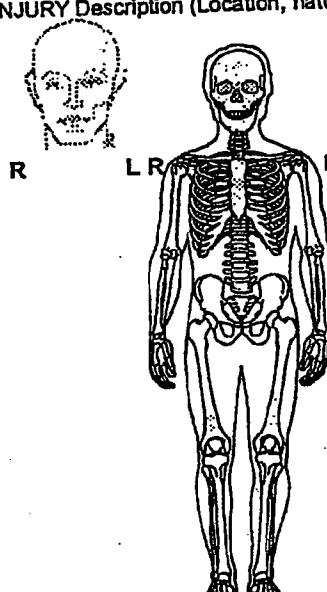
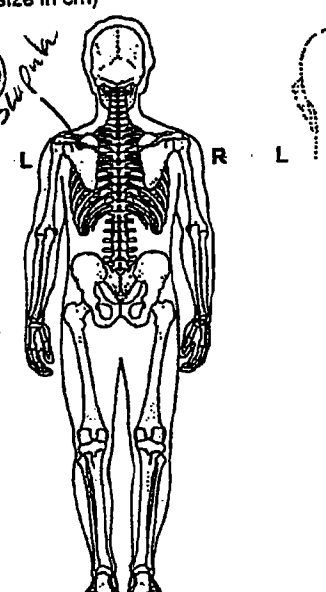


LOG # 8

Trauma Record For use of this form, see DoD Memo Subject: Trauma Record, dtd 1 APR 04; the proponent agency is OTSG																																																	
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MTF DESIGNATION: Number BCCF TYPE OASIS		CASUALTY NAME: FIRST LAST CASUA (b)(6)-4																																															
Arrive Date-Time Group (DTG): 18 AUG 0725		Rank GRANCY 3 Date of Birth [blank] Gender ☒ Male ☐ Female																																															
ARRIVAL METHOD: ☐ Non-MED GND ☐ SHIP EVAC ☒ WALKED ☐ GND AMB ☐ CARRIED ☐ AIR AMB ☐ Non-MED AIR ☐ OTHER		Nation ☐ US ☒ Host Nation ☐ Enemy ☐ Coalition Service ☐ Civilian ☐ Combatant ☐ Contractor ☐ USA ☐ SOF ☐ USN ☐ NGO ☐ USMC ☐ USAF ☐ Other Retiree																																															
Wound DTG: 18 AUG 0545		PROTECTION: ☐ UNK [X] HELMET [X] FLAK VEST [X] CERAMIC PLATE [X] EYE PROTECTION [X] OTHER: [X]																																															
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LMT / Script Y

(b)(6)-4

Theater Trauma Registry Record

For use of this form, see DA PAM XXX; the proponent agency is OTSG.

Observations/Notes (Holding, En route, etc.)

TIME	BP	PULSE	RESP	SpO ₂	MENTAL Status	DRUG	DOSE	ROUTE	DTG
0840					(A) V P U	Ancef	1gm	IVPB	DTG:
RXN 0710	128	68	20	99	A V P U	Tetanus Boost	5ml	IM	18 Aug @ 0900
0845	148	82	86	20	96	A V P U			
1000	140	85	108	18	98	A V P U			
1130	148	98	104	45	91	A V P U			
					A V P U				

CHIEF COMPLAINT:

CSW to (L) Scapula no exit wound found. Min bleeding
 Pt complains of SOB. Breath sounds all fields. No signs
 of cyanosis. O₂ Sat @ 96% on O₂

CURRENT MEDICATION

CONDITION UPON RELEASE:

DISCHARGE INSTRUCTION:

- IMPROVED
- UNCHANGED
- DETERIORATED

NOTES

0715 no acute distress at this time. Started 16g
 in (L) AC NS @ Keep open.
 0810 Started 1 gms Ancef. CXR results back neg pneumo. O₂ Sats
 ↓ 93% increased O₂ to 3 1/2 L/NL.
 0820 Pt do pain 7/10, gave 2mg more of morphine. xray done of
 (L) shoulder.

Morphine 2mg @ 1010 & 12.5 phenergan

Morphine 2mg @ 1020

1110 16F Foley inserted. Pt has 8 complaints. Draining
 clear amber urine. UA specimen collected.
 Bearhugger on. CXR obtained. Pt has received 4500cc NS total.

