

FOREIGN CLAIMS COMMISSION COVER SHEET

Claim Number: 2.0538

USARCS NUMBER: 1427-05

Date Received: 15-Sep-05

Name:

(b)(6)

Address:

(b)(6)

Baghdad, Iraq

Claim Summary: Claimant was injured by small arms fire caused by combat involving Coalition Forces.

Date of Incident: 04-Mar-05

Amount Requested: \$10,000.00

Recommendation: Approval
Investigation

Denial
D.C. 1

Date Reviewed by OIC:

Claim Is: Approved in the amount of \$_____.

Denied. Denial Code 1 - ALREADY PAID CONDOLEANCE

On hold pending investigation findings.

Pages 2 through 3 redacted for the following reasons:

nonresponsive



DEPARTMENT OF THE ARMY
D Company, 1st Battalion, 64th Armor Regiment
2nd Brigade, Unit of Action, 3^d Infantry Division
Camp Rustimiyah, Iraq APO AE 09380

REPLY TO
ATTENTION
OF:

AFZP-VBL-D

14 MARCH 2005

MEMORANDUM FOR RECORD

SUBJECT: 04 MARCH 05 Engagement that Lead to the Death of (b)(6)

1. The purpose of this memorandum is to allow the claimant (b)(6) visit his nephew at the Tekreit Hospital in the green zone and begin the claim for the accidental death of his brother.
2. On 04 MAR 05 at approximately 2310, 1st Platoon, D Company while on patrol in the company AOR, came in contact with a dark green Suzuki SUV occupied by (b)(6) and his three passengers: (b)(6) and (b)(6). The vehicle approached the US patrol's vehicles while they were conducting a security patrol with two vehicles in the lead followed by a dismounted element followed by two vehicles in trail vicinity (b)(2)High. As the vehicle approached the soldiers verbally warned and motioned for the vehicle to stop with TAC lights. When the vehicle would not stop (b)(2)High two soldiers one with an M16 and one with an M240B fired warning shot (b)(2)High (b)(2)High the vehicle men stopped and cut off its lights approximately (b)(2)High from the US column. The soldiers then advanced on the vehicle and began simultaneously searching the vehicle and treating the wounded. The driver, (b)(6), expired after a brief attempt at CPR while 2 of the 3 occupants were treated for gun shot wounds. (b)(6) male, was treated for a gun shot wound to the knee and evacuated to FOB Rustimiyah. (b)(6) boy, was treated for a gun shot wound to the hand and also evacuated to Camp Rustimiyah. (b)(6) boy, was not injured during the incident but remained with these patients. The patients were subsequently evacuated to the CSII to receive further treatment. The unknown driver was searched for identification and taken to the IP station for further processing.
3. My assessment is that the soldiers of 1st Platoon acted in accordance with the ROE and fired purely in self defense. I also feel that the Iraqi civilians acted out of fear and confusion and had no malicious intent toward the coalition or the US Army. It is unfortunate that this event lead to the death of a local national and the only recourse I can recommend is that the deceased's family receive compensation for their pain and anguish and be allowed to visit their nephew in the green zone.
4. The POC for this memorandum is the undersigned at Camp Rustimiyah, Iraq, building 3B15.

(b)(3), (b)(6)

CPT. AR
Commanding



DEPARTMENT OF THE ARMY
D Company, 1st Battalion, 64th Armor Regiment
2nd Brigade, Unit of Action, 3rd Infantry Division
Camp Rustimiyah, Iraq APO AE 09380

REPLY TO
ATTENTION
OF:

AFZP-VBL-D

05 MARCH 2005

MEMORANDUM FOR RECORD

SUBJECT: 04 MARCH 05 Engagement that Lead to the Death of unknown vehicle driver.

1. The purpose of this memorandum is to outline my informal investigation into the events that occurred on 04 MAR 05 resulting in the death of an unknown Iraqi citizen and the wounding of two of his passengers.

2. On 04 MAR 05 at approximately 2310, 1st Platoon, D Company while on patrol in the company AOR, came in contact with a dark green Suzuki SUV occupied by an unknown driver and his three passengers: (b)(6) and (b)(6) (b)(6). The vehicle approached the US patrol's vehicles while they were conducting a security patrol with two vehicles in the lead followed by a dismounted element followed by two vehicles in trail vicinity (b)(2)High. As the vehicle approached the soldiers verbally warned and motioned for the vehicle to stop with TAC lights. When the vehicle would not stop at (b)(2)High SPC (b)(3)(b)(6) with an M16 and SPC (b)(3)(b)(6) with an M240B fired warning shots (b)(2)High (b)(2)High. The vehicle then stopped and cut off its lights approximately (b)(2)High from the US column. The soldiers then advanced on the vehicle and began simultaneously searching the vehicle and treated the wounded. The driver, approximately (b)(6) expired after a brief attempt at CPR while 2 of the 3 occupants were treated for gun shot wounds. (b)(6) male, was treated for a gun shot wound to the knee and evacuated to FOB Rustimiyah. (b)(6) boy, was treated for a gun shot wound to the hand and also evacuated to Camp Rustimiyah. (b)(6) boy, was not injured during the incident but remained with these patients. The patients were subsequently evacuated to the CSH to receive further treatment. The unknown driver was searched for identification and taken to the IP station for further processing.

