

**SWORN STATEMENT**

For use of this form, see AR 190-45; the proponent agency is PMG.

**PRIVACY ACT STATEMENT**

**AUTHORITY:** Title 10, USC Section 301; Title 5, USC Section 2951; E.O. 9397 Social Security Number (SSN).

**PRINCIPAL PURPOSE:** To document potential criminal activity involving the U.S. Army, and to allow Army officials to maintain discipline, law and order through investigation of complaints and incidents.

**ROUTINE USES:** Information provided may be further disclosed to federal, state, local, and foreign government law enforcement agencies, prosecutors, courts, child protective services, victims, witnesses, the Department of Veterans Affairs, and the Office of Personnel Management. Information provided may be used for determinations regarding judicial or non-judicial punishment, other administrative disciplinary actions, security clearances, recruitment, retention, placement, and other personnel actions.

**DISCLOSURE:** Disclosure of your SSN and other information is voluntary.

1. LOCATION FOB BOSTICK, AFGHANISTAN	2. DATE (YYYYMMDD) 2009/10/23	3. TIME 1430	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME (b)(3), (b)(6)	6. SSN (b)(3), (b)(6)	7. GRADE/STATUS O-4/RA	
8. ORGANIZATION OR ADDRESS 759th Forward Surgical Team, TF MED, FOB Bostick , APO AE 09354			

9. I, (b)(3), (b)(6), WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

1. WHAT IS YOUR DUTY POSITION? General Surgeon
2. HOW LONG HAVE YOU BEEN IN THE ARMY? HOW LONG IN COUNTRY FOR THIS DEPLOYMENT?  
7 Years, Arrived in Country 27 June 2009
3. DO YOU HAVE PRIOR COMBAT DEPLOYMENTS? IF SO, WHEN AND WHERE?  
No previous combat experience
4. BRIEFLY DESCRIBE YOUR ACTIONS ON 3 OCT 09, WHO DID YOU TREAT, WHAT WERE THEIR WOUNDS, WHERE DID THE SOLDIER GO AFTER YOU WERE DONE TREATING THEM?.

I was the Attending / Lead surgeon on SPC Stephan Mace and (b)(6), SPC (b)(3), (b)(6) and SPC (b)(3), (b)(6) Initial reports of wounded soldiers was received by the 3-61 Aid Station on 3 Oct 2009 at approximately 0630. Reports of casualties continued to come into the FST/Aid Station over the next approximately 2 hours when communication by phone was disrupted. Initial reports of 3 severely wounded urgent surgical patients and several other with significant injuries requiring evacuation were given through the 3-61 TOC. The remainder of the day was spent preparing and going over the MASCAL plan with the FST and Aid Station personnel.

Stephan Mace and (b)(6) came into the FST on the first MEDEVAC. Prior to arrival reports of 5 units of fresh whole blood were given to SPC Mace through the FOB Bostick TOC and the flight medics on arrival. We confirmed SPC Mace's blood type and elected to collect 5 additional units of fresh whole blood prior to arrival of the patient. SPC Mace and (b)(6) arrived at the FST at 2015 local. My attention was initially to SPC Mace. SPC Mace was in extremis upon arrival with heart rates into the 140's and blood pressure of 75/12. A primary and secondary survey revealed that he had a penetrating abdominal injury and an injury to in left leg with a CAT tourniquet in place. The left leg CAT tourniquet was never taken down the entire course at the FST. The patient was taken back to the OR for pre operative IV access and arterial line access. The intubation and plan was quickly discussed with LTQ (b)(3), (b)(6)

My attention for 5 minutes turned to (b)(6) I identified evisceration of his small bowel through a GSW to the left abdomen. He was hemodynamically stable. It was elected that SPC Mace was the most critical patient and (b)(6) was evacuated to Jalabad FST 240th FST for definitive surgery. A central venous line was placed and a Bogata bag placed over the

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT (b)(3), (b)(6)	PAGE 1 OF 3 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"  
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

STATEMENT OF (b)(3), (b)(6) \_\_\_\_\_ TAKEN AT FOB BOSTICK DATED 2009/10/23

9. STATEMENT (Continued)

intestines and the patient was evacuated. This patient was managed in conjunction with an Special Forces PA.

I returned to the operating room and SPC Mace was intubated and continued to be in very serious condition. He continued to have a blood pressure and a heart rate. I placed a central venous line into his right femoral vein and a right femoral arterial line. The patient was receiving blood product resuscitation and crystalloid resuscitation by LTC (b)(3), (b)(6)

The patient was preped with iodine solution in the standard manner and a laparotomy was performed. The patient had very little bleeding of his skin and soft tissue. He had a moderate amount of old blood in his abdomen and a left colon injury. The abdomen was packed with laparotomy sponges. The Left colon was removed in the standard surgical technique. During this part of the procedure the patient went into an unstable nonperfusing ventricular rhythm. Advance Cardiac Life Support (ALCS) was initiated with chest compressions and drugs per ACLS protocol. There was hemostasis following removal of his left colon and no significant surgical bleeding in his abdomen. His blood pressure return occasionally with a pulse. SPC Mace continued to receive blood products and crystalloid resuscitation through his ACLS code. LT (b)(3), (b)(6) noted that he was having trouble with ventilation of SPC Mace in addition to continued need for ACLS. I elected to perform a Left anterior lateral thoracotomy to ensure no pneumothorax and to fully evaluate the heart. Open cardiac massage was started simultaneously. The timing of this portion of the procedure I am not sure of. Over at least 45 minutes open cardiac massage was performed on the patient with full ACLS code. The patient would regain cardiac activity for only several seconds and return to an asystole. The patient was on maximum dose of epi and levophed during the code. The patient was also receiving intermittent dose of other vasoactive medications. The patient did not return from asystole despite maximal effort from the FST staff. I called the chaplain into the operating room to read the patient his last rights. I pronounced the patient at 2235 on 3 Oct 2009.

The patient received 11 units of Packed Red Blood Cells, 9 units of Fresh Frozen Plasma, and 17 units of fresh whole blood. The patient also received 4 liters of normal saline and 3 liters of Lactated Ringers.

The patient abdomen and chest were closed on skin level. All invasive devices were left in the patient. The patient was placed into a body bag. The patient was removed from the OR.

Following this procedure, I continued to assist in the treatment of the remainder of the casualties. The remainder of the casualties were walking wounded and needed only minimal care.

Following the care of the patients, I performed documentation of the patients that I saw that evening. I did not write the not for (b)(6) for several days following the incident. The day ended early in the morning on 4 October 2009.

*Nothing Follow* (b)(3), (b)(6)  
*Nothing Follow*

9. STATEMENT (Continued)  
THIS PAGE NOT USED

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

*Nothing Follows*

**AFFIDAVIT**

I, (b)(3), (b)(6), HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL

(b)(3), (b)(6) \_\_\_\_\_  
*(Signature)*

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 23 day of OCT, 2009 at FOB BOSTICK, AFGHANISTAN, APO AE 09354

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\_\_\_\_\_  
ORGANIZATION OR ADDRESS  
\_\_\_\_\_  
\_\_\_\_\_  
ORGANIZATION OR ADDRESS

(b)(3), (b)(6) \_\_\_\_\_  
*(Signature of Person Administering Oath)*

(b)(3), (b)(6) SFC, USA  
*(Typed Name of Person Administering Oath)*

ARTICLE 136, UCMJ  
*(Authority To Administer Oaths)*

INITIALS OF PERSON MAKING STATEMENT

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

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