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OPNAV INSTRUCTION 3501.176D

From: Chief of Naval Operations

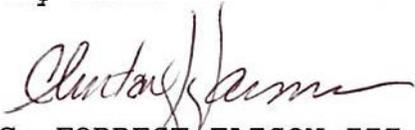
Subj: REQUIRED OPERATIONAL CAPABILITIES AND PROJECTED  
OPERATIONAL ENVIRONMENT FOR THE ROLE 3 NAVY  
EXPEDITIONARY MEDICAL FACILITY

Ref: (a) OPNAVINST C3501.2K (NOTAL)  
(b) DoD Directive 6200.04 of 9 October 2004  
(c) JP 4-02  
(d) OPNAVINST 4040.39C

Encl: (1) Projected Operational Environment (POE) for the Role  
3 Expeditionary Medical Facility  
(2) Required Operational Capabilities (ROC) for the Role  
3 Expeditionary Medical Facility  
(3) Expeditionary Medical Facility Capability and  
Functions Matrix

1. Purpose. To issue the required operational capabilities (ROC) and the projected operational environment (POE) for the Expeditionary Medical Facility (EMF). This instruction is a complete revision and should be reviewed in its entirety.
2. Cancellation. OPNAVINST 3501.176C.
3. Discussion. Enclosures (1) and (2) provide the description of the mission areas and operational capabilities for which the Navy EMF was designed and organized as required by references (a) through (d). Enclosures (1) through (3) of this instruction provide resource agencies with the information they need concerning the EMF's mission requirements, capabilities, and the types and locations of expected operations.
4. Action. Director, Logistics Programs and Corporate Operations (OPNAV N41), fleet commanders, and Chief, Bureau of Medicine and Surgery shall periodically review enclosures (1) through (3) and recommend changes to the Director, Medical Resources, Plans and Policy (OPNAV N0931) when capability of the EMF is significantly altered.

5. Records Management. Records created as a result of this instruction, regardless of media and format, shall be managed per SECNAV Manual 5210.1 of January 2012.



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Surgeon General of the Navy

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PROJECTED OPERATIONAL ENVIRONMENT (POE)  
FOR  
THE ROLE 3 EXPEDITIONARY MEDICAL FACILITY

1. Operational Environment. An EMF is a military organization consisting of health services, construction, and support personnel. EMFs contain deployable medical system equipment, materials, and consumables configured to support and provide theater hospitalization capability. Per references (b) and (c), the EMF meets the requirement to establish, operate, and maintain a deployable medical facility ashore capable of providing role 3 care during operations. Although the EMF is designed primarily to support ground-based operations, it can also support concurrent air and maritime operations. The EMF will receive patients from forward medical facilities or directly from combat areas to provide role 3 care within the theater evacuation policy. Adaptive force packaging will be used to deploy personnel or equipment as multiple individual packages or modules that provide incrementally increased medical capabilities.

2. Operational Demand. The EMF has initial operational capability at 72 hours and becomes fully operational capable within 10 days, assuming all equipment and personnel are assembled at a pre-selected, level (maximum 2 percent grade), operational site. Once erected, the EMF functions as an acute medical and surgical care facility in direct support of designated naval, joint, and multinational forces engaged in, or potentially engaged in, the full range of military operations. The EMF shall:

a. Provide Health Service Support (HSS) to Navy component commands as expeditionary advanced base functional components specified in the current operation plans per reference (d).

b. Deploy as part of the fleet commander's projection ashore to support geographical combatant commanders' theater evacuation policies.

c. Provide naval medical capability ashore in situations where a sustained land campaign is envisioned for a Marine expeditionary force or for limited contingencies involving naval forces short of major combat operations. This profile is coincidental with sustaining operations during Readiness State I as defined in reference (a).

3. Forward Operations. Forward operations provide tailored mobile surgical hospital services for direct medical support in military operations or for use by U.S. Government agencies involved in medical stability operations, providing limited humanitarian care incident to these operations. Sufficient additional lead time is required to reconfigure the staffing profile and medical or nonmedical material load-out package to support this tailored tasking. This profile is coincidental with sustaining operations during Readiness State II and Readiness State III as defined in reference (a).