000008

<i>2mg morphine</i> <i>12.5mg Phenytoin IV</i> <i>2mg morphine</i> <i>2mg morphine</i> <i>2000 cc</i>				<i>4mg morphine IV</i>		<i>VELOC.</i> <i>AP / LAT</i> <i>Left Shoulder Lateral</i> <i>Left Shoulder</i>	
Trauma Record DISCHARGE SUMMARY							
MEDICATIONS: <i>1 gm Ancef 0810</i> <i>TD BOOSTER 0900</i>		LABS: <i>H&H, Chem 7</i> <i>UA</i> <i>STAT</i>		XRAYS: <i>CXR -</i> <i>Left Shoulder</i>		PMH: Allergies:	
REGION		DIAGNOSIS, PROCEDURES and COMPLICATIONS					
Face		<i>HEENT: PERIHA EOMs</i>					
Head & Neck (incl C-spine)		<i>No C Spine Tenderness.</i>					
Chest (incl T-spine)		<i>BETA</i>					
Abdomen (incl L-spine)		<i>NO (+) BS (B) Tenderness</i>					
Pelvis		<i>PTenderness</i>					
UPPER / LOWER Extremities		<i>Good Peril Pulse</i>					
Skin		<i>No Rashes</i>					
DISPOSTION		☐ EVAC to ☐ RTD ☐ RT CAMP ☐ DECEASED (see below)				Evacuation Priority ☐ ROUTINE ☐ PRIORITY ☐ URGENT	
DTG:							
Damage Control Procedures? Y / N Hypothermic (< 34°C)? Y / N Coagulopathy? Y / N							
Cause of Death at DTG _____.							
ANATOMIC: ☐ Airway ☐ Head ☐ Neck ☐ Chest ☐ Abdomen ☐ Pelvis ☐ Extremity (Upper/Lower) ☐ Other							
PHYSIOLOGIC: ☐ Breathing ☐ CNS ☐ Hemorrhage ☐ Total Body Disruption ☐ Sepsis ☐ Multi-organ failure							
COMMENTS: _____ SURGEON: _____							
For Official Use Only / Law Enforcement Use Only							

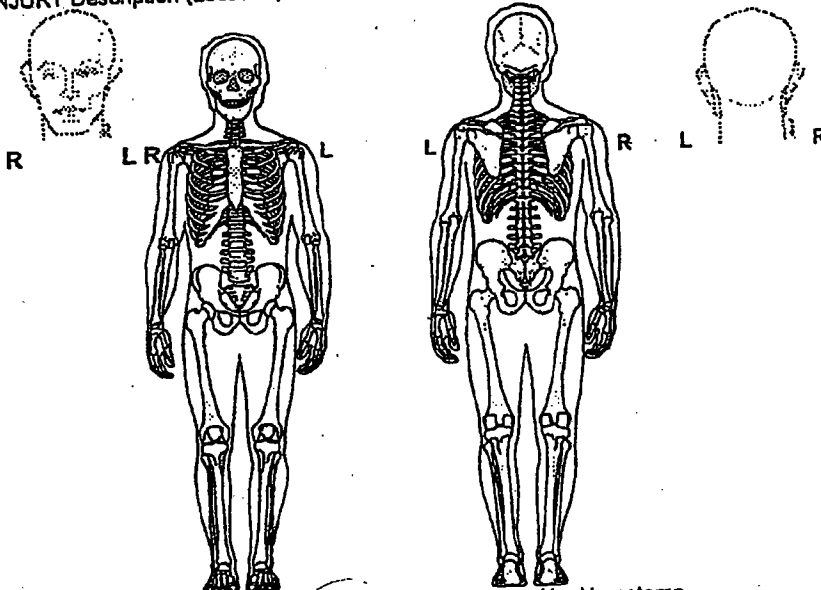
(printed Name)

