involvement in Iraq and Afghanistan and represents state-of-the-art principles and practices of forward trauma surgery. Expertly addresses the appropriate medical management of blast wounds, burns, and multiple penetrating injuries, as well as other battle and non-battle injuries. Topics include triage, hemorrhage control, airway/breathing, shock and resuscitation, anesthesia, infections, critical care, damage control surgery, face and neck injuries, soft-tissue injuries, ocular injuries, head injuries, extremity fractures, thoracic injuries, amputations, abdominal injuries, pediatric care, and more. A new chapter provides Tactical Combat Casualty Care guidelines. Significant updates were also made to the blood collection and transfusion chapters. Other products produced by the U.S. Army, Borden Institute can be found here: <https://bookstore.gpo.gov/agency/borden-institute>

Skeletal Trauma E-Book Bruce D. Browner 2019-06-27 Offering expert, comprehensive guidance on the basic science, diagnosis, and treatment of acute musculoskeletal injuries and post-traumatic reconstructive problems, Skeletal Trauma, 6th Edition, brings you fully up to date with current approaches in this challenging specialty. This revised edition is designed to meet the needs of orthopaedic surgeons, residents, fellows, and traumatologists, as well as emergency physicians who treat patients with musculoskeletal trauma. International thought leaders incorporate the latest peer-reviewed literature, technological advances, and practical advice with the goal of optimizing patient outcomes for the full range of traumatic musculoskeletal injuries. Offers complete coverage of relevant anatomy and biomechanics, mechanisms of injury, diagnostic approaches, treatment options, and associated complications. Includes eight new chapters dedicated to advances in technology and addressing key problems and procedures, such as Initial Evaluation of the Spine in Trauma Patients, Management of Perioperative Pain Associated with Trauma and Surgery, Chronic Pain Management (fully addressing the opioid epidemic), Understanding and Treating Chronic Osteomyelitis, and more. Features a complimentary one-year subscription to OrthoEvidence, a global online platform that provides high-quality, peer-reviewed and timely orthopaedic evidence-based summaries of the latest and most relevant literature. Contains up-to-date critical information on mass casualty incidents and war injuries, with contributions from active-duty military surgeons and physicians in collaboration with civilian authors to address injuries caused by road traffic, armed conflict, civil wars, and insurgencies throughout the world. Features important call out boxes summarizing key points, pearls and pitfalls, and outcomes. Provides access to nearly 130 instructional videos that demonstrate principles of care and outline detailed surgical procedures. Contains a wealth of high-quality illustrations, full-color photographs, and diagnostic images.

Manual of Definitive Surgical Trauma Care, Fifth Edition Kenneth David Boffard 2019-05-22 Developed for the International Association for Trauma Surgery and Intensive Care (IATSIC), the Manual of Definitive Surgical Trauma Care 5e is ideal for training all surgeons who encounter major surgical trauma on an infrequent basis. This new edition includes both an e-version, and also a microSD card containing over 20 operative videos. The increasing role of non-operative management (NOM) has been recognised, and the Military Module is substantially updated to reflect recent conflict experience. An expanded section highlights trauma management under austere conditions. Written by faculty who teach the DSTC Course, this definitive and well

established book focuses on life-saving surgical techniques to use in challenging and unfamiliar incidents of trauma.

The Emergency Medicine Trauma Handbook Alex Koefman 2019-10-31 Trauma is a leading cause of death and disability around the world, and the leading cause of death in those aged forty-five years. Conditions such as airway obstruction, hemorrhage, pneumothorax, tamponade, bowel rupture, vascular injury, and pelvic fracture can cause death if not appropriately diagnosed and managed. This essential book provides emergency physicians with an easy-to-use reference and source for traumatic injury evaluation and management in the Emergency Department. It covers approaches to common, life-threatening, and traumatic diseases in the Emergency Department, for use on shift and as a reference for further learning. Each chapter includes a succinct overview of common traumatic injuries, with evaluation and management pearls and pitfalls. Highly illustrated with images from one of the busiest trauma centers in the US, and featuring expert contributions from a diverse set of attending physicians, this is an essential for all emergency medicine practitioners.

