

NATO STANDARD

AMedP-8.3

**TRAINING REQUIREMENTS FOR
HEALTH CARE PERSONNEL IN
INTERNATIONAL MISSIONS**

Edition A Version 1

JUNE 2013



NORTH ATLANTIC TREATY ORGANIZATION

ALLIED MEDICAL PUBLICATION

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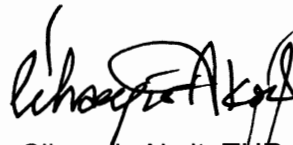
NORTH ATLANTIC TREATY ORGANIZATION (NATO)

NATO STANDARDIZATION AGENCY (NSA)

NATO LETTER OF PROMULGATION

14 June 2013

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CHAPTER 1 INTRODUCTION

1.1. BACKGROUND

Medical support to NATO forces must meet medical educational standards acceptable to all participating nations, as opposed to national support to national contingents, which requires purely national skill set acceptance. The aim is to provide an acceptable standard of medical training and education to be able to provide care and outcomes of treatment equating to best medical practice. NATO military operations are conducted as a multinational effort. This requires the nations to participate and use national medical capabilities (Medical Modules) efficiently and flexibly. Participation in multinational medical co-operation poses challenges due to differences between nations' Medical Education, Qualification, Skills Training and Allowance to Perform. Health Care Personnel need standardised individual medical predeployment training enabling them to increase their interoperability in a multinational medical environment in order to be able to participate.

1.2. AIM

The aim of this AMedP is to standardize the pre-deployment training requirements for Health Care Personnel, who will participate in multinational missions under military command.

1.3. SCOPE AND LIMITATIONS

1. Health Care Personnel shall at least have knowledge and skills corresponding to module 1 before departure on a multinational mission under military command. Ideally all modules of the training requirements for multinational Health Care Personnel should be completed before deployment.
2. Modules can be taken consecutively or at different times. If the participant has undergone equivalent training, participation in modules might be waived. Duration of the modules is indicative.

1.4. EVALUATION

For Health Care Personnel to be able to participate in a multinational medical facility, nations are encouraged to conduct Evaluation and Certification of their Health Care Personnel in accordance with AMedP-27 (Medical Evaluation Manual), as part of their pre-deployment training.

CHAPTER 2 GENERAL

2.1. PARTICIPANTS

Health Care Personnel, who will participate in multinational missions under military command.

2.2. CONTENTS AND DURATION

The contents and duration of the required training for health care personnel participating in international missions is divided into the following 9 modules:

a. **Required module for personnel without any or inadequate military training:**

Module 1 – Basic training for Health Care Personnel (80 – 96 hours)

b. **Additional modules:**

Module 1 – Basic training for Health Care Personnel (80 – 96 hours)

Module 2 – Traumatology training, General and Tactical, (two courses each, (24 – 40 hours))

Module 3 – Multinational Relations and Medical Ethics (16 – 24 hours)

Module 4 – Environmental Risk, Tropical and Diseases (40 hours)

Module 5 – Stress Management (16 hours)

Module 6 – Disaster Relief (32 – 40 hours)

Module 7 – Language

Module 8 – Current proficiency in primary health care issues.

Module 9 – Mission specific Module – Mission Orientated Training (8 – 16 hours)

CHAPTER 3 TRAINING MODULES

3.1. MODULE 1 – BASIC TRAINING FOR HEALTH CARE PERSONNEL

Module 1 - Basic training for health care personnel comprises the following:

- a. **Purpose:**
To provide the participants with a basic knowledge and understanding of the military environment, so that they will be able to:
 - (1) Protect themselves and patients in a military setting
 - (2) Perform the work of a health professional in a military setting

- b. **Recommended duration:**
80 – 96 hours.

- c. **Objectives:**
 - (1) The participants should be briefed on:
 - 1) The national military organisation and national military services
 - 2) NATO and UN structure
 - 3) Documentation in the national medical service
 - 4) Medical support during missions including medical planning
 - 5) Types of mines and mine danger
 - 6) Handling of weapons
 - 7) CBRN
 - 8) Force Health Protection
 - 9) Introduction to humanitarian law
 - 10) Medical Intelligence

 - (2) The participants should be able to:
 - 1) Protect themselves in a military environment (including CBRN-warfare)
 - 2) Use the personal military equipment
 - 3) Use standardised communication equipment

- d. **Comments:**
This module is the minimum requirement for civilian Health Care Personnel participating in multinational missions under military command.

3.2. MODULE 2 – TRAUMA SKILLS AND KNOWLEDGE

3.2.1. Module 2A – General trauma skills and knowledge

Module 2A – General trauma skills and knowledge comprises the following:

- a. **Purpose:**
To understand and be able to apply general trauma life support principles, according to profession (doctor, nurse or other Health Care Personnel). Pursuant AMedP-22 (Requirement for Military Acute Trauma Care Training), STANAG 2068 (Emergency War Surgery) and STANAG 2122 (Requirements for Training in First-Aid, Emergency Care in Combat Situations and Basic Hygiene for all Military Personnel).
- b. **Prerequisite:**
Previous training in Cardio-Pulmonary Resuscitation (CPR).
- c. **Recommended duration:**
80 – 96 hours.
- d. **Objectives:**
The participants should be trained to the level of:
 - (1) Advanced Trauma Life Support (ATLS[®]) curriculum or similar. (Ref. AMedP-22) (Applies for Medical Doctors)
 - (2) Trauma Nursing Care Course (TNCC[®]), Advanced Trauma Care for Nurses (ATCN[®]), Prehospital Trauma Life Support (PHTLS[®]) curriculum or similar. (Applies for nurses and or other Health Care Personnel)

3.2.2. Module 2B – Tactical trauma skills and knowledge

Module 2B - Tactical trauma skills and knowledge comprises the following:

- a. **Purpose:**
To apply previously acquired general trauma skills and knowledge to different tactical situations. Pursuant AMedP-22 (Requirement for Military Acute Trauma Care Training), AMedP-24 (Emergency Medical Care in the Operational Environment and STANAG 2122 (Requirements for Training in First-Aid, Emergency Care in Combat Situations and Basic Hygiene for all Military Personnel).
- b. **Prerequisite:**
Skills and knowledge equivalent to Module 2A.
- c. **Recommended duration:**
24 – 40 hours.
- d. **Objectives:**
The participants should:
 - (1) Learn how to apply general trauma skills and knowledge in a tactical scenario. Emphasis should be placed on practical teamwork. Pursuant STANAG 2122 (Requirements for Training in First-Aid, Emergency Care in Combat Situations and Basic Hygiene for all Military Personnel) general trauma skills and knowledge are to be applied in the following scenarios:
 - 1) Care under fire
 - 2) Tactical field care
 - 3) Combat casualty evacuation care
 - (2) Train extrication techniques for relevant vehicles

3.3. MODULE 3 – MULTINATIONAL RELATIONS AND MEDICAL ETHICS

Module 3 – Multinational relations and medical ethics comprises the following:

- a. **Purpose:**
To provide the participants a basic understanding of multinational politics and foreign affairs. Additionally, the course should give the participants the ability to identify and handle general and medical ethical problems during missions. Pursuant AJMedP-6 (Allied Joint Civil-Military Medical Interface Doctrine) and AMedP-16 (Comparative Tables of Medical Treatment Facilities).
- b. **Recommended duration:**
16 – 24 hours.
- c. **Objectives:**
The participants should have an overall understanding of:
 - (1) Current geopolitical situation
 - (2) The security policy and foreign affairs of the home country
 - (3) UN, NATO, EU, OSCE – tasks and decision making.
 - (4) International law with a focus on International Humanitarian law and international conventions
 - (5) Relations with to NGOs, IO's
 - (6) Rules of Engagement (ROE)
 - (7) General and medical ethical problems
 - (8) Differences in medical education. Ref. ANNEX A

3.4. MODULE 4 – ENVIRONMENTAL RISKS, TROPICAL AND EPIDEMIC DISEASES

Module 4 – Environmental risks, tropical and epidemic diseases comprises the following:

- a. **Purpose:**
To provide the participants with an overview and practical knowledge of environmental risks and the most common tropical and epidemic diseases. Pursuant AMedP-23 (National Military Strategies for Vaccination of NATO Forces), AMedP-24 (Emergency Medical Care in the Operational Environment), STANAG 2126 (First-Aid Dressings, First Aid Kits and Emergency Medical Care Kits), STANAG 2276 (Development of Medical Laboratory Network System for Rapid Pathogen Identification for Preventing and Managing a Biological Outbreak), STANAG 2277 (Development of a Health Surveillance System for the Identification Analysis and Dissemination of Information Related to a Biological Outbreak).
- b. **Recommended duration:**
40 hours.
- c. **Objectives:**
The participants should have an overall understanding of:
 - (1) General prevention of environmental risks, tropical and epidemic diseases
 - (2) The minimum medical equipment needed (WHO and NATO)
 - (3) Primary Health Care (PHC) in an austere environment
 - (4) Demography, epidemiology and management of tropical and epidemic diseases.

3.5. MODULE 5 – STRESS MANAGEMENT

Module 5 – Stress management comprises the following:

- a. **Purpose:**
To provide participants with basic knowledge and skills needed to manage psychological reactions to extreme stress/trauma. Pursuant AJP-3.10.1(A) (Allied Joint Doctrine For Psychological Operations) and AJMedP-3 (Allied Joint Doctrine For Medical Intelligence).
- b. **Recommended duration:**
16 hours.
- c. **Objectives:**
 - (1) The participants should be briefed on:
 - 1) Stress-reactions (somatic and psychological)
 - 2) The differences between psychological stress reactions and psychiatric disease
 - 3) Post traumatic stress disorder (PTSD)
 - 4) Management of victims of torture and sexual abuse
 - 5) Psychological casualties to Weapons of Mass Destruction
 - (2) The participants should be taught how to minimise stress, to recognize stress reactions and possibly prevent PTSD

3.6. MODULE 6 – DISASTER RELIEF

Module 6 – Disaster relief comprises the following:

- a. **Purpose:**
To prepare the participants to plan, organise or operate medical support for disaster relief operations. Pursuant AMedP-15 (Military Medical Support in Humanitarian and Disaster Relief) and STANAG 2879 (Principles of Medical Policy in the Management of a Mass Casualty Situation).
- b. **Recommended duration:**
32 - 40 hours.
- c. **Objectives:**
The participants should have:
 - (1) An understanding of possible disaster scenarios, natural or man made
 - (2) Knowledge about access to and utilization of medical intelligence
 - (3) An ability to identify important planning factors.
 - (4) An overall understanding of the co-operation with NGOs and local authorities.
 - (5) Knowledge of the organisation of medical support in disaster relief operations
 - (6) An understanding of public affairs

3.7. MODULE 7 – LANGUAGE

Module 7 – Language comprises the following:

- a. **Purpose:**
To assure that the participants have a language level according to STANAG 6001 (Language Proficiency Levels).
- b. **Recommended duration:**
Will be individual in accordance to level to be achieved.
- c. **Objectives:**
Participants should have language skills that enables them to perform their duties as Health Care Personnel in multinational units.

3.8. MODULE 8 – CURRENT PROFICIENCY IN PRIMARY HEALTH CARE ISSUES

Module 8 – Current proficiency in primary health care comprises the following:

- a. **Purpose:**
To enable non-Primary Health Care specialists to perform in Primary Health Care when required.
- b. **Recommended duration:**
Individual and in accordance with national recommendations.
- c. **Objectives:**
The participants should have an update in:
 - (1) Basic skills and knowledge of general practice and enable them to deliver Primary Health Care. (Applies for medical doctors)
 - (2) Basic skills and knowledge of general nursing and enable them to assists in the delivery of Primary Health Care. (Applies for nurses)
 - (3) Basic skills and knowledge in Primary Health Care. (Applies for all other Health Care Personnel)

3.9. MODULE 9 – MISSION ORIENTATED TRAINING

Module 9 – Mission orientated training comprises the following:

- a. **Purpose:**
To prepare the participants for a specific mission so they can perform Health Care effectively and safely.
- b. **Recommended duration:**
8 - 16 hours.
- c. **Objectives:**
The participants should:
 - (1) Have briefings on all relevant general and medical intelligence data
 - (2) Gain understanding of how topics from module 1 to 8 apply for their specific mission by receiving specific information for the planned mission
 - (3) As a team, be familiar with procedures and equipment
 - (4) Be briefed on command, control and communication (C3) for the specific mission
 - (5) Have information about lessons learned (when applicable)

CHAPTER 4 ABBREVIATIONS

4.1. ABBREVIATIONS

This List contains abbreviations used in this document as well as abbreviations needed in the evaluation process

AAP	Allied Administrative Publication
ACO	Allied Command Operations
ACT	Allied Command Transformation
AJP	Allied Joint Publication
AJMedP	Allied Joint Medical Publication
AMedP	Allied Medical Publication
CBRN	Chemical Biological Radiation and Nuclear
CCAST	Critical Care Aero medical Surgical Team
CJSOR	Combined Joint Statement of Requirement
CJTF	Combined Joint Task Force
COE	Centre of Excellence
CR	Combat Ready
DJTF	Deployable Joint Task Force
EU	European Union
IO	International Organisation
JFC / JC	Joint Force Command / Joint Command
LCR	Limited Combat Ready
LL	Lessons Learned
LN	Lead Nation
MC	Military Committee
MD	Medical Doctor
MEM	Medical Evaluation Manual
MET	Medical Evaluation Team
MHC WG	Military Health Care Working Group
MMU	Multinational Medical Unit
MN	Multi National
MOU	Memorandum of Understanding
MSO	Medical Support Officer / Medical Service corps Officer
NATO	North Atlantic Treaty Organisation
NCR	Not Combat Ready
NGO	Non Governmental Organisation
NRF	NATO Reaction Force
OSCE	Organization of Security and Co-Operation in Europe
PTSD	Post Traumatic Stress Disorder
SME	Subject Matter Expert
SOP	Standard Operational Procedure
STANAG	NATO Standardisation Agreement
TA	Technical Agreement

TCN	Troop Contributing Nation
TOA	Transfer of Authority
UN	United Nations
WHO	World Health Organisation

CHAPTER 5 REFERENCES

5.1. REFERENCE PUBLICATIONS

The following are the principal references used for this document:

- a. MC 0326/3 (NATO Principles and Policies of Medical Support)
- b. MC 0458/1 (The NATO Education, Training, Exercise and Evaluation Policy)
- c. MC 0551 (Medical Support Concept for NATO Response Force (NRF) Operations)
- d. ACO Directive (AD) 83-1 (Medical Support to Operations)
- e. ACT Directive 75-2 (Medical Joint Functional Area Training Guide)
- f. AAP-6 (NATO Glossary of Terms and Definitions)
- g. AAP-31 (NATO Glossary of Communication and Information Systems Terms and Definitions)
- h. AJP-3.10.1 (Allied Joint Doctrine For Psychological Operations)
- i. AJP-4.10 (Allied Joint Medical Support Doctrine)
- j. AJMedP-3 (Allied Joint Doctrine For Medical Intelligence)
- k. AJMedP-6 (Allied Joint Civil-Military Medical Interface Doctrine)
- l. AMedP-13 (NATO Glossary of Medical Terms and Definitions)
- m. AMedP-22 (Requirement for Military Acute Trauma Care Training)
- n. AMedP-23 (National military strategies for vaccination of NATO forces)
- o. AMedP-24 (Emergency Medical Care in the Operational Environment)
- p. AMedP-27 (Medical Evaluation Manual)
- q. ATrainP-1 (Education and Training for Peace Support Operations)
- r. STANAG 2068 (Emergency War Surgery)
- s. STANAG 2122 (Requirements for Training in First-Aid, Emergency Care in Combat Situations and Basic Hygiene for all Military Personnel)
- t. STANAG 2126 (First-Aid Dressings, First Aid Kits and Emergency Medical Care Kits)
- u. STANAG 2879 (Principles of Medical Policy in the Management of a Mass Casualty Situation)
- v. STANAG 6001 (Language Proficiency Levels)

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ANNEX A DIFFERENCES IN EDUCATION AND QUALIFICATIONS OF HEALTH CARE PERSONNEL
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A.1. AIM

To outline the existence of different educational backgrounds of the various health care professions of NATO & PfP countries in order to demonstrate the complexity of multinational medical cooperation in missions, and provide recommendations.

A.2. RATIONAL

There is a difference in terminology used for the various professions. For example, the name of a particular medical specialty may not alone provide a clear understanding of the actual responsibilities that a practitioner may have (surgeon, trauma surgeon).

Within some professions, there are many levels of qualification (physician, independent physician, general practitioner, family practitioner), not equivalent in different countries.

The duration of education for some of the same profession varies. For example the length of time for a nurse to qualify for licensure varies from three to four years. However, more significantly, the types of specialties and length of time to obtain a specialty vary widely.

The scope of practice in each profession also varies between nations. Scope of practice is defined as the tasks, responsibilities and allowance to perform associated with a certain profession.

A.3. RECOMMENDATIONS

If a Troop Contributing Nation (TCN) is providing a module to a multinational medical unit (e.g. ICU) it will be requested by using capabilities. By contributing some posts to a medical unit, it is important to know as much as possible about the educational and practical backgrounds of all clinical practitioners. There are obligations on the part of the requesting nations, the lead or framework nation, to make explicit the clinical skills and capabilities that are required. All parties should make transparent the clinical and practical backgrounds, skills and capabilities of the personnel they are providing, ideally by exchange of certificates.

Closely related nations are encouraged to prepare, as much as possible, bilateral agreements such that they are able to form a partnership in a multinational medical unit in a short notice.

ANNEX A APPENDIX 1 – KNOWLEDGE OF DIFFERENCES IN MEDICAL EDUCATION AND QUALIFICATIONS

A.A1.1. BELGIUM

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician (GP)	High school	7 years	None	Civilian Med. School
Family practitioner	Physician	+ 2 years (part-time)	Physician in unit	Civilian Med. School
Acute trauma care	Physician	+ 2 years (part-time)	Physician at role 1	Civilian Med. School
Occupational medicine	Physician	+4 years (part-time)	Preventive medicine	Civilian Med. School
Tropical diseases	Physician	+6 months (full time)	(As supplementary education)	Civilian Med. School
Sport medicine	Physician	+ 2years (part time)	(As supplementary education)	Civilian Med. School
Flight surgeon	Physician	+ 1 year (part time)		In BE or NATO Med school
Specialist (internal medicine, cardio, pneumo, endocrine, etc.) (1)	Physician	+5 years (full time)	Medical advisor (evaluation med) or physician at role 2/3	Civilian Med school
Specialist (orthopedics/ abdominal surgeon) (2)	Physician	+6 years (full time)	Medical advisor (evaluation med) or physician at role 2/3	Civilian med school
Specialist (Anesthetics) (3)	Physician	+ 5 years	Medical advisor (evaluation med) or physician at role 2/3	Civilian med school
Specialist (Subspecialty intensive care or E.R)	Physician +2 years (full time)	Medical advisor (evaluation med) or physician at role 2/3	Medical advisor (evaluation med) or physician at role 2/3	Civilian Med school
Other specialties	Physician	+4 or 5 years (full time)	Medical advisor (evaluation med)	Civilian Med. School
Veterinarian	High School	+6 years (full time)	Vet	Civilian school (university)
Pharmacist	High school	+5 years (full time)	Pharmacist	Civilian school (university)
Dentist	High school	+5 years (full time)	Dentist	Civilian school (university)
Psychologist	High school	+ 5 years (full time)	Clinical psychology	Civilian school (university)
Physiotherapist	High school	+4 years (full time)	Physiotherapy	Civilian school (university)
Nurse, general	High school	+3 years (full time)	Nurse resp. in med. Ward	Civilian nurse school
Nurse, psychiatry	General nurse	+ 1 year (full time)	Nurse resp. in psyc. Ward	Civilian nurse school

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Nurse, surgical	General nurse	+ 1 year (full time)	Nurse resp. in operative theatre	Civilian nurse school
Intensive care and emergency nurse	General nurse	+1 year (full time)	Nurse resp. in E.R. and I.C. units	Civilian nurse school
"Social nurse"	General nurse	+ 1 year (full time)	Nurse in preventive job	Civilian nurse school
Speechtherapist	High school	+ 3 years (full time)	Speech and hearing therapy	Civilian paramedical school
Orthoptist	High school	+ 3 years (full time)	Eye examination	Civilian paramedical school
Occupational therapist	High school	+ 3 years (full time)	Occupational retraining	Civilian paramedical school
Medical laboratory specialist	High school	+ 3 years (full time)	Laboratory analysis	Civilian paramedical school
Radiography technician	High school	+ 3 years (full time)	x-ray technician	Civilian paramedical school
Paramedic (ambulancier)	None	+ 3 month	Qualified first aid + med transport	Both military medical school and civilian emergency care
First aid auxiliary	None	+ 1 month	First aid + med transport	Military medical school
Lab auxiliary	None	+ 10 month	Simple methods	Military medical school
x-ray auxiliary	None	12 month	Assists technician	Military medical school
Surgical auxiliary	None	+ 10 month	Preparing operative theatre	Military medical school
Vet. Auxiliary	None	+ 10 month	Assists vet.	Military medical school
Pharmacist assistant	None	+ 10 month	Assists pharmacist	Military medical school
Dental auxiliary	None	+ 2 month	Assists dentist	Military medical school

N.B.:

- 6 years elementary school (6-12) +
- 6 years high school (12-18)

A.A1.2. BULGARIA

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician	High school	6 years in civilian Medical	Physician at medical unit (Role 1)	Authorised for independent work
Family practitioner (GP)	Physician	+ 3 years medical specialization	Physician or commander at Role 1	Authorised for independent work
Military Medical Planning	Physician	+ 3 years medical specialization	Commander at Role 2/3 Medical advisor at HQs Medical staff at HQs	Authorised for independent work
Military Preventive Medicine	Physician	+ 3 years medical specialization	PrevMed Facilities Medical staff at HQs	Authorised for independent work
Emergency medicine	Physician	+ 5 years medical specialization	Physician at Role 2/3/4 (Emergency Department)	Authorised for independent work
Surgeon (general)	Physician	+ 5 years medical specialization	Qualified physician at Role 2/3/4	Authorised for independent work
Surgeon (Orthopedics& Traumatology; Cardiac; Urology; Thoracic; Neurosurgery; Oral&Maxillo-Facial)	Physician	+ 5 years medical specialization	Qualified physician at Role 3/4	Authorised for independent work
Anesthesiologist	Physician	+ 4 years medical specialization	Qualified physician at Role 2/3/4	Authorised for independent work
Internal medicine	Physician	+ 5 years medical specialization	Qualified physician at Role 2/3/4	Authorised for independent work
Internal medicine subspecialties (gastroenterologist, pulmonologist, cardiologist etc.)	Physician	+ 4 years medical specialization	Qualified physician at Role 3/4	Authorised for independent work
Neurologist	Physician	+ 4 years medical specialization	Qualified physician at Role 3/4	Authorised for independent work
Psychiatrist	Physician	+ 4 years medical specialization	Qualified physician at Role 3/4	Authorised for independent work
Occupational medicine	Physician	+ 4 years medical specialization	PrevMed Facilities	Authorised for independent work
Infectious diseases	Physician	+ 4 years medical specialization	Qualified physician at Role 3/4	Authorised for independent work
Flight surgeon	Physician	+ 3 years medical specialization	Air Force Base MEDEVAC unit	Authorised for independent work
Laboratory physician	Physician	+ 4 years medical specialization	Qualified physician at Role 3/4	Authorised for independent work
Microbiologist	Physician	+ 4 years medical specialization	Qualified physician at Role 3/4	Authorised for independent work
Radiologist	Physician	+ 4 years medical specialization	Qualified physician at Role 3/4	Authorised for independent work
Physiotherapist	Physician	+ 4 years medical specialization	Qualified physician at Role 3/4	Authorised for independent work