Exhibit 24

000069

Trauma Record			
For use of this form, see DoD Memo Subject: Trauma Record, dtd 1 APR 04; the proponent agency is OTSG			
AUTHORITY: AR 40-66 PURPOSE: To provide a standard means of documenting all trauma care at echelons 1-3 ROUTINE USES: The "Blanket Routine Uses" set forth at the beginning of the Army compilation of systems of records notice apply. DISCLOSURE: This is protected health information. HIPAA laws apply		CASUALTY NAME: FIRST LAST CA (b)(6)-4	
MTF DESIGNATION: Number BCCF TYPE OASIS		Rank Date of Birth Gender ☒ Male ☐ Female GANCE 3	
ARRIVAL METHOD: ☐ WALKED ☐ CARRIED ☐ Non-MED AIR ☐ OTHER ☐ Non-MED GND ☐ SHIP EVAC ☐ GND AMB ☐ AIR AMB		Nation ☐ US ☐ Host Nation ☒ Enemy ☐ Coalition Service ☒ Civilian ☐ Combatant ☐ Contractor ☐ USA ☐ SOF ☐ USN ☐ NGO ☐ USMC ☐ Other ☐ USAF DETAINEE	
Wound DTG: 18 AUG 04 @ 0545 WOUNDED BY: ☐ US/COALITION (Nation) ☐ ENEMY ☐ CIVILIAN (Nation) ☐ TRAINING ☐ SELF ACCIDENT ☐ SELF NON-ACCIDENT ☐ SPORTS-RECREATION ☐ OTHER		PROTECTION: ☐ UNK HELMET FLAK VEST CERAMIC PLATE EYE PROTECTION OTHER:	
MECHANISM OF INJURY: ☐ GSW/BULLET ☐ BLUNT TRAUMA ☐ SINGLE FRAGMENT ☐ MULTI FRAGMENT ☐ KNIFE / EDGE ☐ BLAST ☐ CRASH (a/c, veh, per) ☐ Chem/Rad/Nud ☐ BURN (thermal, flash) ☐ CRUSH ☐ FALL ☐ SMOKE Inhalation		TRIAGE CATEGORY: ☐ IMMEDIATE ☐ DELAYED ☐ MINIMAL ☐ EXPECTANT GLASCOW COMA SCALE (circle one) 3 8 12 15 UNC STUPOR LETHARGY ALERT	
HEAT COLD BITE / STING OTHER		TIME 0725 Pulse 77 Temp - B/P 148/95 Resp 15 SpO2 98% RA	

INJURY Description (Location, nature and size in cm)



AM Amputation BL Bleeding D Deformity H Hematoma
 AV Avulsion B Burn F Foreign Body L Laceration
 P Puncture X Fracture S Stab Wnd G Gunsh Wnd

OR Start DTG: Vent On DTG: ICU in DTG: **190**
 Stop DTG: Off DTG: Out DTG: **1145**

SPECIALTY: **Law Enforcement Use Only**
 (b)(6)-2

TX & PROCEDURES:	
SEDATED	
CHEM	
PARALYZED	
INTUBATED	
CRIC	
NEEDLE	
DECOMP	
Chest Tube	L R air/blood
IO line	
COLLOID	ml
CRYSTALLOID	LR/NS/HTS ml
TOURNIQUET	Time on Time off
Collar / C-spine	
Back board	
HEMOSTATIC	
DEVICE	
OXYGEN	Liters/min.
RBC	Units
FFP	Units
CRYO	Units
Pils	Packs
Fresh Whole Bld	Units
rFVIIa	mcg/kg

Use Only: **Law Enforcement Use Only** Fix /splnt Exhibit **Estimate**

Theater Trauma Registry Record

For use of this form, see DA PAM XXX; the proponent agency is OTSG.

Observations/Notes (Holding, En route, etc.)

TIME	BP	PULSE	RESP	SpO ₂	MENTAL Status	DRUG	DOSE	ROUTE	DTG
0830	118/76	67	18	95%	(A) V P U	0.5ml TD		IM	OTSG Polkoid 07
1050	120/80	72	20		A V P U	Smg Morphine		IM	C Polkoid 07
					A V P U				
					A V P U				
					A V P U				
					A V P U				

b(6)-2

CHIEF COMPLAINT: PT states he was beat up & tent pole
NO Tetanus BHA,

CURRENT MEDICATION: CONDITION UPON RELEASE: DISCHARGE INSTRUCTION:

⊕

—IMPROVED
—UNCHANGED
—DETERIORATED

NOTES:

♂ S/P beating in camp & tent pole. ⊕ trauma to back/pan
CTOC PT do pain. ⊕ urine BS, ⊕ Hb, ⊕ ven pain, ⊕ SOB, ⊕ CP
⊕ abd pain.