3. My assessment is that the soldiers of 1st Platoon acted in accordance with the ROE and fired purely in self defense. I feel there was nothing the platoon could have done to mitigate this unfortunate incident.

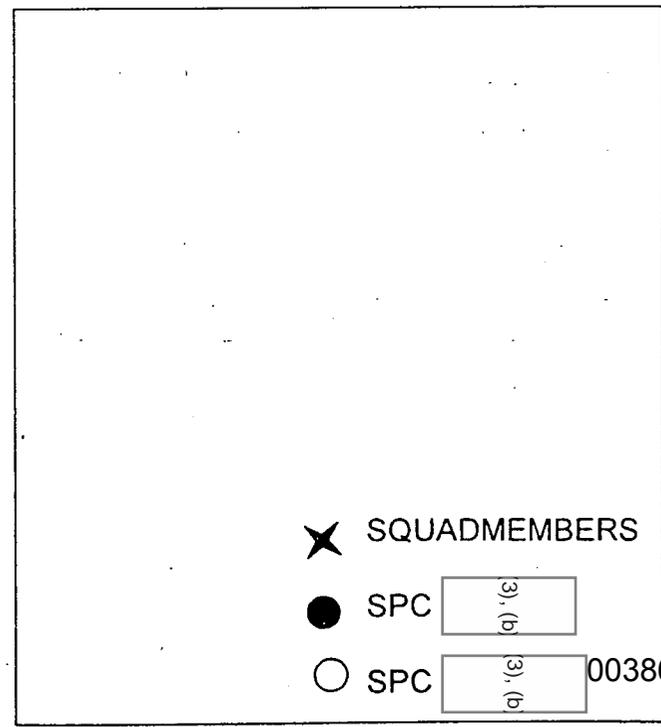
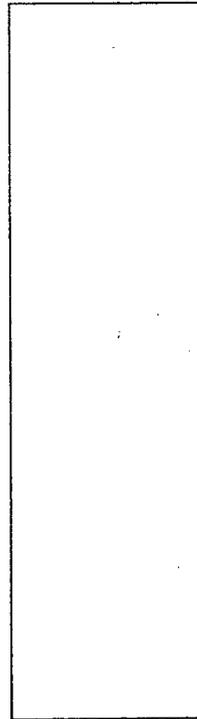
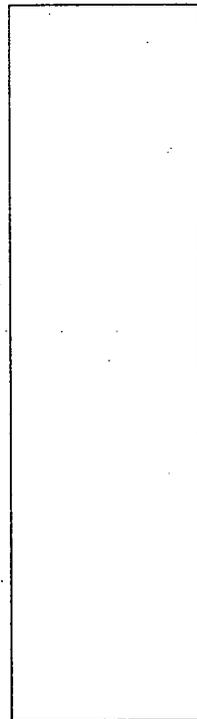
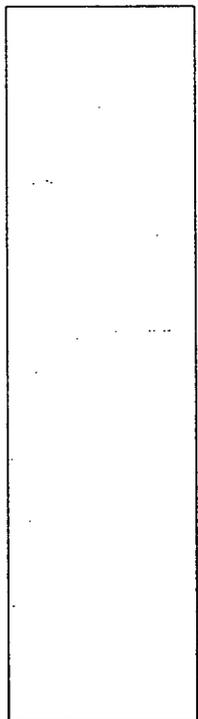
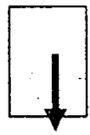
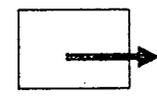
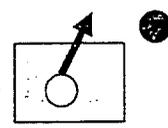
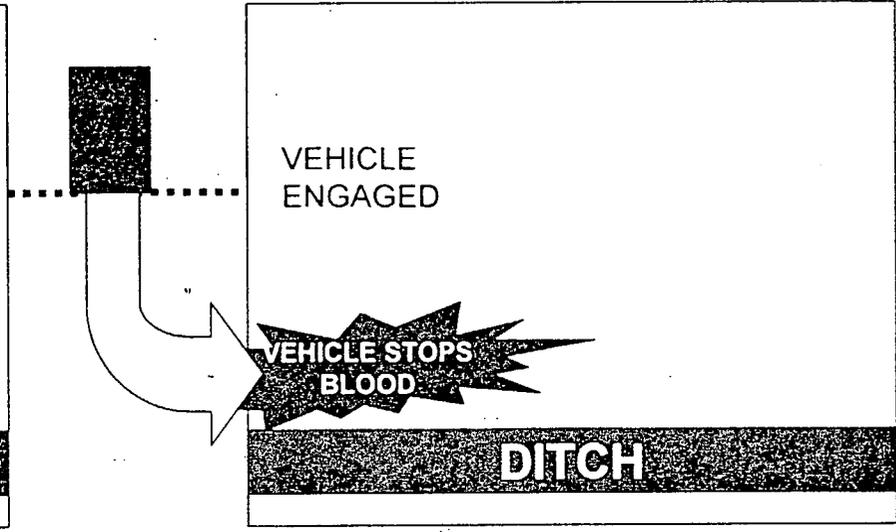
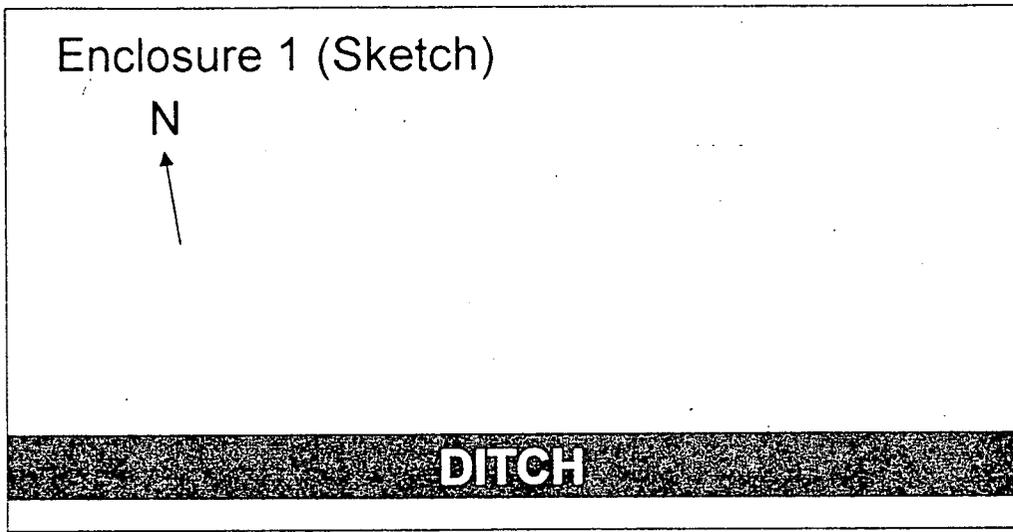
4. The POC for this memorandum is the undersigned at Camp Rustimiyah, Iraq, building 3B15.

