Training and Evaluation Outline Report

Status: Approved
01 Apr 2022
Effective Date: 01 Apr 2022

Task Number: 08-CMD-1819

Task Title: Manage Army Health System Regenerations Assessments

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Destruction Notice: None
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Supporting Reference(s):

Step Number	Reference ID	Reference Name	Required	Primary	Source Information
	ADP 3-0	Operations	Yes	No	
	ADP 3-07	Stability	Yes	No	
	ADP 6-0	Mission Command http://armypubs.army.mil/doctrine/DR_pubs/dr_a/pdf/adp6_0_new.pdf	Yes	No	
	ATP 3-34.5	Environmental Considerations	Yes	No	
	ATP 3-94.4	Reconstitution Operations	Yes	Yes	
	ATP 4-02.42	ARMY HEALTH SYSTEM SUPPORT TO STABILITY AND DEFENSE SUPPORT OF CIVIL AUTHORITIES TASKS http://armypubs.army.mil/doctrine/DR_pubs/dr_a/pdf/atp4_02x42.pdf	Yes	No	
	ATP 4-02.55	ARMY HEALTH SYSTEM SUPPORT PLANNING	Yes	No	
	ATP 4-02.8	Force Health Protection	Yes	No	
	ATP 5-19	Risk Management	Yes	No	
	ATP 6-0.5	COMMAND POST ORGANIZATION AND OPERATIONS	Yes	No	
	ATP 6-22.5	A LEADERS GUIDE TO SOLDIER HEALTH AND FITNESS	Yes	No	
	FM 4-02	ARMY HEALTH SYSTEM	Yes	No	

Conditions: The command (CMD), while conducting routine operations in its area of operation (AO), receives an operation order (OPORD) from higher headquarters (HQ), and the commander directs the staff/element leaders to manage Army health system (AHS) regenerations assessments for all organizations within the theater of operation (TO) in support of the operational mission. The commander and staff elements issue planning and execution guidance as required, and as situations change, The setup locations have been identified, approved and has primary access to main supply routes, approved external sustainment support, and is accessible to all supported and supporting units in the TO. Continuous voice, data, full motion video communications capabilities (if required and authorized in accordance with (IAW) OPORD, tactical and digital radios, data networks, command and control (C2) information systems, and other medical and Army command network capabilities are established and operational. The required Army, joint, and host nation applicable regulations, approved internal and external standard operating procedures (SOPs), technical manuals (TMs), field manuals (FMs), and Army Health System/Force protection (AHS/FHP) plans are on-hand as reference material. The element has been provided guidance on rules of engagement for this mission and are continuously receiving updates as situations and mission requirements change. All operational variables of political, military, economic, social, information, infrastructure, physical environment, time (PMESII-PT) should be present. Mission, enemy, terrain and weather, troops and support available-time available and civil considerations (METT-TC) identified constraints must be considered. The element is not likely to be attacked with hostile enemy fire or chemical agents. This task will be performed under day and night in either/or a combination of operational environments (OEs) and in one or more of the three training environments to standard as outlined in the training evaluation matrix of this task. All authorized equipment is on hand and operational. All CMD organizations and personnel are available to provide support during all day and night operations. Specified time constraints are identified in the OPORD. The element has adequate resources and time to prepare. Unit leaders are present in the AO to provide further guidance as necessary.

Note: The condition statement for this task is written assuming the highest training conditions reflected on the Task Proficiency matrix required for the evaluated unit to receive a trained (T/T-) rating. Not all sub-steps of this task are applicable to every situation. Therefore, the evaluating HQ commander will determine prior to evaluation which steps are designated "N/A" in advance of conducting the evaluation.

Note: Training begins with the execution of pre-combat checks and inspections. Training ends when designated training objectives for the particular training events or exercises are performed IAW training & evaluation outline (T&EO) and to Army standard. Unit leadership should conduct an after action report (AAR) to determine future training requirements for the unit and provide feedback to the proponent.