PMH: "Psych issues"

PSX: none. (⊕ superficial knife scars tabbed, not seen)

meds: none

allergy NKDA

000071

Trauma Record DISCHARGE SUMMARY			
MEDICATIONS: <i>5mg Morphine</i>		LABS: <i>UA</i>	XRAYS: <i>CXR pelvis</i>
		PMH: Allergies: <i>PCN</i>	
REGION	DIAGNOSIS, PROCEDURES and COMPLICATIONS		
Face	<i>NCAT, minor, periorbital NCAT, nasal septum 3 horizontal fine dentition @ supra & scapular</i>		
Head & Neck (incl C-spine)	<i>NO @ basocranial, distal Nuch. apply @ depth</i>		
Chest (incl T-spine)	<i>CXR @, shallow 2° per @ primary & secondary to back @ TTP of left apex, @ T spine TTP @ depth, @ neck ecchymosis</i>		
Abdomen (incl L-spine)	<i>FAST scan @, @ ecchymosis, @ TTP FAST scan @, @ checked superficial wounds Ant Post of</i>		
Pelvis	<i>@ NL GU exam, @ blood @ markers, @ scrotal hematoma</i>		
UPPER /LOWER Extremities	<i>Motor 5/5, Ambulates @ difficulty, N/A (Shounford) pulses 2/4. Shounford sensation normal</i>		
Skin	<i>mult ecchymotic sites, @ TTP, small Amoson ≈ 4.3</i>		
DISPOSITION	☐ EVAC to ☐ RTD <i>RT CAMP</i> ☐ DECEASED (see below)		Evacuation Priority ☐ ROUTINE ☐ PRIORITY ☒ URGENT
DTG:			
Damage Control Procedures? Y/N Hypothermic (< 34°C)? Y/N Coagulopathy? Y/N			
Cause of Death at DTG <i>CXR @ - Sx PTK, Pulm contusion</i> <i>UA @ - blood</i> <i>FAST @</i>			
ANATOMIC: ☐ Airway ☐ Head ☐ Neck ☐ Chest ☐ Abdomen ☐ Pelvis ☐ Extremity (Upper/Lower) ☐ Other			
PHYSIOLOGIC: ☐ Breathing ☐ CNS ☐ Hemorrhage ☐ Total Body Disruption ☐ Sepsis ☐ Multi-organ failure			
COMMENTS:			
SURGEON: <i>(signature)</i>			
For Official Use Only / Law Enforcement			
(printed Name) Exhibit 25			

000072

Trauma Record For use of this form, see DoD Memo Subject: Trauma Record, did 1 APR 04; the proponent agency is OTSG																											
AUTHORITY: AR 40-56 PURPOSE: To provide a standard means of documenting all trauma care at echelons 1-3 ROUTINE USES: The "Blanket Routine Uses" set forth at the beginning of the Army compilation of systems of records notice apply. DISCLOSURE: This is protected health information. HIPAA laws apply																											
MTF DESIGNATION: Number BCCF TYPE TF OASIS		CASUALTY NAME: FIRST LAST (b)(6)-4 (b)(6)-4																									
Arrive Date-Time Group (DTG): 18 Aug 0725		Rank Date of Birth Gender Unit 1/1/1952 ☒ Male ☐ Female Garci 3																									
ARRIVAL METHOD: ☒ WALKED ☐ Non-MED GND ☐ CARRIED ☐ SHIP EVAC ☐ Non-MED AIR ☐ GND AMB ☐ OTHER ☐ AIR AMB		Nation Service ☐ US ☐ Civilian ☐ USA ☐ SOF ☒ Host Nation ☐ Combatant ☐ USN ☐ NGO (Detainee) ☐ Enemy() ☐ Contractor ☐ USMC ☒ Other Detainee ☐ Coalition() ☐ USAF																									
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OR Start DTG: Stop DTG: PROVIDER (b)(6)-2		Vent On DTG: Off DTG: ICU in DTG: Out DTG: 1140 SPECIALTY: EP																									

Theater Trauma Registry Record

For use of this form, see DA PAM XXX; the proponent agency is OTSG.

