



NEWS RELEASE

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10-bed Early Entry Package

Medical troops hone skills with innovative, rapidly deployable asset

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MIESAU, GERMANY – Smaller, lighter, faster.

That was the philosophy on display here February 7-9, when the Soldiers of the 212th Combat Support Hospital tested their ability to rapidly deploy their newly developed 10-bed early entry package.

During ongoing command post training, they quickly set up the highly mobile level three package and began treating simulated patients in what is effectively a miniature version of the hospital, according to Master Sgt. Peter Perkins, the noncommissioned officer in charge of the 10-bed early entry package.

“We were asked to come up with a contingency force, something that is a lot more rapidly deployable than our regular 44- or 84-bed CSH. Basically they asked, what is the smallest way that you can bring a level three package – surgery, pharmacy, lab, x-ray and resuscitative trauma – to the fight as quickly as possible? That’s when we developed the 10-bed,” Perkins said.

Though not a part of any current doctrine, the 10-bed package can swiftly bring more than 50 personnel to establish and sustain 10 intensive care beds, two operating room beds, and a full complement of pharmacy, x-ray and laboratory capabilities. This package has the potential to open up options for a variety of missions from combat to disaster relief.

A fully established, level three CSH brings nearly every capability of a garrison hospital to the warzone. But the full CSH also brings various logistical challenges. Meanwhile, this smaller “10-bed slice” as it has been dubbed, is more mobile and has the potential to be deployed and mission capable within 24 hours of arriving on site, according to Perkins.

“Most hospitals role in with the mindset of having 72 hours to be up and running. We built this based on capabilities,” Perkins said. “We get to level one as fast as possible, level two as fast as possible and then on to being level three. Once we get on the ground, we can be up and functioning within a day.”

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In order to be adaptable to a variety of potential missions, the thinking was to be smaller, lighter, and faster when it came to designing the early entry package.

“Everyone essentially repackaged what they already had,” said Perkins. “For example, the lab is used to going out in a big container, expanding out and putting all of their gadgets and widgets in there. Right now we have them working out of a bag on their back with all of the lab capability that we need initially to do everything.”

To put it in perspective, Perkins said that normally the CSH would require more than 30 containers, roughly 20 feet each, which would be loaded and shipped by truck, train or boat. On the other hand, the 10-bed package is designed to be moved by plane on just 16 pallets. All of which are packed and ready to move at a moment’s notice.

“If we’re not actively training with the equipment, it is packaged on a pallet and ready to go,” he said.

While the initial impact of this rapidly deployable package could be invaluable, the beauty of the design is that the remainder of the full-size CSH would be able to simply build onto this facility, rather than having to establish a new separate site.

“We are effectively just the core part of our CSH so if the rest of the CSH were to follow on, they would just build upon us. Nothing would have to move, they would just plug the pieces in,” Perkins said.

Training like this will ensure the Soldiers of the 212th are ready if called.

The Soldiers have the set up of the facility down to quick drill now, according to Perkins, who said that with this 10-bed package, they will be able to provide top-level care in nearly any environment quicker than ever before.

Headquartered at the Miesau Army Depot, 212th CSH is a part of the 30th Medical Command (Deployment Support). The unit stands ready to, on order, deploy tailored forces to provide level III combat health support for the entire spectrum of operations. The Soldiers provide battle command and control for all organic and attached units, while being prepared to assume medical task force command and conduct split-based operations.

Story and photos by Sgt. 1st Class Christopher Fincham, 30th MEDCOM Public Affairs NCOIC. For more information please contact him at christopher.fincham@us.army.mil.

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CUTLINES:

10bedPackage_08FEB2011_020: Soldiers of the 212th Combat Support Hospital treat a simulated casualty in the operating room of the 10-bed early entry package February 8, in Miesau, Germany.

10bedPackage_08FEB2011_016: Soldiers of the 212th Combat Support Hospital treat a simulated casualty in the operating room of the 10-bed early entry package February 8, in Miesau, Germany.