Profession	Educational requirement	Duration of education	Working responsibility	Comment
ORL	Physician	+ 4 years medical specialization	Qualified physician at Role 3/4	Authorised for independent work
Ophthalmologist	Physician	+ 4 years medical specialization	Qualified physician at Role 3/4	Authorised for independent work
Veterinarian	High school	5 years in civilian Veterinary University	PrevMed Facilities	Authorised for independent work
Pharmacist	High school	5 years in civilian Medical University	Qualified position at Role 2/3/4 Medical staff at HQs	Authorised for independent work
Dentist	High school	6 years in civilian Medical University	Qualified position at Role 1 (some)/2/3/4	Authorised for independent work
Psychologist	High school	4 years in civilian University for bachelor's degree; + 2 years for master degree	Qualified position at Army Brigades; Air Force and Navy Base Department in Military Medical Academy	Authorised for independent work
Rehabilitation technician	High school	3 years in civilian Medical College	Role 3/4	
Nurse, general	High school	4 years in civilian Medical	Role 1/2/3/4	
Nurse, psychiatry	Nurse	+ 2 years medical specialization	Role 3/4	
Nurse, surgical	Nurse	+ 2 years medical specialization	Role 2/3/4	
Intensive care and emergency nurse	Nurse	+ 2 years medical specialization	Role 2/3/4	
Laboratory technician	High school	3 years in civilian Medical College	Role 2/3/4	
Radiology technician	High school	3 years in civilian Medical College	Role 2/3/4	
Pharmacist assistant	High school	4 years in civilian Medical College	Role 2/3/4	
Paramedic (ambulancier)	Primary school	680 hrs in civilian College	Transport and first aid	Since 2013 – no experience yet
Paramedic (assistant)	Primary school	960 hrs in civilian College	Transport, first aid and medical assistance	Since 2013 – no experience yet

A.A1.3. CANADA

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Bio-Science Officer – Deployable Health Hazards Team Leader	Master in Industrial Hygiene	5-6 yrs	Water, air, soil testing for contaminants, eg toxic industrial chemicals and materials, and chemical and biological agents	
Dental Technician	Graduate of an accredited Level II college program which deliver the 9 core skills required by the National Dental Assisting Examining Board.	1 yr	Provide chair-side assistance to the Dental Officer	Nine core skills are: <ul style="list-style-type: none"> - chairside - radiography - preliminary impressions - rubber dam - treatment liners - matrices & wedges - selective rubber cap polishing - oral hygiene instruction - dietary counselling - fluoride
Medical Technician	Primary Care Paramedic certification	4 months	Pre-hospital care	
Medical Laboratory Technologist	Grad of approved MLab Technology program in Canada. Also must be certified thru the Canadian Society for Medical Laboratory Science	2-3 yrs	Provides services in clinical chemistry, haematology, microbiology (including parasitology), blood banking, urinalysis & serology	
Nursing Officer: 1. Primary Care Nurse 2. Emergency Room Nurse 3. Mental Health Nurse	Baccalaureate in Nursing Baccalaureate in Nursing. Emergency Nursing Certification Baccalaureate in Nursing. Mental Health Nursing	4 yrs university 5 yrs 6 yrs	Beside nursing care. Triage. Immunization Triage and screening. Resuscitation using Trauma Nursing Core Course and Advanced Cardiac Life Support protocols. First responder Assessment with regard to repatriation. Work as part of multidisciplinary Mental	First responder includes Advanced First Aid skills. Multidisciplinary Mental Health team consists of Social Worker, Psychiatrist, Mental

Profession	Educational requirement	Duration of education	Working responsibility	Comment
4. Operating Room Nurse	Certification Baccalaureate in Nursing. Operating Room Nursing Certification	5 yrs	Health team. Short term intervention. Education in suicide prevention, stress management, etc Scrub & circulate during surgery. Provide nursing care in Recovery Room. Work in Central Processing & Sterilization area	Health Nurse and Padre.
Pharmacist	1 yr basic science courses. Pharmacy undergrad degree	5 yrs	Determine and ensure the proper use of medications, particularly to identify and prevent pharmacotherapeutic problems, and prepare, control and deliver medications in order to maintain or restore health. Provision of medical supply. Oversee maintenance of medical equipment. Blood transport.	
Social Worker	Master of Social Work degree	5 yrs university	Assessment with regard to repatriation. Work as part of multidisciplinary Mental Health team. Short term intervention. Education in suicide prevention, stress management, etc.	Multidisciplinary Mental Health team consists of Social Worker, Psychiatrist, Mental Health Nurse and Padre.
General Dental Officer	2 yrs university + Doctor of Dental Surgery or equivalent	6 yrs	General dental procedures	Minimum requirement is 2yrs university before entering Dental school. However, most have at least one undergrad degree.
Advanced General Dentist	Graduate of General Dentistry program + specialty program leading to Fellowship in the American Academy of General Dentistry	8 – 9 yrs	More advanced specialty dental procedures usually referred from General Dental Officer. Specialty treatment provided in the fields of oral surgery, prosthodontics, periodontics, endodontics, and orthodontics.	May challenge Fellowship exams a minimum of 1 yr following graduation from specialty program.
Oral Maxillo-Facial Surgeon	Graduate of General Dentistry program + specialty surgical program leading to Fellowship in the	10 yrs	Maxillo-facial surgery; facial reconstruction; ballistics; burns; implants	

Profession	Educational requirement	Duration of education	Working responsibility	Comment
	Royal College of Dentists of Canada			
Prosthodontist	Graduate from General Dentistry program + specialty program leading to Fellowship in the Royal College of Dentists of Canada	9 yrs	Advanced dental rehabilitation	
Periodontist	Graduate from General Dentistry program + specialty program leading to Fellowship in the Royal College of Dentists of Canada	9 yrs	Advanced hard and soft tissue dental procedures; implants	
Public Health Dentist	Graduate from General Dentistry program + specialty program leading to Fellowship in the Royal College of Dentists of Canada and Masters Degree	8 yrs	Provide input to dental care program and policies for the Canadian Forces	
General Duty Medical Officer	Undergraduate degree + Doctorate of Medicine (MD) + Family Medicine Residency	8 – 10 yrs	General family medicine	
General Surgeon	MD + General Surgical program leading to Fellowship in the Royal College of Surgeons of Canada	MD + 5 yrs	General surgery	May sub-specialize (eg Trauma, etc) leading to a Fellowship in the various subspecialty groups
Orthopaedic Surgeon	MD + Orthopaedics program leading to Fellowship in the Royal College of Surgeons of Canada	MD + 5 yrs	Orthopaedic surgery	May sub-specialize (eg Trauma, etc) leading to a Fellowship in the various subspecialty groups
Anaesthesiologist	MD + Anaesth program leading to Fellowship in the Royal College of Physicians of Canada	MD + 4 yrs	Anaesthesiology	
Internal Medicine	MD + Internal Medicine program leading to Fellowship in the	MD + 5yrs	General Internal Medicine	May sub-specialize (e.g. Infectious Disease, Gastroenterology, Cardiology, etc) leading

Profession	Educational requirement	Duration of education	Working responsibility	Comment
	Royal College of Physicians of Canada			to a Fellowship in the various subspecialty groups
Psychiatry	MD + Psychiatry program leading to Fellowship in the Royal College of Physicians of Canada	MD + 4 yrs	General psychiatry	
Radiology	MD + Radiology program leading to Fellowship in the Royal College of Physicians of Canada	MD + 4 yrs		May sub-specialize (e.g. Thoracics, Nuro, etc) leading to a Fellowship in the various subspecialty groups
Advanced Aerospace Medicine	MD + Aerospace Medicine course	MD + 2 yrs	Advise Chief of Air Staff on medical issues	
Advanced Diving Medicine	MD + Diving Medicine course	MD + 2 yrs	Advise Chief of Maritime Staff on medical issues	
Public Health	MD + Master in Public Health degree	MD + 2 yrs	Provide advice on Force Health Protection issues	
Medical Technologist - Operating Room	- Graduate of a Registered Practical Nurse (RPN) program from a college. Graduate of an Operating Room Tech Program followed by an On-Job-Training-Program (OJTP)	4-6 months 6 months 9 weeks	Provides services In the Operating Room as: - Scrub Tech - Circulating Tech - Anaesthesia assist - Sterilisation support - Equipment user maintenance	An RPN program is a college program of 24 months. However, because the military students on this course have already acquired many of the skills and much of the knowledge during their military service, these individuals take an abbreviated course and then challenge the licensing exams. The Operating Room course is also taken at a civilian college. The OJTP is provided in a military hospital.
Medical Radiation Technologist	Graduate of an accredited radiological school (college or university)	College – 3 yrs University – 4 yrs.	Carries out all radiological examinations & equipment testing (QA & QC)	By 2005, the standard for education will be a 4 yr university degree program.
Physician Assistant	Physician Assistant course	2 yrs	Limited diagnosis and treatment Able to perform in an independent role.	

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Preventive Medicine Technician	Graduate of Canadian secondary school system with credits in Math, Chemistry and Physics. Certifications required are: <ul style="list-style-type: none"> - Canadian Public Health Inspector - Occupational Health and Safety - Provincial Pest Control licences in structural, core, and fumigation 	Total of 1 year	Carries out all services related to public and occupational health and safety, including inspections & pest control.	The certification in Occupational Health and Safety is increased to the diploma level later in the Pmed Techs career.

A.A1.4. CZECH REPUBLIC

Profession	Educational requirement	Duration of education	Working responsibility	Comments
Physician	University degree	6 years	Under supervision at hospitals or with GP	Military Medical Academy / programme in general medicine
General practitioner physician	University degree	6 years + 2½ years (since 2004 + 4 years in hospital)	General practitioner	Military Medical Academy / programme in general medicine
Specialist	University degree	6 years+ 2½ years + up to 5 years (since 2004 + 4 years + up to 4 years advanced specialization)	Specialist	Military Medical Academy / programme in general medicine
Preventive Medicine Specialist	University degree	6 years+ 2½ years + up to 5 years (since 2004 + 4 years + up to 4 years)	Preventive medicine	Military Medical Academy / programme in general medicine
Pharmacist	University degree	5 years	Pharmacist	Military Medical Academy / programme in pharmacy
Veterinarian	University degree	5 years	Vet	Civilian university / programme in veterinarian medicine
Dentist	University degree	5 years	Dentist	Military Medical Academy

N.B.:

9 years of elementary school mandatory (6-15)

4 years of high school (15-19)

university degree

- Physician 6 years
- Veterinarian 5 years
- Dentist 5 years
- Pharmacist 5 years

Profession	Educational requirement	Duration of education	Working responsibility	Comments
Nurse, general	High school, nursing school / since 2004 only Bachelor degree	3-4 years	Nurse	Civilian nursing school or university + 3 – 10 months military course
Nurse, internal medicine profile	High school, nursing school / since 2004 only Bachelor degree	3-4 years + 1-2 years	Nurse in internal medicine branches	Civilian nursing school or university + 3 – 10 months military course + 1 - 2 years specialization training in postgraduate institute
Nurse, surgical profile	High school, nursing school / since 2004 only Bachelor degree	3-4 years + 1-2 years	Nurse in surgical branches	Civilian nursing school or university + 3 – 10 months military course + 1 - 2 years specialization training in postgraduate institute
Nurse, anaesthesiological profile	High school, nursing school / since 2004 only Bachelor degree	3-4 years + 1-2 years	Nurse at ICU,...	Civilian nursing school or university + 3 – 10 months military course + 1 - 2 years specialization training in postgraduate institute

Nursing 3-4 years bachelor level

First Aid and auxiliary

Profession	Educational requirement	Duration of education	Working responsibility	Comment
First aid auxiliary	None	6 weeks	First aid	Trained at military medical school
Rescuer	Bachelor	3 years	Rescue and related profiles	Trained at civilian school + 3 months military course

A.A1.5. DENMARK

All the below mentioned professions are educated at civilian university or civilian schools.

CIVILIAN EDUCATION

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician	University degree	6½ years	Under supervision at hospitals or with GP	Authorized as medical physician
Independent physician	University degree	6½ years + 1½ years	Without supervision can work independently	6 months intern medicine, 6 months surgery (with 3 months emergency care unit), 6 months with a GP. After these 1½ years physicians starts the education to become specialist
Specialist, general practitioner	University degree	6½ years + 1½ years + 5 years	General practitioner	As above + 12 months intern medicine 12 months surgery (6 months emergency care) 6 months gynaecology(obstretic 6 months psychiatry 6 months choose free 18 months assistant to GP
Specialist, anaesthesiology	University degree	6½ years+ 1½ years+5 years	Anaesthesiology	54 months anaesthesiology 6 months intern medicine
Specialist, surgeon	University degree	6½ years+1½ years+6½ years	Surgeon	Difference in length and curriculum dependent what kind of surgeon
Veterinarian	University degree	5½ years	Vet	
Dentist	University degree	5 years	Dentist	
Nurse, general	High school, nurse school	3½ years	Nurse resp. in med. Wards and gerontology	
Nurse, anaesthesiology	High school, nurse school	3½ years + 1½ years	Nurse resp. in operative theatre and i.c	Entry requirement: 2 years experience as qualified nurse in hospital dept.'s and 6 months in a department of anaesthesia
Nurse, intensive care	High school, nurse school	3½ years + 1½ years	Nurse resp. in E.R and I.C. units	Entry requirement: 2 years experience as qualified nurse in hospital dept.'s and 6 month in an intensive care dept.
Nurse, psychiatry	High school, nurse school	3½ years + 1 year	Nurse resp. in psych wards	Entry requirements: 2 years experience as qualified nurse in hospital dept.'s and 6

Profession	Educational requirement	Duration of education	Working responsibility	Comment
				months in psychiatry ward
Nurse, surgery	High school, nurse school	3½ years + 1½ years	Nurse resp. in operative theatre	Entry requirement: 2 years experience as qualified nurse in hospital dept.'s and 6 month in surgery
Nurse, infection control nurse	High school, nurse school	3½ years + 3 months	Nurse resp. in preventive and hygiene	Entry requirement: 3 years as qualified nurse including teaching and administrative experience

N.B.:

9 years of elementary school mandatory (6-15)

3 years of high school (15-18)

university degree

- Physician 6½ years
- Veterinarian 5½ years
- Dentist 5 years

Nursing school 3½ years

First aid auxiliary 3 month – 3 years

MILITARY EDUCATION

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician	Civilian as above + military medical school	5 months	Work under supervision, physician in a unit and at role 1	
Independent physician	Civilian as above + military medical school	5 months	Without supervision, role 2	Staff course 8 months
GP	Civilian as above + military medical school	5 months	Medical advisor, senior medical officer, role 2/3	General staff course 1 year
Anaesthesiologist	Civilian as above + military medical school	5 months	Medical advisor, senior medical officer, role 2-3-4	General staff course 1 year
Veterinarian	Civilian as above + military medical school	2 weeks	Vet	
Dentist	Civilian as above + military medical school	3 months	Dentist	
Nurse	Civilian as above + military medical school	2 weeks	Under supervision of medical officer, not allowed to work independently	
First aid auxiliary	None +	3 months	First aid	Trained at military medical school
First aid auxiliary, level 2	None	1 year	First aid, med. Trp., assistant role 2	Trained at military medical school and at civilian hospital
First aid auxiliary, level 3	None	2 years	First aid, med. Trp. Assistant role 3	Trained at military medical school and at civilian hospital

A.A1.6. ESTONIA (INTENTIONALLY BLANK)

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician (GP)				
Family practitioner				
Acute trauma care				
Occupational medicine				
Tropical diseases				
Sport medicine				
Flight surgeon				
Specialist (internal medicine, cardio, pneumo, endocrine, etc.) (1)				
Specialist (orthopedics/ abdominal surgeon) (2)				
Specialist (Anesthetics) (3)				
Specialist (Subspecialty intensive care or E.R)				
Other specialties				
Veterinarian				
Pharmacist				
Dentist				
Psychologist				
Physiotherapist				
Nurse, general				
Nurse, psychiatry				
Nurse, surgical				
Intensive care and emergency nurse				
"Social nurse"				
Speechtherapist				

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Orthoptist				
Occupational therapist				
Medical laboratory specialist				
Radiography technician				
Paramedic (ambulancier)				
First aid auxiliary				
Lab auxiliary				
x-ray auxiliary				
Surgical auxiliary				
Vet. Auxiliary				
Pharmacist assistant				
Dental auxiliary				

A.A1.7. FRANCE

CIVILIAN EDUCATION

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Independent physician = general practitioner	University degree	9 years	Without supervision can work independently	Including 6 months intern medicine, 6 months emergency care unit, 6 months gynaeco-pediatric, 6 months with a GP.
Specialist anesthesiology-reanimation or for emergency or for general surgery or specialized surgery (neuro-surgery excepted)	University degree	11 years	According to the speciality	Including 10 periods of 6 months in the speciality.
Specialist for neuro-surgery	University degree	12 years	According to the speciality	Including 12 periods of 6 months in the speciality.
Veterinarian	State school degree	6 years	Veterinarian	
Dentist	University degree	5 years	Dentist	
Nurse, general	High school, nurse school	3½ years	Nurse resp. in med.	
Nurse, anesthesiology or intensive care	High school, nurse school	3½ years + 2 years	Nurse resp. in operative theatre and i.c	
Nurse, surgery	High school, nurse school	3½ years + 2 years	Nurse resp. in operative theatre	
Nurse assistant	High school, nurse assistant school	1 year	Assistance of medical officers or nurses	

N.B.:

9 years of elementary school mandatory (6-15)

3 years of high school (15-18)

university degree

- Physician 9 years
- Veterinarian 6 years
- Dentist 5 years

Nursing school 3½ years, Nurse assistant 1 year

MILITARY EDUCATION

Profession	Educational requirement	Duration of education	Working responsibility	Comment
All medical officers	Civilian as above + military medical school	Included in the qualification course	According to the qualification	Trained at military school
Veterinarian	Civilian as above + military medical school	1 year	Veterinarian	Trained at military school
Dentist	Civilian as above + military medical school	Included in the qualification course	Dentist	Trained at military school
Nurse, general or anesthesiology or intensive care or surgery	Civilian as above + military medical school	1 ½ - 2 years	Under supervision of medical officer, not allowed to work independently	Trained at military school
Nurse assistant	Civilian as above + military medical school	1 ½ year	Under supervision of medical officer or nurse	Trained at military school

A.A1.8. GERMANY

All the below mentioned professions are educated at civilian universities or civilian schools, except Paramedics and Nurses (general), who also may be educated/trained at schools attached to Military Hospitals or the GE Military Medical Academy

Profession	Educational requirement	Duration of education	Working responsibility	Comment
General practitioner (GP)/ Internal medicine	Physician	+ 5 years (full-time)	without supervision Physician in unit Physician at role 1	36 month internal medicine, 24 month with a GP 80 h Course "Psychosomatic"
Internal medicine (Cardiologist, Gastro-enterologist, Pneumologist)	Physician	+ 6 years (full-time)	Physician at role 2/3	36 month internal medicine, 36 month cardiology, gastro-enterology or pneumology (incl. 6 month intensive care)
Surgeon (general)	Physician	+ 6 years (full-time)	Physician at role 2/3	24 month basic surgical education, 48 month special surgical education
Surgeon (orthopedics and traumatology)	Physician	+ 6 years (full-time)	Physician at role 2/3	24 month basic surgical education, 48 month orthopedics and traumatology
Anaesthesiologist	Physician	+ 5 years (full-time)	Physician at role 2/3	48 month anaesthesiologie, 12 month intensive care
Occupational medicine	Physician	+5 years (full time)	Preventive medicine	24 month internal medicine, 36 occupational medicine
Other Specialists	Physician	+ 5 - 6 years (full time)	Physician at role 2/3	60 - 72 month special education
Intensive care	Specialist (GP, Internal Medicine, Surgeon, Anästhesiologist, Pediatric, Neurologist)	+ 2 years (full-time)	Physician at role 2/3	
Tropical diseases	Specialist	+24 month (fulltime) + 3 month theoretical training course	Supplementary education	Civilian and military medical school
Sport medicine	Specialist	+ 1 year (fulltime) + 240 h theoretical training course	Supplementary education	Civilian and military medical school
Flight surgeon	Specialist (GP, Internal Medicine, Occupational Medicine)	+ 6 month (part time) + 180 h theoretical training course	Physician in unit	Flight medical school
Veterinarian	University degree	5 1/2 years (full time)	Veterinarian	Civilian university
Pharmacist	University degree	5 years (full time)	Pharmacist	Civilian university
Dentist	University degree	5 1/2 years (full time)	Dentist	Civilian university

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Psychologist	University degree	4 years (full time)	Clinical psychology	Civilian university
Nurse, general	High School	+ 3 years (full time)	Nurse resp. in med. Ward	Civilian nurse school Military medical school
Nurse, surgical	General nurse	+ 2 year (full time)	Nurse resp. in operative theatre	Civilian nurse school
Nurse, Intensive care and emergency	General nurse	+ 2 year (full time)	Nurse resp. in E.R. and I.C. units	Civilian nurse school
Paramedic	Primary School	+ 2 years (full time)	First aid	Civilian school Military medical school
Pharmacie technician	High School	+ 3 years (full time)		
Veterinarian Assistant	High School	+ 3 years (full time)		
Medical technician for functional diagnostics	High School	+ 3 years (full time)		
Medical radiology technician	High School	+ 3 years (full time)	x-ray technician	Civilian paramedical school
Medical laboratory technician	High School	+ 3 years (full time)	Laboratory analysis	Civilian paramedical school
Public health technician	High School	+ 2 years (full time)	Preventive medicine	
Physiotherapist	High School	+ 3 years (full time)		
Biological technician	High School	+ 2 years (full time)		
Chemical technician	High School	+ 2 years (full time)		
Nursing assistant	Primary School	+ 3 years (full time)		
Medical dental technician	Primary School	+ 3 years (full time)		

ADDITIONAL MILITARY EDUCATION (without basic military training = 3 month)

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Medical Officer	Civilian as above	+ 7 weeks		Military Medical Academy
		+ 3 month		"Führungsakademie der Bundeswehr" (Commanded General Staff College)
NCO	Civilian as above	3 month		Military Medical Academy

N.B.:

- 9 years elementary school mandatory(6-15)
- 4 years elementary school (6-10) + 9 years high school (10-19)

- university degree

- Physician 6 years
- Dentist 5 1/2 years
- Pharmacist 5 years
- Veterinarian 5 1/2 years

A.A1.9. GREECE (INTENTIONALLY BLANK)

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician (GP)				
Family practitioner				
Acute trauma care				
Occupational medicine				
Tropical diseases				
Sport medicine				
Flight surgeon				
Specialist (internal medicine, cardio, pneumo, endocrine, etc.) (1)				
Specialist (orthopedics/ abdominal surgeon) (2)				
Specialist (Anesthetics) (3)				
Specialist (Subspecialty intensive care or E.R)				
Other specialties				
Veterinarian				
Pharmacist				
Dentist				
Psychologist				
Physiotherapist				
Nurse, general				
Nurse, psychiatry				
Nurse, surgical				
Intensive care and emergency nurse				
"Social nurse"				
Speechtherapist				

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Orthoptist				
Occupational therapist				
Medical laboratory specialist				
Radiography technician				
Paramedic (ambulancier)				
First aid auxiliary				
Lab auxiliary				
x-ray auxiliary				
Surgical auxiliary				
Vet. Auxiliary				
Pharmacist assistant				
Dental auxiliary				

A.A1.10. HUNGARY

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician (medical doctor)	High school	6 years in civilian Medical University	Not authorised for independent work	Joining army: medical officer
Specialist in Military and Disaster Medicine	Physician	+ 5 years postgraduate training	Physician or commander at ROLE-1, ROLE-2	Authorised for independent work
Flight surgeon	Physician	+ 4 years postgraduate training	Physician or commander at ROLE-1, ROLE-2 of Air Force	Authorised for independent work
Specialist on Occupational Medicine	Physician	+ 4 years postgraduate training	Physician at ROLE-1, ROLE-2	Authorised for independent work. For commanding position must get specialisation on the Military and Disaster medicine (secondary residency)
Family practitioner	Physician	+ 5 years postgraduate training	Physician at ROLE-1, ROLE-2	Authorised for independent work. For commanding position must get specialisation on the Military and Disaster medicine
Specialist in internal diseases	Physician	+ 5 years postgraduate training	Qualified physician at ROLE-2, ROLE-3, ROLE-4	Authorised for independent work. For commanding position must get specialisation on the Military and Disaster medicine
Specialist in anaesthesiology and intensive therapy	Physician	+ 5 years postgraduate training	Qualified physician at ROLE-2, ROLE-3, ROLE-4	Authorised for independent work.
Specialist in general surgery	Physician	+ 5 years postgraduate training	Qualified physician at ROLE-2, ROLE-3, ROLE-4	Authorised for independent work. For commanding position must get specialisation on the Military and Disaster medicine
Specialist in traumatology	Physician	+ 5 years postgraduate training	Qualified physician at ROLE-2, ROLE-3, ROLE-4	Authorised for independent work.
Specialist in neurology	Physician	+ 5 years postgraduate training	Qualified physician at ROLE-2, ROLE-3, ROLE-4	Authorised for independent work.
Specialist in psychiatry	Physician	+ 5 years postgraduate training	Qualified physician at ROLE-2, ROLE-3, ROLE-4	Authorised for independent work.

