Jolo Mass Casualty
Griffin Elzey, PJ/SOF Paramedic
May 10, 2019

Overview
- Situation
- Mission
- Capabilities
- Triage
- Patient Breakdowns
- Debrief Points

Situation
- Supporting Host Nation Military Operations
- 24/7 Alert Posture
  - 1 x RW aircraft on alert for Casevac (N+1)
  - 1 x RW aircraft on standby (N+4)
  - 1 x FW aircraft on standby (N+4)
**Capabilities**
- Former SOF Paramedics
- TCCC trained
- ACLS
- PHTLS
- PALS
- Hoist capable RW
- Whole blood
- Medical direction (24/7 call center)

**Mission**
- Provide fixed and rotary casevac/medivac capability to deployed American/Philippine troops and civilians

**Jolo Bombing**
- IED remotely detonated during church service
- Second blast detonated in parking lot with arrival of first responders
- Initial reports for dozens wounded/killed
Mission Drop

- 0838 Phone call advising us of situation
- 0901 Launch authority granted
- 0910 Helo 1 Launches for Jolo
- 0945 Enter hospital initiate patient triage

Triage

- Arrive to small emergency room on Island of Jolo, 1 mile from Church
- Lead doctor reports 16 People in hospital bay, one expectant/ing, no critical
- 15 Alert and seemingly well save
- 1 patient doctor is standing near, intubated/bagged, pallid, blood puddle
- Upon request for most critical pt, Dr. directed me to routine pt (because civilians were not allowed in mil hospital)
- keyed into Dr’s error
- Begin treating Pt.1

Patient 1 Upon Arrival

- M: Blast
- L: Multiple LL/LU leg shrapnel R/LQ shrapnel wound
- R: Unconscious/unresponsive
- HR: Extremely fast, forgot exact value
- BP: Barely Palpable Carotid
- RR: Bagged RR of 10
- ETCO2 Low 20’s
- Pallid and cool to the touch
- T: 98@900
- ET Tube
- Left/Right arm IV
**Patient 1 Treatment**

- Clear blood/blood sweep
- Slow active bleed found, tighten TQ
- Call for blankets, blood, blood warmer
- Administer 1G TXA
- Pack wound while waiting, cover with few available blankets
- Administer first unit of blood
- Express to doctor priority of patient, need for blankets

*Medics were then called to evacuate Pt. 2 and 3, Pt. 1 left with TCCC trained non-medic and doctor*

---

**Patient 2**

- M: Blast
- I: Right below knee amputation, Shrapnel to Right Upper Arm
- S: Mentation: AOx4
  - HR: 140
  - Strong Radial
  - Moderate pain before ketamine
- T: TQ APPX 0900
  - 2xIV, L&R Forearm
  - 1 unit of whole blood
  - 2 L NS
  - 1G ABX
  - 25mg ketamine

---

**Patient 3 (Handoff to Helo 2)**

- M: Blast
- I: 30% partial thickness burns to face, neck, arms, lower abd.
- S: Mentation: A&O
  - RR: 98
  - BP: Strong radial pulse
  - SPO2: 100% on room air
- T: Burns dressed w/dry, sterile dressing
  - 10 L leg
  - 25mg ketamine ID
Patient 1: Part 2

M: Blast
I: Multiple LL/LU leg shrapnel
RLQ shrapnel wound
S: Mentation: Unconscious/Unresponsive
HR: Extremely fast, forgot exact value
BP: Barely palpable Carotid
RR: Bagged RR of 10
ETCO2 Low 20’s
Pallid and cool to the touch

Tx Done By Philippines Medical Staff
Navy Corpsman/SARC
Civilian Medics

Patient Breakdown

<table>
<thead>
<tr>
<th>Aircraft</th>
<th>Trip 1</th>
<th>Trip 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helicopter 1</td>
<td>P1: Right below knee partial</td>
<td>P1: Multiple shrapnel wounds to</td>
</tr>
<tr>
<td></td>
<td>amputation</td>
<td>abdomen (RLQ), upper and lower</td>
</tr>
<tr>
<td></td>
<td>Shrapnel to Right Upper arm</td>
<td>Leg shrapnel.</td>
</tr>
<tr>
<td>Helicopter 2</td>
<td>P1: 30% partial thickness Burns</td>
<td>P1: Multiple shrapnel wounds to</td>
</tr>
<tr>
<td></td>
<td>face, neck, arms, hands</td>
<td>neck, abd, L leg, both feet, R arm</td>
</tr>
<tr>
<td>Fixed Wing</td>
<td>P6: Lower leg laceration</td>
<td>P6: TBI, possible skull fx R side,</td>
</tr>
<tr>
<td></td>
<td>P7: R Arm fx, R+L Leg Amnolgy</td>
<td>minor shrapnel wound R arm and</td>
</tr>
<tr>
<td></td>
<td>P8: Head laceration, right ankle wound</td>
<td></td>
</tr>
</tbody>
</table>

Outcome

- 20 Dead
- 102 Injured
- 9 Pickups via American aircraft
- Patient 1 Confirmed alive 30 days post blast
- Death toll did not rise
Debrief Points

▪ Expectations VS Outcomes
▪ HALO Effect (Title influence on judgement)
▪ TCCC For non-medics w/ proximity to potential operations

Acknowledgements

▪ Navy Corpsman/Special Amphibious Reconnaissance Corpsman (SARC)
▪ Philippine Army Medics
▪ Vighter Medical Group

Questions/Comments

Contact: Griffin.Elzey@gmail.com