



# U.S. ARMY MEDICAL CENTER OF EXCELLENCE LESSONS LEARNED NEWSLETTER



## Second Quarter Fiscal Year 2026

### Joint Base San Antonio – Fort Sam Houston, Texas

#### Message from the Chief



In this second quarter edition of the MEDCoE Lessons Learned Newsletter, we highlight the MEDCoE Top Ten Lessons Observed for Fiscal Year 2025 (FY25) and the Russia Medical Lessons Learned Report. You can find the links to the documents in our “Recent Document Uploads” section.

This edition marks the end of an era for the Lessons Learned Branch. As part of the Army Transformation Initiative, the Centers of Excellence are reorganizing to streamline the force modernization efforts across the Army.

Within this initiative, the Lessons Learned Branch is finalizing its merger to help form the new Transformation and Lessons Learned Managers (TLLM) this quarter. In the same vein, this newsletter will evolve to become the TLLM Newsletter, continuing to highlight medical lessons learned, while also incorporating modernization efforts being led by the TLLM for the operational force. The TLLM is the force’s representative for all Doctrine, Organization, Training, Materiel, Leadership & Education, Personnel, Facilities, and Policy (DOTMLPF-P) matters. It acts as the single point of contact for users to provide feedback and issues for action. The TLLM is the **engine of accelerated change - powering the evolution of our medical enterprise.**

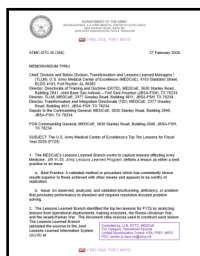
– Kenton M. Bass, Chief, Lessons Learned Branch

### Topics in this Issue

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- Russia Medical Lessons Learned Report
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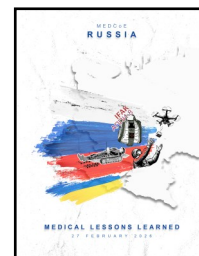
### MEDCoE FY25 Top Ten Lessons

1. Lack of a “Golden Hour” makes Prolonged Care Critical
2. Medical Logistics
3. Unmanned Aircraft Systems
4. Russia Adapting Its Tactical Casualty Response
5. Holistic Health and Fitness
6. Whole Blood
7. Casualty Evacuation (CASEVAC)
8. Disease Non-Battle Injury
9. Tourniquet Application
10. Subterranean Medical Care



### Russia Medical Lessons Learned Report

1. Tactics, Techniques, and Procedures (TTPs) for CASEVAC
2. Unmanned Platforms for CASEVAC
3. UAVs Assist Prolonged Care
4. Tactical Care Based on Threat Level
5. Ubiquitous Drone Threat
6. IFAKs Outpace Logistical Capacity
7. Tourniquet Training
8. Social Media Used for Medical Training
9. Staffing Shortages and Inconsistent Care
10. Force Generation Over Individual Recovery
11. Night Training to Improve Performance
12. Reliance on Civilian Sector
13. High Surgical Demands for Low-Acuity Casualties
14. Training Versus Combat Tourniquets



**We welcome your feedback to ensure we include the information you need and to help improve this newsletter!**

MEDCoE Lessons Learned (LL) Branch Teams Phone and Email is 520-716-5885 and [usarmy.jbsa.medical-coe.list.amedd-lessons-learned@army.mil](mailto:usarmy.jbsa.medical-coe.list.amedd-lessons-learned@army.mil), respectively. Email us to modify our distribution list.

Previous quarterly issues of the newsletters are at <https://www.jllis.mil/details/64285c1c0b819238188f7b19>.

The MEDCoE LL Branch publishes this newsletter under the authority of the Director, Directorate of Training and Doctrine, MEDCoE.



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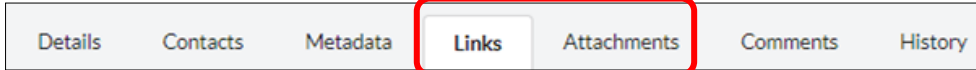
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### Use of Joint Lessons Learned Information System (JLLIS)

As the DoD repository for lessons learned, the majority of the document links in this newsletter are from JLLIS. You will need to be somewhat familiar with JLLIS to find the documents and other information linked to the newsletter. First time users of JLLIS will need to register through Joint Training Platform at <https://jtp.jten.mil/jtp/>. Once registered, the links will take users to a JLLIS bin. The bin will have two important tabs: 'Links' and 'Attachments'. The 'Links' tab will list related bins, and the 'Attachment' taps will list the documents.



### Recent Lessons Learned Collections

The MEDCoE Lessons Learned Branch periodically conducts data collections from units that have returned from deployments, missions, or major training exercises to develop Front End Analysis (FEA) reports. The intent is to share lessons (both best practices and issues) with the force. You can find additional collection reports and unit After Action Reports (AARs) by searching JLLIS at <https://www.jllis.mil>.