Task Evaluation Criteria Matrix Operational Environment OE Definitions:

Static: a static training environment has aspects of operational variables needed to stimulate mission variables that are fixed throughout the unit's execution of the task.

Dynamic: a dynamic training environment has operational variables and threat tactics, techniques, and procedures (TTP) for assigned countertasks that change in response to the execution of friendly force tasks.

Complex: a complex training environment requires a minimum of four-terrain, time, military (threat), and social (population) or more operational variable; brigade and higher units require all eight operational variables to be replicated in varying degrees based on the task being trained.

Single threat: a single threat in a training environment is a conventional force, irregular force, criminal element, or terrorist force.

Hybrid threat: a hybrid threat in a training environment uses diverse and dynamic combination of conventional forces, irregular forces, terrorist forces, and criminal elements unified to achieve mutually benefiting effects.

Live Training Environment: training executed in field conditions using tactical equipment (involves real people operating real systems).

Virtual Training Environment: training executed using computer-generated battlefields in simulators with the approximate characteristics of tactical weapon systems and vehicles. Units use virtual training to exercise motor control, decision-making, and communication skills.

Constructive Training Environment: uses computer models and simulations to exercise command and staff functions. It involves simulated operating simulated systems.

 Some iterations of this task should be performed in MOPP 4.

Standards: The commander and special staff/element leaders to manage AHS regenerations assessments for subordinate medical organizations within the TO continuously to support, protect, and sustain operational forces with the use of all available equipment and personnel within the specified time constraints in the mission OPORD and IAW ATP 3-94.4/emerging doctrine, the approved Army standard identified in the task evaluation criteria matrix and in the task performance steps which are included in this task, the commanders guidance, applicable internal and external SOPs, appropriate medical regulations, FMs, and specified Army regulations (ARs).

Note: Leaders may include the commander, executive officer (XO), command sergeant major (CSM), staff officers/element leaders, and others as designated by the commander.

Live Fire: No

Objective Task Evaluation Criteria Matrix:

Plan and Prepare			Execute						Assess	
Operational Environment — BDE & Above		Training Environment (L/V/C)	Leaders Present at Training/Required	Present at Training/Required	External Eval	Performance Measures	Critical Performance Measures	Leader Performance Measures	Evaluator's Observed Task Proficiency Rating	Commander's Assessment
Dynamic and Complex (All OE Variables and Hybrid Threat)	Night	Commander(s) or Unit Key Leader(s) will determine if training will be conducted under live, virtual, or constructive training environmental conditions using corresponding event types (for example, STT, STX, FTX, etc.) in order to facilitate the Crawl, Walk, Run methodology of training progression to support Unit Training Management (UTM) and the recommended Combined Arms Training Strategy (CATS). Per FM 7-0, all external evaluations (EXEVAL) must be conducted in a live environment.	>=75%	>=80%	Yes	>=80%	All	>=85%	T	T
									T-	T-
Dynamic and Complex (All OE Variables and Single Threat)			60-74%	60-79%	No	65-79%		75-84%	P	P
	Day						<All		P-	P-
Dynamic and Complex (<All OE Variables and Single Threat)			<=59%	<=59%		<=64%		<=74%	U	U

Remarks: REPORTING ERRORS AND RECOMMENDING IMPROVEMENTS: You can help improve this collective task. Please let us know if you find any errors or if you would like to recommend any improvements to the performance steps or other information in this collective task. The preferred method is to submit a DA Form 2028 (Recommended Changes to Publications and Blank Forms) with your recommended changes via email to usarmy.jbsa.medical-coe.mbx.collective-training@army.mil.Your recommended changes will be reviewed, validated to ensure approved Army or joint doctrine supports your recommendation(s) and implemented as applicable.

Notes: Readiness Requirement (RR) Individual Critical Task Lists (ICTLs) are tasks that have been identified by the military occupational specialty/areas or concentration (MOS/AOC)-specific proponent at the AMEDD Medical Center of Excellence (MEDCoE) as essential for preparing Soldiers for deployment. The RR tasks are a part of the complete MOS/AOC critical performance list, but special emphasis must be put on these tasks to ensure the Soldiers are obtaining the skills crucial to missions that contribute to lethality and readiness.