Observations/Notes (Holding, En route, etc.)

TIME	BP	PULSE	RESP	SpO ₂	MENTAL Status	DRUG	DOSE	ROUTE	DTG
0825	118/80	68	18	99	(A) V P U	Fentanyl 2mg	30mg	IV	(b)(6)-2
0923	117/71	87	18	99	(A) V P U	Ancef 2g	2g	IV	(b)(6)-2
0930	123/61	69	18	100	(A) V P U	Benz	.5mg	IV	
0915					A V P U	BENT	15mg	IV	
					A V P U				
					A V P U				

CHIEF COMPLAINT:

bleeding from nose / minimal pain

CURRENT MEDICATION | CONDITION UPON RELEASE: | DISCHARGE INSTRUCTION:

None

IMPROVED
UNCHANGED
DETERIORATED

TRANSPORT TO BAGDAD

NOTES:

1940m Trauma Left Nostril 2° Rupture Projection (BW)

NO LOC TMS INJURY PERMANENT EYE INJURY

CH. II -XTT

Left Nostril entrance well IDed - Extends into criptan plate
Nasal speculum used Nasal Turbinate well visualized. No Trauma
(UP Scope) Apparent. Posterior Pharynx well visualized. No Trauma
Seen. Facial Edema: No FB Identified Facial Area are Fragments
seen in occipital Area.

MAP: BW to Left Nasal fold 2° unidentified Trauma - Used CT Scanner to
Identify Trauma since none are on site. Patient states occipital Area was hit
Pellet gun wound since we are unable to identify Trauma will arrange

Transport to Baghdad for CT Scan Trauma.

D(6)-2

MID:

Trauma Record **DISCHARGE SUMMARY**

MEDICATIONS: <i>150 mg</i> <i>Toradol 30mg IV</i> <i>2gm Ancap</i>		LABS: <i>H+H / Chem 7</i> <i>Start IV</i>	XRAYS: <i>Facial series</i> <i>AP & LAT</i>	PMH: <i>Ø</i> Allergies: <i>NICDA</i>
REGION	DIAGNOSIS, PROCEDURES and COMPLICATIONS			
Face	<i>HEB: Max Trauma Left Maxilla PERMANENT</i>			
Head & Neck (incl C-spine)	<i>NO C Spine Tenderness Full ROM</i>			
Chest (incl T-spine)	<i>BCTA</i>			
Abdomen (incl L-spine)	<i>NO (+) BS GI and</i>			
Pelvis	<i>NO TILT LB Tenderness</i>			
UPPER / LOWER Extremities	<i>Good Pump Pulses</i>			
Skin	<i>Wound</i>			
DISPOSTION	☒ EVAC to <i>31 CSH</i>		Evacuation Priority ☐ ROUTINE ☒ PRIORITY ☐ URGENT <i>Air evacuation</i>	
DTG:	☐ RTD ☐ RT CAMP ☐ DECEASED (see below)			
Damage Control Procedures? Y / N Hypothermic (< 34°C)? Y / N Coagulopathy? Y / N				
Cause of Death at DTG _____				
ANATOMIC: ☐ Airway ☐ Head ☐ Neck ☐ Chest ☐ Abdomen ☐ Pelvis ☐ Extremity (Upper/Lower) ☐ Other				
PHYSIOLOGIC: ☐ Breathing ☐ CNS ☐ Hemorrhage ☐ Total Body Disruption ☐ Sepsis ☐ Multi-organ failure				
COMMENTS: _____ SURGEON: _____ For Official Use Only / Law Enforcement Use Only (printed Name)				

