

U.S. ARMY

Medical Transformation in Contact

TiC 2.0 | FY 2025 | v2

The Force Modernization Enterprise

Medical Test and Evaluation Activity (MTEAC)

Director: COL Deon Maxwell, Sr.
Mission: Provides objective, data-driven evaluations of medical devices and systems to inform fielding and other decisions. The MEDCoE is the only CoE with a test and evaluation mission.



Fielded Force Integration Directorate (FFID)

Director: COL Johnny Paul
Mission: Ensures the Army's medical force is aligned with operational needs for LSCO and future missions by integrating medical capabilities across the DOTMLPF-P framework and collaborating with the force modernization community.



Directorate of Training and Doctrine (DOTD)

Director: COL Dan Bridon
Mission: Develops and sustains doctrine, training, and educational products for the operational, institutional, and self-development learning domains to enhance the combat readiness of the current and future Army Medical Force.



Directorate of Simulation (DoS)

Director: COL Eric Jacobson
Mission: Regulates and modernizes Emergency Medical Technician (EMT) certification and develops Army medical modeling and simulation policies for institutional medical training, professional military education and operational medical readiness training.



Medical Capability Development Integration Directorate (MED CDID)

Director: COL David Zinnante
Mission: Determines medical gaps, develops operational concepts, and then leads experiments and exercises with all warfighting functions to determine which requirements are integrated into the future force.



Academy of Health Sciences (AHS)

Commandant: COL Rebecca Zinnante
Mission: Delivers Multi-Domain Operations (MDO) education and training; deliberately and progressively grows Soldiers and Army Civilians into competent, committed, and professional leaders.



AMEDD Personnel Proponent Directorate (APPD)

Director: COL Tony Marinos
Mission: Analyzes, synchronizes, and integrates Personnel Development System life cycle management functions and force structure design for the AMEDD.



Doctrine Domain

FM 3-08, Casualty Evacuation

Directorate: DOTD, FFID

Objective: Directed by LTG Beagle, this publication provides the force direction for conducting casualty evacuation at echelon. Once published, this publication will have a cascading effect on lower-level doctrine (ATPs) across all the warfighting functions that contain casualty evacuation TTPs. As an FM, this publication will reinvigorate the culture of casualty evacuation as a maneuver commander responsibility to plan, resource, rehearse, and execute.



ATP 4-02.11, Casualty Response

Directorate: DOTD

Objective: Multiservice publication that lays out Tier 1 and 2 TCCC, by service, and concentrates on TTPs for providing casualty response from point of injury to a casualty collection point. This is very much at the tactical level that will provide direction for leaders (non-medical as well as medical) to develop training strategies, battle drills, and SOPs focused on immediate treatment and evacuation of casualties.



Harding Project

Directorate: The Borden Institute, AHS

Objective: A CSA initiative focused on revitalizing professional military discourse. *The Pulse of Army Medicine* is MEDCoE’s contribution, with over 500 views and 15 publications since October 24.



Ukraine Medical Lessons Learned Summary

Directorate: DOTD/FFID

Objective: The MEDCoE Lesson Learned Branch captures lessons affecting Army Medicine compiled from operational deployments, training exercises and the Russo-Ukraine war. These lessons are published in quarterly newsletters and an annual report.

Scan to Subscribe:



Scan the QR code to subscribe to the newsletter (.mil, .edu, .gov emails only).

Organizational Domain

Security Force Assistance Command (SFAC) Medic

Directorate: CDID, APPD

Objective: The 68W23 Medical Advisor training program increases the scope of practice beyond the current capabilities of the 68W20 combat medic to independently operate for periods up to 72-hours providing medical care to a wide range of combat and noncombat casualties in remote and austere locations.



68th Theater Medical Command (TMC) Activation

Directorate: FFID

Objective: The TAA 25-29 activated one TMC (68th) in support of USAREUR-AF in FY25. The Main Command Post was formally activated on 20 September 2024, stationed at Sembach, GE. The 68th will conduct their validation exercise in OCT 2025.



66F to 60N Force Design Update

Directorate: APPD, FFID

Objective: Updates Hospital Augmentation Detachment FDU Jr to change one 66F O3 Nurse Anesthetist with one 60N O3 Anesthesiologist in the Anesthesia Service Section to optimize assets. ANC and MC concur.



3P Additional Skill Identifier (ASI) throughout TiC Formations

Directorate: APPD, FFID

Objective: Assigns 68W ASI 3P in grades E5 and E6 to TiC Formations to determine proper utilization that inform future Force Design Updates (FDUs).



Consolidated TiC Criteria (ref CAC guidance)

- Principally focused on Division & below
- Addresses the two medical MDO gaps: clear the battlefield, hospitalization
- Implementable in 18-24 months
- Scaled
- Joint Force enabling
- Enables speed and transformation

Training Domain

Medical Effects & Enablers (E&E)

Directorate: Future Force Integration Directorate (FFID)
Objective: An exportable, realistic, advanced medical simulations package that prepares medical personnel for the realities of a LSCO and MDO. Recently used to integrate trauma effects equipment and personnel with JRTC OPS Group during rotation 24-11 to create realistic medical scenarios for the BSMC and FRSD.



68W Advanced Emergency Medical Technician (AEMT)

Directorate: DOTD, AHS
Objective: The “Enhanced Medic” proof of concept began in January 2025 and is intended to close the gap on skills required to support LSCO and demonstrated through the AEMT. It will increase the depth and breadth of knowledge of 90 Soldiers and provide them the opportunity to test for the Advanced EMT certification.



Medical Master Trainer Course

Directorate: DOTD, AHS
Objective: Significant analysis conducted in 2018 related to the capabilities of Combat Medics. This 4-week course is designed to augment the NCO professional development for E5s & E6s in BCTs.