RR tasks are identified in each MOS/ AOC. The task title, the appropriate skill level, frequency of training and training location are also provided. The tasks can be tracked for individual or unit accountability. The RR tasks can be used as an individual or collective training assessment tool for preparing and sustaining Soldier's skills. The RR tasks can be accessed by using the Central Army Registry (located on the Army Training Network website).

Safety Risk: Low

Task Statements

Cue: Upon notification of a mission from higher HQ, the commander directs the special staff/element leaders to manage AHS regenerations assessments to assigned/attached elements for its established AO in support of the operational mission.

DANGER

Leaders have an inherent responsibility to conduct Risk Management to ensure the safety of all Soldiers and promote mission accomplishment.

WARNING

Risk Management is the Army's primary decision-making process to identify hazards, reduce risk, and prevent both accidental and tactical loss. All Soldiers have the responsibility to learn and understand the risks associated with this task.

CAUTION

Identifying hazards and controlling risks across the full spectrum of Army functions, operations, and activities is the responsibility of all Soldiers.

Performance Steps and Measures

NOTE: Assess task proficiency using the task evaluation criteria matrix.

NOTE: Asterisks (*) indicate leader steps; plus signs (+) indicate critical steps.

STEP/MEASURE	GO	NO-GO	N/A

Plan

	GO	NO-GO	N/A
+* 1. Commander and special staff/element leaders execute the C2 operations process to plan, prepare, execute, and assess activities to manage AHS regenerations assessments within theater of operations.			
a. Drive the operations process through the activities of understand, visualize, describe, direct, lead, and assess IAW established timelines, the higher commander's intent, orders from higher HQ, and SOPs.			
b. Develop primary, alternate, contingency, and emergency (PACE) plan for each essential data and communications flow.			
c. Practice the command approach to C2.			
d. Inform and influence relevant audiences.			
+* 2. Commander and special staff/element leaders initiate the planning process for manage AHS regenerations assessments.			
a. Task-organize the force and prioritize efforts for manage AHS regenerations assessments.			
b. Synchronized planning actions for subordinates.			
c. Develop agility and initiative in subordinates.			
d. Provide tasks and coordinating instructions for mission accomplishment.			
e. Coordinate with higher, lower, and adjacent units.			
f. Conduct network operations.			
g. Receive the mission.			
h. Analyze the mission.			
i. Conduct risk management.			
j. Plan the management of AHS regenerations assessment according to higher HQ guidance/directives.			
k. Plan to restore units to a desired level of combat effectiveness commensurate with mission requirements and available resources.			
l. Plan to include reconstitution considerations in all operational planning.			
m. Plan the reassignment of unit personnel and equipment among other units within the command, either as individual replacements or as sub-units.			
n. Plan the rebuilding of a unit through large-scale replacement of personnel, equipment, and supplies to include:			
(1) Reestablish of C2.			
(2) Conduct mission-essential training for the regenerated units.			
o. Plan AHS manage regenerations assessments trigger points and control measures.			
p. Perform staff administrative procedures.			
+* 3. Commander and special staff/element leaders issue an OPORD.			
a. Maintain running estimates.			
b. Consolidate all staff leaders input.			
c. Conduct intelligence evaluation and preparation of the battlefield.			
d. Provide recommendations to the tactical situations.			
+* 4. Commander and special staff/element leaders conduct briefings with subordinates immediately after issuing the OPORD to ensure subordinates understand the commander's intent.			
a. Prepare staff planning, policies, and C2 of the operations.			
b. Develop battle rhythm.			
c. Define phases of the operation that reflect the commander's intent.			
d. Exercise staff supervision over AHS regenerations assessments.			