Manual of Definitive Surgical Trauma Care Kenneth D Boffard 2011-08-26 Manual of Definitive Surgical Trauma Care is an essential manual for all trainee and qualified surgeons. It covers every aspect of surgical trauma care. Provides clear access to all necessary information from theory of injury through to individual organ system injury and resources such as injury scoring Provides clear surgical guidance on how to deal with major trauma Updated to incorporate all recent developments including massive transfusion and current surgical techniques of exposure and repair Contains hints, tips and tricks, while highlighting the pitfalls that can occur when dealing with major trauma A truly global perspective based on the IATSIC approved DSTC course, Manual of Definitive Surgical Trauma Care will give you the confidence to focus on life-saving surgical techniques when faced with challenging and unfamiliar incidents of trauma. Written by the faculty who teach the DSTC Course, developed for the International Association for Trauma Surgery and Intensive Care (IATSIC), it is ideal for all surgeons who deal with major surgical trauma on an infrequent basis.

Society, History, and the Global Human Condition Ziaur Baber 2010-12-18 This book highlights the continuing relevance of classical sociological theories and concepts in making sense of the contemporary globalized world. Covering a very wide historical and geographical range and topics that include: classical sociological theory, genocide, resistance, the intifada, street gangs, democracy, bureaucracy, war literature, ethnic diversity, national culture, and science, the distinguished contributors to this volume affirm the contemporary relevance of the classical sociological tradition for making sense of the global human condition.

Emergency War Surgery (Third Edition) Borden Institute, Walter Reed Army Medical Center Staff 2013-02-04 This is the official, comprehensive and widely used United States Army "Emergency War Surgery" handbook. Addresses the appropriate medical management of both battle and nonbattle injuries. Written by subspecialty experts, this latest revision (2004) has been much updated and enhanced from experiences gained in Iraq and Afghanistan. A collaborative effort of the Borden Institute and the Walter Reed Army Medical Center, this handbook is an essential tool for the management of forward combat trauma. Chapters include: Weapons Effects and Parachute Injuries; Levels of Medical Care; Triage; Aeromedical Evacuation; Airway/Breathing; Haemorrhage Control; Shock and Resuscitation; Vascular Access; Anesthesia; Infections; Critical Care; Damage Control Surgery; Face and Neck Injuries; Ocular Injuries; Head Injuries; Thoracic Injuries; Abdominal Injuries; Genitourinary Tract Injuries; Gynecologic Trauma and Emergencies; Wounds and Injuries of the Spinal Column and

Cord; Pelvic Injuries; Soft-Tissue Injuries; Extremity Fractures; Open-Joint Injuries; Amputations; Injuries to the Hands and Feet; Vascular Injuries; Burns; Environmental Injuries; Radiological Injuries; Biological Warfare; Chemical Injuries; Pediatric Care; Care of Enemy Prisoners of War and Internee. 478 pages. Profusely illustrated throughout.

Civil War Surgeon - Biography of James Langstaff Dunn, MD. Kerr 2012-03 This book is a Biography of James Langstaff Dunn, MD, Civil War Surgeon and unwavering Patriot, from Medical Student 1846 to War End 1865. A modern doctor, Paul B Kerr, MD, obtained 140 letters Dunn wrote to his dear wife, Temperance, and children, from his College and War years. Dr Kerr interprets the letters as relates to surgery, diseases, tent life, prisons, hospitals and logistics in the light of life and medicine today, and his own experiences in Army Medicine in WW II and Korea. Dr Kerr also discusses the knowledge of anesthesia in the 1800s, and how it evolved during 40 years of his own practice of anesthesia. Dunn was the Surgeon of the 109th PA Volunteers of Infantry for three years, a Battalion that carried many central assignments and battles. Fighting for 1 1/2 years with the Army of the Potomac, his unit did a second 1 1/2 years with the Army of the Tennessee. Dunn describes first-hand the Battles for Gettysburg, Chancellorsville, Chattanooga, Atlanta and the occupancy of Savannah. You won't forget his exhausting personal help for women and babies in the fiery destruction of Columbia, South Carolina. Nor will his description of first entry into Atlanta be forgotten. Dunn personally names Clara Barton "The Angel of the Battlefield." He witnesses the amazing assault on Lookout Mountain, visits relatives in Cincinnati and Nashville. In Washington, he observes President Lincoln and the huge tent city with thousands of marching men there. We have from him a dateline Washington, DC on the very day Lincoln was shot. We meet his boss and friend, General John Geary, who from Mayor of San Francisco and Governor of Kansas, becomes his Commandant, and, after the War, Governor of Pennsylvania. We learn first hand about drunkenness, "Hospital Gangrene;" and Dunn's encounters with slaves, the aristocracy of Virginia and the primitive whites of the Tennessee Mountains. Throughout, Dr Dunn keeps his morals, his devotion to the Union and his disgust with pacifists at home in Pennsylvania and in Congress. He discusses the Conscription Laws and methods of substitution. His letters are full of Military Information that in other wars were subject to censorship. His 140 letters are as a "War Correspondent."