**311th FH  
JTF-B**

- The 311th Field Hospital (FH) deployed to U.S. Southern Command Area of Responsibility (AOR) from Feb to Dec 25 to support Joint Task Force - Bravo (JTF-B).
- Issues discussed: Gaps in pre-deployment training, validation of clinical competencies, medical logistics, and Unit Manning Roster (UMR) issues.
- FEA report link is at <https://www.jllis.mil/details/694197c5479206dd3f0ca9f7>.

**179th Opto  
Tm  
OSS**

- The 179th Medical Team, Optometry (Opto Tm) deployed to U.S. Central Command (CENTCOM) AOR from Apr 25 to Jan 26 in support of Operation Spartan Shield (OSS).
- Issues discussed: Lack of administrative personnel and operational experience, outdated Enduring Equipment Sets (E2S), and timely Class VIII resupply.
- FEA report link is at <https://www.jllis.mil/details/6966a19a3d41b65b9be961dd>.

**C Co.,  
325th LSB  
JPMRC**

- The Charlie Company, 325th Light Support Battalion (C Co., 325th LSB) deployed from 1 to 16 Nov 25 in support of Joint Pacific Multinational Readiness Center (JPMRC) rotation 26-01 in Hawaii.
- Issues discussed: Split-based operations, transportation and medical logistics issues, and Modified Table of Equipment (MTOE) medical equipment modernization.
- FEA report link is at <https://www.jllis.mil/details/698c8e9877adfb96ba9da9a4>.

**10th FH  
OSS**

- The 10th FH deployed to CENTCOM AOR from Apr 25 to Jan 26 in support of OSS.
- Issues discussed: Individual, section, and unit readiness training, revision of theater's medical command structure, and administrative difficulties for the Field Hospital.
- FEA report link is at <https://www.jllis.mil/details/6995d11e68ffd7d159634d09>.

**25th CAB's  
H2F Team  
JPMRC**

- The 25th Combat Aviation Brigade's (CAB's) Holistic Health and Fitness (H2F) Team deployed to JPMRC from 3 to 15 Nov 25.
- Issues discussed: Battlefield Circulation (BFC), lack of integration into the Military Decision-Making Process (MDMP), H2F flexibility.
- FEA report link is at <https://www.jllis.mil/details/698366dafa15567b50eb0096>.

**673d DCAS  
OSS**

- The 673d Dental Company, Area Support (DCAS) deployed to CENTCOM AOR from Apr 25 to Jan 26 in support of OSS.
- Issues discussed: Inadequate dental readiness, Class VIII medical resupply, and limited capacity for preventive dental care.
- FEA report link is at <https://www.jllis.mil/details/6983567b7b37c30d8da630d7>.



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## Recent Lessons Learned Collections (Continued)

Mr. Ngo  
Myanmar

- Mr. Victor Ngo, senior medical consultant, provided insight on his frontline experience in Myanmar (formally known as Burma).
- Issues Discussed: Importance of cover and concealment during casualty care, the need for decentralized casualty collection points (CCPs), and adapting medical gear for prone casualty care.
- FEA report link is <https://www.jllis.mil/details/68d574beade8f3afdae42526>.

278th ACR  
JMTG-U

- The 278th Armored Cavalry Regiment (ACR) deployed to U.S. Europe Command AOR from May 25 to Feb 26 in support of Joint Multinational Training Group—Ukraine (JMTG-U).
- Issues Discussed: Clarity of JMTG-U mission, misalignment between pre-mobilization training mission requirements, and inadequate manning to meet mission demands.
- FEA report link is <https://www.jllis.mil/details/699df5ee86bfe17414827142>.

## Recent Document Uploads

In general, the MEDCoE LL Branch uploads unit After Action Reports (AARs) and Tactical Standard Operating Procedures (TACSOPs) to JLLIS and Army Medicine articles to the MEDCoE LL website.

**MEDCoE FY25 Top Ten Lessons:** <https://www.jllis.mil/details/69970e7f68ffd7d15964c7ef>.

**MEDCoE's Russia Medical Lessons Learned Report:** <https://www.jllis.mil/details/699dfa2786bfe1741482a159>.

**Medical Lessons from Ukraine by Mr. Kyle Green, Medical Consultant:** <https://www.jllis.mil/details/695d67a7c99e38c329d98a70>.

**NATO Security Assistance and Training for Ukraine's Medical Network Brief & Executive Summary:** <https://www.jllis.mil/details/695d6d581b817025e8be454f>.