Exhibit 26
000075

Official

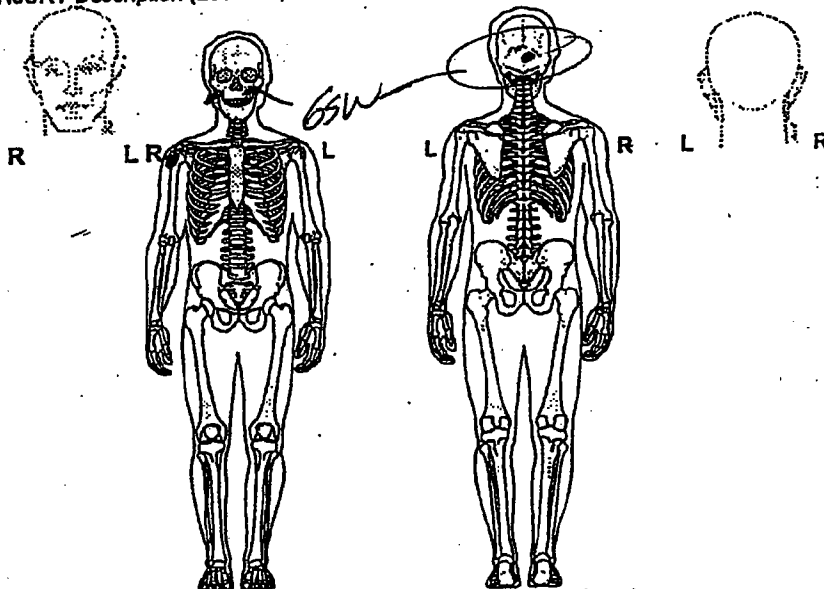
Trauma Record

For use of this form, see DoD Memo Subject: Trauma Record, did 1 APR 04; the proponent agency is OTSG

AUTHORITY: AR 40-66
PURPOSE: To provide a standard means of documenting all trauma care at echelons 1-3
ROUTINE USES: The "Blanket Routine Uses" set forth at the beginning of the Army compilation of systems of records notice apply.
DISCLOSURE: This is protected health information. HIPAA laws apply

MTF DESIGNATION: Number BCCF TYPE OASIS		CASUALTY NAME: FIRST Lon LAST #1		CASUALTY SSN:	
Arrive Date-Time Group (DTG): 18 Aug 04 0600		Rank	Date of Birth 2/29/60	Gender ☒ Male ☐ Female	Unit
ARRIVAL METHOD: ☐ WALKED ☒ CARRIED ☐ Non-MED AIR ☐ OTHER		Nation ☐ US ☐ Host Nation ☐ Enemy(☐ Coalition(		Service ☐ Civilian ☐ Combatant ☐ Contractor	
Wound DTG: 18 Aug 04		PROTECTION: ☐ UNK		TRIAGE CATEGORY: ☐ IMMEDIATE ☐ DELAYED ☐ MINIMAL ☐ EXPECTANT	
WOUNDED BY: ☒ US/COALITION(Nation ☐ ENEMY ☐ CIVILIAN(Nation ☐ TRAINING ☐ SELF ACCIDENT ☐ SELF NON-ACCIDENT ☐ SPORTS-RECREATION ☐ OTHER:		HELMET FLAK VEST CERAMIC PLATE EYE PROTECTION OTHER:		GLASCOW COMA SCALE (circle one) 3 8 12 15 UNC STUPOR LETHARGY ALERT	
MECHANISM OF INJURY: ☒ GSW/BULLET ☐ BLUNT TRAUMA ☐ SINGLE FRAGMENT ☐ MULTI FRAGMENT		☐ KNIFE / EDGE ☐ BLAST ☐ CRASH(a/c, veh, pe ☐ Chem/Rad/Nuc ☐ BURN (thermal, flash) ☐ CRUSH ☐ FALL ☐ SMOKE Inhalation		☐ HEAT ☐ COLD ☐ BITE / STING ☐ OTHER	
				TIME	0605
				Pulse	91
				Temp	
				B/P	132/101
				Resp	
				SpO2	99%

INJURY Description (Location, nature and size in cm)



AM Amputation BL Bleeding D Deformity H Hematoma
 AV Avulsion B Burn F Foreign Body L Laceration
 P Puncture X Fracture S Stab Wnd G Gunsh Wnd

OR Start DTG:	Vent On DTG	ICU in DTG:
Stop DTG:	Off	Out DTG:
SPECIALTY:		