Emergency War Surgery 2014 Office of the Surgeon General 2014-01-16 This is the 2014 update to the 2004 version. Information in this edition reflects lessons learned from American involvement in Iraq and Afghanistan, and represents state-of-the-art principles and practices for forward trauma surgery. This publication is not a first aid manual and is intended for physicians, physician assistants, and advanced practice medics and corpsmen involved in providing emergency medical and trauma care near the battle space. This publication expertly addresses the appropriate medical management of blast wounds, burns, multiple penetrating injuries, as well as other battle and non-battle injuries. Specific chapters cover the following topics: Weapons Effects and War Wounds-Treat the wound, not the weapon, explosive injuries, and ballistics injuries including 5.56mm and 7.62mm. Mass Casualty and Triage-Triage categories and decision making and emergency treatment area setup. Airway/Breathing-Initial airway management, ventilation, intubation, difficult airways, and surgical cricothyrotomy. Hemorrhage Control-Bleeding control, tourniquets, pressure points, dressings, bandages, hemostatic agents, and controlled hypotension. Shock, Resuscitation, and Vascular Access-Treatment of hypovolemic shock, vascular access, subclavian vein access, internal jugular venipuncture, saphenous vein cut down and intraosseous infusion. Anesthesia-Indications, rapid sequence intubation, indications and dosing recommendations for narcotics and muscle relaxants. Soft Tissue and Open Joint Injuries

Pre-surgical care, surgical wound management, and wound care. Infections-Diagnosis of a wound infection, common microorganisms causing battlefield infections, recommendations to prevent infections associated with combat related injuries, antimicrobial agent selection including preferred agents and alternate agents with appropriate administration and dosing guidelines. Critical Care-Shock resuscitation, fluid and electrolyte management, treatment of acute coronary syndrome, congestive heart failure, unstable angina, and other acute medical conditions. Damage Control Surgery-Pre-hospital and emergency resuscitation and critical care. Face and Neck Injuries-Immediate management of face and neck injuries and facial bone fractures. Ocular Injuries-Immediate treatment, treatment of chemical injuries, corneal abrasions, and foreign bodies. Thoracic Injuries-Tension pneumothorax, hemothorax, open pneumothorax (sucking chest wound), flail chest, chest tube placement, and emergency thoracotomy. Gynecologic Trauma and Emergencies-Emergency delivery and emergency Cesarean section and neonatal resuscitation. Extremity Fractures-Wound management Burns-Point of injury care, primary survey, estimation of fluid resuscitation needs, burn resuscitation, burn and wound care. Environmental Injuries-Trench foot and frostbite, field and medical facility treatment, hypothermia treatment, heat injury and heat stroke, altitude illness and acute mountain sickness, high altitude pulmonary and cerebral edema, Radiological Injuries-Treatment of injuries and illnesses from conventional nuclear weapons and radiological dispersal devices (dirty bombs.) Biological Warfare Agents-Hemorrhagic fever, Hanta, Ebola, Lassa, Rift Valley, botulinum, ricin, anthrax, plague, cholera, and tularemia treatment. Chemical Injuries-Treatment of nerve agents, vesicants, and choking agents. Pediatric Care-Fluid, caloric, and protein requirements for children, normal vital signs, pediatric resuscitation equipment and supplies, commonly used drugs and dosages, surgical wound management Battlefield Transfusions Emergency Whole Blood Collection Product Manufacture Emergency War Surgery, 5th US Revision Miguel A. Cubano 2018-10-01 Updated from the 2013 edition, this volume reflects lessons learned from recent US involvement in Iraq and Afghanistan and represents state-of-the-art principles and practices of forward trauma surgery. Expertly addresses the appropriate medical management of blast wounds, burns, and multiple penetrating injuries, as well as other battle and non-battle injuries. Topics include triage, hemorrhage control, airway/breathing, shock and resuscitation, anesthesia, infections, critical care, damage control surgery, face and neck injuries, soft-tissue injuries, ocular injuries, head injuries, extremity fractures, thoracic injuries, amputations, abdominal injuries, pediatric care, and more. A new chapter provides Tactical Combat Casualty Care guidelines. Significant updates were also made to the blood collection and transfusion chapters. Other products produced by the U.S. Army, Borden Institute can be found here: <https://bookstore.gpo.gov/agency/borden-institute>