**UK's Ukraine Maritime Medical Lessons Learned Report:** <https://www.jllis.mil/details/69655ab17059cb1c87eab79>.

**UK's Defence Intelligence Counter Proliferation for Health Security and Medical Intelligence Reports:** <https://www.jllis.mil/details/69655dc37059cb1c87eab3a6>.

**68th Theater Medical Command's Israel Defense Force Lessons Learned Report:** <https://www.jllis.mil/details/6966b42d7059cb1c87eba91a>.

**Medical Capabilities Development Integration Directorate's Artificial Intelligence and Autonomous Triage and Treatment White Paper:** <https://www.jllis.mil/details/6968f56c80ea579410320ca6>.

**Joint Multinational Readiness Center's Combined Lyophilized Product Strategy for Forward Resuscitation Article:** <https://www.jllis.mil/details/69792046e161003c682bc380>.

**Uniformed Services University's Renal Failure During LSCO Historical Perspective Brief:** <https://www.jllis.mil/details/6979221de161003c682bc493>.

## Recent Publications

This section provides the force with recent/updated newsletters and medical publications.

**Joint En Route Care Guidelines:** <https://jts.health.mil/assets/docs/cpgs/CoERCCC%20Guidelines%20FY26.pdf>.

**The Crucible's Triage Tips the Scales: Combat Medicine Realities in LSCO with JRTC Combat Medics:** <https://youtu.be/FTCr9Up8Y?si=BgyDVAT3hoBbsvTI>.

**The Pacific Medic:** [https://d34w7g4gy10iej.cloudfront.net/pubs/pdf\\_76220.pdf](https://d34w7g4gy10iej.cloudfront.net/pubs/pdf_76220.pdf).

**Optimizing Army Leader Changeover (A tool for Relief in Place and Transfer of Authority):** <https://api.army.mil/e2/c/downloads/2025/12/14/2e44e064/no-26-1082-optimizing-army-leader-changeover-the-perpetual-reset-dec-25.pdf>.

**WarDocs' Empowering Medics with Cutting-Edge Simulation Technology:** <https://www.wardocspodcast.com/post/empowering-medics-with-cutting-edge-simulation-technology-cmsgt-ret-jason-robbins-and-lou-oberndo>.

**WarDocs' Ranger Medic to Physician Assistant:** <https://www.wardocspodcast.com/post/ranger-medic-to-pa-student-sfc-allen-s-journey>.

**SAG-U & NSATU Operational Insights Newsletter, January 2026:** <https://www.jllis.mil/details/6979250e48a7165c89c37db5>.



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### Did You Know?

Role 2 enhanced operations are transforming battlefield medicine underground. From March 12th to March 14th, 2025, the 629th Medical Company, Area Support (MCAS) successfully established and operated a Role 2 Enhanced medical treatment facility within a subterranean complex at Camp Stanley, Republic of Korea (ROK). This operation was a pivotal component of Pacific Medic Focus (PMF) 25-01, conducted during Freedom Shield 2025, a U.S.-ROK combined exercise. The mission showcased the medical proficiency of the 629th MCAS and its forward-thinking approach to supporting large scale combat operations (LSCO) and multi-domain operations (MDO).

Operating in a subterranean facility draws lessons from the Korean War, where medical units faced constant threats from artillery and rocket attacks. Subterranean environments offer enhanced survivability, concealment, and protection against kinetic, chemical, biological, radiological, nuclear, and electromagnetic threats. Recent conflicts, such as the war in Ukraine and the Israel-Hamas conflict in Gaza, have reinforced the necessity of underground medical operations to shield personnel and patients from modern threats like missiles and drones.

The 629th MCAS validated mission-essential tasks and experimented with subterranean Role 2 operations in a simulated high-threat environment. The facility tested medical coordination, logistics, and survivability, with the 629th MCAS serving as the medical command and control (MED C2). The integration of Mounted Mission Command Software (MMC-S) by the 168th Medical Battalion, Multifunctional (MMB) enhanced communication and command capabilities.



629th MCAS and 560th MCGA teams arrive at the Role 2 Enhanced patient drop off zone UGF

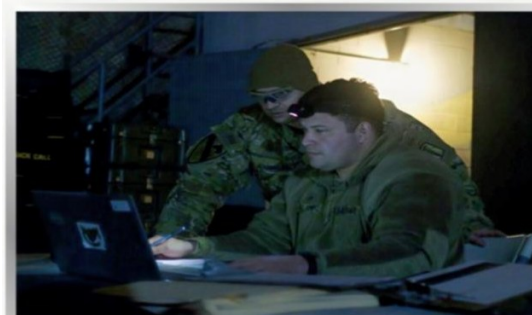
strategies to mitigate vulnerabilities and reduce the electromagnetic footprint of forward medical units.