Prepare

	GO	NO-GO	N/A
+* 5. Commander and special staff/element leaders prepare operations for manage AHS regenerations assessments.			
a. Improve situational understanding.			
b. Develop a common understanding of the plan.			
c. Train and become proficient on critical tasks.			
d. Gather supporting references such as doctrine, technical manuals, and online resources for mange AHS regeneration assessments.			
e. Analyze the higher HQ plans or orders.			
f. Determine specified, implied, and essential tasks.			
g. Participate in special staff element rehearsals.			
h. Prepare to shift medical resources to meet the changing requirements.			
i. Prepare to provide AHS system support to regenerate health service support (HSS) and FHP.			

j. Prepare to conduct internal and external assessment for attrited units proposed for regeneration.			
k. Prepare to manage a plan to enable the subordinate elements to increase their combat effectiveness and to assess the combat and operational stress control (COSC) requirements.			
l. Prepare to provide decontamination support to units undergoing deliberate regeneration.			
m. Prepare to operate in either areas where traditional support bases are absent or not fully developed.			

Execute

+* 6. Command section and special staff/element leaders execute operations to manage AHS regenerations assessments.			
a. Establish reconstitution considerations in all operational planning.			
b. Ensure AHS regenerations assessment plans exist and are in accordance with HQ guidance/directives.			
c. Monitor management of AHS regenerations assessments according to higher HQ guidance/directives.			
d. Ensure the unit's training program includes training for regeneration.			
e. Establish regeneration priorities that align with operational and tactical objectives when more than one unit requires regeneration.			
f. Activate regeneration task force (RTF) assessment teams to evaluate attrited units as required.			
g. Determine the follow-on mission.			
h. Determine whether to regenerate an attrited unit.			
(1) Establish unit effectiveness goals for the attrited units.			
(2) Identify the available time to regenerated the attrited units.			
i. Adjust the makeup of the predesignated RTF based on the assessment and the current situation.			
j. Align regeneration efforts with command priorities and the situation.			
k. Select the regeneration site based on the recommendation of the operations staff.			
l. Determine specific actions required for the regeneration.			
+* 7. Command and G2/G3 section provide personnel for higher HQ RTF.			
a. Advise commanders on the threat situation facing candidates for regeneration.			
b. Assess the threat for prospective regeneration sites.			
c. Advice the commander and operations staff on the intelligence elements for the RTF.			
d. Coordinate intelligence with these elements during the process as required.			
e. Reorganize unit staff to continuously provide staff supervision over required AHS support activities during RTF assessment activities.			
f. Coordinate additional personnel requirements with the executive officer and personnel (DCS PER)/G1 section.			
g. Provide to the commander the assessment of an attrited unit.			
h. Recommend to the commander unit regeneration priority as directed by higher HQ DCS, G3.			
(1) Advise on availability of personnel and equipment.			
(2) Identify critical shortfalls.			
(3) Plan for employment options to meet contingency needs.			
i. Serve as the focal point for control and coordination of regeneration efforts as directed by the commander.			
j. Align regeneration efforts with command priorities and the situation.			
k. Advise the commander and staff sections on the necessity, composition, and functions of the RTF.			
l. Advise the commander on security measures for the regenerated site selected.			
m. Coordinate with the rear operations commander to integrate a unit undergoing regeneration into the rear operations security plan.			
n. Advise the commander on training needs in unit undergoing regeneration.			
(1) Identify required resources.			
(2) Identify and mitigate risk of the operation.			
(3) Facilitate training for the regenerated units.			
o. Manage the operations process for regeneration.			
p. Coordinate with identified key leaders of the RTF as necessary throughout the reconstitution process, to include planning phase.			
q. Inspect unit RTF personnel for compliance with equipment and specific areas of expertise requirements as directed by the higher HQ DCS, G3.			
r. Dispatch unit representatives to designated location(s) within the time frame prescribed by the higher HQ DCS, G3.			
s. Advise the commander and medical staff			
+* 8. G-4 section personnel conduct internal and external sustainment operations for attrited units proposed for regeneration.			
a. Provide logistics input for the regeneration operation plan (OPLAN).			
b. Identify logistics resources needed to carry out regeneration OPLAN.			

c. Identify allocation of critical items of supply.

d. Coordinate transportation plans and policies.