Trauma James Cole 2011-10-11 In this pulse-pounding medical memoir, trauma surgeon James Cole takes readers straight into the ER, where anything can and does happen. TRAUMA is Dr. Cole's harrowing account of his life spent in the ER and on the battlegrounds, fighting to save lives. In addition to his gripping stories of treating victims of gunshot wounds, stabbings, attempted suicides, flesh-eating bacteria, car crashes, industrial accidents, murder, and war, the book also covers the years during Cole's residency training when he was faced with 120-hour weeks, excessive sleep deprivation, and the pressures of having to manage people dying of traumatic injury, often with little support. Unlike the authors of other medical memoirs, Cole trained to be a surgeon in the military and served as a physician member of a Marine Corps reconnaissance unit, United States Special Operations Command (USSOCOM), and on a Navy Reserve SEAL team. From treating war casualties in Afghanistan and Iraq to his experiences as a civilian trauma surgeon treating alcoholics, drug addicts, criminals, and the mentally deranged

TRAUMA is an intense look at one man's commitment to his country and to those most desperately in need of aid.

Military Medical Ethics in Contemporary Armed Conflicts Michael L. Gross 2021 "The goal of military medicine is to conserve the fighting force necessary to prosecute just wars. Just wars are defensive or humanitarian. A defensive war protects one's people or nation. A humanitarian war rescues a foreign, persecuted people or nation from grave human rights abuse. To provide medical care during armed conflict, military medical ethics supplements civilian medical ethics with two principles: military-medical necessity and broad beneficence. Military-medical necessity designates the medical means required to pursue national self-defense or humanitarian intervention. While clinical-medical necessity directs care to satisfy urgent medical needs, military medical necessity utilizes medical care to satisfy the just aims of war. Military medicine may therefore attend the lightly wounded before the critically wounded or use medical care to win hearts and minds. The underlying principle is broad, not narrow, beneficence. The latter addresses private interests, while broad beneficence responds to the collective welfare of the political community"--

Between Flesh and Steel Richard A. Gabriel 2013 Over the last five centuries, the development of modern weapons and warfare has created an entirely new set of challenges for practitioners in the field of military medicine. *Between Flesh and Steel* traces the historical development of military medicine from the Middle Ages to modern times. Military historian Richard A. Gabriel focuses on three key elements: the modifications in warfare and weapons whose increased killing power radically changed the medical challenges that battle surgeons faced in dealing with casualties; advancements in medical techniques that increased the effectiveness of military medical care; and changes that finally brought about the establishment of a military medical care system in modern times. Other topics include the rise of the military surgeon, the invention of anesthesia, and the emergence of such critical disciplines as military psychiatry and bacteriology. The approach is chronological--century by century and war by war, including Iraq and Afghanistan--and cross-cultural in that it examines developments in all of the major armies of the West: British, French, Russian, German, and American. *Between Flesh and Steel* is the most comprehensive book on the market about the evolution of modern military medicine.

