

## U.S. Army Europe and 7th Army

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### EXERCISE OFFERS REALISTIC, FAST-PACED TRAINING FOR MEDICS WITH U.S. ARMY EUROPE-LED AVIATION TASK FORCE

**By Sgt. Brandon Little**

12th Combat Aviation Brigade Public Affairs Office

**CAMP TAJI, Iraq --** It was a day off for Spc. Lisett Chaparro, so she decided to ride her bike to the post office to mail some souvenirs to her family.

For Chaparro, and most people here, it was a day like any other ... until the alarm sounded.

“It was extremely loud and everybody could hear it,” said Chaparro, a combat medic and a member of Headquarters and Headquarters Troop, 4th Squadron, 3rd Armored Cavalry Regiment. “I grabbed my bike and rode all the way (to the clinic); I had two minutes to get on all my gear.”

Chaparro pulled her body armor over her civilian clothes, put on her Kevlar helmet and other protective gear, and moved to her post. As she did, the other clinic staffers moved into position as well, and in minutes the Task Force XII Aviation Medicine Clinic was ready to receive and treat patients.

Fortunately they didn't actually have to treat any injuries this time -- no real ones, anyway. The scenario was part of a simulated mass casualty training exercise.



SGT BRANDON LITTLE

Spc. Lisett Chaparro, a combat medic with Headquarters and Headquarters Troop, 4th Squadron, 3rd Armored Cavalry Regiment, checks on a Soldier role-playing as a casualty during a mass casualty exercise at Camp Taji, Iraq. Chaparro, a staff member at the Task Force XII Aviation Medicine Clinic, was off duty when the alarm kicking off the exercise sounded. Task Force XII is the aviation task force led by U.S. Army Europe's 12th Combat Aviation Brigade that is supporting Multi-National Division – Baghdad.

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During the exercise, attacks on the base produced several simulated casualties who needed to be treated, said Capt. Joe Dominguez, a physician's assistant with Headquarters and Headquarters Company, Task Force XII.

"We were ... told over the radio what types of injuries we had and we sent out medical help," said Dominguez. "The ambulances went out and sorted the patients according to their urgency for medical care; (clinic staff members) also performed some life-sustaining procedures."

While the Soldiers in the ambulances were picking up patients, several others guarded the clinic.

"Our job is to guard the clinic and control the flow of personnel inside," said Spc. Trinidad Arzate, a medic in Headquarters and Headquarters Troop, 4th Squadron, 3rd ACR. "Limiting the number of personnel inside reduces chaos and helps the medics concentrate on their job."

After they were taken off the ambulance, the simulated patients were taken to the appropriate treatment areas of the clinic, said Spc. Micah Barley, a medic in U.S. Army Europe's 3rd Battalion, 158th Aviation, part of 12th CAB.

"Everyone seemed to be willing to pitch in and do the job that needed to be done," said Barley. "We were ready to do whatever was needed to treat those patients and make sure they received the best care possible."

Working together during a simulated, unexpected emergency, helps prepare Soldiers to handle the real thing, said Chaparro.

"It could happen in the middle of the night or on your day off," she said. "We always have to be prepared to come in, no matter what time it is, to do what we are trained to do ... and that's save lives."

Even though the events and the injuries were simulated, the training was real.

"It was good training for new medics who have not seen any casualties," said Dominguez. "It was good for those of us who've been there before, to get reacquainted with the types of events that could possibly happen."



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