4. Readiness State Thresholds. During Readiness States I, II, or III, EMFs can be expected to provide health services to support the following levels of effort:

a. Capable of providing command and control to prepare and regulate patients in the joint medical evacuation (MEDEVAC) system and command nets, naval support forces nets, and intra-theater medical nets.

b. Capable of operating in the designated battle space through organic shelter systems, buildings of opportunity, pre-designated host nation facilities, and limited spaces.

c. Capable of initial operating capability in 72 hours with full operational capability in 10 days.

d. Capable of operating 24 hours a day in climate extremes ranging from cold weather ( $-10^{\circ}$  F) to tropical to desert environments ( $125^{\circ}$  F).

e. Capable of transport via road, rail, sea, or air. All materials are containerized for road, rail, or sea transport except wheeled vehicles and a minimum of outsized base support equipment.

f. Capable of providing medical care services in the following functional areas: casualty receiving; perioperative services; and surgical suites, which are staffed to meet peak capabilities described in enclosure (3).

g. Wartime EMF manpower requirements are based on an 84-hour work week with modifications for watch standers or other platform-specific requirements.

h. Capable of deploying with collective protection systems if required as outlined in enclosure (3).

i. An EMF operates with limited organic base operating support (BOS). Additional BOS required for full operating capability and sustained operations will be requested from the supported operational commander.

5. Operational Area Task Organization

a. Capable of providing Role 3 in a flow-through mode for patients in any operational area per references (a) through (c).

b. Capable of providing scalable care in terms of beds as outlined in enclosure (3).

c. Capable of providing scalable care by surgical and medical specialists able to perform throughput as outlined in enclosure (3).

d. Capable of providing patient movement per references (a) through (c).

REQUIRED OPERATIONAL CAPABILITIES (ROC)  
FOR  
THE ROLE 3 EXPEDITIONARY MEDICAL FACILITY

1. Mission. The mission of the EMF is to provide standardized, modular, flexible Theater Hospitalization and HSS functionality to an advanced base environment throughout the full range of military operations. It is able to support the theater unified commander, joint task force commanders, Marine air-ground task forces, the naval expeditionary group, and forward elements of the Navy, Army, and Air Force units deployed ashore. Although the EMF is designed primarily to support ground-based operations, it can also support concurrent air and maritime operations. The EMF mission is also to provide HSS and civil support care for U.S. government agencies involved in foreign humanitarian assistance and peacetime operations with manning, medical materiel, equipment, and provisions tailored according to individual missions. Operations are governed by the principles of the *"Geneva Convention for the Amelioration of the Condition of the Wounded and Sick in Armed Forces in the Field of August 12, 1949."* Accordingly, the following primary (P) and secondary (S) mission warfare areas are assigned.

EMF						
CCC	CON	FHP	FSO	MOB	MOS	NCO
S	S	P	P	P	P	S

Note: CCC: Command Control and Communications; CON: Construction; FHP: Force Health Protection; FSO: Fleet Support Operations; MOB: Mobility; MOS: Missions of State; NCO: NonCombat Operations.

2. Readiness Conditions. ROCs are reported under readiness states having major significance in determining the unit's total manpower requirement. The following summarizes the readiness states applicable to the EMF:

a. Readiness State I: Full Contingency Readiness.

(1) Significant strategic and or tactical indications of actual or imminent hostilities. While in Readiness State I, the EMF shall be capable of meeting the following criteria: able to perform all medical care to support maximum patient loads anticipated from imminent or actual hostilities. This state

supports war and operation plans executed at defense readiness conditions (DEFCON) I and II including a complete EMF staff mobilization and activation found in enclosure (3).

(2) Transition to this maximum state of readiness may begin with the declaration of DEFCON II (heightened tensions and or indications that an enemy force is taking actions which increase his or her readiness for an attack, or has made an attack) with an objective for full augmentation achieved prior to the onset of DEFCON I. All watch stations and vital positions shall be manned to sustain operations at the maximum patient flow rate indefinitely once augmentation is complete and patients begin arriving. Collective protection capability exists based on limitations as outlined in enclosure (1).

b. Readiness State II: Tailored Contingency Readiness. Significant strategic and or tactical indications of actual or potential limited hostilities. As directed by higher authority, partial augmentation is achieved to sustain a readiness posture and patient rate tailored to a limited threat or hostilities, or civil disaster. The EMF is able to provide limited medical services in advance of full augmentation by adaptive force packages.