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Specialist on urology	Physician	+ 5 years postgraduate training	Qualified physician at ROLE-3, ROLE-4	Authorised for independent work.
Specialist in ORL	Physician	+ 5 years postgraduate training	Qualified physician at ROLE-3, ROLE-4	Authorised for independent work.
Specialist in dermatovenerology	Physician	+ 5 years postgraduate training	Qualified physician at ROLE-3, ROLE-4	Authorised for independent work.
Specialist on rehabilitation of locomotion disorders	Physician	+ 5 years postgraduate training	Qualified physician at ROLE-4	Authorised for independent work.
Specialist in ophthalmology	Physician	+ 5 years postgraduate training	Qualified physician at ROLE-3, ROLE-4	Authorised for independent work.
Specialist on radiology	Physician	+ 5 years postgraduate training	Qualified physician at ROLE-2, ROLE-3, ROLE-4	Authorised for independent work.
Medical laboratory specialist	Physician	+ 5 years postgraduate training	Qualified physician at ROLE-2, ROLE-3, ROLE-4	Authorised for independent work.
Specialist in one of the following areas "internal type": cardiology, haematology, gastroenterology, infectious diseases, nephrology	Physician + qualification during primary residency	+ 2-3 years postgraduate training	Qualified, specialised physician at ROLE-3, ROLE-4	Authorised for independent work.
Specialist in one of the following areas "surgery type": vascular surgeon, cardiac surgeon, neuro-traumatology, facial surgery, plactical-surgery	Physician + qualification during primary residency	+ 2-3 years postgraduate training	Qualified, specialised physician at ROLE-3, ROLE-4	Authorised for independent work.
Dentist	High school	+ 5 years civilian Medical University (Dental Faculty)	Dentist at ROLE-1, ROLE-2, ROLE-3, ROLE-4	Authorised for independent work In the army: Medical Officer
Pharmacist	High school	+ 5 years civilian Medical University	Pharmacist at ROLE-2, ROLE-3, ROLE-4	Authorised for independent work

Profession	Educational requirement	Duration of education	Working responsibility	Comment
		(Faculty of Pharmacy)		In the army: Medical Officer
Psychologist	High school	+ 5 years studies in University	Psychologist at troops, or at medical units (ROLE-1, ROLE-2, ROLE-3, ROLE-4)	Authorised for independent work In the army: Psychologist Officer
Veterinarian	High school	+ 5 years studies in Veterinarian University	Veterinarian at ROLE-2, ROLE-4)	Authorised for independent work n the army: Veterinarian Officer
Nurses	High school	3 years special medical studies during education in the High School	Nurse general	In the army: Medical NCO
	Nurse general	1-2 year courses	Nurse, assistant specialised	In the army: Medical NCO
	Nurse general	+ 4 years Medical Institute	Specialised nurse or leader	In the army: Medical Service Officer
Paramedic	High school	Special courses up to 1 year	Fist aid, transportation, evacuation of casualties	In the army: Medical soldier up to NCO

A.A1.11. ITALY (INTENTIONALLY BLANK)

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician (GP)				
Family practitioner				
Acute trauma care				
Occupational medicine				
Tropical diseases				
Sport medicine				
Flight surgeon				
Specialist (internal medicine, cardio, pneumo, endocrine, etc.) (1)				
Specialist (orthopedics/ abdominal surgeon) (2)				
Specialist (Anesthetics) (3)				
Specialist (Subspecialty intensive care or E.R)				
Other specialties				
Veterinarian				
Pharmacist				
Dentist				
Psychologist				
Physiotherapist				
Nurse, general				
Nurse, psychiatry				
Nurse, surgical				
Intensive care and emergency nurse				
"Social nurse"				
Speechtherapist				

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Orthoptist				
Occupational therapist				
Medical laboratory specialist				
Radiography technician				
Paramedic (ambulancier)				
First aid auxiliary				
Lab auxiliary				
x-ray auxiliary				
Surgical auxiliary				
Vet. Auxiliary				
Pharmacist assistant				
Dental auxiliary				

A.A1.12. LATVIA (INTENTIONALLY BLANK)

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician (GP)				
Family practitioner				
Acute trauma care				
Occupational medicine				
Tropical diseases				
Sport medicine				
Flight surgeon				
Specialist (internal medicine, cardio, pneumo, endocrine, etc.) (1)				
Specialist (orthopedics/ abdominal surgeon) (2)				
Specialist (Anesthetics) (3)				
Specialist (Subspecialty intensive care or E.R)				
Other specialties				
Veterinarian				
Pharmacist				
Dentist				
Psychologist				
Physiotherapist				
Nurse, general				
Nurse, psychiatry				
Nurse, surgical				
Intensive care and emergency nurse				
"Social nurse"				
Speechtherapist				

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Orthoptist				
Occupational therapist				
Medical laboratory specialist				
Radiography technician				
Paramedic (ambulancier)				
First aid auxiliary				
Lab auxiliary				
x-ray auxiliary				
Surgical auxiliary				
Vet. Auxiliary				
Pharmacist assistant				
Dental auxiliary				

A.A1.13. LITHUANIA

PROFESSION, EDUCATION, QUALIFICATION AND RESPONSIBILITY
CIVILIAN EDUCATION

Profession	Educational requirement	Duration of education	Working responsibility	Comments
Medical doctor (physician)	High school	6 years university studies	No practical work	University diploma only (no qualification certificate nor license for medical practice)
Medical doctor (general practitioner)	University degree	6 years university studies + 1 year primary residentship (3 months in internal medicine, 3 months in general surgery, 3 months in paediatrics and 2 month obstetrics/gynaecology)	Primary care independently at ambulance service or hospital admission room and under supervision at hospitals or with GP	Authorized as medical doctor (physician) for primary care (license for primary care (valid 5 years)) After this education doctor could start specialist education
Specialist, family practitioner	Medical doctor (general practitioner)	+ 2 years secondary residentship (family medicine – 10,5 months, paediatrics – 3,5 months, internal diseases – 4 months, surgery – 2 months, other (eye, ENT diseases, neurology, obstetrics/gynaecology) – 3 months.	Family practitioner	Licence for family medicine practice (valid 5 years)
Specialist, internal diseases	Medical doctor (general practitioner)	+ 5 years secondary residentship	Internal diseases specialist (hospitals)	Licence for internal disease practice (valid 5 years)
Specialist in one of the following area (conservative medicine): allergology, occupational medicine, dermatology, endocrinology, gastroenterology, geriatrics, haematology, infectious diseases,	Medical doctor (general practitioner)	+ 4 years secondary residentship (2 years basic internal diseases studies and 2 years specialised studies)	Specialist (consultant)	Licence for specialised practice (valid 5 years)

Profession	Educational requirement	Duration of education	Working responsibility	Comments
cardiology, nephrology, oncology-chemotherapy, oncology – radiotherapy, pulmonology, rheumatology,				
Specialist, physical medicine and rehabilitation	Medical doctor (general practitioner)	+ 3 years secondary residentship	Physical medicine and rehabilitation specialist	Licence for physical medicine and rehabilitation practice (valid 5 years)
Specialist, sports medicine	Medical doctor (general practitioner)	+ 3 years secondary residentship	Sports medicine specialist	Licence for sports medicine practice (valid 5 years)
Specialist, clinical toxicology	Medical doctor (general practitioner)	+ 3 years secondary residentship (2 years basic internal diseases studies and 1 year specialised studies)	Specialist in clinical toxicology (consultant)	Licence for clinical toxicology practice (valid 5 years)
Specialist, neurology	Medical doctor (general practitioner)	+ 4 years secondary residentship (1 year basic internal diseases studies and 3 year specialised studies in neurology)	Neurologist (consultant)	Licence for neurological practice (valid 5 years)
Specialist, laboratory diagnostics	Medical doctor (general practitioner)	+ 4 years secondary resident ship	Specialist laboratory diagnostics	Licence for laboratory diagnostics practice (valid 5 years)
Specialist, ophthalmology	Medical doctor (general practitioner)	+ 3 years secondary resident ship	Eye diseases specialist	Licence for eye disease practice (valid 5 years)
Specialist, ENT diseases	Medical doctor (general practitioner)	+ 3 years secondary resident ship	ENT diseases specialist	Licence for ENT disease practice (valid 5 years)
Specialist, general surgery	Medical doctor (general practitioner)	+ 5 years secondary resident ship in general surgery	General surgeon	Licence for general surgery practice (valid 5 years)
Specialist, vascular surgery	Medical doctor (general practitioner)	+5,1 years secondary residentship (2 years general surgery, 3 years vascular surgery, 1 month endovascular surgery)	Vascular surgeon	Licence for vascular surgery practice (valid 5 years)
Specialist,	Medical doctor	+ 5 years	Neurosurgeon	Licence for neurosurgery

Profession	Educational requirement	Duration of education	Working responsibility	Comments
neurosurgery	(general practitioner)	secondary residentship in general surgery +3 years tertiary residentship – specialised studies in neurosurgery		practice (valid 5 years)
Specialist, orthopaedics traumatology	Medical doctor (general practitioner)	+ 5 years secondary residentship in orthopaedics traumatology	Orthopaedics traumatologist	Licence for orthopaedics traumatology practice (valid 5 years)
Specialist, heart surgery	Medical doctor (general practitioner)	+5 years secondary residentship (2 years general surgery, 3 years heart surgery)	Heart surgeon	Licence for heart surgery practice (valid 5 years)
Specialist, urology	Medical doctor (general practitioner)	+5 years secondary residentship (2 years general surgery, 3 years urology)	Urologist	Licence for urology practice (valid 5 years)
Specialist, paediatrics surgery	Medical doctor (general practitioner)	+5 years secondary residentship (2 years general surgery, 3 paediatrics surgery)	Paediatrics surgeon	Licence for paediatrics surgery practice (valid 5 years)
Specialist, conservative paediatrics	Medical doctor (general practitioner)	+4-6 years secondary-tertiary residentship	Paediatrician (specialist, consultant)	Licence for paediatrics practice (valid 5 years)
Specialist, obstetrics/gynaecology	Medical doctor (general practitioner)	+4 years secondary residentship	Obstetrician/gynaecologist	Licence for obstetrics/gynaecology practice (valid 5 years)
Specialist, anaesthesiology – intensive care	Medical doctor (general practitioner)	+4 years secondary residentship	Anaesthesiology – intensive care specialist	Licence for anaesthesiology – intensive care practice (valid 5 years)
Dentist	High school	5 years of university studies	No practical work	University diploma only (no qualification certificate nor license for medical practice)
General practice dentist	University degree	5 years + primary residentship – 1 years	Primary care dentist – independent work	License for general dentistry (valid for 5 years)
Dentist, specialist	General practice dentist	+ secondary residentship 3 years	Dentist specialist (endodontology, periodontology, pediatrics dentistry, maxillo-facial surgeons, oral surgeons, orthodontology,	License for specialised dental practice (valid for 5 years)

Profession	Educational requirement	Duration of education	Working responsibility	Comments
			orthopaedics)	
Pharmacist	High school	5 years of university studies	Pharmacist	
Psychologist	High school	5 years of university studies	Psychologist	
Veterinarian	High school	5 years of university studies	Veterinarian	
Nurse, obstetrics	High school	3½ years nurse school	Nurse resp. in obstetrics ward	
Nurse, general	High school	3½ years nurse school	Nurse resp. in med. ward and outpatient department	
Nurse, biomedical diagnostics	High school	3 years nurse school		
Oral hygienist	High school	3 years nurse school	Oral hygienist	
Ergo therapist	High school	3 years nurse school	Ergo therapist	
Dentist's assistant	High school	3 years nurse school	Dentist's assistant	
Nurse, anaesthesiology and intensive care	High school	3½ years nurse school + ½ years special studies	Nurse resp. in operative theatre and I.C. units	
Nurse, psychiatry	High school	3½ years nurse school	Nurse resp. in psych wards	
"Social nurse"	High school	3 years nurse school	Nurse in social and preventive work	
Nurse with university education	Nurse + 2 years of practice	4 years university studies	Nurse (manager, chief nurse)	
Paramedic (planned from 2004)	High school + nurse school	27 weeks	Paramedic (specialist in prehospital care, assistant to doctor or nurse)	Advanced first aid and transportation, in emergency situations allowed to perform invasive procedures (e.g. injections) without doctor's or nurse's supervision

All specialities mentioned above are educated at civilian universities and schools.

N.B.:

4 years of elementary school (6-9)

5 years of basic school (10-15)

3 years of high school (16-18)

University degree: Physician - 6 years, dentist - 5 years

Nursing school: 3-3½ years

MILITARY EDUCATION

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Medical	Civilian as	6 month	Reserve military medical	This doctor should

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doctor (physician)	above + military medical school		doctor (no working responsibility)	continue civilian education (residentship) to become a family practitioner or specialist
Medical doctor (general practitioner)	Civilian as above + military medical school	6 months	Military medical doctor with supervision, role 1	This doctor could continue civilian education (residentship) to become a family practitioner or specialist
Specialist, family practitioner	Civilian as above + military medical school	2-6 months	As civilian license + military medical doctor, role 1, infirmary	Most of doctors in military
Specialist (various)	Civilian as above+ military medical school	2-6 months	As civilian license + military medical doctor, role 2/3, medical center	
Dentist	Civilian as above + military medical school	2-6 months	As civilian license + military medical doctor, role 1/2/3, infirmary, medical center	
Nurse	Civilian as above + military medical school	2 weeks	Military medical doctor assistant (could work independently)	
Paramedic	High education+ military medical school	12 weeks	Paramedic (specialist in prehospital care, assistant to doctor or nurse)	Planned to change program IAW civilian training program and add military medical thing

In Lithuania there are 2 directions of doctors career in military. First – as specialists - more attention to civilian training and sustaining of skills, second – staff doctors (administrators) – little or no practical work, more attention to administrative skills, management (medical platoon leader course, battalion staff doctor course, brigade staff doctor course, other medical planning course)

A.A1.14. THE NETHERLANDS

CIVILIAN EDUCATION

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Independent physician = general practitioner	University degree	6 years, 4 years in med school and 2 years internship	Without supervision can work independently	
Independent Family physician	University degree	6 years and additional 3 years training	Without supervision can work independently	Family physician is a med specialist
Specialist anesthesiology-reanimation or for emergency or for general surgery or specialized surgery (neuro-surgery excepted)	University degree	6 years and additional 3- 6 years training depending on profession: General Surgeon: 6 years Anesthetist: 3 years	According to the speciality	Including 10 periods of 6 months in the speciality.
Specialist for neuro-surgery	University degree	6 + 6 years	According to the speciality	
Veterinarian	State school degree	6 years	Veterinarian	
Dentist	University degree	5 years	Dentist	
Nurse, general	High school, nurse school	3½ years	Nurse resp. in med.	
Nurse, anesthesiology or intensive care	High school, nurse school	3½ years + 2 years	Nurse resp. in operative theatre and i.c	
Nurse, surgery	High school, nurse school	3½ years + 2 years	Nurse resp. in operative theatre	
Nurse assistant	High school, nurse assistant school	1 year	Assistance of medical officers or nurses	

N.B.:

6 years of elementary school mandatory (6-12)

6 years of high school (12-18)

university degree

- Physician 6 years
- Veterinarian 6 years
- Dentist 5 years

Nursing school 3½ years, Nurse assistant 1 year

MILITARY EDUCATION

Profession	Educational requirement	Duration of education	Working responsibility	Comment
All mil general practitioners	Civilian as above + military medical school	Included in the qualification course, 2 years additional to civ education	According to the qualification	Trained at military school With short term attachements to operational units
Veterinarian			Veterinarian	There are no regular veterinarians in NL Defence org.
Dentist	Civilian as above + military medical school	Included in the qualification course; 2 years additional to civ education	Dentist	Trained at military school With short term attachements to operational units
Nurse, general or anesthesiology or intensive care or surgery	Civilian as above + military medical school	In total 4 years civ and mil training, integrated	Under supervision of medical officer, not allowed to work independently, depends on situation	Trained at military school
Nurse assistant	Civilian as above + military medical school	1 year integrated civ and mil training	Under supervision of medical officer or nurse	Trained at military school

A.A1.15. NORWAY

All the below mentioned professions are educated at civilian university or civilian schools.

CIVILIAN EDUCATION

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician	University degree	6½ years	Under supervision at hospitals or with GP	Authorized as medical physician
Independent physician	University degree	6½ years + 1½ years	Without supervision can work independently	6 months intern medicine, 6 months surgery (with 3 months emergency care unit), 6 months with a GP. After these 1½ years physicians starts the education to become specialist
Specialist, general practitioner	University degree	6½ years + 1½ years + 5 years	General practitioner	As above + 12 months intern medicine 12 months surgery (6 months emergency care) 6 months gynaecology(obstetric) 6 months psychiatry 6 months choose free 18 months assistant to GP
Specialist, anaesthesiology	University degree	6½ years+ 1½ years+5 years	Anaesthesiology	54 months anaesthesiology 6 months intern medicine
Specialist, surgeon	University degree	6½ years+1½ years+6½ years	Surgeon	Difference in length and curriculum dependent what kind of surgeon
Veterinarian	University degree	5½ years	Vet	
Dentist	University degree	5 years	Dentist	
Nurse, general	High school, nurse school	3 years	Nurse resp. in med. Wards and gerontology	
Nurse, anaesthesiology	High school, nurse school	3 years + 2 years	Nurse resp. in operative theatre and i.c	Entry requirement: 2 years experience as qualified nurse in hospital dept.'s and 2 years in a department of Intensive / Recovery/ Emergency care
Nurse, intensive care	High school, nurse school	3 years + 2 years	Nurse resp. in E.R and I.C. units	Entry requirement: 2 years experience as qualified nurse in hospital dept.'s and 2

Profession	Educational requirement	Duration of education	Working responsibility	Comment
				years in a department of Intensive/ Recovery/ Emergency care
Nurse, psychiatry	High school, nurse school	3 years + 2 year	Nurse resp. in psych wards	Entry requirements: 2 years experience as qualified nurse in hospital dept.'s and 6 months in psychiatry ward
Nurse, surgery	High school, nurse school	3 years +2 years	Nurse resp. in operative theatre	Entry requirement: 2 years experience as qualified nurse in hospital dept.'s and 6 month in surgery

N.B.:

10 years of elementary school mandatory (6-16)

3 years of high school (16-19)

university degree

- Physician 6½ years
- Veterinarian 5½ years
- Dentist 5 years

Nursing school 3 years

First aid auxiliary 3 month – 3 years

MILITARY EDUCATION

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician	Civilian as above + military medical school	2 month	Work under supervision, physician in a unit and at role 1	
Independent physician	Civilian as above + military medical school	2 months	Without supervision, role 2	
GP	Civilian as above + military medical school	2 months	Medical advisor, senior medical officer, role 2/3	
Anaesthesiology	Civilian as above+ military medical school	2 months	Medical advisor, senior medical officer, role 2-3-4	
Veterinarian	Civilian as above + military medical school	2 months	Veterinarian, hygiene, BC	
Dentist	Civilian as above + military medical school	2 months	Dentist, maxiofacialish surgery	When trained
Nurse	Civilian as above + military medical school	2 week	Under supervision of medical officer, not allowed to work independently	
First aid auxiliary	None +	3 months	First aid	Trained at military medical school
First aid auxiliary, level 2	None	1 year	First aid, med. Trp., assistant role 2	Trained at military medical school and at civilian hospital
First aid auxiliary, level 3	None	2 years	First aid, med. Trp. Assistant role 3	Trained at military medical school and at civilian hospital

A.A1.16. POLAND

All the below mentioned professions are educated at civilian university or civilian schools.