Orthopedics in Disasters Nikolaj Wolfson 2016-05-30 This book is the first to address specifically the mechanisms and treatment of orthopedic injuries due to natural disasters and other mass casualty events. Casualty management is discussed in a range of contexts, from earthquakes and tsunamis to terror attacks and combat situations. Organizational aspects are addressed, general treatment principles are documented, and the management of a variety of orthopedic injuries is described with the aid of numerous illustrations. The book will serve as an invaluable source of practical knowledge for a broad spectrum of medical and other staff, including emergency personnel, orthopedic and trauma surgeons, general practitioners, medical students, and professionals working for the military, government bodies, and NGOs.?

Dit doet even pijn Adam Kay 2018-05-16 Zeg je vrienden en familie maar vaarwel. Bereid je voor op een werkweek van 97 uur, beslissingen over leven en dood, een constante vloed aan lichaamssappen en een budget dat eerder gepast lijkt voor een turfsteker. Welkom in het leven van een arts in opleiding. Tijdens de helse dagen en slapeloze nachten hield cabaretier en voormalig arts in opleiding Adam Kay jarenlang in het geheim een dagboek bij. Zijn verslagen van de frontlinies van het ziekenhuis zijn samengebracht in dit afwisselend hilarische, afschuwelijke en ontroerende boek. Dit doet even pijn vertelt je alles wat je wilt weten over het werk op een ziekenboeg - plus een aantal dingen die je liever niet had willen weten. Mogelijke

bijwerkingen: spontane lachstuipen en opwellende tranen. Adam Kay (1980) werkte jarenlang arts in opleiding, maar is tegenwoordig een succesvol cabaretier en scriptschrijver. Zijn debuut Dit doet even pijn werd direct een bestseller in Groot-Brittannië en is inmiddels in vijftien landen vertaald.

Fragments from Iraq Zsolt T. Stockinger, M.D. 2014-01-10 From February 2005 to March 2006 Navy trauma surgeon Zsolt Stockinger served on a forward operating base in Iraq's Sunni Triangle, where he treated more than a thousand casualties and performed hundreds of surgeries. Throughout his deployment, he recorded his thoughts and experiences in a journal that he occasionally sent to his wife as a way to stay connected. Stockinger's diary offers a unique account of daily military life in Iraq from a surgeon's perspective, from the intense action of rocket attacks and emergency procedures to the creative and often lighthearted ways of filling tedious stretches of down time. Illustrated with 47 photographs, this work provides a realistic portrait of life on base and a powerful perspective on the human carnage of war.

Emergency War Surgery 2004 3rd United States Edition. Although it does not state that it is part of a series, it is listed on the Borden Institute's web-site under "Textbooks of Military Medicine". Represents an entirely new handbook. Revised to reflect lessons learned from ongoing American involvement in Southwest Asia. Is an essential tool for the management of forward combat trauma. Takes a bulleted manual style in order to optimize its use as a rapid reference. Drafted by sub-specialty experts. Updated by surgeons returned from year-long deployments in Iraq and Afghanistan. A collaborative effort with the Army Medical Department Center & School. Includes bibliographical references and index.

A History of War Surgery John Wright 2011-04-15 The story of the men and women who, throughout history, have pitted themselves against the destruction caused in battle.

War and American Literature Jennifer Haytock 2021-02-04 This book examines representations of war throughout American literary history, providing a firm grounding in established criticism and opening up new lines of inquiry. Readers will find accessible yet sophisticated essays that pose key questions and scholarship in the field. War and American Literature provides a comprehensive synthesis of the literature and scholarship of US war writing, illuminates how themes, texts, and authors resonate across time and wars, and provides multiple contexts in which texts and a war's literature can be framed. By focusing on American war writing, from the war with the Native Americans and the Revolutionary War to the recent wars in Iraq and Afghanistan, this volume illuminates the unique role representations of war have in the US imagination.

Aan de grenzen van het Amerikaans imperium / de Robert D. Kaplan 2005-11-20 Politieke analyses over het wereldwijde optreden van Amerikaanse militairen, door een journalist die met de troepen meereist.

