

Royal Army Medical Corps

On Wednesday 13th January five members of the Farnborough Society managed to successfully battle their way through deep snow and treacherous road conditions to attend the talk and demonstration at the Royal Army Medical Corps, Aldershot.

We arrived to find reassuringly calm conditions in what could have been chaos caused by the preceding group to ours - a large number of young soldiers - having arrived an hour late from Keogh Barrack after making their way at a snail's pace due to the dangerous conditions of the roads. Whilst waiting for them to vacate the lecture room we were taken to a staff room and plied with mugs of steaming coffee whilst awaiting the arrival of the rest of our group which should have been comprised of paramedics from the Surrey ambulance service. Unfortunately, due to the weather conditions, only one person arrived from Knaphill in his four wheel drive vehicle whilst several others did not make it either because they were snowed in at home or had been called in to cover for other ambulance crews who were snowed in and could not report for duty.

However, being in such a select group did mean that we were able to ask a great number of questions throughout an excellent presentation.

We had the entire administrative set up of an army field hospital explained and broken down into the logistics of providing a full compliment of a 75 bed hospital through to smaller units offering fewer beds and facilities as required in any given situation.

An organisation chart showed the importance of not only medical staff, but of welfare and mental health professionals plus ancillary staff. This certainly brought home how incredibly well-run an Army field hospital must be.

It was fascinating to be informed of the developments in both soldiers' personal equipment together with the ability of helicopter pilots to remove casualties swiftly from the battle scene to well organised and prioritised medical facilities which lead to a decreased loss of life and earlier intervention in serious wounds. We were extremely heartened to hear that these developments had led to 74 lives, which would, in previous times been lost due to the nature of the injuries, being saved in recent conflicts.

Among the soldiers' personal first aid equipment was a newly developed tourniquet which appeared to be a fairly simple piece made from nylon webbing type material with Velcro, buckles and a small device for tightening once in place. This was designed to be used with one hand so that it could be used on an arm or leg by injured soldiers themselves. It was rather distressing to be told later, during the demonstration, that drivers of patrol vehicles frequently left for their duty with a tourniquet already around each thigh since the Improvised Explosive Devices used by terrorists had become so violent that severe leg injuries were routinely experienced. The proactive use of these tourniquets meant that putting them into immediate action prevented death due to blood loss but, of course, meant more amputees returning home.

On a lighter note, it was stated that each soldier was also issued with a single dose of self administered painkiller which could be injected through clothing. However, the Commanding Officer sincerely hoped that any soldier needing to do this would remember to avoid the map pocket.

After this comprehensive presentation we were taken to an area where a team of doctors and nurses were standing by in a mock up of the receiving area of an army field hospital. The demonstration kicked off with the arrival of an ambulance containing a young soldier doing a very convincing impersonation of somebody suffering the type of blast injury explained to us. We were talked and shown through the receiving procedure, the assessment by a doctor and any immediate treatment to be given by the medical team before dispatching the casualty to surgery. The whole procedure was quick, professional and very reassuring.

Visitors were then given the opportunity to look inside the field ambulance or to ask further questions of the medical staff. Whilst chatting to them it was notable that several, who had been to Iraq and/or Afghanistan, stated they felt it to be a great privilege to be working with the team in field conditions in a battle zone.

In conclusion, this visit was felt to be a great success, hugely informative, probably made us all feel very proud and supportive of our Army and NHS volunteer Medical personnel and encouraged those of us who were fortunate enough to attend to urge others to go on any other visit that could be arranged in the future.