e. Identify movement control needs and elements required.

f. Determine host-nation support (HNS) requirements for regeneration process, as appropriate.

g. Provide information and help to secure available HNS.

h. Coordinate with G-3 staff section and sustainment commanders to establish general location of the regeneration site.

i. Plan for pre-stocking of supplies and equipment to support regeneration.

j. Plan for services essential to the regeneration process.

k. Ensure expeditious handling of remains and personal effects.

l. Plan for clothing exchange, shower, and laundry operations.

m. Integrate medical, personnel support, and finance and comptroller requirements into the concept of sustainment for regeneration.

n. Maintain current and projected equipment availability and serviceability status as the unit regenerates.

+ 9. Medical staff officers/surgeons, and RTF personnel leaders assess degraded unit AHS requirements.

a. Identify number of AHS personnel that require replacement.

b. Advise the commander, special staff and element leaders on HSS and FHP considerations for site selection.

c. Identify the level of COSC support required which includes the availability of mental behavioral health teams.

d. Advise commanders on the effects of accumulated radiation exposure.

e. Monitor possible delayed effects from exposure to chemical or biological agents.

f. Advise commanders on the disposition of personnel exposed to lethal doses of radiation or chemical and biological agents.

g. Obtain medical intelligence to identify health threats prevalent in the region.

h. Identify prophylaxis needed to mitigate chemical, biological, radiological and nuclear (CBRN) agents threats.

i. Coordinate with CBRN officers to assess the decontamination needs of attrited units proposed for regeneration.

j. Identify damaged or destroyed Class VIII supplies and equipment that require replacement.

k. Coordinate with G-3 staff officers and element leaders on evacuation policy and return to duty (RTD).

l. Identify evacuation assets required for the regeneration mission.

m. Identify number of casualties requiring emergency treatment.

n. Identify number veterinary personnel required to inspect Class I supplies.

o. Identify number of preventive medicine personnel required to inspect water sources and facilities.

p. Ensure RTF has sufficient Class VIII supplies and medical equipment.

+ 10. RTF personnel leaders provide input to the initial assessment report.

a. Consolidate AHS data into a format which provides the overall status of the unit's combat effectiveness from a AHS standpoint.

b. Provide recommendations for each deficiency to increase unit effectiveness.

c. Identify unit's capabilities to resupply the unit and to replace its personnel shortages and equipment.

d. Identify the AHS capability required in the RTF.

e. Identify shortfalls between unit's capability and the requirements.

f. Recommend level of reconstitution required from a AHS viewpoint.

+* 11. Element leaders evaluate operations.

a. Request external evaluation.

b. Monitor the current situation to collect relevant information.

c. Evaluate progress toward attaining end state conditions, achieving objectives, and performing tasks.

d. Conduct an AAR to recommend or direct action for improvement.

e. Improve coordination and synchronization of support plan as situations change or as a result of AAR.

f. Maintain communications with higher HQ.

g. Modify internal and external SOPs as necessary.

h. Submit the required reports and updates to higher HQ.

Assess

+* 12. Commander assesses training and renders a proficiency assessment (Trained, Practiced, Untrained)) based on observed task performance and other feedback.

a. Takes a holistic view of various forms of feedback when assessing training.

b. Records assessment results for future reference.

Task Performance Summary Block

Training Unit	ITERATION							
	1		2		3		4	
_____	Day / Night		Day / Night		Day / Night		Day / Night	
Date of Training per Iteration:								
Day or Night Training:	Day / Night		Day / Night		Day / Night		Day / Night	
	#	%	#	%	#	%	#	%
Total Leaders Authorized	% Leaders Present							
Total Soldiers Authorized	% Soldiers Present							
Total Number of Performance Measures	% Performance Measures 'GO'							
Total Number of Critical Performance Measures	% Critical Performance Measures 'GO'							
Live Fire, Total Number of Critical Performance Measures	% Critical Performance Measures 'GO'							
Total Number of Leader Performance Measures	% Leader Performance Measures 'GO'							
MOPP LEVEL								
Evaluated Rating per Iteration T, T-, P, P-, U								

Mission(s) supported: None

MOPP 4: Sometimes

MOPP 4 Statement: At MOPP 4, performance will be limited to minimal essential actions.