Photography in Iraq Source Wikipedia 2013-09 Please note that the content of this book primarily consists of articles available from Wikipedia or other free sources online. Pages: 31. Chapters: Lynndie England, Abu Ghraib torture and prisoner abuse, Michael Yon, Charles Graner, Armin T. Wegner, War Feels Like War, Manadel al-Jamadi, James Nachtwey, Russell Klika, Chris Hondros, Ashley Gilbertson, War Surgery in Afghanistan and Iraq: A Series of Cases, 2003-2007, Firdos Square statue destruction, Kaveh Golestan, Jeremy Sivits, Coalition chronicle, Satar Jabar, David C. Turnley, Kevin Frayer, Paul Moran. Excerpt: Beginning in 2004, human rights violations in the form of physical, psychological, and sexual abuse, including torture, rape, sodomy, and homicide of prisoners held in the Abu Ghraib prison in Iraq (also known as Baghdad Correctional Facility) came to public attention. These acts were committed by military

police personnel of the United States Army together with additional US governmental agencies. Lynndie England holding a leash attached to a prisoner, known to the guards as "Gus," who is lying on the floor. Revealed in the Taguba Report, an initial criminal investigation by the United States Army Criminal Investigation Command had already been underway, where soldiers of the 320th Military Police Battalion had been charged under the Uniform Code of Military Justice with prisoner abuse. In 2004, articles describing the abuse, including pictures showing military personnel appearing to abuse prisoners, came to public attention, when a 60 Minutes II news report (April 28) and an article by Seymour M. Hersh in *The New Yorker* magazine (posted online on April 30 and published days later in the May 10 issue) reported the story. The United States Department of Defense removed seventeen soldiers and officers from duty, and eleven soldiers were charged with dereliction of duty, maltreatment, aggravated assault and battery. Between May 2004 and March 2006, eleven soldiers were convicted in courts martial, ...

Don't Go Lisa Scottoline 2013-04-09 Lisa Scottoline has thrilled millions with her emotionally charged novels that feature strong women exploring the boundaries of family, justice, and love. Her New York Times bestseller, *Don't Go*, she breaks new ground and delivers the story of a soldier who discovers what it means to be a man, a father, and ultimately, a hero. When Dr. Mike Scanlon is called to serve as an army doctor in Afghanistan, he's acutely aware of the dangers he faces and the hardships it will cause his wife Chloe and newborn baby. And deep inside, he doesn't think of himself as a warrior, but a healer. However, in an ironic turn of events, as Mike operates on a wounded soldier in a war-torn country, Chloe dies at home in the suburbs, in an apparent household accident. Devastated, he returns home to bury her, only to discover that the life he has behind has fallen apart. His medical practice is in jeopardy, and he is a complete stranger to the only family he has left - his precious baby girl. Worse, he learns a shocking secret that sends him into a downward spiral. Ultimately, Mike realizes that the most important battle of his life faces him on the home front and he'll have to put it all on the line to save what's dearest to him - his family. Gripping, thrilling, and profoundly emotional, *Don't Go* is Lisa Scottoline at her finest.

Front Line Surgery Matthew J. Martin, 2017-07-21 The second edition of *Front Line Surgery* expands upon the success of the first edition, providing updated discussion of practical management of commonly encountered combat injuries. This edition reflects the cutting edge of combat casualty care, refined principles of surgical management of specific injury patterns, and incorporation of the spectrum of recent research advancements in trauma care. Each chapter continues to follow the same organization as the first edition. The "BLUF", or bottom line up front, headlines each topic, providing the critical pearls for the reader, followed by a focused, straight forward discussion of management, pitfalls, and recommendations. In addition, select chapters conclude with a section discussing the application of this topic in civilian practice, as potentially encountered by the rural or humanitarian relief surgeon. Additional new topics include: REBOA and endovascular techniques for hemorrhage control, updates in transfusion and resuscitation practice, active shooter situations, rural trauma management in developed nations, advancements in prehospital care and the Tactical Combat Casualty Care (TC3) course, and discussion of the newest generations of topical hemostatic agents and tourniquets. These additions serve to both enhance the breadth and depth of the material relevant to military surgeons, but should also further expand the applicability and interest in this work to all civilian trauma surgeons.