c. Readiness State III: Current Operations Readiness. Conduct current operations with augmented assets. Watch stations and vital positions sufficient to sustain special operations at the DEFCON III or IV are manned and ready. The EMF is able to provide limited medical services. The operating profile for this state is task organized to support the combatant commands' operational plans. This readiness state will be, at a minimum, the sum total of those watch stations and vital positions required to support routine operations in DEFCON IV (geopolitical instability exists in the area of operations which requires constant vigilance and monitoring for rapidly escalating, emergent developments; or provide response to a broad spectrum of medical stability operations) and the additional adaptive force packages and vital positions required to immediately surge to a level to support DEFCON III (tensions exist which may have serious and adverse effects, and the possibility of force involvement exists; or the possibility exists for a significant surge in seriously injured civilian population).

d. Readiness State IV: Training Readiness. During Readiness State IV, the EMF equipment sets will be prepositioned in bulk storage sites, sea-based, or undergoing integrated logistics overhaul refitting. Personnel assigned to EMF mobilization billets will undergo skill level training through their respective peacetime medical treatment facilities (MTF). The EMF indoctrination and orientation training will be conducted at a site designated by the Navy Medicine Operational Training Center. All assigned personnel shall maintain all requirements for mobilization (medical, training, etc.).

4. ROC Symbols. These symbols are used to specify the desired level of achievement of readiness or other work for or during a particular readiness condition. Readiness normally applies to watches and or evolutions, while other work refers to non-watch activity such as performing maintenance or running the galley.

a. "F" = "Full". The capability is to be fully achieved. For operational functions (watches), this means that installed equipment or systems will be fully manned to design capability. For support functions, sufficient manning is provided to ensure effective accomplishment of all included tasks. The achievement is to be sustained for the duration of the condition unless modified by an "A" or "E".

b. "L" = "Limited". The capability is to be only partially realized. Even though only limited capability is realized, it is to be sustained for the duration of the condition unless modified by an "A" or "E". Every "L" must be supported by a limiting statement specifying the limitation.

c. "A" = "Augmentation". The capability is to be either fully or partially achieved for a limited time during the condition. The capability is achieved by using off-watch personnel to achieve the required degree of capability. This symbol is always associated with an "F" or "L" and establishes a requirement for personnel to be trained, available and on call to augment existing watch stations as required.

d. "E" = "Special Team". The capability is to be either fully or partially achieved for a limited time during the condition. The capability is achieved by using off-watch special teams or details. This symbol is always associated with an "F" or "L" and denotes a capability which does not require continuous watch manning. Teams and details as set may either

supplement or replace all or part of the existing watch organization. Man overboard and replenishment details are two examples.

MODIFIER	CAPABILITY	
	FULL	LIMITED
NONE	Manned to design capacity for duration of condition	Manned to less than design capacity for duration of condition
A	Temporarily manned to design capacity using off-watch personnel	Temporarily manned to less than design capacity using off-watch personnel
E	Temporarily manned to design capacity using a special team	Temporarily manned to less than design capacity using a special team

7. EMF Staff and External Personnel Resources. Normally, using an "A" or an "E" requires no elaborating statement as their meanings are predefined.

8. This ROC and POE instruction shows:

- a. If the resource is EMF staff, no elaboration or statement is provided.
- b. If the resource is external for "F", a note is added to the ROC stating the resource.
- c. If the resource is external for "L", the resource is added to the capability limiting statement.

**COMMAND, CONTROL, AND COMMUNICATIONS (CCC)**

**CCC 3 PROVIDE OWN UNIT'S COMMAND AND CONTROL FUNCTIONS.**

CCC 3.3 Provide all personnel services, programs, and facilities to safeguard classified material and information. F

CCC 3.4 Carry out emergency destruction of classified material and equipment rapidly and efficiently. F

- CCC 3.8 Establish voice communications with U.S. Marine Corps (USMC) evacuation and command nets and/or naval support activity net. L  
(L) - Limited to internal voice communication with external communications requiring outside support.
- CCC 3.11 Establish voice communications with supported forces. L  
(L) - Limited to internal voice communication with external communications requiring outside support.
- CCC 3.12 Repair own unit's CCC equipment. L  
(L) - Limited to EMF staff and equipment.
- CCC 6 PROVIDE COMMUNICATIONS FOR OWN UNIT.**
- CCC 6.2 Maintain visual communications. F
- CCC 6.6 Process messages. L  
(L) - Limited to unclassified communications only.
- CCC 6.12 Maintain internal communications systems. L  
(L) - Limited to unclassified communications only.