(b)(3), (b)(6)

CPT, AR
Commanding

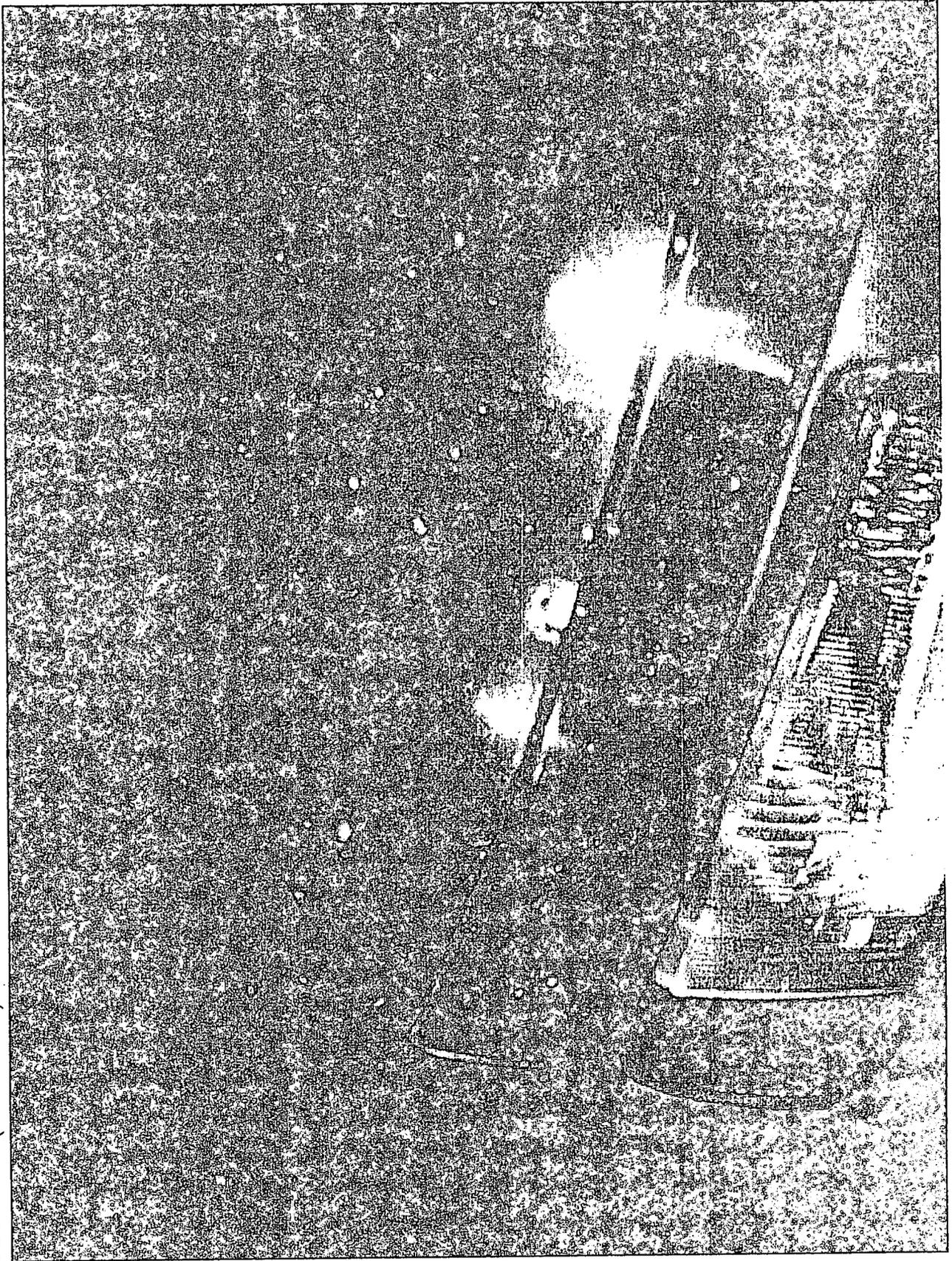
Encl.
Enclosure 1 (Sketch)
Enclosure 2 (Photos)