War Surgery in Afghanistan and Iraq Shawn Christian Nessen 2008 Specialty Volume of Textbooks of Military Medicine. TMM. Edited by Shawn Christian Nessen, Dave Edmond Lounsbury, and Stephen P. Hetz. Foreword by Bob Woodruff. Prepared especially for medical

personnel. Provides the fundamental principles and priorities critical in managing the trauma of modern warfare. Contains concise supplemental material for military surgeons deploying or preparing to deploy to a combat theater.

No Place to Hide W. Lee Warren 2014-05-06 A War Zone of the Soul Dr. W. Lee Warren's life as a neurosurgeon in a trauma center began to unravel long before he shipped off to serve the Air Force in Iraq in 2004. When he traded a comfortable if demanding practice in San Antonio, Texas for a ride on a C-130 into the combat zone, he was already reeling from months of personal struggle. At the 332nd Air Force Theater Hospital at Joint Base Balad, Iraq, Warren realized his experience with trauma was just beginning. In his 120 days in a tent hospital, he was trained in different specialty—surviving over a hundred mortar attacks and trying desperately to repair the damages of a war that raged around every detail of every day. No place was safe, and the constant barrage wore down every possible defense, physical or psychological. One day, clad only in a T-shirt, gym shorts, and running shoes, Warren was caught in the open while round after round of mortars shook the earth and shattered the air with their explosions, stripping him of everything he had been trying so desperately to hold on to. Warren's story is an example of how a person can rise from a place of total loss to one of strength, courage, and victory. Whether you are in the midst of your own crisis of faith, failed relationship, financial struggle, or illness, you will be inspired to remember that how you respond determines whether you survive—spiritually, emotionally, and sometimes physically. It is the beginning of a long journey home.

The Lisa Scottoline Collection: Volume 2 Lisa Scottoline 2014-11-25 Available for the first time in this stunning electronic edition, THE LISA SCOTTOLINE COLLECTION: VOLUME 2 is sure to delight the #1 New York Times bestselling author's millions of fans. Includes: COME HOME Jill Farrow is a typical suburban mom who has finally gotten her and her daughter's lives back on track after a divorce. She is about to remarry, her job as a pediatrician fulfills her—though it is stressful—and her daughter, Megan, is a happily over-scheduled thirteen-year-old juggling homework and the swim team. But Jill's life is turned upside down when her ex-stepdaughter Abby, shows up on her doorstep late one night and delivers shocking news: Jill's ex-husband is dead. Abby insists that he was murdered and pleads with Jill to help find his killer. Jill reluctantly agrees to make a few inquiries and discovers that things don't add up. As she digs deeper, her actions threaten to rip apart her new family, destroy their hard-earned happiness, and even endanger her own life. Yet Jill can't turn her back on a child she loves and once called her own. This unforgettable novel reads with the breakneck pacing of a thriller while also exploring the definition of motherhood, asking the questions: Do you ever stop being a mother? Can you ever have an ex-child? What are the limits to love of family? DON'T GO When Dr. Mike Scanlon is called to serve as an army doctor in Afghanistan, he's acutely aware of the dangers he'll face and the hardships it will cause his wife Chloe and newborn baby. And deep inside, he doesn't think of himself as a warrior, but a healer. However, in an ironic turn of events, as Mike operates on a wounded soldier in a war-torn country, Chloe dies in their kitchen, a victim of an apparent household accident. Devastated, Mike returns home to bury her, only to discover that the life he left behind has fallen apart. His medical practice is in jeopardy, and he is a complete stranger to the only family he has left: his precious baby girl. Worse, he learns a shocking secret that sends him into a downward spiral. As layer upon layer of lies are revealed, Mike soon realizes that the most important battle of his life faces him on the home front, and he'll have to put it all on the line to save what's dearest to him.

War Surgery in Afghanistan and Iraq Shawn Christian Nessen 2008

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