NVG: Never

NVG Statement: None

Prerequisite Collective Task(s): None

Supporting Collective Task(s):

Step Number	Task Number	Title	Proponent	Status
1.	71-CMD-5100	Conduct the Operations Process for Command and Control (C2)	71 - Mission Command (Collective)	Approved
2.	71-DIV-5123	Task Organize for Operations	71 - Mission Command (Collective)	Approved
2.	71-DIV-5111	Conduct the Military Decision Making Process	71 - Mission Command (Collective)	Approved
3.	71-DIV-5145	Integrate Risk Management into the Operations Process	71 - Mission Command (Collective)	Approved
3.	71-DIV-5144	Develop a Running Estimate	71 - Mission Command (Collective)	Approved
3.	71-CMD-2210	Conduct Intelligence Preparation of the Battlefield	71 - Mission Command (Collective)	Approved
6.	71-DIV-4019	Conduct Regeneration	71 - Mission Command (Collective)	Approved
8.	08-CMD-1818	Manage Class VIII Support Activities	08 - Medical (Collective)	Approved
8.	08-CMD-1825	Manage Medical Logistics Support	08 - Medical (Collective)	Approved
9.	08-CMD-1800	Plan Army Health System Support	08 - Medical (Collective)	Approved
9.	08-CMD-1827	Manage Medical Treatment and Combat Casualty Care	08 - Medical (Collective)	Approved
9.	08-CMD-1820	Manage Army Health System Support	08 - Medical (Collective)	Approved
9.	08-CMD-1831	Manage Combat and Operational Stress Control Prevention	08 - Medical (Collective)	Approved
9.	08-CMD-1830	Manage Treatment of Chemical, Biological, Radiological, and Nuclear Contaminated Patients	08 - Medical (Collective)	Approved
9.	08-CMD-1815	Manage Behavioral Health and Neuropsychiatric Treatment	08 - Medical (Collective)	Approved

OPFOR Task(s): None

Supporting Individual Task(s):