CENTCOM 003861



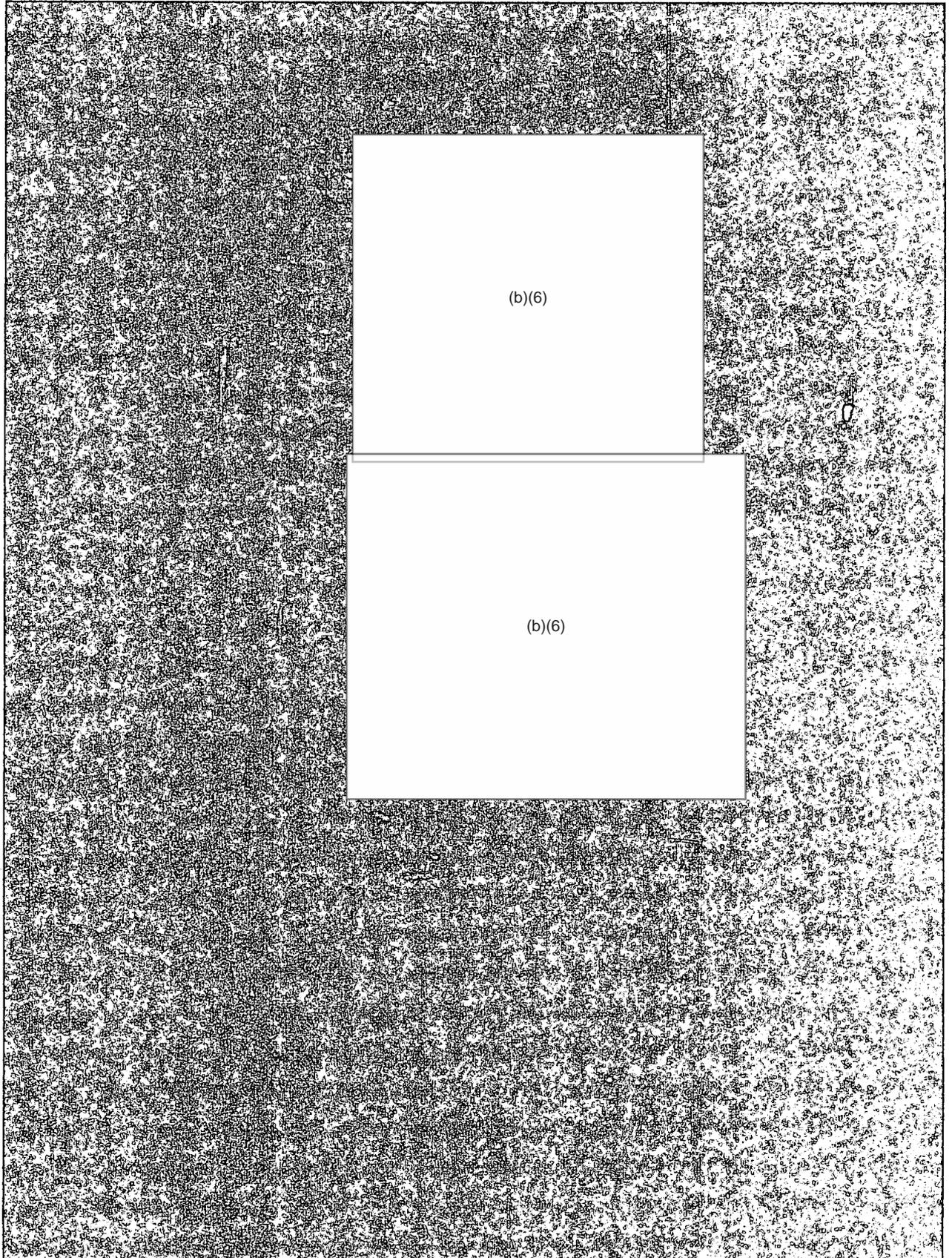
- ✱ SQUADMENBERS
- SPC [redacted] (3), (b)
- SPC [redacted] (3), (b) 003862

Enclosure 2 (Vehicle)



CENTCOM 003863

Enclosure 2 (Vehicle)