CIVILIAN EDUCATION

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician	University degree	6 years	Under supervision at hospitals	Authorised as medical physician
Independent physician	University degree	6 years + 1 year of internship	Without supervision can work independently	Internship: 4 months intern medicine, 4 months surgery, 1 month emergency care unit 1 month paediatrics 2 months obstetrics and gynaecology. After these 1 year physicians start the education to become specialist
Specialist	University degree	6 years + 1 years + 5 years	Specialist in different disciplines of medicine	After the exam must continue work at the ward
Veterinarian	University degree	5 years	Vet	
Dentist	University degree	5 years	Dentist	
Nurse, general	High school, nurse school	3 years	Nurse resp. in med. wards	

N.B.:

9 years of elementary school mandatory (6-15)

3 years of high school (15-18)

university degree

- Physician 6 years
- Veterinarian 5½ years
- Dentist 5 years

Nursing school 3 years

MILITARY EDUCATION – do not exist now, proposals:

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Independent physician	Civilian as above + military medical school	6 months	Without supervision, role 1 and 2	Trained at military medical educational centre Can continue speciality in the military hospital and as a specialist support role 3 or 4
Nurse	Civilian as above + military medical school	2 weeks	Under supervision of medical officer, not allowed to work independently	Trained at military medical educational centre

A.A1.17. PORTUGAL (INTENTIONALLY BLANK)

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician (GP)				
Family practitioner				
Acute trauma care				
Occupational medicine				
Tropical diseases				
Sport medicine				
Flight surgeon				
Specialist (internal medicine, cardio, pneumo, endocrine, etc.) (1)				
Specialist (orthopedics/ abdominal surgeon) (2)				
Specialist (Anesthetics) (3)				
Specialist (Subspecialty intensive care or E.R)				
Other specialties				
Veterinarian				
Pharmacist				
Dentist				
Psychologist				
Physiotherapist				
Nurse, general				
Nurse, psychiatry				
Nurse, surgical				
Intensive care and emergency nurse				
"Social nurse"				
Speechtherapist				

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Orthoptist				
Occupational therapist				
Medical laboratory specialist				
Radiography technician				
Paramedic (ambulancier)				
First aid auxiliary				
Lab auxiliary				
x-ray auxiliary				
Surgical auxiliary				
Vet. Auxiliary				
Pharmacist assistant				
Dental auxiliary				

A.A1.18. ROMANIA (INTENTIONALLY BLANK)

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician (GP)				
Family practitioner				
Acute trauma care				
Occupational medicine				
Tropical diseases				
Sport medicine				
Flight surgeon				
Specialist (internal medicine, cardio, pneumo, endocrine, etc.) (1)				
Specialist (orthopedics/ abdominal surgeon) (2)				
Specialist (Anesthetics) (3)				
Specialist (Subspecialty intensive care or E.R)				
Other specialties				
Veterinarian				
Pharmacist				
Dentist				
Psychologist				
Physiotherapist				
Nurse, general				
Nurse, psychiatry				
Nurse, surgical				
Intensive care and emergency nurse				
"Social nurse"				
Speechtherapist				

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Orthoptist				
Occupational therapist				
Medical laboratory specialist				
Radiography technician				
Paramedic (ambulancier)				
First aid auxiliary				
Lab auxiliary				
x-ray auxiliary				
Surgical auxiliary				
Vet. Auxiliary				
Pharmacist assistant				
Dental auxiliary				

A.A1.19. SLOVAKIA

Profession	Educational requirement	Duration of education	Working responsibility	Note
Physician	Graduate Medical Education	6 years	Delivery of medical care	There is no specific military medical faculty
GP	Graduate Medical Education + Post Graduate Education	6 years + 3 years	General Practitioner for Adults	
Acute trauma care	Graduate Medical Education + Post Graduate Education	6 years + 5 years	Specialist	
Occupational medicine	Graduate Medical Education + Post Graduate Education	6 years + 4 years	Specialist	
Tropical diseases	Graduate Medical Education + Post Graduate Education	6 years + 4 years	Specialist	
Sport medicine	Graduate Medical Education + Post Graduate Education	6 years + 3 years	Specialist	
Flight surgeon	Graduate Medical Education + certified practices	6 years + certificate	Specialist	
Specialist/Internal medicine	Graduate Medical Education + Post Graduate Education	6 years + 5 years	Specialist	
Specialist/Cardio	Graduate Medical Education + Post Graduate Education	6 years + 4 years	Specialist	
Specialist/Pneumo	Graduate Medical Education + Post Graduate Education	6 years + 4 years	Specialist	
Specialist/Endocrine	Graduate Medical Education + Post Graduate Education	6 years + 3 years	Specialist	
Specialist/Abdominal	Graduate Medical Education + Post Graduate Education	6 years + 5 years	Specialist	
Specialist/ Orthopedics	Graduate Medical Education + Post Graduate Education	6 years + 5 years	Specialist	
Specialist/Anesthetics Specialist/Subspecialization intensive care/ER	Graduate Medical Education + Post Graduate Education	6 years + 3 years	Specialist	
Veterinarian	Graduate Medical Education	6 years	Veterinary surgeon	There is no specific military faculty of veterinary medicine
Pharmacist	University Education	5 years	Pharmacist	There is no specific military pharmaceutical faculty
Dentist	Graduate Medical Education	5 years	Specialist	MDDr. since 2009
Psychologist	University Education	5 years	Psychologist	Clinical psychology

Profession	Educational requirement	Duration of education	Working responsibility	Note
				– specialization 2 years
Physiotherapist	University Education Higher Specialized Education	5 years ¹⁾ 3 years ²⁾ 3 years	Physiotherapist	¹⁾ Magister ²⁾ Bachelor
Nurse/General	University Education Higher Specialized Education	5 years ¹⁾ 3 years ²⁾ 3 years ³⁾	Delivery of nursing care	¹⁾ Magister ²⁾ Bachelor ³⁾ Registered Nurse
Nurse/psychiatry/surgical/ Intensive care and emergency nurse	University Education/ Higher Specialized Education + Post Graduate Education	5 years ¹⁾ 3 years ²⁾ / 3 years ³⁾ + 1 year	Delivery of nursing care	¹⁾ Magister ²⁾ Bachelor ³⁾ Registered Nurse
Speech therapist	University Education	5 years ¹⁾ 3 years ²⁾	Speech therapist	¹⁾ Magister ²⁾ Bachelor Clinical Speech Therapy – specialization 2 years
Orthoptist ¹⁾	Higher Specialized Education	3 years ¹⁾	Correction of eye defects and production of vision aids	¹⁾ Certified Orthoptist
Optician	Secondary Vocational School Education	4 years ¹⁾	Correction of eye defects and production of vision aids	¹⁾ Optician
Occupational therapist	University Education + Post Graduate Education	3 years ¹⁾ + 1 year	Occupational therapy	¹⁾ Bachelor
Medical laboratory specialist Lab auxiliary	University Education Secondary Vocational School Education	5 years ¹⁾ 3 years ²⁾ 4 years ³⁾	Laboratory diagnostics	¹⁾ Magister ²⁾ Bachelor ³⁾ Lab auxiliary
Radiography technician X-ray auxiliary	University Education Higher Specialized Education	3 years ¹⁾ 3 years ²⁾	Radiological diagnostics and therapy	¹⁾ Bachelor ²⁾ Certified Radiography Technician
Paramedic (rescuer)	University Education Higher Specialized Education Secondary Vocational School Education	3 years ¹⁾ 3 years ²⁾ 4 years ³⁾	Delivery of medical care	¹⁾ Bachelor ²⁾ Certified Paramedic ³⁾ Paramedic
First aid auxiliary/Surgical auxiliary	Secondary Vocational School Education	4 years	Delivery of nursing care	
Pharmacist assistant	Secondary Vocational School Education	4 years	Handling of medicines and medical aids	
Dental technician	University Education Higher Specialized Education Secondary Vocational School Education	3 years ¹⁾ 3 years ²⁾ 4 years ³⁾	Dental orthotics	¹⁾ Bachelor ²⁾ Certified Dental Technician ³⁾ Dental Technician
Dental hygienist	University Education Higher Specialized	3 years ¹⁾ 3 years ²⁾		¹⁾ Bachelor ²⁾ Certified Dental

Profession	Educational requirement	Duration of education	Working responsibility	Note
	Education			Hygienist

¹¹⁾ Group of specialists referred to as „eye care professionals”. It includes not only ophthalmologists, i.e. doctors, but also other professions that are not structured in the same manner as they are structured abroad. Orthoptist is not a medical doctor but is classified as other medical personnel.

A.A1.20. SLOVENIA (INTENTIONALLY BLANK)

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician (GP)				
Family practitioner				
Acute trauma care				
Occupational medicine				
Tropical diseases				
Sport medicine				
Flight surgeon				
Specialist (internal medicine, cardio, pneumo, endocrine, etc.) (1)				
Specialist (orthopedics/ abdominal surgeon) (2)				
Specialist (Anesthetics) (3)				
Specialist (Subspecialty intensive care or E.R)				
Other specialties				
Veterinarian				
Pharmacist				
Dentist				
Psychologist				
Physiotherapist				
Nurse, general				
Nurse, psychiatry				
Nurse, surgical				
Intensive care and emergency nurse				
"Social nurse"				
Speech-therapist				

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Orthoptist				
Occupational therapist				
Medical laboratory specialist				
Radiography technician				
Paramedic (ambulancier)				
First aid auxiliary				
Lab auxiliary				
x-ray auxiliary				
Surgical auxiliary				
Vet. Auxiliary				
Pharmacist assistant				
Dental auxiliary				

A.A1.21. SPAIN (INTENTIONALLY BLANK)

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician (GP)				
Family practitioner				
Acute trauma care				
Occupational medicine				
Tropical diseases				
Sport medicine				
Flight surgeon				
Specialist (internal medicine, cardio, pneumo, endocrine, etc.) (1)				
Specialist (orthopedics/ abdominal surgeon) (2)				
Specialist (Anesthetics) (3)				
Specialist (Subspecialty intensive care or E.R)				
Other specialties				
Veterinarian				
Pharmacist				
Dentist				
Psychologist				
Physiotherapist				
Nurse, general				
Nurse, psychiatry				
Nurse, surgical				
Intensive care and emergency nurse				
"Social nurse"				
Speechtherapist				

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Orthoptist				
Occupational therapist				
Medical laboratory specialist				
Radiography technician				
Paramedic (ambulancier)				
First aid auxiliary				
Lab auxiliary				
x-ray auxiliary				
Surgical auxiliary				
Vet. Auxiliary				
Pharmacist assistant				
Dental auxiliary				

A.A1.22. TURKEY (INTENTIONALLY BLANK)

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician (GP)				
Family practitioner				
Acute trauma care				
Occupational medicine				
Tropical diseases				
Sport medicine				
Flight surgeon				
Specialist (internal medicine, cardio, pneumo, endocrine, etc.) (1)				
Specialist (orthopedics/ abdominal surgeon) (2)				
Specialist (Anesthetics) (3)				
Specialist (Subspecialty intensive care or E.R)				
Other specialties				
Veterinarian				
Pharmacist				
Dentist				
Psychologist				
Physiotherapist				
Nurse, general				
Nurse, psychiatry				
Nurse, surgical				
Intensive care and emergency nurse				
"Social nurse"				
Speechtherapist				

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Orthoptist				
Occupational therapist				
Medical laboratory specialist				
Radiography technician				
Paramedic (ambulancier)				
First aid auxiliary				
Lab auxiliary				
x-ray auxiliary				
Surgical auxiliary				
Vet. Auxiliary				
Pharmacist assistant				
Dental auxiliary				

A.A1.23. UNITED KINGDOM

Profession	Educational Qualification	Duration of Education	Working Responsibility	Comments
General Duties Medical Officer	Degree	5 years (degree) + 2 years (post graduate training)		RN & Army – Independent deployment. RAF – supervised locations
General Practitioner	Degree	5 years (degree) + 2 years (post graduate training) + 3 years (specialist training)		
Anaesthetist	Degree	5 years (degree) + 2 years (post graduate training) + 5 years (specialist training)		
Surgeon - Orthopaedic	Degree	5 years (degree) + 2 years (post graduate training) + 7 years (specialist training)		
Surgeon – General	Degree	5 years (degree) + 2 years (post graduate training) + 5 / 6 years (specialist training)		
A & E	Degree			
General Nurse	Degree or Diploma in Higher Education	3.5 years	General nursing duties	
Mental Health Nurse	Degree or Diploma in Higher Education	3.5 years		
Intensive Care Nurse	Degree or Diploma in Higher Education	3.5 years + 6 – 12 months specialist training	ITU team member	
A&E Nurse	Degree or Diploma in Higher Education	3.5 years + 6 – 12 months specialist training	Reception, triage & minor treatments	
Operating Theatre Nurse	Degree or Diploma in Higher Education	3.5 years + 6 – 12 months specialist training	Run operating theatre & assist surgeon / anaesthetist	
Medical Assistant – Royal Navy	National Vocational Qualification	1.5 years	Independent deployment	Some may be registered paramedics
Medical Assistant – Royal Air Force	National Vocational Qualification	9 months	Team skills	Some may be registered paramedics
Combat Medical Technician – Army	National Vocational Qualification	6 months	Individual & Team skills	Some may be registered paramedics
Operating Department Practitioner	Diploma in Higher Education	2 years	Run operating theatre & assist surgeon / anaesthetist	
Dentist	Degree	5 years (degree) + 2 years (post graduate training)		
Dental Nurse	Diploma in Higher Education ?			

Profession	Educational Qualification	Duration of Education	Working Responsibility	Comments
Veterinarian Surgeon	Degree			

A.A1.24. UNITED STATES

Profession	Educational Requirement	Duration of Education	Working Responsibility	Comments
Physician	College Degree	4 years	None, academic work only	4 year college degree before acceptance to medical school
	Medical School	4 years	Direct supervision	Unable to work independently until after internship
	Internship	1 year	Basic general medicine. No specialty training	Able to practice medicine independently (licensed) after completion of internship
	Residency	2-6 years depending on the specialty. gen pract 2 yrs surgery 5 yrs	Decreasing levels of supervision as proficiency is demonstrated	Specialty board examination given after completion of residency certifies recipient as a specialist in that field
	Fellowship	1-4 years depending on area of sub-specialization	Decreasing levels of supervision as proficiency is demonstrated	Example: trauma surgeon 4 yrs college + 4 yrs medical school + 1 yr internship+ 5 yrs residency in general surg+ 2 yrs trauma surgery fellowship total of 16 years after high school
Nurse	College Degree In Nursing	4 years	General hospital /ward duties	
	Nurse specialist	2-12 months after nursing degree depending on area of specialization	Variable according to specialty. Continue to work under the direction of physicians.	Examples: OR Nurse Intensive care Nurse Emergency Medicine Nurse
	Nurse Practitioner	2 years after completion of nursing degree	Able to work independently of physician supervision	Examples: Nurse midwife Nurse anesthetist Nurse practitioner -family medicine -pediatrics -emergency medicine
Medic	Initial medic training	14 weeks	Hospital/ward duties under the direction of doctors and nurses	Duties would include starting IV's, taking vital signs, giving oral medications assisting patients.
	Field /Combat Training	8 weeks	Initial stabilization, treatment and triage of combat injuries	Usually incorporated into an operational unit and/or part of a forward deployed medical unit. May or may not have supervision depending on size of unit
	Technical	2-12 months	Technical support to specific	Examples:

Profession	Educational Requirement	Duration of Education	Working Responsibility	Comments
	training	after initial medic training depending on type of training	medical unit areas	X-Ray technician Lab technician Respiratory technician OR technician

A.A1.25. AUSTRIA (INTENTIONALLY BLANK)

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician (GP)				
Family practitioner				
Acute trauma care				
Occupational medicine				
Tropical diseases				
Sport medicine				
Flight surgeon				
Specialist (internal medicine, cardio, pneumo, endocrine, etc.) (1)				
Specialist (orthopedics/ abdominal surgeon) (2)				
Specialist (Anesthetics) (3)				
Specialist (Subspecialty intensive care or E.R)				
Other specialties				
Veterinarian				
Pharmacist				
Dentist				
Psychologist				
Physiotherapist				
Nurse, general				
Nurse, psychiatry				
Nurse, surgical				
Intensive care and emergency nurse				
"Social nurse"				
Speechtherapist				

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Orthoptist				
Occupational therapist				
Medical laboratory specialist				
Radiography technician				
Paramedic (ambulancier)				
First aid auxiliary				
Lab auxiliary				
x-ray auxiliary				
Surgical auxiliary				
Vet. Auxiliary				
Pharmacist assistant				
Dental auxiliary				

A.A1.26. SWEDEN

All the below mentioned professions are educated at civilian university or civilian schools.

CIVILIAN EDUCATION

Profession	Educational requirement	Duration of education	Working responsibility	Comment
Physician	University degree	5½ years + 2 years	Under supervision at hospitals or with GP	Authorized as medical physician
Specialist physician General considerations	University degree	5½ years + 2 years + 4½ - 6 years depending on speciality	1. Work under mentorship but with own responsibility during education to specialist 2. After education to specialist, independent work but still not senior physician in the speciality	3½ - 4½ years in own speciality, ½ - 2 years in adjacent specialities Senior specialist (capability to be responsible for a department or a subspeciality) after further 3 – 5 years.
Specialist, general practitioner	University degree	5½ years + 2 years + 4½ years	General practitioner	12 months intern medicine 6 months surgery or 6 months gynaecology 6 months pediatrics 6 months psychiatry 6 months choose free 12 months assistant to GP
Specialist, anaesthesiology	University degree	5½ years+ 2 years+5 years	Anaesthesiology	48 months anaesthesiology 6 months intern medicine 6 months surgery
Specialist, surgeon	University degree	5½ years+2years+ 5 – 6 years	Surgeon	Difference in length and curriculum depending on surgical subspeciality
Veterinarian	University degree	5½ years	Vet	
Dentist	University degree	5 years + 1 year	Dentist	
Nurse, general	High school, nurse school (university level)	3 years	Nurse resp. in med. wards	
Nurse, anaesthesiology	High school, nurse school, (university level)	3 years + 1 years	Nurse resp. in operative theatre	
Nurse, emergency room	High school, nurse school, (university level)	3 years + 1 year	Nurse resp. in emergency room	
Nurse, intensive care	High school, nurse school, (university level)	3 years + 1 years	Nurse resp. in I.C. units	
Nurse, psychiatry	High school, nurse school, (university level)	3 years + 1 year	Nurse resp. in psych wards	
Nurse, surgery	High school, nurse school, (university level)	3 years +1 years	Nurse resp. in operative theatre	

Profession	Educational requirement	Duration of education	Working responsibility	Comment
	level)			
Preventive medicine and environmental control inspector	University degree	4 years		

N.B.:

9 years of elementary school mandatory (7-16)

3 years of high school (16-19)

university degree

- Physician 7½ years
- Veterinarian 5½ years
- Dentist 6 years
- Nurse 4 years

MILITARY EDUCATION

Medical reserve officers:

Conscript service 10 – 15 months

Reserve officers course 18 weeks

Profession specific training 3 – 6 months

Conscript medical personnel:

(doctors, nurses)

Conscript service 8 – 15 months

Truma care course 5 weeks

Excercises 2 – 4 weeks

ANNEX A	APPENDIX 2 – SKILLS TRAINING AND ALLOWANCE TO PERFORM
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A.A2.1. BELGIUM

BELGIUM	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY		YY	YY		YY
Triage for treatment	NY		NY	YY		YY
Primary survey	YY		YY	YY		YY
C.spine immobilisation	YY		YY	YY		YY
Chin lift/jaw thrust	YY		YY	YY		YY
Opening mouth/finger sweep	YY		YY	YY		YY
Suctioning	YY		YY	YY		YY
Oropharangeal airway	YY		YY	YY		YY
Nasopharangeal airway	YY		YY	YY		NY
Endotracheal intubation	NN		NN	YN		NN
Cricothyroidotomy	YY		YY	YY		NN
Recovery position	YY		YY	YY		YY
Oxygen	YN		YN	YN		YY
Exhaled Air-Resuscitation (EAR)	YY		YY	YY		YY
CPR	YY		YY	YY		YY
IPPV (balloon)	YY		YY	YY		YY
Tension pneumothorax	NN		NN	YN		NN
"", tube	NN		NN	YN		NN
Flail chest: immobilisation	NN		NN	NN		NY
Open pneumothorax: seal	YY		YY	YY		YY
Massive haemothorax: drain	NN		NN	YN		NN
External blood loss: compression	YY		YY	YY		YY
Shock: fluids	YN		YN	YN		NN
Tamponade: pericardiocentesis	NN		NN	NN		NN
Defibrillation/automatic	YY		YY	YY		YN
Determination: LOC/pup. Reaction	YY		YY	YY		YY
Corticosteroids in spinal trauma	NN		NN	NN		NN
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	NN		NN	NN		NN
Sonography (evaluation)	NN		NN	NN		NN
Pulsoximetry	NN		NN	NN		YY
Capnography	NN		NN	NN		NN
ECG (evaluation)	NN		NN	YN		NN
Nasogastric intubation	YN		YN	YN		NN
Bladder catheterisation	YN		YN	YN		NN
AMPLE history	YY		YY	YY		YY
Morphine and C-medical autoinjections	YN		YN	YN		NN

BELGIUM	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Medicines (antibiotics/tetanus toxoid)	YN		YN	YN		NN
Secondary survey	YY		YY	YY		YY
Maxillofacial: emergency measures	NN		NN	NN		NN
Skull: emergency measures	YY		YY	YY		NN
Larynx treatment	?		?	?		NN
Vessels (neck) treatment	NN		NN	NN		NN
Haemothorax: tubethoracostomy	NN		NN	NN		NN
Pneumothorax:tubethoracostomy	NN		NN	NN		NN
Visceral protrusion: coverage	YY		YY	YY		YY
Vertebrae/cord: immobilisation	NN		NN	NN		YY
Limbs: splintage, dressing	YY		YY	YY		YY
Limbs: tourniquet	YY		YY	YY		YY
Eyes: rinsing, coverage	YY		YY	YY		YY
Burns: cooling, dressing	YY		YY	YY		YY
Burns: i.v	YY		YY	YY		NN
Burns: escharotomy	YN		YN	YN		NN
Hypothermia: management	YY		YY	YY		YY
Local cold injuries: management	YY		YY	YY		YY
Electric injuries: treatment	YY		YY	YY		YY
Children treatment	YY		YY	YY		YY
Women (pregnant) treatment	YY		YY	YY		YY
Elderly treatment	YY		YY	YY		YY
Bites (animal, snake, etc)	YY		YY	YY		YY
NBC- basic treatment	YY		YY	YY		YY
Triageguidelines for evacuation	NN		NN	YY		NN

A.A2.2. BULGARIA

BULGARIA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	
Triage for treatment	NN	YY	YY	YY	YY	
Primary survey	YY	NN	YY	YY	YY	
C.spine immobilization	NN	YY	YY	YY	YY	
Chin lift/jaw thrust	YY	YY	YY	YY	YY	
Opening mouth/finger sweep	YY	YY	YY	YY	YY	
Suctioning	YY	YY	YY	YY	YY	
Oropharangeal airway	NN	YY	YY	YY	YY	
Nasopharangeal airway	NN	YY	YY	YY	YY	
Endotracheal intubation	NN	NN	NN	NN	YY	
Cricothyroidotomy	NN	NN	NN	NN	YY	
Recovery position	YY	YY	YY	YY	YY	
Oxygen	YY	YY	YY	YY	YY	
Exhaled Air-Resuscitation (EAR)	NN	YY	NN	YY	YY	
CPR	NN	YY	YY	YY	YY	
IPPV (balloon)	NN	YY	NN	YY	YY	
Tensionpneumothorax	NN	NN	NN	NN	YY	
", tube	NN	NN	NN	NN	YY	
Flail chest: immobilization	NN	NN	NN	NN	YY	
Open pneumothorax: seal	NN	YY	YY	NN	YY	
Massive haemothorax: drain	NN	NN	NN	NN	NN	
External blood loss: compression	YY	YY	YY	YY	YY	
Shock: fluids	YY	YY	YY	YY	YY	
Tamponade: pericardiocentesis	NN	NN	NN	NN	NN	
Defibrillation/automatic	YY	YY	YY	YY	YY	
Determination: LOC/pup. Reaction	YY	YY	YY	YY	YY	
Corticosteroids in spinal trauma	NN	NN	NN	NN	NN	
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	NN	NN	NN	NN	NN	
Sonography (evaluation)	NN	NN	NN	NN	NN	
Pulsoximetry	YY	YY	YY	YY	YY	
Capnography	NN	NN	NN	NN	NN	
ECG (evaluation)	NN	YY	NN	YY	YY	
Nasogastric intubation	YY	YY	YY	YY	YY	
Bladder catheterisation	YY	YY	YY	YY	YY	
AMPLE history	YY	YY	YY	YY	YY	

BULGARIA	General	Anaesthesia	Surgical	Intensive	Physician	Independent
Morphine and C-medical	YY	YY	YY	YY	YY	
Medicines	YY	YY	YY	YY	YY	
Secondary survey	YY	YY	YY	YY	YY	
Maxillofacial: emergency measures	NN	NN	NN	NN	YY	
Skull: emergency measures	YY	YY	YY	YY	YY	
Larynx treatment	NN	NN	NN	NN	YY	
Vessels (neck) treatment	NN	NN	NN	NN	YY	
Haemothorax: tubethoracostomy	NN	NN	NN	NN	NN	
Pneumothorax: tubethoracostomy	NN	NN	NN	NN	NN	
Visceral protrusion: coverage	NN	NN	YY	NN	YY	
Vertebrae/cord: immobilisation	YY	YY	YY	YY	YY	
Limbs: splintage. dressing	YY	YY	YY	YY	YY	
Limbs: tourniquet	YY	YY	YY	YY	YY	
Eyes: rinsing, coverage	YY	YY	YY	YY	YY	
Burns: cooling, dressing	YY	YY	YY	YY	YY	
Burns: i.v	YY	YY	YY	YY	YY	
Burns: escharotomy	NN	NN	NN	NN	NN	
Hypothermia: management	YY	YY	YY	YY	YY	
Local cold injuries: management	YY	YY	YY	YY	YY	
Electric injuries: treatment	YY	YY	YY	YY	YY	
Children treatment	YY	YY	YY	YY	YY	
Women (pregnant) treatment	YY	YY	YY	YY	YY	
Elderly treatment	YY	YY	YY	YY	YY	
Bites (animal, snake, etc)	YY	YY	YY	YY	YY	
NBC- basic treatment	YY	YY	YY	YY	YY	
Triage guidelines for evacuation	YY	YY	YY	YY	YY	

