

NATO STANDARD

AMedP-8.1

**DOCUMENTATION RELATIVE
TO INITIAL MEDICAL TREATMENT
AND EVACUATION**

Edition B, Version 1

JUNE 2023



NORTH ATLANTIC TREATY ORGANIZATION

ALLIED MEDICAL PUBLICATION

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NATO LETTER OF PROMULGATION

27 June 2023

1. The enclosed Allied Medical Publication AMedP-8.1, Edition B, Version 1, DOCUMENTATION RELATIVE TO INITIAL MEDICAL TREATMENT AND EVACUATION, which has been approved by the nations in the Military Committee Medical Standardization Board, is promulgated herewith. The agreement of nations to use this publication is recorded in STANAG 2132.
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4. This publication shall be handled in accordance with C-M(2002)60.



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Director, NATO Standardization Office

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RECORD OF SPECIFIC RESERVATIONS

[nation]	[detail of reservation]
BEL	BELGIUM medical field card is in line with the medical content of Ann A to AMedP-8.1 and therefore BELGIUM will continue to use its nationally implemented template. BELGIUM accepts the Ann A to AMedP-8.1 as medical card from other Nations.
CZE	CZE uses the TCCC card for reporting of patient's initial treatment at the point of injury. The FMC card is intended for and filled in up at Role 1.
FRA	France will develop a field medical card (FMC) in line with the medical content of AMedP-8.1, Chapter 2, but reserves the right to add the data elements required according to its own conception of patient management or to exclude some data elements that fall outside the remit of the French healthcare personnel. The format or the diagrams of the national FMC may differ from the proposed template.
GBR	<p>Reservation 1. The UK reserves the right to use nationally developed documents. Where appropriate, these will be similar in design to the NATO Field Medical Card.</p> <p>Reservation 2. The UK reserves the right to use a style of document that is appropriate to the tactical environment and the likely skills and experience of first responders. The UK considers that the requirements of this STANAG will be too detailed for use in some situations. Therefore, the UK might use documentation that requires only the essential data for safe and timely and evacuation of the casualty (such as AT MIST report). All fields of data will be included on documentation when this is realistic for the environment of use (note Reservation 3).</p> <p>Reservation 3. The UK reserves the right to make a national decision on whether or not gender and/or sex is recorded on any document. The UK must comply with national legislation and MOD policies on data protection, special information types and equality/diversity, and must maintain data integrity by the correct use of these terms.</p> <p>Reservation 4. The UK currently uses the mnemonic CABCADE rather than MARCH and national documents will reflect this.</p>
GRC	Air Force: HAF had already developed a Medical Form Template to get used by Health Personnel during casualties triage procedure. This template concludes all the required fields as described in Medical Field Card Template, except from blood group and Hx of

	allergies - previous medical conditions, since these data are already concluded in Medical Warning Tags (STANAG 2437).
HRV	Medical service of the Croatian Armed Forces will develop a national Field Medical Card (FMC) that will be in accordance with the example in the Annex A of AMedP-8.1 and will contain data related to the national patient management care system. The format of diagrams of FMC can be varying than the respect example.
ITA	ITA Army employs TCCC protocol and (DD) Form 1380, Tactical Combat Casualty Care Card. TCCC meets the essential information requirements specified in the STANAG/AMedP and will continue to use th DD Form 1380 to document and relay casualty data. ITA Army acknowledges and accepts that other countries will use the format prescribed in the STANAG/AMedP as well as variants based on National preference.
<p>Note: The reservations listed on this page include only those that were recorded at time of promulgation and may not be complete. Refer to the NATO Standardization Document Database for the complete list of existing reservations.</p>	

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CHAPTER 1 INTRODUCTION

1.1. GENERAL

Although electronic documentation of medical data is quickly developing, it is considered that a hard copy Field Medical Card (FMC) is still necessary for initial documentation in the prehospital environment. Several Working Groups and Panels of the Committee of the Chiefs of Military Medical Services in NATO (COMEDS WG/P) have been involved in defining minimum core medical data elements relative to the different types of nationally developed FMC. The data elements were originally defined with the scope to secure at least compatibility between NATO nations developing electronic medical documentation systems and a NATO Trauma Registry. Data elements found relevant up to and including Role 1 are considered essential for FMC use.