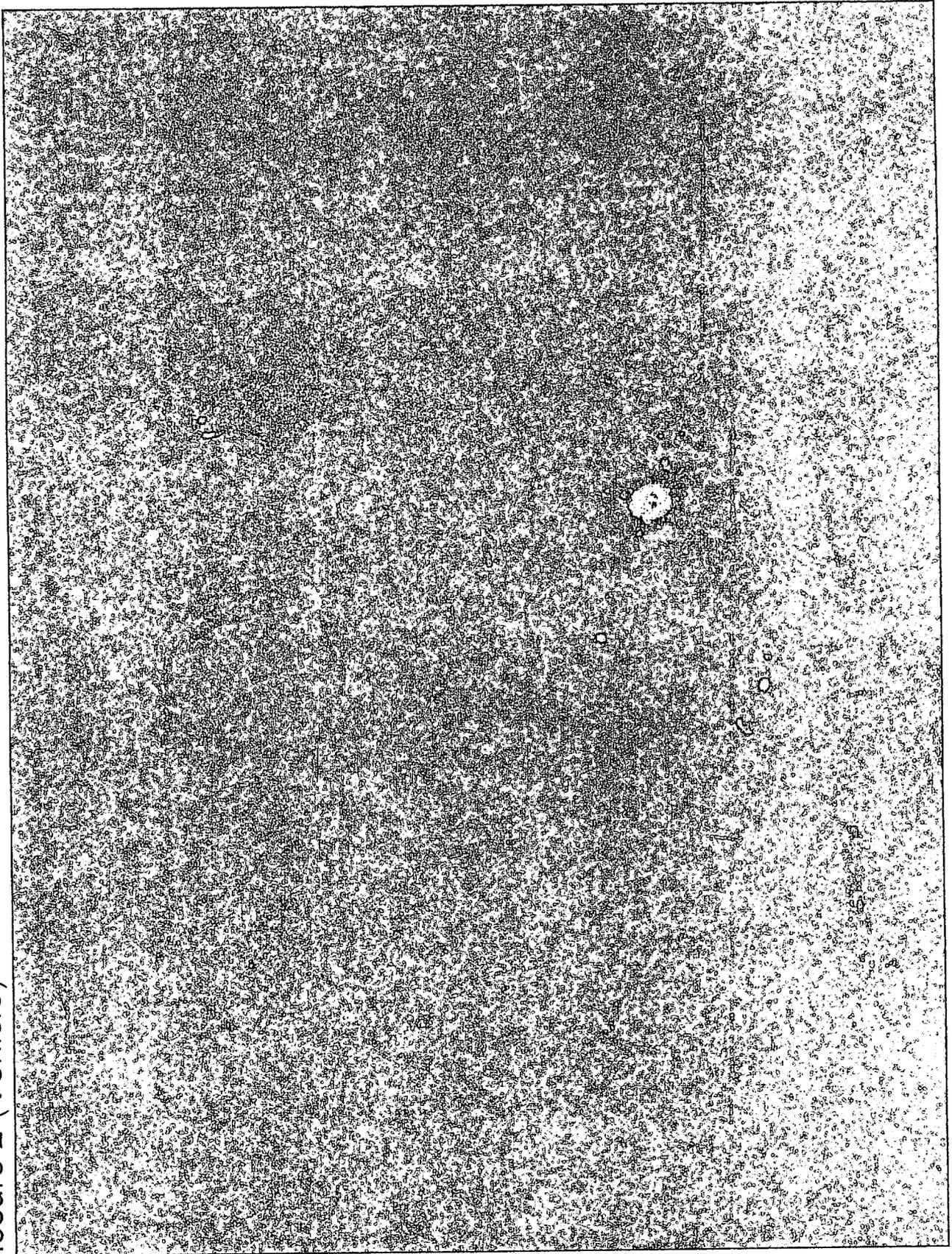


CENTCOM 003864

Page 9 redacted for the following reason:

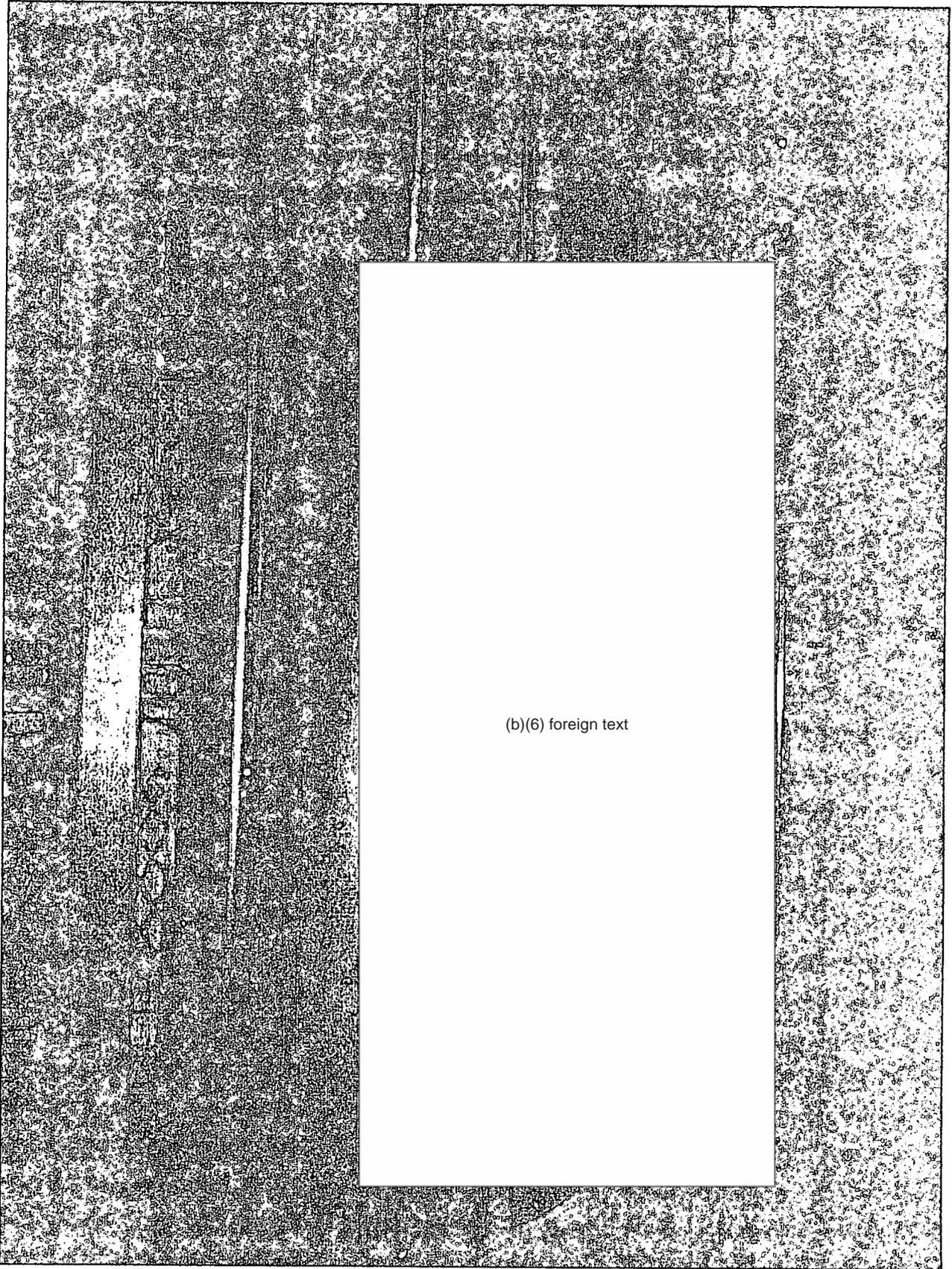
(b)(6)

Enclosure 2 (Vehicle)



CENTCOM 003866

Enclosure 2 (Vehicle)



(b)(6) foreign text

Pages 12 through 14 redacted for the following reasons:

(b)(6)
(b)6



REPLY TO
ATTENTION OF:

DEPARTMENT OF THE ARMY
HEADQUARTERS, 2D BRIGADE
3D INFANTRY DIVISION
FOB LOYALTY, IRAQ
APO AE 09380

AFZP-VB-JA

Date: 19-Sep-05

MEMORANDUM FOR RECORD

SUBJECT: DISAPPROVAL OF FOREIGN CLAIM II8T1427-05:

Claim of:

Address:

Date Filed: 15-Sep-05

Amount Claimed: \$10,000.00

Claimed Loss: Claimant was injured by small arms fire caused by combat involving Coalition Forces.

Claim Number: 2.0538

1. Your above-mentioned claim is disapproved.
2. This incident **does not** comply with the provisions of the Foreign Claims Act, 10 U.S.C. Section 2734, as implemented by Chapter 10, AR 27-20. This claim was filed in a timely manner. This claim did occur outside the United States.
3. The reason for the disapproval of this claim is code 1:
 1. Loss was a result of Combat Operations
 2. The filing claimant is an improper claimant
 3. Claim lacked evidence supporting U.S. negligence or fault
 4. Claim lacked evidence to prove a loss
 5. Loss was a result of Anti-Coalition Forces
4. If you are dissatisfied by this action, AR 27-20 provides that you may request that the decision be reconsidered. Any such request must be forwarded to this office for FCC consideration. There is no prescribed format for such a request. However, it should describe the legal and/or factual basis for relief. Any request for reconsideration must be made, in writing, within 30 days of receipt of this letter. The FCC's action on reconsideration is final and conclusive by law.
5. POC for this memorandum is SPC FOB Loyalty, @ VOIP

CPT, JA
FOREIGN CLAIMS COMMISSION

CENTCOM 003871

MEDICAL RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
31 March 2005	DATE OF ADMISSION: 8 March 2005 DATE OF DISCHARGE: 1 April 2005
	DIAGNOSIS(ES): <i>s/p s/p Right index ray amputation, Salvage of radial index neurovascular flap for partial coverage coverage of 1st web space and split-thickness</i> HOSPITAL COURSE: <i>SKin grafting</i>
	9 March 2005 - <i>Exp</i> Exploration of hand, <i>index ray</i> <i>index</i> amputation <i>index</i> fingers, salvage of radial index neurovascular flap for partial cover coverage of 1 st web space, irrigation and debridement of soft tissue of palm
	18 March 2005 - <i>Right palm split-thickness skin graft</i>
	DISCHARGE MEDICATIONS: <i>motrin 800 mg po tid Percocet 9 ii ii Tabs po q 4h prn pain</i>
	DUTY LIMITATIONS: <i>None Full ROM of hand and wear dynamic dynamic outrigger splint to see prevent prevent long fingers PIP contracture</i> RECOMMENDATIONS: <i>Wet to dry dressing change bid</i>