A.A2.3. CANADA

CANADA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY		YY	YY	YY	YY
Triage for treatment	YY		YY	YY	YY	YY
Primary survey	YY		YY	YY	YY	YY
C.spine immobilisation	YY		YY	YY	YY	YY
Chin lift/jaw thrust	YY		YY	YY	YY	YY
Opening mouth/finger sweep	YY		YY	YY	YY	YY
Suctioning	YY		YY	YY	YY	YY
Oropharangeal airway	YY		YY	YY	YY	YY
Nasopharangeal airway	YY		YY	YY	YY	YY
Endotracheal intubation	NN		NN	YY	YY	YY
Cricothyroidotomy	NN		NN	NN	YY	YY
Recovery position	YY		YY	YY	YY	YY
Oxygen	NN		NN	NN	YY	NN
Exhaled Air-Resuscitation (EAR)	NN		NN	NN	YY	NN
CPR	YY		YY	YY	YY	YY
IPPV (balloon)	NN		NN	NN	YY	NN
Tensionpneumothorax	NN		NN	YY	YY	YY
", tube	NN		NN	NN	YY	YY
Flail chest: immobilisation	YY		YY	YY	YY	YY
Open pneumothorax: seal	YY		YY	YY	YY	YY
Massive haemothorax: drain	NN		NN	NN	YY	YY
External blood loss: compression	YY		YY	YY	YY	YY
Shock: fluids	NN		NN	YY	YY	YY
Tamponade: pericardiocentesis	NN		NN	NN	YY	YY
Defibrillation/automatic	NN		NN	YY	YY	YY
Determination: LOC/pup. Reaction	YY		YY	YY	YY	YY
Corticosteroids in spinal trauma	NN		NN	NN	YY	YY
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	NN		NN	NN	YY	YY
Sonography (evaluation)	NN		NN	NN	YY	NN
Pulsoximetry	YY		YY	YY	YY	YY
Capnography	NN		NN	YY	YY	YY
ECG (evaluation)	NN		NN	YY	YY	YY
Nasogastric intubation	YY		YY	YY	YY	YY
Bladder catheterisation	YY		YY	YY	YY	YY
AMPLE history	YY		YY	YY	YY	YY
Morphine and C-medical autoinjections	NN		NN	YY	YY	YY
Medicines (antibiotics/tetanus toxoid)	NN		NN	YY	YY	YY
Secondary survey	YY		YY	YY	YY	YY
Maxillofacial: emergency measures	NN		NN	YY	YY	YY

CANADA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures	NN		NN	YY	YY	YY
Larynx treatment	NN		NN	NN	YY	YY
Vessels (neck) treatment	NN		NN	NN	YY	YY
Haemothorax: tubethoracostomy	NN		NN	NN	YY	YY
Pneumothorax:tubethoracostomy	NN		NN	NN	YY	YY
Visceral protrusion: coverage	YY		YY	YY	YY	YY
Vertebrae/cord: immobilisation	YY		YY	YY	YY	YY
Limbs: splintage, dressing	YY		YY	YY	YY	YY
Limbs: tourniquet	NN		NN	YY	YY	YY
Eyes: rinsing, coverage	YY		YY	YY	YY	YY
Burns: cooling, dressing	YY		YY	YY	YY	YY
Burns: i.v	YY		YY	YY	YY	YY
Burns: escharotomy	YY		YY	NN	YY	YY
Hypothermia: management	YY		YY	YY	YY	YY
Local cold injuries: management	YY		YY	YY	YY	YY
Electric injuries: treatment	YY		YY	YY	YY	YY
Children treatment	YY		YY	YY	YY	YY
Women (pregnant) treatment	YY		YY	YY	YY	YY
Elderly treatment	YY		YY	YY	YY	YY
Bites (animal, snake, etc)	YY		YY	YY	YY	YY
NBC- basic treatment	YY		YY	YY	YY	YY
Triageguidelines for evacuation	YY		YY	YY	YY	YY

A.A2.4. CZECH REPUBLIC

CZECH REPUBLIC	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	YY
Triage for treatment	YN	YN	YN	YN	YY	NN
Primary survey	YY	YY	YY	YY	YY	NN
C.spine immobilisation	YY	YY	YY	YY	YY	YY
Chin lift/jaw thrust	YY	YY	YY	YY	YY	YY
Opening mouth/finger sweep	YY	YY	YY	YY	YY	YY
Suctioning	YY	YY	YY	YY	YY	YY
Oropharangeal airway	YY	YY	YY	YY	YY	YY
Nasopharangeal airway	YY	YY	YY	YY	YY	YY
Endotracheal intubation	NN	NN	NN	NN	YY	NN
Cricothyroidotomy	YN	YN	YN	YN	YY	NN
Recovery position	YY	YY	YY	YY	YY	YY
Oxygen	YY	YY	YY	YY	YY	YY
Exhaled Air-Resuscitation (EAR)	NN	NN	NN	NN	?	NN
CPR	YY	YY	YY	YY	YY	YY
IPPV (balloon)	NN	NN	NN	NN	?	NN
Tensionpneumothorax, needle	YN	YN	YN	YN	YY	NN
", tube	YN	YN	YN	YN	YY	NN
Flail chest: immobilisation	YN	YN	YN	YN	YY	NN
Open pneumothorax: seal	YN	YN	YN	YN	YY	NN
Massive haemothorax: drain	YN	YN	YN	YN	YY	NN
External blood loss: compression	YY	YY	YY	YY	YY	YY
Shock: fluids	YN	YN	YN	YY	YY	YN
Tamponade: pericardiocentesis	NN	NN	NN	NN	YY	NN
Defibrillation/automatic	NY	NY	NY	NY	NY	NN
Determination: LOC/pup. Reaction	NN	NN	NN	NN	YY	NN
Corticosteroids in spinal trauma	NN	NN	NN	NN	YY	NN
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	NN	NN	NN	NN	NN	NN
Sonography (evaluation)	NN	NN	NN	NN	NN	NN
Pulsoximetry	YY	YY	YY	YY	YY	NN
Capnography	NN	NN	NN	NN	YY	NN
ECG (evaluation)	NN	NN	NN	NN	YY	NN
Nasogastric intubation	NN	NN	NN	NN	NY	NN
Bladder catheterisation	NN	NN	NN	NN	YY	NN
AMPLE history	NN	NN	NN	NN	NN	NN
Morphine and C-medical autoinjections	YY	YY	YY	YY	YY	NN
Medicines (antibiotics/tetanus toxoid)	NN	NN	NN	NN	YY	NN
Secondary survey	NN	NN	NN	NN	YY	NN
Maxillofacial: emergency	YN	YN	YN	YN	YY	NN

CZECH REPUBLIC	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
measures						
Skull: emergency measures	YN	YN	YN	YN	YY	NN
Larynx treatment	NN	NN	NN	NN	YY	NN
Vessels (neck) treatment	NN	NN	NN	NN	YY	NN
Haemothorax: tubethoracostomy	NN	NN	NN	NN	YY	NN
Pneumothorax:tubethoracostomy	NN	NN	NN	NN	YY	NN
Visceral protrusion: coverage	YY	YY	YY	YY	YY	YN
Vertebrae/cord: immobilisation	YY	YY	YY	YY	YY	YY
Limbs: splintage, dressing	YY	YY	YY	YY	YY	YY
Limbs: tourniquet	YY	YY	YY	YY	YY	YY
Eyes: rinsing, coverage	YY	YY	YY	YY	YY	NN
Burns: cooling, dressing	YY	YY	YY	YY	YY	NN
Burns: i.v	YN	YN	YN	YY	YY	NN
Burns: escharotomy	NN	NN	NN	NN	NY	NN
Hypothermia: management	NN	NN	NN	NN	YY	NN
Local cold injuries: management	NN	NN	NN	NN	YY	NN
Electric injuries: treatment	NN	NN	NN	NN	YY	NN
Children treatment	NN	NN	NN	NN	YY	NN
Women (pregnant) treatment	NN	NN	NN	NN	NN	NN
Elderly treatment	NN	NN	NN	NN	YY	NN
Bites (animal, snake, etc)	NN	NN	NN	NN	YY	NN
NBC- basic treatment	NN	NN	NN	NN	YY	NN
Triageguidelines for evacuation	YN	YN	YN	YN	YY	NN

A.A2.5. DENMARK

DENMARK	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	YY
Triage for treatment	NN	YY	YN	?	YY	YY
Primary survey	NN	YY	?	NN	NY	YY
C.spine immobilisation	NN	YY	YY	YY	YY	YY
Chin lift/jaw thrust	NN	YY	YY	YY	YY	YY
Opening mouth/finger sweep	YY	YY	YY	YY	YY	YY
Suctioning	YY	YY	YY	YY	YY	YY
Oropharangeal airway	NN	YY	NN	YY	YY	YY
Nasopharangeal airway	NN	YY	YY	YY	YY	NN
Endotracheal intubation	NN	YY	YY	YY	NY	NN
Cricothyroidotomy	NN	YY	YN	YY	NY	NN
Recovery position	YY	YY	YY	YY	YY	YY
Oxygen	YN	YY	YY	YY	YY	YY
Exhaled Air-Resuscitation (EAR)	YY	YY	YY	YY	YY	YY
CPR	YY	YY	YY	YY	YY	YY
IPPV (balloon)	YN	YY	YY	YY	YY	YY
Tensionpneumothorax: needle	NN	NN	NN	NN	YY	YN
", tube	NN	NN	NN	NN	YY	YN
Flail chest: immobilisation	?	NN	NN	NN	YY	YN
Open pneumothorax: seal	YY	NN	NN	NN	YY	YY
Massive haemothorax: drain	NN	NN	NN	NN	YY	YN
External blood loss: compression	YY	YY	YY	YY	YY	YY
Shock: fluids	NN	YY	YY	YY	YY	YY
Tamponade: pericardiocentesis	NN	NN	NN	NN	NY	YN
Defibrillation/automatic	NN	NN	NN	NN	YY	?
Determination: LOC/pup. Reaction	NN	YY	YY	YY	YY	YY
Corticosteroids in spinal trauma	NN	NN	NN	NN	NY	NN
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)		NN	NN	NN	YY	NN
Sonography (evaluation)	NN	NN	NN	NN	NY	NN
Pulsoximetry	YY	YY	YY	YY	YY	YY
Capnography	YY	YY	NN	YY	YY	YN
ECG (evaluation)	NN	NN	NN	Y?	YY	NN
Nasogastric intubation	YN	YY	YY	YY	YY	NN
Bladder catheterisation	NN	YN	YY	YY	YY	NN
AMPLE history	YY	NN	?	?	YY	NN
Morphine and C-medical autoinjections	YN	?	YN	YN	YY	YY
Medicines (antibiotics/tetanus toxoid)	NN	YN	YN	YN	YY	YN
Secondary survey	NN	NN	NN	?	NY	YN
Maxillofacial: emergency	NN	?	?	?	YY	YN

DENMARK	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
measures						
Skull: emergency measures	NN	?	?	?	YY	YN
Larynx treatment	NN	YN	?	YY	YY	NN
Vessels (neck) treatment	?	?	?	?	YY	NN
Haemothorax: tubethoracostomy	NN	NN	NN	NN	NY	YN
Pneumothorax:tubethoracostomy	NN	NN	NN	NN	NY	YN
Visceral protrusion: coverage	NN	YY	YY	YY	YY	YY
Vertebrae/cord: immobilisation	?	?	YY	YY	YY	YY
Limbs: splintage, dressing	YY	?	YY	YY	YY	YY
Limbs: tourniquet	YN	YN	NN	?	YY	YY
Eyes: rinsing, coverage	YY	YY	YY	YY	YY	YY
Burns: cooling, dressing	YY	YY	YY	YY	YY	YY
Burns: i.v	NN	YY	YY	NN	YY	YN
Burns: escharotomy	NN	NN	NN	YY	YY	YN
Hypothermia: management	YY	YY	YY	YY	YY	YY
Local cold injuries: management	YY	YY	YY	YY	YY	YY
Electric injuries: treatment	YY	YY	YY	YY	YY	YY
Children treatment	NN	YY	YY	YY	YY	YN
Women (pregnant) treatment	NN	Y?	?	?	YY	YN
Elderly treatment	YY	YY	YY	YY	YY	YN
Bites (animal, snake, etc)	NN	NN	YN	YN	YY	YY
NBC- basic treatment	NN	NN	YY	?	YY	YY
Triageguidelines for evacuation	NN	NN	NN	?	NY	YY

A.A2.6. ESTONIA (INTENTIONALLY BLANK)

ESTONIA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"						
Triage for treatment						
Primary survey						
C.spine immobilisation						
Chin lift/jaw thrust						
Opening mouth/finger sweep						
Suctioning						
Oropharyngeal airway						
Nasopharyngeal airway						
Endotracheal intubation						
Cricothyroidotomy						
Recovery position						
Oxygen						
Exhaled Air-Resuscitation (EAR)						
CPR						
IPPV (balloon)						
Tension pneumothorax , tube						
Flail chest: immobilisation						
Open pneumothorax: seal						
Massive haemothorax: drain						
External blood loss: compression						
Shock: fluids						
Tamponade: pericardiocentesis						
Defibrillation/automatic						
Determination: LOC/pup. Reaction						
Corticosteroids in spinal trauma						
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)						
Sonography (evaluation)						
Pulsoximetry						
Capnography						
ECG (evaluation)						
Nasogastric intubation						
Bladder catheterisation						
AMPLE history						
Morphine and C-medical autoinjections						
Medicines (antibiotics/tetanus toxoid)						
Secondary survey						
Maxillofacial: emergency measures						

ESTONIA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures						
Larynx treatment						
Vessels (neck) treatment						
Haemothorax: tubethoracostomy						
Pneumothorax:tubethoracostomy						
Visceral protrusion: coverage						
Vertebrae/cord: immobilisation						
Limbs: splintage, dressing						
Limbs: tourniquet						
Eyes: rinsing, coverage						
Burns: cooling, dressing						
Burns: i.v						
Burns: escharotomy						
Hypothermia: management						
Local cold injuries: management						
Electric injuries: treatment						
Children treatment						
Women (pregnant) treatment						
Elderly treatment						
Bites (animal, snake, etc)						
NBC- basic treatment						
Triageguidelines for evacuation						

A.A2.7. FRANCE

FRANCE	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	YY
Triage for treatment	NN	NN	NN	NN	YY	NN
Primary survey	YY	YY	YY	YY	YY	YY
C.spine immobilisation	YY	YY	YY	YY	YY	YY
Chin lift/jaw thrust	YY	YY	YY	YY	YY	YY
Opening mouth/finger sweep	YY	YY	YY	YY	YY	YY
Suctioning	YY	YY	YY	YY	YY	NN
Oropharangeal airway	YY	YY	YY	YY	YY	YY
Nasopharangeal airway	YY	YY	YY	YY	YY	YY
Endotracheal intubation	NN	YY	NN	NN	YY	NN
Cricothyroidotomy	NN	NN	NN	NN	YY	NN
Recovery position	YY	YY	YY	YY	YY	YY
Oxygen	YY	YY	YY	YY	YY	NN
Exhaled Air-Resuscitation (EAR)	YY	YY	YY	YY	YY	YY
CPR	YY	YY	YY	YY	YY	YY
IPPV (balloon)	YY	YY	YY	YY	YY	YY
Tensionpneumothorax	NN	NN	YY	NN	YY	NN
", tube	NN	NN	NN	NN	YY	NN
Flail chest: immobilisation	NN	NN	NN	NN	YY	NN
Open pneumothorax: seal	NN	NN	NN	NN	YY	NN
Massive haemothorax: drain	NN	NN	NN	NN	YY	NN
External blood loss: compression	YY	YY	YY	YY	YY	YY
Shock: fluids	YN	YN	YN	YN	YY	NN
Tamponade: pericardiocentesis	NN	NN	NN	NN	YY	NN
Defibrillation/automatic	YY	YY	YY	YY	YY	YY
Determination: LOC/pup. Reaction	YY	YY	YY	YY	YY	YY
Corticosteroids in spinal trauma	NN	NN	NN	NN	YY	NN
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	NN	NN	NN	NN	YY	NN
Sonography (evaluation)	NN	NN	NN	NN	YY	NN
Pulsoximetry	YN	YY	YN	YY	YY	NN
Capnography	YN	YY	YN	YY	YY	NN
ECG (evaluation)	NN	NN	NN	NN	YY	NN
Nasogastric intubation	YN	YY	YY	YY	YY	NN
Bladder catheterisation	YN	YY	YY	YY	YY	NN
AMPLE history	NN	NN	NN	NN	YY	NN
Morphine and C-medical autoinjections	YN	YY	YN	YN	YY	NN
Medicines (antibiotics/tetanus toxoid)	YN	YN	YN	YN	YY	NN
Secondary survey	NN	YN	NN	YN	YY	NN
Maxillofacial: emergency measures	YN	YN	YN	YN	YY	NN

FRANCE	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures	YN	YN	YN	YN	YY	NN
Larynx treatment	NN	NN	NN	NN	YY	NN
Vessels (neck) treatment	NN	NN	NN	NN	YY	NN
Haemothorax: tubethoracostomy	NN	NN	NN	NN	YY	NN
Pneumothorax:tubethoracostomy	NN	NN	NN	NN	YY	NN
Visceral protrusion: coverage	NN	NN	NN	NN	YY	NN
Vertebrae/cord: immobilisation	NN	NN	NN	NN	YY	NN
Limbs: splintage, dressing	NN	YY	YY	YY	YY	YY
Limbs: tourniquet	YN	YN	YN	YN	YY	NN
Eyes: rinsing, coverage	YY	YY	YY	YY	YY	NN
Burns: cooling, dressing	YY	YY	YY	YY	YY	YY
Burns: i.v	YN	YY	YN	YN	YY	NN
Burns: escharotomy	YN	YN	YN	YN	YY	NN
Hypothermia: management	YN	YY	YN	YN	YY	NN
Local cold injuries: management	YY	YY	YY	YY	YY	NN
Electric injuries: treatment	YY	YY	YY	YY	YY	NN
Children treatment	YN	YN	YN	YN	YY	NN
Women (pregnant) treatment	YN	YN	YN	YN	YY	NN
Elderly treatment	YN	YN	YN	YN	YY	NN
Bites (animal, snake, etc)	YN	YN	YN	YN	YY	NN
NBC- basic treatment	YY	YY	YY	YY	YY	NN
Triageguidelines for evacuation	YN	YN	YN	YN	YY	NN

A.A2.8. GERMANY

GERMANY	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	YY
Triage for treatment	NN	NN	NN	NN	YY	NN
Primary survey	NN	NN	NN	YY	YY	YY
C.spine immobilisation	NN	NN	YY	YY	NN	YY
Chin lift/jaw thrust	YY	YY	YY	YY	YY	YY
Opening mouth/finger sweep	YY	YY	YY	YY	YY	YY
Suctioning	YY	YY	YY	YY	YY	YY
Oropharangeal airway	YY	YY	YY	YY	YY	YY
Nasopharangeal airway	YY	YY	YY	YY	YY	YY
Endotracheal intubation	NN	YY	NN	YY	YY	YY
Cricothyroidotomy	NN	NN	NN	NN	YY	NN
Recovery position	YY	YY	YY	YY	YY	YY
Oxygen	YY	YY	YY	YY	YY	YY
Exhaled Air-Resuscitation (EAR)	YY	YY	YY	YY	YY	YY
CPR	YY	YY	YY	YY	YY	YY
IPPV (balloon)	YY	YY	YY	YY	YY	YY
Tensionpneumothorax	NN	YN	NN	YN	YY	YY
", tube	NN	YN	NN	YN	YY	YN
Flail chest: immobilisation	NN	NN	YY	NN	YY	YY
Open pneumothorax: seal	YY	YY	YY	YY	YY	YY
Massive haemothorax: drain	NN	YN	NN	YN	YY	NN
External blood loss: compression	YY	YY	YY	YY	YY	YY
Shock: fluids	YN	YY	NN	YY	YY	YY
Tamponade: pericardiocentesis	NN	NN	NN	NN	NY	NN
Defibrillation/automatic	NN	YY	NN	YY	YY	YY
Determination: LOC/pup. Reaction	YY	YY	YY	YY	YY	YY
Corticosteroids in spinal trauma	NN	YN	NN	NN	YN	YN
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	NN	NN	NN	NN	NN	NN
Sonography (evaluation)	NN	NN	NN	NN	NN	NN
Pulsoximetry	NN	YY	YY	YY	YY	YY
Capnography	NN	YY	NN	YY	YY	YY
ECG (evaluation)	NN	YN	NN	YN	YY	YY
Nasogastric intubation	YY	YY	YY	YY	YY	YY
Bladder catheterisation	YY	YY	YY	YY	YY	NN
AMPLE history	NN	YN	NN	YN	YY	YY
Morphine and C-medical autoinjections	YY	YY	YY	YY	YY	YY
Medicines (antibiotics/tetanus toxoid)	NN	NN	NN	NN	YY	NN
Secondary survey	NN	NN	NN	NN	YY	YY
Maxillofacial: emergency measures	YY	YY	YY	YY	YY	YY

GERMANY	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures	YY	YY	YY	YY	YY	YY
Larynx treatment	YY	YY	YY	YY	YY	YY
Vessels (neck) treatment	YY	YY	YY	YY	YY	YY
Haemothorax: tubethoracostomy	NN	YN	NN	YN	YY	NN
Pneumothorax:tubethoracostomy	NN	YN	NN	YN	YY	NN
Visceral protrusion: coverage	YY	YY	YY	YY	YY	YY
Vertebrae/cord: immobilisation	NN	YY	YY	YY	YY	YY
Limbs: splintage, dressing	YY	YY	YY	YY	YY	YY
Limbs: tourniquet	YY	YY	YY	YY	YY	YY
Eyes: rinsing, coverage	YY	YY	YY	YY	YY	YY
Burns: cooling, dressing	YY	YY	YY	YY	YY	YY
Burns: i.v	YN	YY	NN	YY	YY	YY
Burns: escharotomy	NN	NN	NN	NN	NN	NN
Hypothermia: management	YY	YY	YY	YY	YY	YY
Local cold injuries: management	YY	YY	YY	YY	YY	YY
Electric injuries: treatment	YY	YY	YY	YY	YY	YY
Children treatment	YY	YY	YY	YY	YY	YY
Women (pregnant) treatment	YY	YY	YY	YY	YY	YY
Elderly treatment	YY	YY	YY	YY	YY	YY
Bites (animal, snake, etc)	NN	YN	YY	YN	YY	YY
NBC- basic treatment	YY	YY	YY	YY	YY	YY
Triageguidelines for evacuation	NN	NN	NN	NN	YY	YY

A.A2.9. GREECE

GREECE	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	YY
Triage for treatment	NN	NN	NN	NN	YY	YN
Primary survey	YY	?	?	?	YY	?
C.spine immobilisation	?	?	?	?	?	?
Chin lift/jaw thrust	YN	YN	YN	YN	YY	YY
Opening mouth/finger sweep	YY	YY	YY	YY	YY	YY
Suctioning	YY	YY	YY	YY	YY	YY
Oropharangeal airway	NN	YN	YY	YN	YY	YY
Nasopharangeal airway	NN	YN	YN	YN	YY	YN
Endotracheal intubation	NN	YN	YN	YN	YY	YN
Cricothyroidotomy	NN	YN	YN	YN	YY	YN
Recovery position	YY	YY	YY	YY	YY	YY
Oxygen	?	?	?	?	YY	?
Exhaled Air-Resuscitation (EAR)	YY	YY	YY	YY	?	YY
CPR	YY	YY	YY	YY	YY	YY
IPPV (balloon)	NN	YN	YN	YN	YY	?
Tensionpneumothorax	NN	YN	YN	YN	YY	?
", tube	NN	YN	YN	YN	YY	?
Flail chest: immobilisation	NN	YN	YN	YN	YY	?
Open pneumothorax: seal	YN	YN	YY	NN	YY	?
Massive haemothorax: drain	NN	YN	YN	YN	YY	?
External blood loss: compression	?	?	?	?	YY	?
Shock: fluids	YN	YN	YN	YN	?	YN
Tamponade: pericardiocentesis	NN	YN	YN	YN	YY	NN
Defibrillation/automatic	NN	YN	YN	YN	YY	YY
Determination: LOC/pup. Reaction	?	?	?	?	YY	?
Corticosteroids in spinal trauma	NN	NN	NN	NN	?	NN
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	NN	YN	YN	YN	YY	?
Sonography (evaluation)	NN	YN	YN	YN	YY	?
Pulsoximetry	YY	YY	YY	YN	YY	?
Capnography	NN	YY	YN	YY	YY	?
ECG (evaluation)	NN	YN	YN	YN	YY	?
Nasogastric intubation	NN	YN	YN	YN	YY	?
Bladder catheterisation	NN	YN	YN	YN	YY	?
AMPLE history	YY	YY	YY	YY	YY	YY
Morphine and C-medical autoinjections	NN	YN	YN	YN	YY	YY
Medicines (antibiotics/tetanus toxoid)	NN	YN	YN	YN	YY	YY
Secondary survey	?	YN	?	?	?	?
Maxillofacial: emergency measures	NN	YN	YN	YN	YY	?