**CONSTRUCTION (CON)**

- CON 1 PERFORM TACTICAL CONSTRUCTION.**
- CON 1.1 Perform vertical construction including prefabricated buildings, bunkers, and towers. L  
(L) - Limited to construction of EMF and base support elements.
- CON 1.2 Perform horizontal construction including unpaved roads, airstrips, mat runways, helicopter landing areas. L  
(L) - Limited to construction of EMF and base support

elements, including minor site preparation.

CON 1.3 Construct utilities including power generation and water purification systems. L

(L) - Limited to EMF support, portable generators and chemical purification.

**CON 2 PERFORM BASE CONSTRUCTION.**

CON 2.3 Construct utilities including central base power plant, sewage and water systems, water purification and desalination systems, and wire communication systems. L

(L) - Limited to construction of EMF and base support elements.

CON 2.4 Perform vertical construction of own expeditionary camp facilities under all climatic conditions. L

(L) - Limited to construction of EMF and base support elements.

**CON 3 PERFORM CONSTRUCTION ENGINEERING.**

CON 3.1 Conduct surveying and drafting operations. L

(L) - Limited to EMF and base site preparations.

CON 3.4 Perform design for local expedient projects. L

(L) - Limited to EMF and base facilities systems.

**CON 4 PERFORM SPECIALIZED CONSTRUCTION.**

CON 4.23 Provide rapid response to erect, maintain, and support combat zone and communication zone fleet hospitals. L

(L) - Limited to EMF and base facilities.

**CON 5 PERFORM OPERATIONAL CONSTRUCTION LOGISTIC SUPPORT IN THE DEPLOYMENT AREA.**

- CON 5.2 Perform organizational and intermediate maintenance on own, naval construction regiment, and augment equipment. L  
(L) - Limited to maintenance of EMF organic equipment.
- CON 6 PERFORM WAR DAMAGE REPAIR/RAPID RUNWAY REPAIR OPERATIONS.**
- CON 6.1 Perform repairs to utilities including central base camp power, sewage, and water systems. L  
(L) - Limited to repair of EMF and base support elements.
- CON 6.2 Perform repairs to petroleum, oil, and lubricants distribution systems. L  
(L) - Limited to repair of EMF and base support systems.
- CON 6.3 Perform repairs to communication systems. L  
(L) - Limited to organizational level capability up to and including circuit board replacement.

**FORCE HEALTH PROTECTION (FHP)**

- FHP 7 PROVIDE OPERATING ROOMS IN AN AFLOAT OR FIELD ENVIRONMENT.**
- FHP 7.1 Provide central sterile supply service functions. F
- FHP 7.2 Identify, equip, and maintain suitable operating room(s) for use by the following personnel (choose as applicable): F
- (a) Operating room technician
  - (b) Operating room nurse
  - (c) Medical officers
  - (d) General surgeons
  - (e) Surgical specialists
- FHP 7.3 Conduct orthopedic casting service (choose as F

applicable):

(a) Orthopedic cast room technician

**FHP 8 PROVIDE MEDICAL ADMINISTRATIVE SERVICES IN AN AFLOAT OR FIELD ENVIRONMENT.**

FHP 8.5 Perform medical logistics (choose as applicable): F

(a) Procure, issue, manage, resupply, and dispose of medical supplies (Class VIIIA and VIIIB) and equipment.

(b) Conduct bio-medical/dental equipment repair, installation, inspection, calibration, and maintenance services.

(c) Coordination of patient movement items in accordance with theater policy.

**FHP 9 PROVIDE FIRST AID ASSISTANCE.**

FHP 9.2 Train assigned personnel in first aid, self, and buddy aid procedures. F

FHP 9.3 Train stretcher bearers. F

**FHP 10 PROVIDE TRIAGE OF CASUALTIES/PATIENTS.**

FHP 10.1 Identify, equip, and maintain suitable triage spaces. F

FHP 10.2 Train assigned personnel in triage care. F

FHP 10.3 Provide administrative and logistic support to augmentation personnel and their associated equipment that are assigned to triage and CBR decontamination stations. L

(L) - Limited to EMF operational requirements, theater requirements, and current doctrine.