OR MEDICAL FACILITY COMBAT SUPPORT HOSPITAL	STATUS	DEPART./SERVICE	(b)(3), (b)(6) MAJ MC ORDS MAINTAINED AT
NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	
IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)		REGISTER NO.	WARD NO. ICW

(b)(6)

CHRONOLOGICAL RECORD OF MEDICAL CARE
 Medical Record
 STANDARD FORM 600 (REV. 6-97)
 Prescribed by GSA/ICMR
 FIRMR (41 CFR) 201-9.202-1 USAPA V2.00

CENTCOM 003873

CENTCOM 003875

VERIFY BY INITIALING

INITIAL PROPER COLUMN FOLLOWING EACH COMPLETION

ORDER DATE	CLERK/NURSE	RECURRING ACTIONS, FREQUENCY, TIME	HR	DATE COMPLETED													
				21	22	23	24	25	26	27	28	29	30	31	4	7	3
8 MAR 05	(b)(3), (b)(6)	VSq shift															
8 MAR 05		Activity: As tolerated															
9 MAR 05		Diet: Clear liquors AAT															
9 MAR 05		HOB ↑ 30°															
9 MAR 05		Keep R arm ↑ in pillow @ all times															
30 MAR 05		Wet → Dry drsg BID															

(b)(3), (b)(6)

ALLERGIES: YES NO
 NKDA

PRIMARY DIAGNOSIS:
 S/P GSW E degloving injury palm R Hand
 S/P I & O x 2, 86th CSH

ADDITIONAL PAGES IN USE:
 YES NO
 PAGE NO: _____

PATIENT IDENTIFICATION:
 (b)(6)

ACTION TIMES
 USE PENCIL. CIRCLE ACTION TIMES
 D 8 9 10 11 12 13 14 15
 E 16 17 18 19 20 21 22 23

5. Activity: Limitatic. (Specify)
Full range of motion of hand and wear dynamic outrigger splint to prevent long finger PIP contracture
Patient and/or Significant Other (S.O.) communicates knowledge and understanding of activity limitations.

(b)(3), (b)(6) No Dietary Restrictions If special, identify
Patient/S.O. communicates understanding of dietary restrictions.

7. Medications: No Medication Required
Name of Medication Dosage Frequency of Medication Special Instructions
Motrin (Ibuprofen) 400-800 mg three times a day with food or milk
Percocet 1 tablet every 4 hrs as needed for pain.
as needed for pain

(b)(3), (b)(6) Patient and/or S.O. communicates knowledge and understanding of name, dosage, frequency and special instructions.

8. Treatments/Care:
Instructions Given: Patient/S.O. observed Demonstrations (Date) Patient/S.O. Returned Demonstration (Date)
wet to dry dressing change to R hand (1 small spot) twice a day (between fingers)
Equipment/Supplies (Specify)

9. Follow-up: You should be seen in _____ clinic in _____ (time period).
To 86th CSH Baghdad
Dr. (b)(3), (b)(6)
(b)(3), (b)(6) Patient/S.O. communicates understanding of follow-up instructions.

10. Patient's Condition (Health Status relative to Nursing Care Plan):
Good

11. Signature (Registered Nurse)
(b)(6), (b)(3) *[Signature]*
13. Pat

12. Additional Information:
Percocet 325 mg given P.O.
@ 13:48 for pain. 535 (b)(3), (b)(6)
JLWSE.
COPY 1 - INPATIENT RECORD COPY

DOB:
NIT:

(LIT) State
(UNIT)

UNCLASSIFIED: /

AEROMEDICAL EVACUATION PATIENT RECORD

PATIENT IDENTIFICATION

1. NAME (Last, First, Middle Initial) (b)(6) 2. SSN (b)(6) 3a. STATUS CIV 3b. SERVICE N/A 4. PRECEDENCE U P R X 5. GRADE N/A

6. AGE (b)(6) 7. SEX Male 8. WEIGHT (b)(6) 9. BLOOD TYPE Unknown 10. CLASSIFICATION (1A-5F) X AMBULATORY X LITTER 11. ACCEPTING PHYSICIAN (b)(3), (b)(6) 12. CITE/AUTHORITY NO.

13. APPT/SURG DATE 31 March 2005 14a. ORIGINATING FACILITY 225TH CSIF 14b. ORIGINATING FACILITY PHONE NUMBER 15a. DESTINATION FACILITY Baghdad - 86TH CSIF 15b. DESTINATION FACILITY PHONE NUMBER 16. NUMBER OF ATTENDANTS 16a. MEDICAL 4 16b. NON MED 1 - uncle

17. DIAGNOSIS S/P Right index ray amputation and volar split-thickness skin graft 19. CLINICAL ISSUES (Please indicate Yes or No on clinical issues. Explain YES comments in Section 23)

ISSUE	YES	NO	ISSUE	YES	NO	ISSUE	YES	NO
a. HYPERTENSION	X		f. MOTION SICKNESS		X	k. AMBULATORY	X	
b. CARDIAC POC			g. VISION IMPAIRED			l. AMBULATORY AID		X
c. DIABETES			h. VOIDING PROBLEMS			m. SELF-MEDS		X
d. RESPIRATORY		X	i. BOWEL PROBLEMS		X	n. ADEQUATE SUPPLY OF MEDS	X	
e. EARS/SINUS			j. SELF-CARE	X		o. OTHER		