Medic Program of Instruction (Pol)

Directorate: DOTD, AHS
Objective: Numerous experiments, senior leader guidance, and feedback from operational units identify the need for all Combat Medics to have an increased foundation of knowledge and skills that enable clinical reasoning during challenging and austere environments, especially when medical evacuation is delayed.



Foundational Skills Training

Directorate: 32d Medical Brigade, AHS
Objective: In synch with TRADOC and CIMT, implementing Foundational Skills training in AIT to overcome cultural gaps, life skills disparities, and physical challenges, while building trust, warfighting proficiency and the cohesive teams our Army Profession needs to fight and win.



Materiel Domain

Field Portable Ultrasound
Directorate: MTEAC, CDID
Objective: MTEAC recently conducted an operational test of 3 ultrasound field portable devices. It is a new requirement to fill a capability gap for the Tactical Combat Medical Care, Austere Tactical Care, and Special Forces Tactical Medical Equipment Sets.



Sparrow Ventilator
Directorate: CDID, MTEAC, FFID
Objective: A military-grade ventilator designed specifically for military use. It can be used in tactical or clinical settings.



Freeze Dried Plasma
Directorate: CDID, MTEAC, FFID
Objective: A more easily transportable plasma product that can be pushed further forward to locations on the battlefield and reduce the operational medical logistics burden involved in the processes of collection, storage and resupply of plasma.



IFAK and CLS Modernization
Directorate: FFID
Objective: IFAK and CLS kits will be modernized based on observations in Ukraine, aligning with TCCC Tier 1 and 2 designations.



Vehicle Medical Kit (VMK)
Directorate: FFID
Objective: A VMK was introduced during GWOT as a solution to enhance CASEVAC but was not identified as an enduring requirement. As part of the CASEVAC Scrum, MEDCoE is proponent for this capability and will conduct a set review and update in FY25.



Battlefield Assisted Trauma Distributed Observation Kit - Joint (BATDOK-J)

Directorate: CDID, FFID, MTEAC
Objective: This Android-based medical app, designed for NETT Warrior devices, supports documentation, clinical decision-making, and data transfer for casualties and injuries in future combat environments.



Leader Development and Education Domain

Mobile Advanced Readiness Training (MART)

Directorate: G-3/5/7, AHS

Objective: Leverages a train the trainer approach to provide training on end-user technical tasks and skills focused on the use, integration, and maintenance of medical equipment and systems fielded across the Army’s legacy, current, and future fleets.



MED Minutes Microlearning

Directorate: DOTD

Objective: Leveraging current social media tools – Facebook and Instagram reels, YouTube shorts – DOTD is creating one-minute videos describing doctrinal concepts in plain language. To date, episodes discuss CASEVAC, triage, casualty collection points, care under fire, and other important concepts.



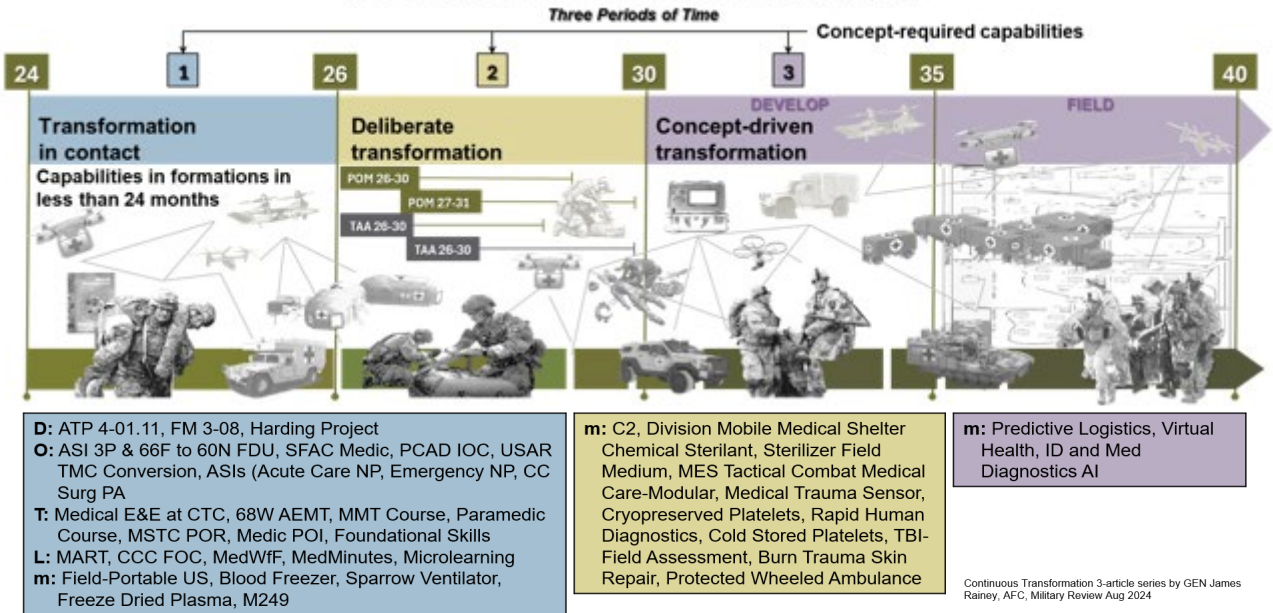
Medical Warfighting Forum (MWfF)

Directorate: G-3/5/7, FFID

Objective: MEDCoE conducts an annual forum to communicate MEDCoE signature initiatives and enhance dialogue with internal assets and strategic stakeholders.



Continuous Transformation





United States Army Medical Center of Excellence

*Joint Base San Antonio – Ft. Sam Houston
(JBSA-FSH)*

CONSERVE FIGHTING STRENGTH!



<https://medcoe.army.mil>