TX & PROCEDURES:	
SEDATED	0610 / 0624
CHEM	0610
PARALYZED	0625
INTUBATED	
CRIC	
NEEDLE	
DECOMP	
Chest Tube	L R air/blood
IO line	
COLLOID	ml
CRYSTALLOID	LR/NS/HTS ml
TOURNIQUET	Time on Time off
Collar / C-spine	
Back board	0605
HEMOSTATIC	
DEVICE	
OXYGEN	100% Liters/min.
RBC	Units
FFP	Units
CRYO	Units
Pits	Packs
Fresh Whole Bld	Units
rFVIIa	mcg/kg
EXT Fix /splnt	

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Exhibit 27

000076

MEDCOM - 1011

Theater Trauma Registry Record

use of this form, see DA PAM XXX; the proponent is OTSG

Observations/Notes (Holding, En route, etc.)

TIME	BP	PULSE	RESP	SpO ₂	MENTAL Status	DRUG	DOSE	ROUTE	DTG
0610	172/119	55		54%	A V P (U)	100mg Lidocaine	100mg	IVP	OTG
0610	172/119	55		54%	A V P (U)	20mg Etomidate	20mg	IVP	
0615	173/110	61		58%	A V P (U)	5cc Succ	5mg	IVP	
0623	158/88	94		89%	A V P (U)	60mg Etomidate	20mg	IVP	
0624	158/88	94		89%	A V P (U)	100mg Succ	100mg	IVP	
0635					A V P (U)	10mg Vlc	10mg	IVP	
CHIEF COMPLAINT:									
0635	130/78	91		97%		5mg Versed	5mg	IVP	
0640	130/67	89				2gm Ancef		IVP	
						ASml Tetanus		IM	

CURRENT MEDICATION	CONDITION UPON RELEASE:	DISCHARGE INSTRUCTION:
NONE NKA	☒ IMPROVED ☐ UNCHANGED ☐ DETERIORATED	

NOTES:

Foley started & intubated @ 0615, 18# to @ AC + 20# to @ AC infusing NS.

Tetanus + 2gm Ancef
Esmine Kray @ 0640.

8 S/P mouth GSW - to head / face / @ shoulder.

PT brought in GCS 15, decub - BD, PT intubated immediately. @ 100mg Lidocaine, 20mg Succ, etomidate Sats came up to 100%. Very difficult airway, lots of blood, likely aspiration. PMS: none

to subsequently placed CRR taken.

(b)(6)-2

(b)(6)-2

090077

Trauma Re DISCHARGE SUMMARY

MEDICATIONS: <i>None</i>	LABS:	XRAYS: <i>Late spine</i>	PMH: Allergies:
REGION	DIAGNOSIS, PROCEDURES and COMPLICATIONS		
Face	<i>Gsn to face (1) maxilla, (2) jaw, (3) occipital</i>		
Head & Neck (incl C-spine)	<i>Stepoffs, Pt in C-collar (on arrival placed)</i>		
Chest (incl T-spine)	<i>CT (16), Agedal resp Hyperventilated</i>		
Abdomen (incl L-spine)	<i>Dist soft flat Nodal line, RL, & upon blood</i>		
Pelvis	<i>Stable</i>		
UPPER /LOWER Extremities	<i>(1) pot shoulder & extreme wound</i>		
Skin			
DISPOSITION	☒ EVAC to <i>31st CGH</i> <i>At Multi casualty</i> ☐ RTD ☐ RT CAMP ☐ DECEASED (see below)		Evacuation Priority ☐ ROUTINE ☐ PRIORITY ☐ URGENT
DTG:			
Damage Control Procedures? Y / N Hypothermic (< 34°C)? Y / N Coagulopathy? Y / N			
Cause of Death at DTG <i>C-spine lat & cran lacer</i>			
ANATOMIC: ☐ Airway ☐ Head ☐ Neck ☐ Chest ☐ Abdomen ☐ Pelvis ☐ Extremity (Upper/Lower) ☐ Other			
PHYSIOLOGIC: ☐ Breathing ☐ CNS ☐ Hemorrhage ☐ Total Body Disruption ☐ Sepsis ☐ Multi-organ failure			
COMMENTS:		SURGEON: (printedName)	

MEDCOM Test Form 1381, JAN 2004

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Exhibit 27

000078

MEDCOM - 1013