Release #01-004
PUBLIC AFFAIRS OFFICE
4th BRIGADE COMBAT TEAM
82nd AIRBORNE DIVISION
Fort Bragg, NC 28310-5000
Phone (910) 432-3239/907-2826

January 29, 2009

Release # 01-004
For Immediate Release

Paratroopers ready to save lives

Fury Brigade conducts medical training

By Sgt. Stephen Decatur
4th Brigade Combat Team Public Affairs Office 82nd Airborne Division

Fort Bragg, N.C- The Paratroopers stumbled over debris through a dark room while a smoke machine and strobe-light disoriented them. They were clearing the unfamiliar L-shaped place when a voice cried out from the corner.

"Oh, my leg's been blown off," said an instructor, clutching at his notional stump.

A Paratrooper rushed over while the others pulled security, asking how much was supposedly missing before applying a tourniquet.

To ensure that every Paratrooper will be ready to save his fellow troopers life, the 1st Battalion, 508th Parachute Infantry Regiment, 4th Brigade Combat Team, 82nd Airborne Division put its Paratroopers through the Taylor/Sandri Division Medical Training Center on Fort Bragg Jan. 21 to Jan. 23.

The troopers started off the training with classes on tactical first-aid skills. The most basic tasks like assessing a casualty and stopping bleeding by applying a tourniquet were covered, as well as more complicated procedures like dressing a shoulder wound. The Paratroopers even learned a few tricks from their combat-experienced instructors. One instructor taught them to warm up a cold IV bag using heater packets from an MRE (Meal, Ready to Eat) bag.

After completing their class, the Paratroopers jumped right into the hands-on phase of training, which included several urban combat scenarios that challenged the Paratroopers to make the correct tactical as well as medical decisions.

“It’s as close to the real thing as you can get without actually being shot at” said Sgt. Evan Derveloy, a combat medic with the DMTC.

Derveloy, who has treated patients in combat, said that stress is a big factor affecting the first responder’s performance. That’s why the training at the DMTC involves devices like smoke machines and strobe lights to bombard the senses and attempt to simulate the stress of combat.

“Most people never know that kind of stress,” Derveloy said. “You don’t want to be learning on the fly.”

From noncommissioned officers and officers who have been soldiering for years, to new privates fresh from basic training, the Paratroopers all had medical training before, but it’s repetition that’s going to give them the confidence to put their knowledge into action in combat, said Sgt. Matthew Johnson, a team leader with 2nd Platoon, Company C, 1-508th PIR.

“Under pressure you’re going to forget it unless you know it by heart,” Johnson said. “It’s just like anything. The more you do it the more it becomes second nature.”

The troopers also practiced treating casualties using high-tech dummies that can receive IVs, have a simulated pulse, breathe and display symptoms of injuries. The dummies were also programmed to respond to the trainee’s actions. When a trainee treats a sucking-chest wound by inserting a needle into the dummy’s chest, for example, the dummy starts to breath normally again.

“I hadn’t had anything like this before I deployed,” Derveloy said. “I had to learn in the field.”

Pfc. James Frojen, an infantryman with C Co., 1-508th PIR, had been through the combat lifesaver course before, but this was by far the least classroom-oriented medical training he’d had, he said.

“I’ve never had training quite this in-depth,” Frojen said. “It’s much more stressful. Scenarios like this really build the realism.”

Frojen also liked ready access to the medics, because they showed him the right way to perform a task if he made a mistake, and because they could answer his questions on the spot.

Ultimately, first-aid training is all about looking out for fellow Paratroopers, Johnson said.

“You could save your buddy’s life,” he said.