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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 dated November 22, 1943 *(SSN)*.
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION	2. DATE *(YYYYMMDD)*	3. TIME	4. FILE NUMBER
FOB Joyce Batallion Aid Station	2009/09/12	2100	

5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS
(b)(3), (b)(6)	(b)(3), (b)(6)	03/AD

8. ORGANIZATION OR ADDRESS
C-CO 704th BSB 4-IBCT 4-ID

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

This statement is in answer to the questions deemed relevant to me as part of the investigation of circumstances surrounding the enemy attack that occurred in the vicinity of FOB Joyce on 08 September 2009. I was asked to provide information regarding the medical care of casualties undertaken on this day.

My position is acting BTN surgereon for 1-32 Infantry.

I was involved in the care of the following US Marines and ANA soldiers. I was not present at or near the site of the engagement, and therefore have no comment regarding the activities of these soldiers at the time of injury.

I will summarize the evaluation and treatment of the casualties I cared for. Since names were not known of ANA casualties, I will designate them as ANA casualty # in the order that I saw them.

Ma(b)(3), (b)(6) Sustained gunshot wound to left forearm, just below the elbow, laterally. He was evaluated at approx 1100 hours. There was no exit wound, suggesting round was retained in the arm. He had full neurological and circulatory function at the time of evaluation. His wound was not bleeding significantly. He was treated with wound cleaning and pressure bandaging by SF(b)(3), (b)(6) He was evacuated as a routine medevac to BAF later that day, approx 1530 hours.

1SG(b)(3), (b)(6) was in close proximity to RPG blast. He was evaluated also at approx 1100 hrs. According to him and Ma(b)(3), (b)(6) the distance was approx 10 meters. He reported decreased hearing, ringing of the ears, headache, dizziness, and nausea. He received toradol and phenergan in the field. I am not sure of the time these were given. He declined further pain medication at our aid station. His MACE score was abnormal, and his symptoms were consistent with acute concussion. He had no other significant injuries. He was evacuated routine to BAF along with Ma(b)(3), (b)(6)

ANA casualty #1 - This man was reported to be the commander. He was evaluated at approximately 1100 hours. He sustained a gunshot wound to the left hip area. This was a superficial wound, without significant bleeding. He was treated with wound cleaning and bandaging, and evacuated at approx 1130 hours to Asadabad.

ANA casualty #2 - He was also evaluated at approx 1100 hours. He sustained small shrapnel wounds to the lower abdomen, leg and foot. He was stable and showed no signs of bleeding internally. He was evacuated at approx 1130 hours to Asadabad.

ANA casualty #3 - He was evaluated at approx 1145 hours. He sustained a gunshot wound to the face, at the right cheek. He also had an open fracture of the lower right leg. His treatment included IV fluids, a nasopharyngeal airway with supplemental oxygen, and bandaging and splinting of the right leg. He was evacuated at approximately 1215 hours to Asadabad.

ANA casualty #4 - He was evaluated at approx 1200 hours. He sustained a gunshot wound to the chest, with exit wound in the back. He was pronounced dead upon arrival, with no heartbeat. His body was transported outside to the expectant triage area.

ANA casualty #5 - He was treated at approx 1215 hours. He sustained a shrapnel wound to the left upper chest, with an exit wound on the right upper back, creating a sucking chest wound. His treatment included placing an occlusive dressing over his chest wound, needle decompression of the chest, IV fluids, and supplemental oxygen. He was evacuated at approx 1230 hours to Asadabad.

ANA casualty #6 - He was evaluated at approx 1230 hours. He sustained a wound of unknown cause to the back of his skull, with exposed brain matter. He was breating spontaneously and moving all extremeties, so trauma care was administered. He was intubated (breathing tube) and artifically ventilated, an IV was started, and his head wound was dressed and bandaged.

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF 3 PAGES
	(b)(3), (b)(6)	(b)(3), (b)(6)

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 BE INDICATED.

USE THIS PAGE IF NEEDED. IF THIS PAGE IS NOT NEEDED, PLEASE PROCEED TO FINAL PAGE OF THIS FORM.

STATEMENT OF CPT (b)(3), (b)(6) MD TAKEN AT 2100 DATED 2009/09/12

9. STATEMENT *(Continued)*

Continued statement of CPT (b)(3), (b)(6) MD, taken at 2100 hours on 12 September 2009.

ANA casualty #7 – He was evaluated also at approx 1230 hours. He sustained a gunshot wound to the head. I pronounced him dead upon arrival. He had no heart beat and was not breathing.

The medevac procedures were unconventional, but effective. The first group of casualties, including Ma(b)(3), (b)(6)(b)(3), (b)(6)d the first two ANA casualties, were evaluated in the field by a medic and brought to FOB Joyce by rotor wing medevac in a timely manner. I am not certain of the time from injury to arrival, but the patients were treated in an acceptably timely manner given the severity of their injuries. The remaining ANA casualties were brought in by ANA forces via ground vehicles, bypassing field evaluation and treatment. Though this resulted in a disorganized evacuation process, it also provided for timely evacuation to FOB Joyce. The main problem that arose was that on two occasions, the ANA soldiers attempted to bring casualties directly to the flight line at FOB Joyce without any evaluation whatsoever. One casualty was evacuated to Asadabad in this manner that I am aware of, without receiving any evaluation at FOB Joyce.

My main suggestion for improvement would be to improve control of ANA medevac actions when they are relying on US forces for care. This speaks to the need for training on evac procedures, and medical planning prior to missions.

I would like to add that I had no involvement with evaluating or handling the bodies of the 4 KIA US Marines. They were handled by S(b)(3), (b)(6)hile I was attending to casualties at the aid station. I did not ever view their bodies, and have no direct information to add regarding a possible time of death, or specifics about their injuries. This is also true for the remaining KIA ANA soldiers.

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

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

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

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

INITIALS OF PERSON MAKING STATEMENT (b)(3), (b)(6)

STATEMENT OF CPT (b)(3), (b)(6) TAKEN AT 2100 DATED 12 Sep 2009

9. STATEMENT *(Continued)*

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

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

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

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

AFFIDAVIT

I, CPT (b)(3), (b)(6) _____, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 3. 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 ARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR I

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

Statement)

WITNESSES:

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

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

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

HHC 1-32 / 3BCT / 10th MTN

ORGANIZATION OR ADDRESS

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

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

HHC 1-32IN 10th MTN

ORGANIZATION OR ADDRESS

Subscribed (b)(3), (b)(6) o before me, a person authorized by law to administer oaths, this 13 day of September 2009 at 0842

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

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

ture of Person Administering Oath)

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

(Typed Name of Person Administering Oath)

Investigating Officer

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

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

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