GREECE	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures	NN	YN	YN	YN	YY	?
Larynx treatment	NN	YN	YN	YN	YY	?
Vessels (neck) treatment	NN	YN	YN	YN	YY	?
Haemothorax: tubethoracostomy	NN	YN	YN	YN	YY	?
Pneumothorax:tubethoracostomy	NN	YN	YN	YN	YY	?
Visceral protrusion: coverage	YY	YN	YY	YY	YY	YY
Vertebrae/cord: immobilisation	YN	YY	YY	YY	YY	?
Limbs: splintage, dressing	YY	YY	YY	YY	YY	YY
Limbs: tourniquet	YY	YY	YY	YY	YY	YY
Eyes: rinsing, coverage	YY	YY	YY	YY	YY	YY
Burns: cooling, dressing	NN	YN	YY	YY	YY	YY
Burns: i.v	NN	YN	YN	YY	YY	YN
Burns: escharotomy	NN	YN	YY	YN	YY	YN
Hypothermia: management	NN	YN	YY	YY	YY	YY
Local cold injuries: management	NN	YN	YY	YY	YY	YY
Electric injuries: treatment	NN	YN	YN	YY	YY	YY
Children treatment	?	?	?	?	?	?
Women (pregnant) treatment	?	?	?	?	?	?
Elderly treatment	?	?	?	?	?	?
Bites (animal, snake, etc)	NN	YN	YN	YN	YY	YY
NBC- basic treatment	Y?	YY	YY	YY	YY	YY
Triageguidelines for evacuation	NN	NN	NN	NN	YY	?

A.A2.10. HUNGARY

HUNGARY	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	YY
Triage for treatment	NN	NN	NN	NN	YY	NN
Primary survey	NN	NN	NN	NN	YY	NN
C.spine immobilisation	NN	NN	NN	NN	YY	NN
Chin lift/jaw thrust	NN	NN	NN	NN	YY	NN
Opening mouth/finger sweep	YY	YY	YY	YY	YY	NN
Suctioning	NN	YY	NN	YY	YY	NN
Oropharangeal airway	YY	YY	YY	YY	YY	YY
Nasopharangeal airway	YY	YY	YY	YY	YY	YY
Endotracheal intubation	NN	YY	NN	YY	YY	NN
Cricothyroidotomy	NN	NN	NN	NN	YY	NN
Recovery position	YY	YY	YY	YY	YY	YY
Oxygen	YY	YY	YY	YY	YY	NN
Exhaled Air-Resuscitation (EAR)	NN	YY	NN	NN	YY	NN
CPR	YY	YY	YY	YY	YY	YY
IPPV (balloon)	NN	YY	NN	YY	YY	NN
Tensionpneumothorax: needle	NN	NN	YY	NN	YY	NN
", tube	NN	NN	NN	NN	YY	NN
Flail chest: immobilisation	NN	NN	YY	YY	YY	NN
Open pneumothorax: seal	YY	YY	YY	YY	YY	YY
Massive haemothorax: drain	NN	YY	YY	YY	YY	NN
External blood loss: compression	YY	YY	YY	YY	YY	YY
Shock: fluids	YY	YY	YY	YY	YY	YY
Tamponade: pericardiocentesis	NN	NN	NN	NN	YY	NN
Defibrillation/automatic	NN	NN	NN	NN	YY	NN
Determination: LOC/pup. Reaction	NN	NN	NN	NN	YY	NN
Corticosteroids in spinal trauma	NN	NN	NN	NN	YY	NN
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	YY	YY	YY	YY	YY	NN
Sonography (evaluation)	NN	NN	NN	NN	YY	NN
Pulsoximetry	NN	NN	NN	NN	YY	NN
Capnography	NN	NN	NN	NN	YY	NN
ECG (evaluation)	NN	NN	NN	NN	YY	NN
Nasogastric intubation	YY	YY	YY	YY	YY	NN
Bladder catheterisation	YY	YY	YY	YY	YY	NN
AMPLE history	NN	YY	NN	NN	YY	NN
Morphine and C-medical autoinjections	NN	YY	NN	NN	YY	NN
Medicines (antibiotics/tetanus toxoid)	NN	NN	NN	NN	YY	NN
Secondary survey	NN	NN	NN	NN	YY	NN
Maxillofacial: emergency	NN	YY	NN	YY	YY	NN

HUNGARY	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
measures						
Skull: emergency measures	NN	YY	NN	YY	YY	NN
Larynx treatment	NN	YY	NN	YY	YY	NN
Vessels (neck) treatment	NN	NN	YY	NN	YY	NN
Haemothorax: tubethoracostomy	NN	NN	YY	YY	YY	NN
Pneumothorax:tubethoracostomy	NN	NN	YY	YY	YY	NN
Visceral protrusion: coverage	NN	NN	YY	YY	YY	NN
Vertebrae/cord: immobilisation	NN	NN	YY	YY	YY	NN
Limbs: splintage, dressing	YY	YY	YY	YY	YY	NN
Limbs: tourniquet	YY	YY	YY	YY	YY	YY
Eyes: rinsing, coverage	YY	YY	YY	YY	YY	YY
Burns: cooling, dressing	YY	YY	YY	YY	YY	YY
Burns: i.v	NN	YY	NN	YY	YY	NN
Burns: escharotomy	NN	NN	NN	NN	YY	NN
Hypothermia: management	NN	NN	NN	NN	YY	NN
Local cold injuries: management	YY	YY	YY	YY	YY	YY
Electric injuries: treatment	NN	YY	NN	YY	YY	NN
Children treatment	NN	NN	NN	NN	YY	NN
Women (pregnant) treatment	NN	NN	NN	NN	YY	NN
Elderly treatment	NN	NN	NN	YY	YY	NN
Bites (animal, snake, etc)	NN	YY	NN	YY	YY	NN
NBC- basic treatment	NN	YY	YY	YY	YY	YY
Triageguidelines for evacuation	NN	YY	NN	YY	YY	NN

A.A2.11. ITALY

ITALY	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	
Triage for treatment	YY	YY	YY	YY	YY	
Primary survey	YY	YY	YY	YY	YY	
C.spine immobilisation	YN	YY	YN	YY	YY	
Chin lift/jaw thrust	YY	YY	YY	YY	YY	
Opening mouth/finger sweep	YN	YY	YY	YY	YY	
Suctioning	YN	YY	YY	YY	YY	
Oropharangeal airway	YN	YY	YY	YY	YY	
Nasopharangeal airway	YN	YY	YY	YY	YY	
Endotracheal intubation	YN	YN	YN	YN	YY	
Cricothyroidotomy	YN	YN	YN	YN	YY	
Recovery position	YY	YY	YY	YY	YY	
Oxygen	YY	YY	YY	YY	YY	
Exhaled Air-Resuscitation (EAR)	YN	YY	YY	YY	YY	
CPR	YN	YY	YY	YY	YY	
IPPV (balloon)	YN	YN	YN		YY	
Tensionpneumothorax, needle	YN	YN	YN	YN	YY	
", tube	YN	YN	YN	YN	YY	
Flail chest: immobilisation	YN	YY	YY	YN	YY	
Open pneumothorax: seal	YN	YY	YY	YY	YY	
Massive haemothorax: drain	YN	YN	YN	YY	YY	
External blood loss: compression	YY	YY	YY	YN	YY	
Shock: fluids	YN	YY	YY	YY	YY	
Tamponade: pericardiocentesis	YN	YN	YN	YY	YY	
Defibrillation/automatic	YN	YN	YN	YN	YY	
Determination: LOC/pup. Reaction	YN	YY	YY	YN	YY	
Corticosteroids in spinal trauma	YN	YN	YN	YY	YY	
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	YN	YN	YN	YN	YY	
Sonography (evaluation)	YN	YN	YN	YN	YY	
Pulsoximetry	YN	YN	YN	YN	YY	
Capnography	YN	YN	YN	YN	YY	
ECG (evaluation)	YN	YN	YN	YN	YY	
Nasogastric intubation	YN	YN	YN	YN	YY	
Bladder catheterisation	YN	YN	YN	YN	YY	
AMPLE history	YN	YY	YY	YY	YY	
Morphine and C-medical autoinjections	YY	YY	YY	YY	YY	
Medicines (antibiotics/tetanus toxoid)	YY	YN	YN	YN	YY	
Secondary survey	NN	?	?	?	YY	
Maxillofacial: emergency	YN	YN	YN	YN	YY	

ITALY	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
measures						
Skull: emergency measures	YN	YN	YN	YN	YY	
Larynx treatment	YN	YN	YN	YN	YY	
Vessels (neck) treatment	YN	YN	YN	YN	YY	
Haemothorax: tubethoracostomy	YN	YN	YN	YN	YY	
Pneumothorax:tubethoracostomy	YN	YN	YN	YN	YY	
Visceral protrusion: coverage	YY	YY	YY	YY	YY	
Vertebrae/cord: immobilisation	YN	YY	YY	YY	YY	
Limbs: splintage, dressing	YN	YY	YY	YY	YY	
Limbs: tourniquet	YN	YY	YY	YY	YY	
Eyes: rinsing, coverage	YN	YY	YY	YY	YY	
Burns: cooling, dressing	YN	YY	YY	YY	YY	
Burns: i.v	YN	YY	YY	YY	YY	
Burns: escharotomy	YN	YN	YN	YY	YY	
Hypothermia: management	YN	YY	YY	YN	YY	
Local cold injuries: management	YN	YY	YY	YY	YY	
Electric injuries: treatment	YN	YN	YN	YY	YY	
Children treatment	YN	YN	YN	YN	YY	
Women (pregnant) treatment	YN	YN	YN	YN	YY	
Elderly treatment	YN	YN	YN	YN	YY	
Bites (animal, snake, etc)	YN	YN	YN	YN	YY	
NBC- basic treatment	YN	YY	YY	YY	YY	
Triageguidelines for evacuation	YN	YY	YY	YY	YY	

A.A2.12. LATVIA (INTENTIONALLY BLANK)

LATVIA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"						
Triage for treatment						
Primary survey						
C.spine immobilisation						
Chin lift/jaw thrust						
Opening mouth/finger sweep						
Suctioning						
Oropharyngeal airway						
Nasopharyngeal airway						
Endotracheal intubation						
Cricothyroidotomy						
Recovery position						
Oxygen						
Exhaled Air-Resuscitation (EAR)						
CPR						
IPPV (balloon)						
Tension pneumothorax						
" , tube						
Flail chest: immobilisation						
Open pneumothorax: seal						
Massive haemothorax: drain						
External blood loss: compression						
Shock: fluids						
Tamponade: pericardiocentesis						
Defibrillation/automatic						
Determination: LOC/pup. Reaction						
Corticosteroids in spinal trauma						
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)						
Sonography (evaluation)						
Pulsoximetry						
Capnography						
ECG (evaluation)						
Nasogastric intubation						
Bladder catheterisation						
AMPLE history						
Morphine and C-medical autoinjections						
Medicines (antibiotics/tetanus toxoid)						
Secondary survey						
Maxillofacial: emergency measures						

LATVIA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures						
Larynx treatment						
Vessels (neck) treatment						
Haemothorax: tubethoracostomy						
Pneumothorax:tubethoracostomy						
Visceral protrusion: coverage						
Vertebrae/cord: immobilisation						
Limbs: splintage, dressing						
Limbs: tourniquet						
Eyes: rinsing, coverage						
Burns: cooling, dressing						
Burns: i.v						
Burns: escharotomy						
Hypothermia: management						
Local cold injuries: management						
Electric injuries: treatment						
Children treatment						
Women (pregnant) treatment						
Elderly treatment						
Bites (animal, snake, etc)						
NBC- basic treatment						
Triageguidelines for evacuation						

A.A2.13. LITHUANIA

LITHUANIA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	Y?
Triage for treatment	?N				YY	Y?
Primary survey	?N				YY	Y?
C.spine immobilisation	YY	YY	YY	YY	YY	Y?
Chin lift/jaw thrust	YY	YY	YY	YY	YY	Y?
Opening mouth/finger sweep	YY	YY	YY	YY	YY	Y?
Suctioning	YY	YY	YY	YY	YY	Y?
Oropharangeal airway	YY	YY	YY	YY	YY	Y?
Nasopharangeal airway	YY	YY	YY	YY	YY	Y?
Endotracheal intubation	?N				YY	N?
Cricothyroidotomy	?N				YY	N?
Recovery position	YY	YY	YY	YY	YY	Y?
Oxygen	YY	YY	YY	YY	YY	Y?
Exhaled Air-Resuscitation (EAR)	YY	YY	YY	YY	YY	Y?
CPR	YY	YY			YY	Y?
IPPV (balloon)	?				?	?
Tensionpneumothorax	?N				YY	Y?
", tube	?N				YY	N?
Flail chest: immobilisation	?N	NN	NN	NN	YY	Y?
Open pneumothorax: seal	?N				YY	Y?
Massive haemothorax: drain	?N				YY	N?
External blood loss: compression	YY	YY	YY	YY	YY	Y?
Shock: fluids	YY	YY	YY	YY	YY	Y?
Tamponade: pericardiocentesis	?N				YY	N?
Defibrillation/automatic	?N				YY	N?
Determination: LOC/pup. Reaction	?				YY	Y?
Corticosteroids in spinal trauma	?N				?	N?
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	?N				YY	N?
Sonography (evaluation)	?N				NN	N?
Pulsoximetry	?			YY	YY	N?
Capnography	?N				?	N?
ECG (evaluation)	?				YY	N?
Nasogastric intubation	?	YY	YY	YY	YY	N?
Bladder catheterisation	?	YY	YY	YY	YY	N?
AMPLE history	?				YY	Y?
Morphine and C-medical autoinjections	YY				YY	Y?
Medicines (antibiotics/tetanus toxoid)	YY	YY	YY	YY	YY	N?
Secondary survey	?				YY	Y?
Maxillofacial: emergency measures	?Y				YY	Y?

LITHUANIA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures	?Y				YY	Y?
Larynx treatment	?N				YY	N?
Vessels (neck) treatment	?N				YY	N?
Haemothorax: tubethoracostomy	?N				YY	N?
Pneumothorax:tubethoracostomy	?N				YY	N?
Visceral protrusion: coverage	YY	YY	YY	YY	YY	Y?
Vertebrae/cord: immobilisation	YY	YY	YY	YY	YY	Y?
Limbs: splintage, dressing	YY	YY	YY	YY	YY	Y?
Limbs: tourniquet	YY	YY	YY	YY	YY	Y?
Eyes: rinsing, coverage	YY	YY	YY	YY	YY	Y?
Burns: cooling, dressing	YY	YY	YY	YY	YY	Y?
Burns: i.v	YY	YY	YY	YY	YY	Y?
Burns: escharotomy	YN				YN	N?
Hypothermia: management	YN	YY	YY	YY	YY	Y?
Local cold injuries: management	Y?	Y			YY	?
Electric injuries: treatment	YY	YY	YY	YY	YY	Y?
Children treatment	YY	YY	YY	YY	YY	N?
Women (pregnant) treatment	YY	YY	YY	YY	YY	N?
Elderly treatment	YY	YY	YY	YY	YY	N?
Bites (animal, snake, etc)	?				YY	Y?
NBC- basic treatment	NN	NN	NN	NN	NN	Y?
Triageguidelines for evacuation	NN	NN	NN	NN	?	Y?

A.A2.14. THE NETHERLANDS

THE NETHERLANDS	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	YY
Triage for treatment	YY	NN	NN	NN	YY	YY
Primary survey	YY	YY	YY	YY	YY	YY
C.spine immobilisation	YY	YY	YY	YY	YY	YY
Chin lift/jaw thrust	YY	YY	YY	YY	YY	YY
Opening mouth/finger sweep	YY	YY	YY	YY	YY	YY
Suctioning	YY	YY	YY	YY	YY	YY
Oropharangeal airway	YY	YY	YY	YY	YY	YY
Nasopharangeal airway	NN	YY	NN	YY	YY	YY
Endotracheal intubation	YY	YY	NN	YY	YY	NN
Cricothyroidotomy	YY	YY	YY	YY	YY	YY
Recovery position	YY	YY	YY	YY	YY	YY
Oxygen	YY	YY	YY	YY	YY	YY
Exhaled Air-Resuscitation (EAR)	YY	YY	YY	YY	YY	YY
CPR	YY	YY	YY	YY	YY	YY
IPPV (balloon)	YY	YY	NN	YY	YY	YY
Tensionpneumothorax, needle	YY	YY	YY	YY	YY	YY
", tube	NN	NN	NN	NN	YY	NN
Flail chest: immobilisation	YY	YY	YY	YY	YY	YY
Open pneumothorax: seal	YY	YY	YY	YY	YY	YY
Massive haemothorax: drain	NN	NN	YY	NN	YY	NN
External blood loss: compression	YY	YY	YY	YY	YY	YY
Shock: fluids	YY	YY	YY	YY	YY	YY
Tamponade: pericardiocentesis	NN	NN	NN	NN	YY	NN
Defibrillation/automatic	YY	YY	NN	YY	YY	YY
Determination: LOC/pup. Reaction	YY	YY	YY	YY	YY	YY
Corticosteroids in spinal trauma	NN	NN	NN	NN	YY	NN
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	NN	NN	NN	NN	YY	NN
Sonography (evaluation)	NN	NN	NN	NN	YY	NN
Pulsoximetry	YY	YY	YY	YY	YY	YY
Capnography	NN	YY	NN	YY	YY	NN
ECG (evaluation)	NN	YY	NN	YY	YY	NN
Nasogastric intubation	NN	YY	YY	YY	YY	NN
Bladder catheterisation	YY	YY	YY	YY	YY	YY
AMPLE history	YY	YY	NN	NN	YY	NN
Morphine and C-medical autoinjections	YY	NN	YY	YY	YY	YY
Medicines (antibiotics/tetanus toxoid)	YY	YY	YY	YY	YY	NN
Secondary survey	NN	YY	YY	NN	YY	NN
Maxillofacial: emergency	YY	YY	YY	YY	YY	YY

THE NETHERLANDS	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
measures						
Skull: emergency measures	YY	NN	YY	YY	YY	YY
Larynx treatment	NN	NN	YY	YY	YY	YY
Vessels (neck) treatment	NN	NN	NN	NN	YY	NN
Haemothorax: tubethoracostomy	NN	NN	NN	NN	YY	NN
Pneumothorax:tubethoracostomy	NN	NN	NN	NN	YY	NN
Visceral protrusion: coverage	YN	YY	YY	YY	YY	YY
Vertebrae/cord: immobilisation	YY	YY	YY	YY	YY	YY
Limbs: splintage, dressing	YY	YY	YY	YY	YY	YY
Limbs: tourniquet	YY	YY	YY	YY	YY	YY
Eyes: rinsing, coverage	YY	YY	YY	YY	YY	YY
Burns: cooling, dressing	YY	YY	YY	YY	YY	YY
Burns: i.v	YY	YY	YY	YY	YY	YY
Burns: escharotomy	NN	NN	NN	NN	YY	NN
Hypothermia: management	YY	YY	YY	YY	YY	YY
Local cold injuries: management	YY	YY	YY	YY	YY	YY
Electric injuries: treatment	YY	YY	YY	YY	YY	YY
Children treatment	YY	YY	YY	YY	YY	YY
Women (pregnant) treatment	YY	YY	YY	YY	YY	YY
Elderly treatment	YY	YY	YY	YY	YY	YY
Bites (animal, snake, etc)	NN	NN	NN	NN	YY	NN
NBC- basic treatment	YY	YY	YY	YY	YY	YY
Triageguidelines for evacuation	YY	NN	NN	NN	YY	YY

A.A2.15. NORWAY

NORWAY	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	YY
Triage for treatment	YY	YY	YY	YY	YY	YY
Primary survey	NN	NN	NN	NN	NN	NN
C.spine immobilisation	YY	YY	YY	YY	YY	YY
Chin lift/jaw thrust	YY	YY	YY	YY	YY	YY
Opening mouth/finger sweep	YY	YY	YY	YY	YY	YY
Suctioning	YY	YY	YY	YY	YY	YY
Oropharangeal airway	YY	YY	YY	YY	YY	YY
Nasopharangeal airway	NY	NY	NY	NY	NY	NY
Endotracheal intubation	NN	YN	NN	NN	YY	NN
Cricothyroidotomy	NN	NN	NN	NN	NY	NN
Recovery position	YY	YY	YY	YY	YY	YY
Oxygen	YY	YY	YY	YY	YY	YY
Exhaled Air-Resuscitation (EAR)	YY	YY	YY	YY	YY	YY
CPR	YY	YY	YY	YY	YY	YY
IPPV (balloon)	YY	YY	YY	YY	YY	YY
Tensionpneumothorax, needle	YN	YN	YN	YN	YY	YN
", tube	NN	NN	NN	NN	YY	NN
Flail chest: immobilisation	YY	YY	YY	YY	YY	YY
Open pneumothorax: seal	YY	YY	YY	YY	YY	YY
Massive haemothorax: drain	NN	NN	NN	NN	YY	NN
External blood loss: compression	YY	YY	YY	YY	YY	YY
Shock: fluids	YN	YN	YN	YN	YY	YN
Tamponade: pericardiocentesis	NN	NN	NN	NN	NY	NN
Defibrillation/automatic	YY	YY	YY	YY	YY	NY
Determination: LOC/pup. Reaction	YY	YY	YY	YY	YY	YY
Corticosteroids in spinal trauma	NN	NN	NN	NN	NY	NN
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	NN	NN	NN	NN	YY	NN
Sonography (evaluation)	NN	NN	NN	NN	NY	NN
Pulsoximetry	YN	YY	YY	YY	YY	YY
Capnography	NN	YY	NN	YY	YY	NN
ECG (evaluation)	NN	YN	NN	YN	YN	NN
Nasogastric intubation	YY	YY	YY	YY	YY	NN
Bladder catheterisation	YY	YY	YY	YY	YY	NN
AMPLE history	YY	YY	YY	YY	YY	YY
Morphine and C-medical autoinjections	YN	YN	YN	YN	YY	YN
Medicines (antibiotics/tetanus toxoid)	YN	YN	YN	YN	YN	YN
Secondary survey	NN	NN	NN	NN	NN	NN
Maxillofacial: emergency	YY	YY	YY	YY	YY	YY