18. BATTLE CASUALTY X DISEASE NON-BATTLE INJURY

20. PHYSICIANS ORDERS 20a. DATE 31 March 2005 20b. TIME 1000 20c. ALLERGIES NKDA 21. PRE-FLIGHT VITALS 21a. DATE/TIME 31 March 2005 21b. TEMP 97.8 21c. PULSE 90 21d. RESP 18 21e. BP 120/60 20d. DIET X REG 20e. CALS

22. BRIEF NARRATIVE Patient is a (b)(6) male who sustained a GSW to the left hand and was transferred from the 86TH CSIF to the 225TH CSIF for definitive care which has been rendered. Patient ready for transfer back to Baghdad.

23. ASSESSMENT/PROGRESS DATE/TIME 31 MAR 05 / 1545 NOTES Pt case discussed at (b)(3), (b)(6) (ORTD - 86TH CSIF). Pt discharged to home per (b)(3), (b)(6) Pt A+OX3, V35, 8 D3, P=72, R=12, Scals 1006, T98.2 (T). (b)(3), (b)(6)

24. STAMP AND SIGNATURE OF ATTENDING PHYSICIAN (b)(3), (b)(6) MATT, MC (b)(3), (b)(6) 25. STAMP AND SIGNATURE OF FLIGHT SURGEON

20f. SPECIAL EQUIPMENT 20g. ALTITUDE RESTRICTION: 20h. RECORDS TO ACCOMPANY PATIENT 20i. MEDICATIONS/TREATMENTS Percocet T i i tab 20 q 4h prn pain

CLINICAL RECORD

DOCUMENTATION CARE PLAN (C) LOCATION: No. 3 Yr. 2005
 For use of this form, see AR 40-107
 the proponent agency is the Office of the Surgeon General.

VERIFY BY INITIALING

INITIAL PROPER COLUMN FOLLOWING EACH COMPLETION

ORDER DATE	CLERK/NURSE	RECURRING ACTIONS, FREQUENCY, TIME	HR	DATE COMPLETED											
				21	22	23	24	25	26	27	28	29	30	31	1
3 MAR 05	(b)(3), (b)(6)	VSg shift	08												
			20												
			/												
3 MAR 05		Activity: As tolerated	07												
			19												
			19												
			07												
			/												
3 MAR 05		Diet: Clear liquors AAT	08												
			12												
		17													
		/													
		(b)(3), (b)(6)													
3 MAR 05	HOB ↑ 30°	07													
		19													
		19													
		0													
		/													
3 MAR 05	Keep R arm ↑ in pillow @ all times	07													
		19													
		19													
		0													
		/													
3 MAR 05	Wet → Dry drsg BID	08													
		20													

ALLERGIES: YES NO
 NKDA

PRIMARY DIAGNOSIS:
 S/P GSW E degloving injury palm R Hand
 S/P I: O x 2, Blth CSH

ADDITIONAL PAGES IN USE:
 YES NO
 PAGE NO: _____

PATIENT IDENTIFICATION:
 (b)(6)

ACTION TIMES
 USE PENCIL. CIRCLE ACTION TIMES
 D 8 9 10 11 12 13 14 15
 E 16 17 18 19 20 21 22 23

CENTCOM 003881

CENTCOM 003883

ORDER DATE	CLERK/NURSE	RECURRING MEDICATIONS, DOSE, FREQUENCY	HR	DATE DISPENSED													
				24	25	26	27	28	29	30	31						
23 Mar	(b)(3), (b)(6)	Cosace 100mg Po B.I.D.	08	(b)(3), (b)(6)													
			26														
			/														
24 Mar		IV HCL	07														
			19														
			/														
27 Mar		Milk of Magnesia	24								X	X	X	X			
		pediatric dose	02								X	X	X	X			
		every 2 hours until	04								X	X	X	X			
		relief of constipation	06								X	X	X	X			
	(Hold until the	08	X	X	X	X											
	tabs and X-ray	10	X	X	X	X											
	have been obtained)	12	X	X	X												
		14	X	X	X												
		16	X	X	X												
		18	X	X	X												
		20	X	X	X												
		22	X	X	X												
		24	X	X	X												
		thoprofen 400															
		FID															

ALLERGIES: YES NO
 NKDA

PRIMARY DIAGNOSIS:
 S/P GSW E deslwing RH
 S/P ICD

ADDITIONAL PAGES IN USE:
 YES NO
 PAGE NO. 1

PATIENT IDENTIFICATION:
 (b)(6)

DISPENSING TIMES
 USE PENCIL, CIRCLE MED TIMES

D 7 8 9 10 11 12 13 14
 E 15 16 17 18 19 20 21 22
 N 23 24 01 02 03 04 05 06

CENTCOM 003887

Foreign Language

(b)6 Foreign Language

(b)(6)

2 - 057 -

Pages 33 through 37 redacted for the
following reasons:-----

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(b)(6)

(b)6 Foreign Language

Foreign Language Text, (b)(6)