FHP 10.4 Train designated non-medical personnel to assist in triage management care for CBR contamination casualties. L

(L) - Limited to EMF operational requirements, theater

Requirements, and current doctrine.

- FHP 10.5 Train designated non-medical personnel in CBR casualty decontamination procedures. L  
(L) - Limited to EMF operational requirements, theater Requirements, and current doctrine.
- FHP 10.6 Train designated supervisory medical personnel in oversight procedures during CBR casualty decontamination. L  
(L) - Limited to EMF operational requirements, theater Requirements, and current doctrine.
- FHP 10.7 Provide medical treatment for chemical, biological, and radiological casualties. F
- FHP 11 PROVIDE MEDICAL/SURGICAL TREATMENT FOR CASUALTIES/PATIENTS.**
- FHP 11.1 Identify, equip, and maintain suitable resuscitation spaces. F
- FHP 11.2 Train assigned and embarked personnel in resuscitation. F
- FHP 11.3 Provide administrative support to resuscitation trained augmentation personnel and their associated equipment. F
- FHP 11.4 Identify, equip, and maintain adequate medical supply storage spaces for appropriate level of resuscitation. F
- FHP 11.5 Identify, equip, and maintain suitable spaces for emergency minor surgery. F
- FHP 11.7 Identify, equip, and maintain suitable procedure space for emergency response, stabilization, and casualty transfer. F
- FHP 11.8 Provide emergency response, stabilization, and transfer by specialized teams of physicians, nurses, and technicians. F
- FHP 15 PROVIDE ROUTINE AND EMERGENCY DENTAL CARE.**

- FHP 15.1 Conduct dental sick call. L  
(L) - Limited to EMF staff personnel only and tempo of operations.
- FHP 15.4 Identify, equip, and maintain suitable spaces to conduct dental care. F
- FHP 15.5 Identify, equip, and maintain adequate storage spaces for dental equipment and supplies. F
- FHP 15.6 Provide central dental sterile supply services. F  
FHP 15.7 Conduct dental radiographic services. F  
(a) Intraoral capability  
(b) Pan-oral capability
- FHP 16 PROVIDE DEFINITIVE DENTAL CARE FOR CASUALTIES AND PATIENTS.**
- FHP 16.1 Provide restorative treatment and minor oral surgery including tooth extraction. F
- FHP 16.4 Provide dental prosthesis fabrication and repair (choose as applicable): L  
(a) Limited service laboratory  
(L) - Limited to oral splints.
- FHP 17 PROVIDE ORAL SURGERY/MAXILLOFACIAL CARE FOR CASUALTIES/PATIENTS.**
- FHP 17.1 Identify, equip, and maintain suitable oral/maxillofacial surgical spaces. F
- FHP 17.2 Provide all support needed to augmentation personnel/equipment assigned to provide oral surgery/maxillofacial care for casualties/patients. L  
(L) - Limited to available facilities.
- FHP 17.3 Provide oral surgery/maxillofacial care. F
- FHP 22 PROVIDE MEDICAL/DENTAL SUPPORT SERVICES TO OTHER**

**UNITS/MILITARY SERVICES.**

- FHP 22.1 Provide medical support services and medical equipment and supplies. L  
(L) - Limited by operational tempo, current doctrine, and unique requirements of the EMF.
- FHP 22.2 Provide dental support services including dental equipment and supplies. L  
(L) - Limited by operational tempo, current doctrine, and unique requirements of the EMF.
- FHP 22.3 Provide emergency back-up equipment and supplies to USMC organic medical/dental units. L  
(L) - Limited by operational tempo, current doctrine, and unique requirements of the EMF.
- FHP 23 PROVIDE MEDICAL CARE TO ASSIGNED AND EMBARKED PERSONNEL.**
- FHP 23.1 Conduct sick call. L  
(L) - Limited to EMF staff personnel only and tempo of operations.
- FHP 23.3 Conduct lab diagnostic services requiring the following personnel (choose as applicable): F  
(a) Hospital corpsmen  
(b) Laboratory technicians  
(c) Laboratory officers
- FHP 23.5 Conduct sanitation and safety inspections. L  
(L) - Limited to EMF compound only and tempo of operations.
- FHP 23.6 Conduct occupational health/safety and preventive medicine programs and training using the following personnel (choose as applicable): L  
(a) Hospital corpsmen  
(b) Preventive medicine technicians

- (d) Industrial hygiene officers
  - (e) Radiation health officers
  - (f) Radiation health technicians
  - (zz) Medical officers
- (L) - Limited to EMF staff personnel only and tempo of operations.