1.2. AIM

This agreement is to establish common procedures and standardized documents for the reporting of patient's initial treatment, on an FMC. The FMC will provide documentation of casualties' identity, first aid, initial medical treatment and care in transit up to and including medical treatment facilities (MTF) Role 1. The FMC is intended for use initially by the first responder at the point of injury or as soon as possible and follow the casualty en route. The FMC will be available at the point of injury.

1.3. AGREEMENT

Participating nations agree to include a defined set of minimum core medical data elements into nationally developed FMC or to make use of the FMC found in Annex A. Minimum core medical data elements are listed below. Nationally developed FMC will carry English and/or French text as supplement to national language instructions. Nations may include other registrations in their FMC, but cannot exclude any item listed in this STANAG.

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CHAPTER 2 MINIMUM CORE MEDICAL DATA
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2.1 MINIMUM CORE MEDICAL DATA

The defined minimum core medical data elements that must be represented on a FMC can be grouped into the following subgroups covering a varying number of data elements:

- a. Identification:
 - (1) Last name
 - (2) First name
 - (3) Sex
 - (4) ID number
 - (5) Date of birth
 - (6) Unit of origin
 - (7) Armed Forces of origin (Nationality)

- b. Cause:
 - (9) Mechanism of injury or illness

- c. Assessment:
 - (10) Date and time of injury or illness
 - (11) Time of examination
 - (12) Signs and symptoms
 - (13) Medical allergies
 - (14) Basic vital signs (eg. pulse, blood pressure, respiratory rate, oxygen saturation, AVPU, pain scale)

- d. Treatment:
 - (24) Fluids and blood products (volume, route, time)
 - (25) Analgesia (dose, route, time)
 - (26) Antibiotics (dose, route, time)

(27) Other eg. TXA (dose, route, time)

(28) Tourniquet/TQ (location and time)

(29) Hypothermia intervention

e. Movement:

(33) Evacuation Category (Urgent / Priority / Routine)

(34) Additional Notes

(35) First Responder (Last Name / First Name / ID Number)

ANNEX A NATO FIELD MEDICAL CARD

A.1. EXAMPLE OF A NATO FIELD MEDICAL CARD

NATO FIELD MEDICAL CARD			
LAST NAME / FIRST NAME:	SEX:	ID NUMBER:	DATE OF BIRTH:
UNIT OF ORIGIN:		ARMED FORCES OF ORIGIN (NATIONALITY):	

MECHANISM OF INJURY / ILLNESS:	DATE AND TIME OF INJURY / ILLNESS:	TIME OF EXAMINATION:	SIGNS AND SYMPTOMS:	MEDICAL ALLERGIES:
LEGEND: // FRACTURE X INJURY WITHOUT PERFORATION O INJURY WITH PERFORATION △ HEMORRHAGE ∇ BURNED AREA ADDITIONAL DIAGNOSIS: <input type="checkbox"/> SPINE INJURY <input type="checkbox"/> SHOCK <input type="checkbox"/> BURNS ° / %	<p style="text-align: center;">R L L R</p>		Assessments / Interventions	MASSIVE BLEEDING AIRWAY RESPIRATIONS/BREATHING CIRCULATION HEAD/HYPOTHERMIA
	TIME			
	PULSE			
	BLOOD PRESSURE			
	RESPIRATORY RATE			
OXYGEN SATURATION				
ALERT / VERBAL / PAIN / UNRESPONSIVE				
PAIN SCALE (1 - 10)				

TREATMENT	NAME	VOLUME	ROUTE	TIME
FLUID				
BLOOD PRODUCT				
MEDS	NAME	DOSE	ROUTE	TIME
ANALGESIA				
ANTIBIOTICS				
OTHER EG TXA				
TOURNIQUET/TQ	LOCATION / TIME		LOCATION / TIME	
HYPOTHERMIA INTERVENTION				

EVACUATION CATEGORY:	URGENT:	PRIORITY:	ROUTINE:
ADDITIONAL NOTES:			
FIRST RESPONDER:	LAST NAME / FIRST NAME:		ID NUMBER:

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ANNEX B LIST OF REFERENCES
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B.1. REFERENCE PUBLICATIONS

The following are the principal references used for this document:

- a. STANAG 2347, Edition 3 – AmedP-8.8(A) Medical Warning Tag
- b. STANAG 3204, Edition 9 - AAMedP-1.1(B) Aeromedical Evacuation

AMedP-8.1(B)(1)