

NAVY MEDICINE FAST FACTS

November 2023



ONE NAVY MEDICINE

As a Maritime Medical Force, we develop and deliver manned, trained, equipped, maintained, and certified medical forces that force develop, generate, and preserve the Naval human weapon system.



ACTIVE DUTY + RESERVE + CIVILIAN

♣ SUPPORTING 2 SERVICES ♣

UNITED STATES NAVY

Hospital Corpsmen: 19,080 AC / 2,260 RC

Medical Corps Officers: 3,010 AC / 330 RC

Nurse Corps Officers: 2,370 AC / 940 RC

Dental Corps Officers: 840 AC / 130 RC

Medical Service Corps Officers: 2,370 AC / 170 RC

UNITED STATES MARINE CORPS

Hospital Corpsmen: 5,320 AC / 840 RC

Medical Corps Officers: 440 AC / 110 RC

Nurse Corps Officers: 180 AC / 40 RC

Dental Corps Officers: 230AC / 80 RC

Medical Service Corps Officers: 340 AC / 70 RC

BUDYED BY 2,700+ CIVILIANS

* Total Force Estimates



EN-ROUTE CARE SYSTEM (ERCS) DEPLOYS FOR THE FIRST TIME



Navy's inaugural ERCS Team

Photos by Bobbi Camp, NMFL PAO

MISSIUN:

- ERCS provides personnel, equipment, and consumables for uninterupted patient care during movement without clinically comprising the patient's condition.
- Each ERCS team is designed to retrieve personnel from point of injury, and then take them through echelons of care.
- ERCS teams can provide skilled medical care for up to two critically or ill, but stabilized patients to maintain clinical stability during transportation for up to an 8-hour transit via ground, surface, or air.

MEDICAL COMPLEMENT:

- The ERCS is one of the newest Expeditionary Medicine System (EXMED) capabilities established by the CY23 BUMED Campaign Order.
- Each ERCS team is comprised of one (1) critical care nurse and one (1) search and rescue (SAR) medical technician.

ERCS NEWS:

 On October 14, 2023, Lt. Kyle Rowland, a critical care nurse assigned to NMRTC Camp Lejeune, and Hospital Corpsman 2nd Class Bradley Christian, a SAR medical technician assigned to Navy Medicine Readiness and Training Command (NMRTC) Patuxent River, reported aboard Nimitz-class aircraft carrier USS Dwight D. Eisenhower (CVN 69) marking the first time this capability was deployed.



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FUTURE EXMED CAPABILITY

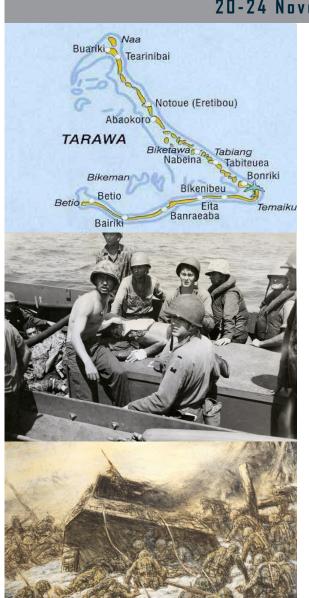
SECNAV Announces Name of New Expeditionary Medical Ship

- On October 27, 2023, in a ceremony at the Naval Medical Center San Diego, Secretary of the Navy Carlos Del Toro announced the name of the forthcoming medical ship USNS Balboa (EMS 2).
- Balboa is the second of three Bethesda-Class Expeditionary Medical Ships (EMS).
- Bethesda-class expeditionary medical ships are designed as dedicated medical ships that optimize hospitallevel medical care in support of distributed maritime operations (DMO).
- The Balboa will feature a shallow draft enabling greater reach and allowing direct access to shallow austere ports, while also providing a flight deck that accommodates military tiltrotors and helicopters.



NAVY MEDICINE AT THE BATTLE OF TARAWA

20-24 November 1943 -- 80th Anniversary



- The Battle of Tarawa was the first American offensive in the Central Pacific region during World War II. Fought mainly on the southwest island of Betio, it is notable for marking the first time that American forces faced significant opposition to an amphibious landing in the Pacific Theater.
- Tarawa is a coral atoll of the Gilbert Islands located in the west-central Pacific Ocean (2,800 miles northeast of Australia).
- American units involved in Tarawa landings: U.S. 5th Fleet, V Amphibious Force ("V Phib"), and 2D Marine Division.
- Initial assault began on 20 November 1943 and included 125 amphibious tractors. Casualties in the assault companies ranged from 50 to 70 percent.
- On Nov 22, Companies "A" and "B" of the Second Medical Battalion were ordered ashore on Betio and Bairiki Islands, respectively. Both of these companies established operating room facilities and were ready to operate within 6 hours after landing.
- Medical plans called for evacuation of casualties from the beaches to transports by small craft. Hospital ships were to be made available by Nov 23.
- Navy Medicine helped evacuate more than 2,500 casualties during the first three and a half days of operation.
- Nearly 4,000 units of plasma were used, or an average of a little less than 2 units of plasma for each casualty. A large percentage of the plasma was administered by hospital corpsmen.
- The low death rate of 2.3 percent during the Battle of Tarawa has been attributed to the heroic work of the Navy medical officers and hospital corpsmen; the use of large amounts of plasma available during the evacuation; and the thorough indoctrination of all supporting medical personnel in the medical plan.
- Navy medical personnel serving at Tarawa were awarded 2 Navy Crosses (both HMs), 15 Silver Stars (2 MCs, and 13 HMs) and 8 Legions of Merit.
- Among those KIA on Tarawa were 36 members of Navy Medicine (2 Navy physicians, 1 dentist and 33 hospital corpsmen).