FHP 23.7 Conduct physical therapy services requiring the following personnel (choose as applicable): F

- (a) Hospital corpsman
- (b) Physical therapy technician
- (c) Physical therapy officers
- (zz) Medical officer

FHP 23.8 Conduct pharmacy services requiring the following personnel (choose as applicable): F

- (a) Hospital corpsmen
- (b) Pharmacy technicians
- (c) Pharmacy officers

FHP 23.9 Conduct associated administrative/maintenance services (choose as applicable): F

- (a) Maintain adequate medical supplies for appropriate level health care.
- (b) Conduct bio-medical/dental equipment repair, installation, inspection, calibration and maintenance services.
- (c) Provide patient/casualty administrative services.
- (d) Perform routine medical administrative services.

FHP 23.11 Conduct ocular diagnostic and therapeutic services requiring the following personnel (choose as applicable): F

- (a) Hospital corpsman
- (b) Ocular technician
- (c) Ophthalmology officers

FHP 23.12 Conduct radiological diagnostic services requiring the following personnel (choose as applicable): F

- (a) Hospital corpsmen
  - (b) Radiological technicians
  - (c) Radiology officers (16Y1), (0131)
- FHP 23.13 Provide central sterile supply service functions. F
- FHP 23.15 Conduct disease and vector control planning and operations. F
- FHP 23.16 Conduct optometric services requiring the following personnel (choose as applicable): F
- (a) Hospital corpsmen
  - (b) Optometric technicians
  - (c) Optometry officers
- FHP 23.17 Identify, equip, and maintain suitable spaces to provide medical care. F
- FHP 23.18 Identify, equip, and maintain adequate storage spaces for medical equipment and medical supplies. F
- FHP 23.19 Provide medical care, triage, and resuscitation commensurate with health care provider credentials using the following personnel (choose as applicable): F
- (a) Independent duty corpsman
  - (b) Physician's assistant
  - (c) Medical officer
  - (zz) Nurse
- FHP 23.20 Provide obstetrics and gynecological medical care commensurate with health care provider credentials using following personnel (choose as applicable): F
- (a) Independent duty corpsman
  - (b) Medical officer
  - (c) Obstetrician-gynecologist
  - (zz) Nurse
- FHP 27 PROVIDE MEDICAL, SURGICAL, POST-OPERATIVE, AND NURSING CARE FOR CASUALTIES/PATIENTS.**
- FHP 27.1 Provide hospital beds (choose as applicable): F

- (a) Intensive care
- (zz) Acute care

- FHP 27.3 Provide blood bank capabilities. L  
(L) - Limited by operational tempo, current doctrine, and unique requirements of the EMF.
- FHP 27.4 Provide suitable care for the dead. L  
(L) - Limited to those cases at the EMF and to emergency holding facility (refrigeration unit).
- FHP 27.6 Provide surgery by general surgeon. F
- FHP 27.7 Provide surgery by surgical specialists and specialists. F
- FHP 27.8 Provide ocular diagnostic and therapeutic services by an ophthalmologist. F
- FHP 27.12 Provide administrative support to augmented nursing services personnel and their associated equipment. F
- FHP 27.13 Provide all support needed to augmentation personnel/equipment assigned to nursing services. F
- FHP 27.14 Provide medical diagnostic support by medical specialists and subspecialists (choose as applicable): F  
(a) Internal medicine  
(b) Pediatrics subspecialty  
(zz) Other (specify)
- FHP 28 PROVIDE MEDICAL REGULATION, TRANSPORT/EVACUATION, AND RECEIPT OF CASUALTIES/PATIENTS.**
- FHP 28.2 Train assigned and embarked personnel in medical regulation procedures. F
- FHP 28.3 Provide administrative support to augmented medical regulation personnel and their associated equipment. F
- FHP 28.4 Transport and/or provide for casualty/patient evacuation. L

(L) - Limited to EMF operational requirements, theater requirements and current doctrine.