NORWAY	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
measures						
Skull: emergency measures	YY	YY	YY	YY	YY	YY
Larynx treatment	NN	NN	NN	NN	?Y	NN
Vessels (neck) treatment	NN	NN	NN	NN	?Y	NN
Haemothorax: tubethoracostomy	NN	NN	NN	NN	YY	NN
Pneumothorax:tubethoracostomy	NN	NN	NN	NN	YY	NN
Visceral protrusion: coverage	YY	YY	YY	YY	YY	YY
Vertebrae/cord: immobilisation	YY	YY	YY	YY	YY	YY
Limbs: splintage, dressing	YY	YY	YY	YY	YY	YY
Limbs: tourniquet	YY	YY	YY	YY	YY	YY
Eyes: rinsing, coverage	YY	YY	YY	YY	YY	YY
Burns: cooling, dressing	YY	YY	YY	YY	YY	YY
Burns: i.v	YN	YN	YN	YN	YY	YN
Burns: escharotomy	NN	NN	NN	NN	YY	NN
Hypothermia: management	YY	YY	YY	YY	YY	YY
Local cold injuries: management	YY	YY	YY	YY	YY	YY
Electric injuries: treatment	YY	YY	YY	YY	YY	YY
Children treatment	YY	YY	YY	YY	YY	NY
Women (pregnant) treatment	YY	YY	YY	YY	YY	NY
Elderly treatment	YY	YY	YY	YY	YY	NY
Bites (animal, snake, etc)	NY	NY	NY	NY	?Y	NY
NBC- basic treatment	YY	YY	YY	YY	YY	YY
Triageguidelines for evacuation	YY	YY	YY	YY	YY	YY

A.A2.16. POLAND (INTENTIONALLY BLANK)

POLAND	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"						
Triage for treatment						
Primary survey						
C.spine immobilisation						
Chin lift/jaw thrust						
Opening mouth/finger sweep						
Suctioning						
Oropharyngeal airway						
Nasopharyngeal airway						
Endotracheal intubation						
Cricothyroidotomy						
Recovery position						
Oxygen						
Exhaled Air-Resuscitation (EAR)						
CPR						
IPPV (balloon)						
Tension pneumothorax						
" , tube						
Flail chest: immobilisation						
Open pneumothorax: seal						
Massive haemothorax: drain						
External blood loss: compression						
Shock: fluids						
Tamponade: pericardiocentesis						
Defibrillation/automatic						
Determination: LOC/pup. Reaction						
Corticosteroids in spinal trauma						
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)						
Sonography (evaluation)						
Pulsoximetry						
Capnography						
ECG (evaluation)						
Nasogastric intubation						
Bladder catheterisation						
AMPLE history						
Morphine and C-medical autoinjections						
Medicines (antibiotics/tetanus toxoid)						
Secondary survey						
Maxillofacial: emergency measures						

POLAND	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures						
Larynx treatment						
Vessels (neck) treatment						
Haemothorax: tubethoracostomy						
Pneumothorax:tubethoracostomy						
Visceral protrusion: coverage						
Vertebrae/cord: immobilisation						
Limbs: splintage, dressing						
Limbs: tourniquet						
Eyes: rinsing, coverage						
Burns: cooling, dressing						
Burns: i.v						
Burns: escharotomy						
Hypothermia: management						
Local cold injuries: management						
Electric injuries: treatment						
Children treatment						
Women (pregnant) treatment						
Elderly treatment						
Bites (animal, snake, etc)						
NBC- basic treatment						
Triageguidelines for evacuation						

A.A2.17. PORTUGAL (INTENTIONALLY BLANK)

PORTUGAL	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"						
Triage for treatment						
Primary survey						
C.spine immobilisation						
Chin lift/jaw thrust						
Opening mouth/finger sweep						
Suctioning						
Oropharyngeal airway						
Nasopharyngeal airway						
Endotracheal intubation						
Cricothyroidotomy						
Recovery position						
Oxygen						
Exhaled Air-Resuscitation (EAR)						
CPR						
IPPV (balloon)						
Tension pneumothorax						
"", tube						
Flail chest: immobilisation						
Open pneumothorax: seal						
Massive haemothorax: drain						
External blood loss: compression						
Shock: fluids						
Tamponade: pericardiocentesis						
Defibrillation/automatic						
Determination: LOC/pup. Reaction						
Corticosteroids in spinal trauma						
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)						
Sonography (evaluation)						
Pulsoximetry						
Capnography						
ECG (evaluation)						
Nasogastric intubation						
Bladder catheterisation						
AMPLE history						
Morphine and C-medical autoinjections						
Medicines (antibiotics/tetanus toxoid)						
Secondary survey						
Maxillofacial: emergency measures						

PORTUGAL	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures						
Larynx treatment						
Vessels (neck) treatment						
Haemothorax: tubethoracostomy						
Pneumothorax:tubethoracostomy						
Visceral protrusion: coverage						
Vertebrae/cord: immobilisation						
Limbs: splintage, dressing						
Limbs: tourniquet						
Eyes: rinsing, coverage						
Burns: cooling, dressing						
Burns: i.v						
Burns: escharotomy						
Hypothermia: management						
Local cold injuries: management						
Electric injuries: treatment						
Children treatment						
Women (pregnant) treatment						
Elderly treatment						
Bites (animal, snake, etc)						
NBC- basic treatment						
Triageguidelines for evacuation						

A.A2.18. ROMANIA (INTENTIONALLY BLANK)

ROMANIA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"						
Triage for treatment						
Primary survey						
C.spine immobilisation						
Chin lift/jaw thrust						
Opening mouth/finger sweep						
Suctioning						
Oropharyngeal airway						
Nasopharyngeal airway						
Endotracheal intubation						
Cricothyroidotomy						
Recovery position						
Oxygen						
Exhaled Air-Resuscitation (EAR)						
CPR						
IPPV (balloon)						
Tension pneumothorax						
" , tube						
Flail chest: immobilisation						
Open pneumothorax: seal						
Massive haemothorax: drain						
External blood loss: compression						
Shock: fluids						
Tamponade: pericardiocentesis						
Defibrillation/automatic						
Determination: LOC/pup. Reaction						
Corticosteroids in spinal trauma						
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)						
Sonography (evaluation)						
Pulsoximetry						
Capnography						
ECG (evaluation)						
Nasogastric intubation						
Bladder catheterisation						
AMPLE history						
Morphine and C-medical autoinjections						
Medicines (antibiotics/tetanus toxoid)						
Secondary survey						
Maxillofacial: emergency measures						

ROMANIA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures						
Larynx treatment						
Vessels (neck) treatment						
Haemothorax: tubethoracostomy						
Pneumothorax:tubethoracostomy						
Visceral protrusion: coverage						
Vertebrae/cord: immobilisation						
Limbs: splintage, dressing						
Limbs: tourniquet						
Eyes: rinsing, coverage						
Burns: cooling, dressing						
Burns: i.v						
Burns: escharotomy						
Hypothermia: management						
Local cold injuries: management						
Electric injuries: treatment						
Children treatment						
Women (pregnant) treatment						
Elderly treatment						
Bites (animal, snake, etc)						
NBC- basic treatment						
Triageguidelines for evacuation						

A.A2.19. SLOVAKIA

SLOVAK REPUBLIC	General nurse	Anesthesia nurse¹⁾	Surgical nurse	Intensive nurse¹⁾	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	YY
Triage for treatment	YY	YY	YY	YY	YY	YY
Primary survey	YY	YY	YY	YY	YY	YY
C.spine immobilisation	YY	YY	YY	YY	YY	YY
Chin lift/ jaw trust	YY	YY	YY	YY	YY	YY
Opening mouth/ finger sweep	YY	YY	YY	YY	YY	YY
Suctioning	YY	YY	YY	YY	YY	YY
Oropharangeal airway	YY	YY	YY	YY	YY	YY
Nasopharangeal airway	YY	YY	YY	YY	YY	YY
Endotracheal intubation	NN	YN	NN	YN	YY	YY
Cricothyroidotomy	YN	YY	YN	YY	YY	YY
Recovery position	YY	YY	YY	YY	YY	YY
Oxygen	YY	YY	YY	YY	YY	YY
Exhaled Air-Resuscitation (EAR)	YY	YY	YY	YY	YY	YY
CPR	YY	YY	YY	YY	YY	YY
IPPV (balloon)	NN	YN	NN	YN	YY	YN
Tension-pneumothorax	YN	YY	YN	YY	YY	YY
", tube	YN	YY	YN	YY	YY	YY
Flail chest: immobilisation	NN	YN	YN	YN	YY	YN
Open pneumothorax: seal	YY	YY	YY	YY	YY	YY
Massive haemothorax: drain	YN	YN	YN	YN	YY	YN
External blood loss: compression	YY	YY	YY	YY	YY	YY
Shock: fluids	YN	YY	YY	YY	YY	YY
Tamponade: pericardiocentesis	NN	NN	NN	NN	NN	NN
Defibrillation/ automatic	YY	YY	YY	YY	YY	YY
Determination: LOC/ pup. Reaction	YN	YY	YN	YY	YY	YY
Corticosteroids in spinal trauma	NN	NN	NN	NN	YY	NN
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	NN	NN	NN	NN	YY ²⁾	NN
Sonography	NN	NN	NN	NN	YY ²⁾	NN

SLOVAK REPUBLIC	General nurse	Anesthesi a nurse ¹⁾	Surgical nurse	Intensive nurse ¹⁾	Physician	Independent medic
(evaluation)						
Pulsoximetry	YY	YY	YY	YY	YY	YY
Capnography	NN	YN	NN	YN	YY	YY
ECG (evaluation)	NN	YY	NN	YY	YY	YY
Nasogastric intubation	YN	YY	YN	YY	YY	YY
Bladder catheterisation	YN	YY	YN	YY	YY	YY
AMPLE history	YY	YY	YY	YY	YY	YY
Morphine and C-medical autoinjections	YY	YY	YY	YY	YY	YY
Medicines (antibiotics/ tetanus toxoid)	YN	YN	YN	YN	YY	YN
Secondary survey	YN	YN	YN	YN	YY	YN
Maxillofacial: emergency measures	NN	NN	NN	NN	YY	NN
Skull: emergency measures	NN	NN	NN	NN	YY	NN
Larynx treatment	NN	NN	NN	NN	YY ²⁾	NN
Vessels (neck) treatment	NN	NN	NN	NN	YY ²⁾	NN
Haemothorax: tubethoracostomy	NN	NN	NN	NN	YY	NN
Pneumothorax: tubethoracostomy	NN	NN	NN	NN	YY	NN
Visceral protrusion: coverage	YY	YY	YY	YY	YY	YY
Vertebrae/cord: immobilisation	YY	YY	YY	YY	YY	YY
Limbs: splintage, dressing	YY	YY	YY	YY	YY	YY
Limbs: tourniquet	YY	YY	YY	YY	YY	YY
Eyes: rinsing, coverage	YY	YY	YY	YY	YY	YY
Burns: cooling, dressing	YY	YY	YY	YY	YY	YY
Burns: i.v	YN	YY	YN	YY	YY	YY
Burns: escharotomy	NN	NN	NN	NN	YY ²⁾	NN
Hypothermia: management	YY	YY	YY	YY	YY	YY
Local cold injuries: management	YY	YY	YY	YY	YY	YY
Electric injuries: treatment	YY	YY	YY	YY	YY	YY
Children treatment	NN	NN	NN	NN	YY ²⁾	NN
Women (pregnant) treatment	NN	NN	NN	NN	YY ²⁾	NN
Elderly treatment	NN	NN	NN	NN	YY	NN
Bites (animal, snake, etc)	YY	YY	YY	YY	YY	YY

SLOVAK REPUBLIC	General nurse	Anesthesi a nurse ¹⁾	Surgical nurse	Intensive nurse ¹⁾	Physician	Independent medic
NBC- basic treatment	YN	YN	YN	YN	YY	YN
Triageguidelines for evacuation	YN	YY	YN	YY	YY	YY

- 1) Intensive care and an Anesthesia is the one branch in Slovakia (Anesthesia and intensive care).
- 2) Specialist.

A.A2.20. SLOVENIA (INTENTIONALLY BLANK)

SLOVENIA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"						
Triage for treatment						
Primary survey						
C.spine immobilisation						
Chin lift/jaw thrust						
Opening mouth/finger sweep						
Suctioning						
Oropharyngeal airway						
Nasopharyngeal airway						
Endotracheal intubation						
Cricothyroidotomy						
Recovery position						
Oxygen						
Exhaled Air-Resuscitation (EAR)						
CPR						
IPPV (balloon)						
Tension pneumothorax						
"", tube						
Flail chest: immobilisation						
Open pneumothorax: seal						
Massive haemothorax: drain						
External blood loss: compression						
Shock: fluids						
Tamponade: pericardiocentesis						
Defibrillation/automatic						
Determination: LOC/pup. Reaction						
Corticosteroids in spinal trauma						
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)						
Sonography (evaluation)						
Pulsoximetry						
Capnography						
ECG (evaluation)						
Nasogastric intubation						
Bladder catheterisation						
AMPLE history						
Morphine and C-medical autoinjections						
Medicines (antibiotics/tetanus toxoid)						
Secondary survey						
Maxillofacial: emergency measures						

SLOVENIA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures						
Larynx treatment						
Vessels (neck) treatment						
Haemothorax: tubethoracostomy						
Pneumothorax:tubethoracostomy						
Visceral protrusion: coverage						
Vertebrae/cord: immobilisation						
Limbs: splintage, dressing						
Limbs: tourniquet						
Eyes: rinsing, coverage						
Burns: cooling, dressing						
Burns: i.v						
Burns: escharotomy						
Hypothermia: management						
Local cold injuries: management						
Electric injuries: treatment						
Children treatment						
Women (pregnant) treatment						
Elderly treatment						
Bites (animal, snake, etc)						
NBC- basic treatment						
Triageguidelines for evacuation						

A.A2.21. SPAIN (INTENTIONALLY BLANK)

SPAIN	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"						
Triage for treatment						
Primary survey						
C.spine immobilisation						
Chin lift/jaw thrust						
Opening mouth/finger sweep						
Suctioning						
Oropharyngeal airway						
Nasopharyngeal airway						
Endotracheal intubation						
Cricothyroidotomy						
Recovery position						
Oxygen						
Exhaled Air-Resuscitation (EAR)						
CPR						
IPPV (balloon)						
Tension pneumothorax						
" , tube						
Flail chest: immobilisation						
Open pneumothorax: seal						
Massive haemothorax: drain						
External blood loss: compression						
Shock: fluids						
Tamponade: pericardiocentesis						
Defibrillation/automatic						
Determination: LOC/pup. Reaction						
Corticosteroids in spinal trauma						
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)						
Sonography (evaluation)						
Pulsoximetry						
Capnography						
ECG (evaluation)						
Nasogastric intubation						
Bladder catheterisation						
AMPLE history						
Morphine and C-medical autoinjections						
Medicines (antibiotics/tetanus toxoid)						
Secondary survey						
Maxillofacial: emergency measures						

SPAIN	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures						
Larynx treatment						
Vessels (neck) treatment						
Haemothorax: tubethoracostomy						
Pneumothorax:tubethoracostomy						
Visceral protrusion: coverage						
Vertebrae/cord: immobilisation						
Limbs: splintage, dressing						
Limbs: tourniquet						
Eyes: rinsing, coverage						
Burns: cooling, dressing						
Burns: i.v						
Burns: escharotomy						
Hypothermia: management						
Local cold injuries: management						
Electric injuries: treatment						
Children treatment						
Women (pregnant) treatment						
Elderly treatment						
Bites (animal, snake, etc)						
NBC- basic treatment						
Triageguidelines for evacuation						

A.A2.22. TURKEY

TURKEY	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	
Triage for treatment	YY	YY	YY	YY	YY	
Primary survey	YY	YY	YY	YY	YY	
C.spine immobilisation	YY	YY	YY	YY	YY	
Chin lift/jaw thrust	YY	YY	YY	YY	YY	
Opening mouth/finger sweep	YY	YY	YY	YY	YY	
Suctioning	YY	YY	YY	YY	YY	
Oropharangeal airway	YY	YY	YY	YY	YY	
Nasopharangeal airway	NN	YY	YY	YY	YY	
Endotracheal intubation	NN	NN	NN	NN	YY	
Cricothyroidotomy	NN	NN	NN	NN	YY	
Recovery position	YY	YY	YY	YY	YY	
Oxygen	YY	YY	YY	YY	YY	
Exhaled Air-Resuscitation (EAR)	YY	YY	YY	YY	YY	
CPR	NN	NN	NN	NN	YY	
IPPV (balloon)	NN	NN	NN	NN	YY	
Tensionpneumothorax, needle	NN	NN	NN	NN	YY	
", tube	NN	NN	NN	NN	YY	
Flail chest: immobilisation	YY	YY	YY	YY	YY	
Open pneumothorax: seal	NN	NN	NN		YY	
Massive haemothorax: drain	NN	NN	NN	NN	YY	
External blood loss: compression	YY	YY	YY	NN	YY	
Shock: fluids	NN	NN	NN	YY	YY	
Tamponade: pericardiocentesis	NN	NN	NN	NN	YY	
Defibrillation/automatic	NN	NN	NN	NN	YY	
Determination: LOC/pup. Reaction	YY	YY	NN	NN	YY	
Corticosteroids in spinal trauma	NN	NN	YY	YY	YY	
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	NN	NN	NN	NN	YY	
Sonography (evaluation)	NN	NN	NN	NN	YY	
Pulsoximetry	YY	YY	NN	NN	YY	
Capnography	NN	NN	YY	YY	YY	
ECG (evaluation)	NN	NN	NN	NN	YY	
Nasogastric intubation	NN	NN	NN	NN	YY	
Bladder catheterisation	NN	YY	NN	NN	YY	
AMPLE history	YY	YY	YY	YY	YY	
Morphine and C-medical autoinjections	NN	NN	YY	YY	YY	
Medicines (antibiotics/tetanus toxoid)	NN	NN	NN	NN	YY	
Secondary survey	NN	NN	NN	NN	YY	
Maxillofacial: emergency	NN	YY	NN	NN	YY	

measures						
Skull: emergency measures	NN	YY	YY	YY	YY	
Larynx treatment	NN	NN	YY	YY	YY	
Vessels (neck) treatment	NN	YY	NN	NN	YY	
Haemothorax: tubethoracostomy	NN	NN	YY	YY	YY	
Pneumothorax:tubethoracostomy	NN	NN	NN	NN	YY	
Visceral protrusion: coverage	YY	NN	NN	NN	YY	
Vertebrae/cord: immobilisation	NN	YY	NN	NN	YY	
Limbs: splintage, dressing	NN	NN	YY	YY	YY	
Limbs: tourniquet	YY	YY	NN	NN	YY	
Eyes: rinsing, coverage	NN	YY	YY	YY	YY	
Burns: cooling, dressing	NN	YY	YY	YY	YY	
Burns: i.v	NN	NN	NN	YY	YY	
Burns: escharotomy	NN	NN	NN	NN	YY	
Hypothermia: management	NN	NN	NN	NN	YY	
Local cold injuries: management	NN	NN	NN	NN	YY	
Electric injuries: treatment	NN	NN	NN	NN	YY	
Children treatment	?	?	?	?	?	
Women (pregnant) treatment	?	?	?	?	?	
Elderly treatment	?	?	?	?	?	
Bites (animal, snake, etc)	NN	NN	NN	NN	YY	
NBC- basic treatment	NN	NN	NN	NN	YY	
Triageguidelines for evacuation	NN	NN	NN	NN	YY	

A.A2.23. UNITED KINGDOM

UK	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	YY
Triage for treatment	YY	YY	YY	YY	YY	YY
Primary survey	YY	YY	YY	YY	YY	YY
C.spine immobilisation	YY	YY	YY	YY	YY	YY
Chin lift/jaw thrust	YY	YY	YY	YY	YY	YY
Opening mouth/finger sweep	YY	YY	YY	YY	YY	YY
Suctioning	YY	YY	YY	YY	YY	YY
Oropharangeal airway	YY	YY	YY	YY	YY	YY
Nasopharangeal airway	YY	YY	YY	YY	YY	YY
Endotracheal intubation	NN	NN	?	YY	YY	NN
Cricothyroidotomy	YY	YY	YY	YY	YY	NN
Recovery position	YY	YY	YY	YY	YY	YY
Oxygen	YY	YY	YY	YY	YY	YY
Exhaled Air-Resuscitation (EAR)	YY	YY	YY	YY	YY	YY
CPR	YY	YY	YY	YY	YY	YY
IPPV (balloon)	NN	NN	?	YY	YY	NN
Tensionpneumothorax	YY	YY	YY	YY	YY	NN
", tube	YY	YY	YY	YY	YY	NN
Flail chest: immobilisation	NN	NN	NN	NN	YY	YY
Open pneumothorax: seal	YY	YY	YY	YY	YY	YY
Massive haemothorax: drain	NN	NN	NN	NN	YY	NN
External blood loss: compression	YY	YY	YY	YY	YY	YY
Shock: fluids	YY	YY	YY	YY	YY	YY
Tamponade: pericardiocentesis	NN	NN	NN	NN	YY	NN
Defibrillation/automatic	YY	YY	YY	YY	YY	YY
Determination: LOC/pup. Reaction	NN	NN	NN	NN	YY	NN
Corticosteroids in spinal trauma	NN	NN	NN	NN	YY	NN
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	YY	YY	YY	YY	YY	NN
Sonography (evaluation)	NN	NN	NN	NN	NY	NN
Pulsoximetry	YY	YY	YY	YY	YY	NN
Capnography	NN	NN	?	YY	YY	NN
ECG (evaluation)	YY	YY	?	YY	YY	NN
Nasogastric intubation	YY	YY	YY	YY	YY	NN
Bladder catheterisation	YY	YY	YY	YY	YY	NN
AMPLE history	NN	NN	?	?	YY	YY
Morphine and C-medical autoinjections	YY	YY	YY	YY	YY	YY
Medicines (antibiotics/tetanus toxoid)	YY	YY	YY	YY	YY	YY
Secondary survey	YY	YY	YY	YY	YY	YY
Maxillofacial: emergency measures	NN	NN	NN	NN	YY	YY

UK	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures	YY	YY	YY	YY	YY	YY
Larynx treatment	NN	NN	NN	NN	YY	NN
Vessels (neck) treatment	YY	YY	?	NN	YY	NN
Haemothorax: tubethoracostomy	NN	NN	NN	NN	YY	NN
Pneumothorax:tubethoracostomy	NN	NN	NN	NN	YY	NN
Visceral protrusion: coverage	NN	NN	NN	NN	YY	YY
Vertebrae/cord: immobilisation	YY	YY	YY	YY	YY	YY
Limbs: splintage, dressing	YY	YY	YY	YY	YY	YY
Limbs: tourniquet	YY	NN	?	?	YY	YY
Eyes: rinsing, coverage	NN	YY	YY	YY	YY	YY
Burns: cooling, dressing	YY	YY	YY	YY	YY	YY
Burns: i.v	YY	YY	YY	YY	YY	YY
Burns: escharotomy	NN	NN	NN	NN	YY	NN
Hypothermia: management	YY	YY	YY	YY	YY	YY
Local cold injuries: management	YY	YY	YY	YY	YY	YY
Electric injuries: treatment	NN	NN	NN	?	YY	YY
Children treatment	NN	NN	?	YY	YY	YY
Women (pregnant) treatment	YY	YY	?	YY	YY	YY
Elderly treatment	YY	YY	?	YY	YY	YY
Bites (animal, snake, etc)	YY	YY	YY	?	YY	YY
NBC- basic treatment	YY	YY	YY	YY	YY	YY
Triageguidelines for evacuation	YN	YN		YY	YY	YY

A.A2.24. UNITED STATES

UNITED STATES	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"						
Triage for treatment						
Primary survey						
C.spine immobilisation						
Chin lift/jaw thrust						
Opening mouth/finger sweep						
Suctioning						
Oropharyngeal airway						
Nasopharyngeal airway						
Endotracheal intubation						
Cricothyroidotomy						
Recovery position						
Oxygen						
Exhaled Air-Resuscitation (EAR)						
CPR						
IPPV (balloon)						
Tension pneumothorax						
"", tube						
Flail chest: immobilisation						
Open pneumothorax: seal						
Massive haemothorax: drain						
External blood loss: compression						
Shock: fluids						
Tamponade: pericardiocentesis						
Defibrillation/automatic						
Determination: LOC/pup. Reaction						
Corticosteroids in spinal trauma						
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)						
Sonography (evaluation)						
Pulsoximetry						
Capnography						
ECG (evaluation)						
Nasogastric intubation						
Bladder catheterisation						
AMPLE history						
Morphine and C-medical autoinjections						
Medicines (antibiotics/tetanus toxoid)						
Secondary survey						
Maxillofacial: emergency measures						