Step Number	Task Number	Title	Proponent	Status
1.	150-C2-5200	Conduct Command Post Operations	150 - Mission Command (Individual)	Approved
2.	150-C2-5112	Conduct Mission Analysis	150 - Mission Command (Individual)	Approved
2.	150-C2-5144	Develop a Running Estimate	150 - Mission Command (Individual)	Approved
2.	150-C2-5134	Establish Liaison	150 - Mission Command (Individual)	Approved
2.	150-COM-7131	Conduct a Task Crosswalk	150 - Mission Command (Individual)	Approved
2.	150-MC-5321	Distribute Planning Guidance	150 - Mission Command (Individual)	Approved
2.	150-MC-5111	Conduct the Military Decision Making Process	150 - Mission Command (Individual)	Approved
2.	150-C2-5110	Conduct Receipt of Mission	150 - Mission Command (Individual)	Approved
2.	150-C2-8010	Conduct Problem Solving	150 - Mission Command (Individual)	Approved
3.	081-70H-2009	Conduct Medical Intelligence Assessment	081 - Medical (Individual)	Approved
3.	150-C2-5119	Prepare an Operation Order	150 - Mission Command (Individual)	Approved
4.	150-C2-5006	Exercise Disciplined Initiative	150 - Mission Command (Individual)	Approved
4.	150-MC-0010	Supervise the Staff	150 - Mission Command (Individual)	Approved
4.	150-LDR-5007	Establish a Shared Understanding	150 - Mission Command (Individual)	Approved
4.	150-LDR-5006	Establish Conditions for Subordinates to Exercise Initiative	150 - Mission Command (Individual)	Approved
5.	150-MC-5122	Perform a Rehearsal	150 - Mission Command (Individual)	Approved
5.	150-COM-7150	Plan Unit Individual Training	150 - Mission Command (Individual)	Approved
5.	081-70H-2003	Develop Army Health Service Support Plan Annex	081 - Medical (Individual)	Approved
5.	081-70H-2001	Manage Medical Assets	081 - Medical (Individual)	Approved
5.	150-COM-7200	Conduct a Training Event	150 - Mission Command (Individual)	Approved
6.	150-C2-5149	Control Operations	150 - Mission Command (Individual)	Approved
7.	301-35F-1107	Update Intelligence Products in Support of Situation Development	301 - Intelligence (Individual)	Approved
7.	301-35F-1302	Estimate the Threat's Remaining Combat Force Strength	301 - Intelligence (Individual)	Approved
8.	101-92Y-4401	Prepare Materiel Condition Status Report	101 - Quartermaster (Individual)	Approved
8.	101-92Y-4302	Manage Budget Operations	101 - Quartermaster (Individual)	Approved
8.	081-70K-2007	Produce a Medical Logistic Concept of Support	081 - Medical (Individual)	Approved
8.	081-70K-2016	Plan Medical Material Requirements	081 - Medical (Individual)	Approved
8.	081-70K-2021	Coordinate Medical Logistics Contingency Programs	081 - Medical (Individual)	Approved
8.	101-92Y-4300	Plan Logistical Support for Combat Operations	101 - Quartermaster (Individual)	Approved
8.	081-70K-2019	Direct Material Support Operations	081 - Medical (Individual)	Approved
8.	101-92Y-4301	Inspect Logistical Operations at the Unit	101 - Quartermaster (Individual)	Approved
8.	101-92Y-4110	Manage Property Distribution	101 - Quartermaster (Individual)	Approved
8.	101-92Y-4400	Update Equipment Authorization Documents	101 - Quartermaster (Individual)	Approved
11.	150-COM-7230	Conduct an After Action Review for a Training Event	150 - Mission Command (Individual)	Approved
11.	150-MC-5124	Refine the Plan	150 - Mission Command (Individual)	Approved
11.	150-COM-7133	Identify Potential Training Issues	150 - Mission Command (Individual)	Approved
12.	150-C2-5143	Lead the 6-Step Assessment Process	150 - Mission Command (Individual)	Approved
12.	150-LDR-5045	Receive Feedback	150 - Mission Command (Individual)	Approved
12.	150-COM-7175	Assess Mission-Essential Task Proficiency	150 - Mission Command (Individual)	Approved

Supporting Drill(s): None

Supported AUTL/UJTL Task(s):

Task ID	Title
ART 4.3.1.5	Provide Behavioral Health and Neuropsychiatric Treatment
OP 4.4.3	Provide Health Services
OP 4.4.3.3	Manage Health Services Resources in the Joint Operations Area (JOA)
OP 4.4.4	Reconstitute Forces

TADSS

TADSS ID	Title	Product Type	Quantity
No TADSS specified			

Equipment (LIN)

LIN	Nomenclature	Qty
No equipment specified		

Materiel Items (NSN)

NSN	LIN	Title	Qty
No materiel items specified			

Environment: Environmental protection is not just the law but the right thing to do. It is a continual process and starts with deliberate planning. Always be alert to ways to protect our environment during training and missions. In doing so, you will contribute to the sustainment of our training resources while protecting people and the environment from harmful effects. Refer to the current Environmental Considerations manual and the current GTA Environmental-related Risk Assessment card. ATP 3-34.5

Safety: In a training environment, leaders must perform a risk assessment in accordance with current Risk Management Doctrine. Leaders will complete the current Deliberate Risk Assessment Worksheet in accordance with the TRADOC Safety Officer during the planning and completion of each task and sub-task by assessing mission, enemy, terrain and weather, troops and support available-time available and civil considerations, (METT-TC). Note: During MOPP training, leaders must ensure personnel are monitored for potential heat injury. Local policies and procedures must be followed during times of increased heat category in order to avoid heat related injury. Consider the MOPP work/rest cycles and water replacement guidelines IAW current CBRN doctrine. ATP 5-19