FHP 28.5 Train assigned and embarked personnel in MEDEVAC procedures. F

FHP 28.6 Receive casualties/patients via surface and/or air. F

FHP 28.8 Maintain a casualty/patient information center capable of collecting, processing, displaying, evaluating, and disseminating casualty/patient information. F

FHP 28.9 Provide ground MEDEVAC of patients from forward deployed hospital units. L

(L) - Limited to EMF operational requirements, theater requirements and current doctrine.

FHP 28.11 Provide all support needed to augmentation personnel/equipment assigned to medical regulation. L

(L) - Limited to EMF operational requirements, theater Requirements, and current doctrine.

#### **FLEET SUPPORT OPERATIONS (FSO)**

##### **FSO 2 PROVIDE BASE FACILITY MAINTENANCE AND UTILITY OPERATIONS.**

FSO 2.1 Operate and maintain electric power generation systems (diesel) and distribution systems. L

(L) - Capability is limited to EMF electrical system.

FSO 2.2 Operate and maintain water production and distribution systems including advanced base desalination equipment. L

(L) - Limited to potable water storage and distribution systems for EMF.

FSO 2.3 Maintain structures of all types including wood, prefabricated, steel, and concrete. L

(L) - Limited to those structures organic to the EMF.

FSO 2.4 Maintain roads and other paved areas. L

(L) - Limited to those organic to the EMF.

FSO 2.6 Maintain POL storage facilities. L

(L) - Limited to those organic to the EMF.

**MOBILITY (MOB)**

**MOB 3 PREVENT AND CONTROL DAMAGE.**

MOB 3.1 Control fire, flooding, electrical, structural, propulsion, and hull/airframe casualties. L

(L) - Limited to flooding, electrical, and structural casualties within the assigned perimeter.

MOB 3.2 Counter and control CBR contaminants/agents. L

(L) - Limited to EMF operational requirements, theater requirements and current doctrine.

MOB 3.3 Maintain security against unfriendly acts. L

(L) - For assigned perimeter only, will require augmentation from combat units.

**MOB 11 MAINTAIN MOUNT-OUT CAPABILITIES.**

MOB 11.1 Deploy with organic allowance within designated time period. F

MOB 11.2 Mount-out selected elements/detachments. F

MOB 11.3 Maintain capability for rapid airlift of unit/detachments as directed. L

(L) - Airlift limited to personnel and equipment required to meet rapid deployment capabilities.

MOB 11.4 Maintain mount-out capability for reconnaissance F

selection and survey of deployable medical facility sites.

**MOB 12 MAINTAIN THE HEALTH AND WELL-BEING OF THE CREW.**

- MOB 12.1 Ensure all phases of food service operations are conducted consistent with approved sanitary procedures and standards. F
- MOB 12.2 Ensure the operation of the potable water system in a manner consistent with approved sanitary procedures and standards. F
- MOB 12.3 Monitor and/or maintain the environment to ensure the protection of personnel from overexposure to hazardous levels of radiation, temperature, noise, vibration and toxic substances per current instructions. F
- MOB 12.4 Maintain closed atmosphere within prescribed specifications. L
- (L) - Limited to hospital and personnel spaces according to current doctrine and unit capability.
- MOB 12.5 Monitor the health and well-being of the crew to ensure that habitability is consistent with approved habitability procedures and standards. F
- MOB 12.7 Provide individual protective clothing and equipment to sufficiently protect casualties in case of CBR contamination. L
- (L) - Limited to patient wraps.
- MOB 12.10 Provide CBR collective protective system for medical and support spaces. L
- (L) - Limited to the medical core and partial troop housing (i.e., toxic-free area).
- MOB 12.11 Provide antidotes to staff, patients, and casualties and this will counteract the effects caused by CBR contaminated environment. F

MOB 12.13 Train designated medical supervisors and non-medical personnel to detect CBR-contaminated casualties. L

(L) - Limited to staff available to perform the function.

MOB 12.14 Train designated non-medical personnel to decontaminate CBR casualties. L

(L) - Limited to staff available to perform the function.

MOB 12.15 Identify, supply, and maintain decontamination stations. L

(L) - Limited to staff available to perform the function.

**MOB 14 CONDUCT OPERATIONS ASHORE.**

MOB 14.1 Operate in climate extremes ranging from cold weather to tropical desert environments (-10 to +125<sup>0</sup> F). F

MOB 14.2 Operate in the rear of combat zone in afloat pre-positioning force or Marine expeditionary brigade environment. F

MOB 14.3 Erect EMF and establish medical operations within 72 hours of arrival at surveyed site using organic staff and table of equipment. L

(L) - Limitations include:

- (a) Requirements per enclosure (3)
- (b) 10 days to establish full medical operations
- (c) Air detachment to survey and "stake out" hospital
- (d) Naval ground forces component commander heavy SEABEE unit must level site before EMF can begin activation process.