UNITED STATES	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures						
Larynx treatment						
Vessels (neck) treatment						
Haemothorax: tubethoracostomy						
Pneumothorax:tubethoracostomy						
Visceral protrusion: coverage						
Vertebrae/cord: immobilisation						
Limbs: splintage, dressing						
Limbs: tourniquet						
Eyes: rinsing, coverage						
Burns: cooling, dressing						
Burns: i.v						
Burns: escharotomy						
Hypothermia: management						
Local cold injuries: management						
Electric injuries: treatment						
Children treatment						
Women (pregnant) treatment						
Elderly treatment						
Bites (animal, snake, etc)						
NBC- basic treatment						
Triageguidelines for evacuation						

A.A2.25. AUSTRIA

AUSTRIA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	
Triage for treatment	NN	NN	NN	NN	YY	
Primary survey	YY	YY	YY	YY	YY	
C.spine immobilisation	YY	YY	YY	YY	YY	
Chin lift/jaw thrust	YY	YY	YY	YY	YY	
Opening mouth/finger sweep	YY	YY	YY	YY	YY	
Suctioning	YY	YY	YY	YY	YY	
Oropharangeal airway	YY	YY	YY	YY	YY	
Nasopharangeal airway	YY	YY	YY	YY	YY	
Endotracheal intubation	NN	NN	NN	NN	YY	
Cricothyroidotomy	NN	NN	NN	NN	YY	
Recovery position	YY	YY	YY	YY	YY	
Oxygen	YY	YY	YY	YY	YY	
Exhaled Air-Resuscitation (EAR)	YY	YY	YY	YY	YY	
CPR	NN	NN	NN	NN	YY	
IPPV (balloon)	YY	YY	YY	YY	YY	
Tensionpneumothorax, needle	NN	NN	NN	NN	YY	
", tube	NN	NN	NN	NN	YY	
Flail chest: immobilisation	YY	YY	YY	YY	YY	
Open pneumothorax: seal	YY	YY	YY	YY	YY	
Massive haemothorax: drain	NN	NN	NN	NN	YY	
External blood loss: compression	YY	YY	YY	YY	YY	
Shock: fluids	NN	NN	NN	NN	YY	
Tamponade: pericardiocentesis	NN	NN	NN	NN	YY	
Defibrillation/automatic	YY	YY	YY	YY	YY	
Determination: LOC/pup. Reaction	YY	YY	YY	YY	YY	
Corticosteroids in spinal trauma	NN	NN	NN	NN	YY	
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	NN	NN	NN	NN	YY	
Sonography (evaluation)	NN	NN	NN	NN	YY	
Pulsoximetry	YY	YY	YY	YY	YY	
Capnography	NN	NN	NN	NN	YY	
ECG (evaluation)	NN	NN	NN	NN	YY	
Nasogastric intubation	YY	YY	YY	YY	YY	
Bladder catheterisation	YY	YY	YY	YY	YY	
AMPLE history	YY	YY	YY	YY	YY	
Morphine and C-medical autoinjections	YY	YY	YY	YY	YY	
Medicines (antibiotics/tetanus toxoid)	YY	YN	YN	YN	YY	
Secondary survey	NN	NN	NN	NN	YY	
Maxillofacial: emergency	NN	NN	NN	NN	YY	

AUSTRIA	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
measures						
Skull: emergency measures	NN	NN	NN	NN	YY	
Larynx treatment	NN	NN	NN	NN	YY	
Vessels (neck) treatment	NN	NN	NN	NN	YY	
Haemothorax: tubethoracostomy	NN	NN	NN	NN	YY	
Pneumothorax:tubethoracostomy	NN	NN	NN	NN	YY	
Visceral protrusion: coverage	YY	YY	YY	YY	YY	
Vertebrae/cord: immobilisation	YY	YY	YY	YY	YY	
Limbs: splintage, dressing	YY	YY	YY	YY	YY	
Limbs: tourniquet	YY	YY	YY	YY	YY	
Eyes: rinsing, coverage	YY	YY	YY	YY	YY	
Burns: cooling, dressing	YY	YY	YY	YY	YY	
Burns: i.v	NN	NN	NN	NN	YY	
Burns: escharotomy	NN	NN	NN	NN	YY	
Hypothermia: management	NN	NN	NN	NN	YY	
Local cold injuries: management	YY	YY	YY	YY	YY	
Electric injuries: treatment	NN	NN	NN	NN	YY	
Children treatment	?	?	?	?	YY	
Women (pregnant) treatment	?	?	?	?	YY	
Elderly treatment	?	?	?	?	YY	
Bites (animal, snake, etc)	NN	NN	NN	NN	YY	
NBC- basic treatment	YY	Y?	YY	YY	YY	
Triageguidelines for evacuation	NN	NN	NN	NN	YY	

A.A2.25. SWEDEN

SWEDEN	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
"Own safety"	YY	YY	YY	YY	YY	YY
Triage for treatment	YY	YY	YY	YY	YY	NN
Primary survey	?	?	?	?	YY	?
C.spine immobilisation	YY	YY	YY	YY	YY	YY
Chin lift/jaw thrust	YY	YY	YY	YY	YY	YY
Opening mouth/finger sweep	YY	YY	YY	YY	YY	YY
Suctioning	YY	YY	YY	YY	YY	YY
Oropharangeal airway	YY	YY	YY	YY	YY	YY
Nasopharangeal airway	YY	YY	YY	YY	YY	YY
Endotracheal intubation		YY	NN	YY	YY	NN
Cricothyroidotomy	NN	NN	NN	NN	YY	NN
Recovery position	NN	YY	YY	YY	YY	YY
Oxygen	YY	YY	YY	YY	YY	YY
Exhaled Air-Resuscitation (EAR)	YY	YY	YY	YY	YY	YY
CPR	YY	YY	YY	YY	YY	YY
IPPV (balloon)	YY	YY	YY	YY	YY	NN
Tensionpneumothorax	NN	YY	NN	YY	YY	NN
", tube	NN	NN	NN	NN	YY	NN
Flail chest: immobilisation	NN	YY	YY	YY	YY	NN
Open pneumothorax: seal	NN	YY	YY	YY	YY	YY
Massive haemothorax: drain	YY	NN	NN	NN	YY	NN
External blood loss: compression	NN	YY	YY	YY	YY	YY
Shock: fluids	YY	YY	YY	YY	YY	NN
Tamponade: pericardiocentesis	YY	NN	NN	NN	YY	NN
Defibrillation/automatic	NN	YY	NN	YY	YY	NN
Determination: LOC/pup. Reaction	NN	NN	NN	NN	YY	NN
Corticosteroids in spinal trauma	NN	NN	NN	NN	YY	NN
Adjuncts X-ray: chest, pelvis, abdomen (evaluation)	NN	NN	NN	NN	YY	NN
Sonography (evaluation)	NN	NN	NN	NN	NN	NN
Pulsoximetry	NN	YY	YY	YY	YY	NN
Capnography	YY	YY	NN	YY	YY	NN
ECG (evaluation)	NN	NN	NN	NN	YY	NN
Nasogastric intubation	NN	YY	YY	YY	YY	NN
Bladder catheterisation	YY	YY	YY	YY	YY	NN
AMPLE history	YY	YY	YY	YY	YY	NN
Morphine and C-medical autoinjections	YY	YY	YY	YY	YY	YY
Medicines (antibiotics/tetanus toxoid)	YY	NN	NN	NN	YY	NN
Secondary survey	NN	NN	NN	NN	YY	NN
Maxillofacial: emergency measures	NN	NN	NN	NN	YY	NN

SWEDEN	General nurse	Anaesthesia nurse	Surgical nurse	Intensive nurse	Physician	Independent medic
Skull: emergency measures	NN	NN	NN	NN	YY	NN
Larynx treatment	NN	NN	NN	NN	YY	NN
Vessels (neck) treatment	NN	NN	NN	NN	YY	NN
Haemothorax: tubethoracostomy	NN	NN	NN	NN	YY	NN
Pneumothorax:tubethoracostomy	NN	NN	NN	NN	YY	NN
Visceral protrusion: coverage	NN	NN	YY	YY	YY	NN
Vertebrae/cord: immobilisation	NN	YY	YY	YY	YY	YY
Limbs: splintage, dressing	YY	YY	YY	YY	YY	YY
Limbs: tourniquet	YY	YY	YY	YY	YY	NN
Eyes: rinsing, coverage	YY	YY	YY	YY	YY	NN
Burns: cooling, dressing	YY	YY	YY	YY	YY	YY
Burns: i.v	YY	YY	YY	YY	YY	NN
Burns: escharotomy	NN	NN	NN	NN	YY	NN
Hypothermia: management	YY	YY	YY	YY	YY	NN
Local cold injuries: management	YY	YY	YY	YY	YY	YY
Electric injuries: treatment	NN	NN	NN	NN	YY	NN
Children treatment	?	?	?	?	?	?
Women (pregnant) treatment	?	?	?	?	?	?
Elderly treatment	?	?	?	?	?	?
Bites (animal, snake, etc)	YY	YY	YY	YY	YY	NN
NBC- basic treatment	NN	YY	NN	NN	YY	NN
Triageguidelines for evacuation	NN	NN	NN	NN	YY	NN

ANNEX B DIFFERENCES IN EDUCATION AND QUALIFICATIONS OF HEALTH CARE PERSONNEL
--

B.1. AIM

To give examples of how to set up education and training programs to achieve medical skills for medical health personnel who want to be able to participate in a multinational medical formation.

B.2. INTRODUCTION

AMedP-8.3 is thought as a toolbox of education and training skills necessary for medical health personnel. The following table is not comprehensive and included only as an example for what should be minimum requirement for medical training of medical military doctors.

B.3. GENERAL PHYSICIAN

The physician has to fulfill the following training:

- a. Language + education in medical ethics, international politics and NATO-procedures:
 - (1) MODULE 3, International Relations and Medical Ethics and
 - (2) MODULE 8, Language
- b. Trauma skills and knowledge:
 - (1) MODULE 2a, General Trauma Skills and Knowledge
 - (2) MODULE 2b, Tactical Trauma Skills and Knowledge
- c. Basic preventive medicine skills and knowledge.
- d. Basic CBRN skills and knowledge.
- e. Basic skills and knowledge of psychiatric trauma:
 - (1) MODULE 5, Stress Management
- f. Description and comparability of national medical education:

- (1) MODULE 9, Knowledge of Differences in Medic Education and Qualifications
- g. National mission certification (readiness).
- h. Updated practice within 1 to 2 years;
 - (1) MODULE 10, Current Proficiency in Primary Health Care Issues

B.4. DOCTORS OTHER THAN GENERAL PHYSICIANS (SPECIALISTS)

The physician has to fulfill the following training:

- a. Basic skills and knowledge of a GP.
- b. Updated practice within 1 to 2 years in own specialty.

B.5. PRE-DEPLOYMENT EDUCATION AND TRAINING

- 1. All physicians has to fulfill the following training:
 - a. Section and platoon training:
 - (1) MODULE 7, Mission Orientated Training
 - b. Trauma and diseases:
 - (1) MODULE 6, Disaster Relief
 - c. Communication.
 - d. Knowledge of sites (medical intelligence).
 - e. Epidemiology and tropical medicine if needed:
 - (1) MODULE 4, Environmental, Tropical Medicine and Epidemic Diseases
- 2. Similar training programmes can be set up for Nurses and Medics with regard to the medical health personnel's medical training and skills.

ANNEX C TRAINING OF MEDICAL STAFF IN PSYCHOLOGICAL ISSUES RELATED TO BIOLOGICAL WARFARE CASUALTIES
--

C.1. AIM

To give Guidelines and recommendations for Training of medical personnel on prevention and treatment of psychological effects related to biological warfare casualties or casualties of Weapons of Mass Destruction (WMD) should be part of a course on the practical medical aspects of WMD (CBRN medicine).

C.2. INTRODUCTION

This guideline has been made in co-operation with COMEDS Military Psychology (MP) Working Group (WG) on basis of the MP WG produced paper on this topic. The guidelines made by COMEDS Medical Training (MT) WG have afterwards been accepted by COMEDS MP WG.

C.3. GENERAL

Hereby a list of subjects which should be included in the training of medical personnel in a Course on “Psychological issues related to treatment of WMD casualties”:

- a. Advice to be given to the chain of command on the psychological effects of WMD.
- b. Psychological effects that can be expected in any “exceptional situation”, in a military and/or civilian population in general, and also in military medical personnel.
- c. Prevention thereof by giving appropriate information and training.
- d. Treatment thereof by appropriate means.
- e. Psychological reactions that may be caused by fear and in particular by fear of WMD attack.
- f. The importance of “medical intelligence” in providing information preceding an actual attack on which agents are most likely to be used.
- g. The importance of finding out as quickly as possible which agents have actually been used during an attack.

- h. Detailed information on which psychological disturbances can be caused by which agent.
- i. Detailed information on psychological side effects that may be caused by drugs used either as a preventive measure or in the treatment of victims of WMD attacks.
- j. How to differentiate between psychological effects caused by fear and psychological reactions directly or indirectly related to WMD, in order to correctly perform triage.
- k. Treatment of psychological disturbances caused either by WMD agents themselves or by specific medications used in the treatment of victims of WMD attack.

ANNEX D JOINT AND COMBINED MEDICAL EXERCISES FOR NATO RESPONSE FORCES

D.1. AIM

To give Guidelines and recommendations for Exercises, as part of Medical Training and the Certification process for NRF medical units.

D.2. INTRODUCTION

1. Exercises are an integral and important part of military training - including medical training - in order to maintain proficiency and competence as an individual and within a team.
2. Provision of Medical Training and Medical Exercises must be of a standard of medical care to achieve outcomes of treatment equating to best medical practice (ref. a). Medical Training must support the need for exercising Medical personnel/formations, which has to take part in multinational formations as a NATO Response Force (NRF). Through training and exercises it will be possible to support the generation of a coherent, joint, trained and certified medical force package with a high readiness, which will be tailored to a given assigned mission (ref. c).
3. Medical personnel / formations normally operate as part of military formations. Therefore, the principle should be established that medical scenarios must be integrated into military exercises and that medical personnel/formations participate in military exercises actively – in recognition of the necessity to train and exercise medical personnel/formations the same as any other military personnel / formation. Additionally, medical formations have to develop and conduct own exercises in order to increase efficiency of procedures as well as readiness and ability to interact with other forces and to be able to Certify Medical unit.
4. Exercises should reflect anticipated environments that require co-operation with and interaction among allied armed forces and/or civilian organisations. A common understanding of policy, regulations and directives is a prerequisite for successful joint and combined exercises.
5. As a means of standardization, the following basic fields of qualification and ability have to be considered for co-ordination of knowledge, experience and expertise on different support levels:
 - a. Readiness.
 - b. Flexibility.

- c. Mobility.
- d. Sustainability.
- e. Multinationality.

6. Medical personnel / formations, which need to achieve a medical certification, must be trained and certified to standards set by the Strategic Commanders (SCs) and approved by the Military Committee (MC).

D.3. METHODS OF TRAINING AND EXERCISE

1. Individual training and methods:

a. **Individual training:**

- (1) Individual formal medical education, qualification and training of medical personnel (medical officers and medical assistance personnel) are prerequisites for any kind of further training and education
- (2) Individual „on the job“ training with medical equipment and of medical procedures is of great importance. The improvement of medical skills is a prerequisite for the ability to keep up with and to act in accordance with the development of medical standards. When training medical skills it is important to train standardized medical Skills and procedures to enhance the Certification process
- (3) Also, medical personnel have to stay current in their basic military skills. The importance of professional military skills of medical personnel is one of the major lessons learned from previous conflicts. For medical professionals on all support levels – as for any other soldier - the competence to self defend and protect is an essential capability that has to be trained and continuously exercised. This is especially true under the conditions of asymmetric warfare

b. **Methods:**¹

- (1) Moulage
- (2) Skills lab (manikin, experimental animals)
- (3) Human Patient Simulator

¹ Lists of methods are not exhaustive.

- (4) Triage programmes
- (5) Multiple choice tests
- (6) Appropriate medical equipment
- (7) Computer assisted training
- (8) Emergency room and ambulances (military and civilian medical facilities)

2. Group training (collective or team training) and methods:

a. **Group Training:**

- (1) Training in groups (Role 1 – 3) is necessary to enhance acquired skills in a co-operative effort and to build up team experience for all tasks of medical treatment / support throughout the different roles and medical levels. When training medical skills it is important to train standardized medical Skills and procedures to enhance the Certification process
- (2) Their relationships with the military environment and the role of practicing medicine in a functional military context have to be addressed adequately

b. **Methods:**

- (1) Moulage training
- (2) Classroom
- (3) Skills lab (manikin and animals)
- (4) Human Patient Simulator
- (5) Emergency room and ambulance (military and civilian medical facilities)
- (6) Triage training
- (7) Appropriate medical equipment

3. Medical training as part of military exercises and methods:

a. **Medical training as part of military exercises:**

- (1) As medical personnel and medical units normally support military formations, their training has to reflect this relationship. Therefore, any military exercise should be designed to integrate medical scenarios. Medical personnel then must be active participants rather than just health care providers
- (2) Medical personnel / formations that have to be part of a NRF need a pre-determined level of training and exercises to achieve certification according to agreed standards with a modular, building block approach:
 - 1) Unit level
 - 2) Component level and
 - 3) Joint Force training
- (3) Additionally, medical formations (Role 2 and above) may need to conduct pure medical field training exercises without additional combat troops. These exercises may be prepared, conducted and evaluated by specialised Medical Training Centres as part of a medical Certification process

b. **Methods:**

- (1) Planning exercise including medical planning
- (2) Medical intelligence
- (3) “Table top” exercises including command surgeons (or equivalent) and HQ Medical staff
- (4) Field training exercises with medical formations of adequate sizes (in accordance with a realistic casualty scenario)
- (5) Logistic exercises including all levels and methods of medical logistics

4. Situation training for medical formations and methods:

a. **Situation training for medical formations:**

Training for armed conflicts as well as for military operations other than war should include training for specific situations of medical support as part of current threat scenarios and address the special quality of threats through asymmetric conflict and terrorism. This may include: Exercise under varying conditions (hostile, uncertain, safe, NBC etc.); assistance in humanitarian and disaster relief operations (natural

disaster, mass casualties situations); co-operation with civilian authorities, NGOs, GOs and IGOs; peace support operations

b. **Methods:**

- (1) Planning exercise
- (2) Field training exercise

5. Joint and Combined (Multinational Training) and methods:

a. **Joint and Combined (Multinational) Training:**

Joint and Combined (Multinational) Training provides the opportunity to compare skills, gain experience and train for common missions. The aim of a joint and combined field exercise is to improve co-operation between different Medical Services for the optimal provision of operational medical support. Benefits from such exercises include:

- (1) Training and development of common procedures for transport and treatment of casualties
- (2) Sharing of information about each other's structures and equipment
- (3) Comparison and integration of national medical procedures and quality standards to achieve NATO certification
- (4) Preparation for combined operations

b. **Methods:**

- (1) Planning exercises
- (2) "Table top" exercises
- (3) Field exercises
- (4) Exercise and simulation centres
- (5) All types of exercise to include adequate medical participation
- (6) In addition, multinational medical exercises (multinational field hospital, Air Medevac)

6. Additional requirements:

It is of critical importance to ensure that appropriate exercise tools on different training levels are provided.

In order to act within the adequate range of standards – Best medical practise - medical procedures, in all these phases well experienced instructors/ observers will be required to assist and support the trainee and DISTAFF in conducting, debriefing and evaluating the exercise.

7. Certification:

- a. Unit level, training is a national responsibility, and is the first essential building block. Units will be trained to predetermined and prescribed NATO standards to ensure units are capable of performing their assigned functions prior to the start of component level training. The Unit level combat readiness certification is the responsibility of the Nations
- b. Component level training is the beginning of the NRF Component and Joint Force Training period, and shall ensuring component level proficiency and interoperability prior to the commencement of joint level training. Medical support issues should be a substantial part of the overall training plan. Component level training and evaluation will be conducted under the responsibility of the nominated Component Commander (CC)
- c. Joint Force Training is to ensure NRF interoperability and combat effectiveness. The JFC MEDAD is responsible for the appropriate integration of medical issues and C2 elements in this training. There will be a joint exercise to serve as a mechanism for certifying the medical units. Supreme Allied Commander Transformation (SACT) and SACEUR will be responsible for certifying the medical units in the NRF

D.4. MEDICAL TRAINING AND EXERCISES ON DIFFERENT LEVELS OF MEDICAL SUPPORT

The following table describes the different training and exercises on different levels of medical support are commented with the minimum medical skills each level of medical support shall be able to perform:

Role	Unit	Format	Medical Contents	Military Contents
1	Medical Support Group,	Field exercise in an operational	Basic medical support, assessment/triage/treatment, first life saving	Teamwork/ Leadership, mission flexibility,

Role	Unit	Format	Medical Contents	Military Contents
	Maritime equivalent	scenario together with combat troops	procedures, life saving in the field (also under NBC-conditions), transportation of casualties in the field, medical regulating (casualty tracking)	operational competence force protection measures, SOP, ROE, Communications
2	Regiment Medical Company, Maritime equivalent	Field exercise without combat troops but in an operational scenario Training in a medical training centre (Individual/Team Training)	Medical care in modular Medical Treatment Facilities (MTF), Reception, resuscitation, triage, damage control surgery, stabilisation, medical evacuation, MASCAL, medical regulating (casualty tracking)	Teamwork/ Leadership, mission flexibility, operational competence Scenario-oriented command, tactical awareness, Task Force Training, force protection measures, SOP, ROE, Communications
3	Field hospital / Hospital ship & equivalent maritime facility	Field exercise in a medical training centre or stand alone with experienced Instructors/ Umpires (Individual/Team Training)	Medical care in (modular) MTF, reception, resuscitation, operative/non operative specialities, intensive care, evacuation & transportation land /air/sea, Tactical Medevac, MASCAL, medical regulating (casualty tracking)	Teamwork/ Leadership mission flexibility, operational competence Scenario-oriented command, tactical awareness, Task Force training force protection measures, SOP, ROE, Communications
4	Military Hospital, Civilian Hospital	Local exercise (Individual/Team Training) With experienced Instructors/umpires	Definitive treatment in full spectrum of modern individual therapy, subspecialties, Strategic Medevac, MASCAS medical regulating (casualty tracking)	Teamwork/Leadership, operational competence, Scenario-oriented command, Communications

D.5. TRAINING FOR AEROMEDICAL EVACUATION

1. To guarantee successful medical care on missions and disaster relief, the provision of Forward, Tactical and Strategic Aeromedical Evacuation between different Role's of Medical Treatment Facilities is of utmost importance. Training for the use of these different valuable assets has to be addressed together with the interface between point of wounding/evacuation and aeromedical evacuation in accordance with the evacuation policy pertinent to a particular scenario.
2. Training and exercise in the functions of the different elements of AE-Co-ordination:
 - a. Rescue Co-ordinating Cell/Centre (RCC).
 - b. Patients Evacuation Co-ordinating Centre (PECC).
 - c. Aeromedical Evacuation Co-ordinating Centre (AECC).
 - d. Aeromedical Evacuation Co-ordinating Officer (AECO).
 - e. Patient tracking and Medical regulating in connection with AE.
 - f. AE procedures in relation to the different Aviation assets in a realistic scenario.
3. To keep up proficiency in these procedures, the personnel have to be trained permanently. Training should be conducted as team training and during field exercises – preferably joint and combined.