The validation of subterranean Role 2 Enhanced operations is critical for potential conflicts against near-peer adversaries like North Korea, where hostile artillery poses a constant threat. PMF 25-01 proved the feasibility and necessity of such operations, integrating advanced communication systems, joint assets, and electromagnetic vulnerability assessments.

The 629th MCAS demonstrated adaptability and readiness for future combat scenarios, supporting the readiness objectives of the 168th MMB, 65th Medical Brigade, 8th Army, and U.S. Forces Korea. As the Army looks toward 2030, subterranean medical operations will be vital for sustaining LSCO and MDO, ensuring survivability and operational success.

Villalobos, Roy D. "Underground Medicine—Experimentation of a Subterranean Role 2 Enhanced—629th Medical Company, Area Support 2025

To read the complete article, visit <https://www.jllis.mil/details/6967fd187059cb1c87ec7aa4>.



Sgt. 1st Class Bryan Rowland, 629th MCAS Treatment Platoon Sergeant, and Sgt. Martin Pelayo, 629th MCAS PAD, verify a patient's information and status.

The exercise demonstrated seamless collaboration among joint, external, and rotational medical units, including the 560th Medical Company, Ground Ambulance; 95th Medical Detachment, Blood Support; 563d Medical Logistics Company; and 135th Medical Detachment, Forward Resuscitative and Surgical. Reinforcements expanded the unit's capability to eight of ten doctrinal medical functions, showcasing the operational potential of Role 2 Enhanced capabilities in LSCO scenarios.

A major innovation was the assessment of the electromagnetic signature of the subterranean facility, conducted in collaboration with the 8th Army Electromagnetic Spectrum manager. This evaluation will inform



135th FRSD surgical team conducts notional operation on patient in the UGF.

### Product, Observation, or Question Submissions

AARs from deployments and training exercises are useful to the medical community of practice. If you have information to share with the community or have a question, please contact the MEDCoE LL Branch at [usarmy.jbsa.medical-coe.list.amedd-lessons-learned@army.mil](mailto:usarmy.jbsa.medical-coe.list.amedd-lessons-learned@army.mil). Additionally, Quick-Fire allows individuals to submit observations from their smart phones using the QR Code.





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### Combat Training Center (CTC) Observations

Every quarter the MEDCoE Lessons Learned Branch conducts a teleconference (TCO) with the four CTCs: Joint Readiness Training Center (JRTC), National Training Center (NTC), Joint Multinational Readiness Center (JMRC), and Mission Command Training Program (MCTP). During these conferences, CTC and MEDCoE representatives discuss the current observations from recent brigade combat team (BCT) rotations and division/corps exercises to pinpoint gaps and trends that the MEDCoE can address in developing DOTMLPF solutions to better support the operational force medically.

- 2QtrFY26 CTC TCO slides and at <https://www.jllis.mil/details/699df863da2f778ad27c57b4>.
- 1QtrFY26 CTC TCO slides are at <https://www.jllis.mil/details/692cb766d89579d7ab658cfa>.

### Helpful Information and Websites

**Clinical Practice Guidelines:** [https://jts.health.mil/index.cfm/PI\\_CPGs/cpgs](https://jts.health.mil/index.cfm/PI_CPGs/cpgs).

**Advanced Virtual Support Operational Forces (ADVISOR):** Call 833-238-7756.

**Global Teleconsultation Portal:** <https://gtp.health.mil/path/user/Login.jsp>.

**Army PA - Combat Medicine and Ready Medical Force Committee:** <https://medcoe.army.mil/ipap>.

**AHS Net:** <https://armyeitaas.sharepoint-mil.us/teams/AHSNET/SitePages/AHSNETHome.aspx>.

**68W Combat Medic Home Page:** <https://armyeitaas.sharepoint-mil.us/teams/68WCombatMedics>.

**Joint Trauma System website:** <https://jts.health.mil/>.

**Deployment Medicine:** <https://www.deployedmedicine.com/>.

**Borden Institute website:** <https://medcoe.army.mil/borden>.

**The Pulse of Army Medicine:** <https://www.lineofdeparture.army.mil/Journals/Pulse-of-Army-Medicine>.

**The Medical Messenger:** <https://www.coemed.org/resources/medicalmessenger>.

### Lessons Learned Websites

**MEDCoE Lessons Learned Webpage:** <https://armyeitaas.sharepoint-mil.us/teams/MEDCoELessonsLearnedRelease2/SitePages/CollabHome.aspx>.

**Joint Lessons Learned Information System (JLLIS):** <https://www.jllis.mil/>.

**Center for Army Lessons Learned (CALL):** <https://armyeitaas.sharepoint-mil.us/sites/TR-CAC-CACT-CALL>.

**Air Force Medical Service Lessons Learned:** <https://kx.health.mil/kj/kx9/AFMSL2/Pages/home.aspx>.

### MEDCoE Lessons Learned Team

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