MOB 14.5 Conduct peacetime, activation, mount-out, and movement exercises of selected personnel and equipment to ensure capability of contingencies involving naval F

forces short of a general war.

MOB 14.6 Conduct limited local security defensive combat operations. L

(L) - For assigned perimeter only, will require augmentation from combat units.

**MISSION OF STATE (MOS)**

**MOS 1 PERFORM NAVAL DIPLOMATIC PRESENCE OPERATIONS.**

MOS 1.2 Conduct force/unit tour for foreign dignitaries. L

(L) - Limited by tempo of operations.

MOS 1.8 Participate in military exercises with allied nations. F

MOS 1.9 Participate in military exercises with non-allied nations. F

**MOS 2 PROVIDE HUMANITARIAN ASSISTANCE.**

MOS 2.7 Provide a full hospital service asset available for use by appropriate government agencies involved in support of disaster relief operations worldwide. L

(L) - Limited to availability of EMF staff, equipment and tempo of current operations.

**MOS 3 PERFORM PEACEKEEPING.**

MOS 3.3 Provide direct participation in a joint/allied peacekeeping force within a foreign country/region. F

**NONCOMBAT OPERATIONS (NCO)**

**NCO 2 PROVIDE ADMINISTRATIVE AND SUPPLY SUPPORT FOR OWN UNIT.**

NCO 2.1 Provide supply support services. F

NCO 2.2 Provide clerical services. F

NCO 2.4 Provide post office services. F

NCO 2.5 Provide messing services. F

- NCO 2.7 Provide inventory and custodial services. F
- NCO 2.8 Provide personnel for living space maintenance. F
- NCO 2.9 Provide personnel for area command security. F
- NCO 2.11 Provide personnel for fuels support. F
- NCO 3 PROVIDE UPKEEP AND MAINTENANCE OF OWN UNIT.**
- NCO 3.1 Provide organizational level preventive maintenance. F
- NCO 3.2 Provide organizational level corrective maintenance. F
- NCO 3.3 Provide small arms storage area. F
- NCO 3.5 Provide for proper storage, handling, use, and transfer of hazardous materials. F
- NCO 10 PROVIDE EMERGENCY/DISASTER ASSISTANCE.**
- NCO 10.4 Provide disaster assistance and evacuation. F
- NCO 10.7 Provide a full hospital service asset available for use by appropriate government agencies involved in support of disaster relief operations worldwide. L
- (L) - Limited to availability of EMF staff, equipment and tempo of current operations.

ROLE 3 EXPEDITIONARY MEDICAL FACILITY CAPABILITY MATRIX

<b>THEATER HOSPITALIZATION</b>			
<b>MTF TYPE</b>	<b>EMF-150</b>	<b>EMF-50</b>	<b>COMMENTS</b>
Tentage	TEMPER	TEMPER	
Acres	13.25	13.25	
Civil Engineering Support Equipment	105	84	
International Standards Organization Containers	168	129	
Vehicles	42	34	based on prime movers
<b>BEDS</b>			
Intensive Care Unit	20	20	
Acute Care Ward	130	30	
<b>CAPABILITIES</b>			
Operating Room Tables	4	4	
Temp Hold (cots)	0	0	
Lab	1	1	capability based on number of shelters
X-Ray	1/6	1/6	capability based on number of equipment (fixed/mobile)
Emergency Room	Yes	Yes	capability based on casualty receiving facility/equipment
Triage	Yes	Yes	capability based on pre-casualty receiving facility
Magnetic Resonance Imaging	N/A	N/A	
Computed Tomography Scanner	Yes	Yes	requested through Navy Expeditionary Medical Support Command
Max blood storage	300/192	300/192	number of units (blood/plasma)
Collective protection	Yes	Yes	Currently limited to two EMFs geo-positioned
<b>DAILY THROUGHPUT</b>			
Admissions	30	10	
Surgical cases	36	36	9 OR table per day.
Limited specialty outpatient	30	30	

Note: TEMPER: Tent, Extendable Modular Personnel