TATRC - 4th Draft

TATRC 1999 ATA Exhibit Multi-Media Script

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Visuals

Audio

THEATER SIGNAGE COPY: The art and science of trauma care has, primarily, been developed by men at war. This exhibit traces the challenges, the milestones and the triumphs of military medical technology from the bone saw to telemedicine.

Civil War Section

FADE UP CUBE WALL: Montage/collage of Civil War battle scenes

SFX: explosion flashes

GRAPHIC:Killed in Battle600,000Died of Wounds200,000Died of Disease400,000

SFX: Light up rations display

WALL: Soldiers at mess

MUSIC: Battle Hymn of the Republic

SFX: Battle sounds, explosions

NARRATOR: The Civil War was the bloodiest war America has ever fought. Over 600,000 soldiers, North and South, lost their lives in that war -- but only 200,000 of them died of combat wounds. The rest -- over 60% -- died of diseases like dysentery, typhus and measles.

The reasons for these tragic statistics are many:

Civil war rations were often rotten and the water contaminated. The concept of infectious disease -- along with the benefits of hygiene and field sanitation -were largely unknown.

SFX:Light up mannequin	The wool uniforms worn by both North
CUBE WALL: Soldiers in uniform in hot conditions	and South were a great asset in the winter and a debilitating liability in the summer. Their boots seldom fit and were not made with a left and right foot.
WALL: Wounded soldiers	Soldiers received no training in first aid and carried no field dressings; splints had to be made from whatever was at hand.
WALL: Dead and wounded soldiers lying on the battlefield	The few medics were ill equipped and poorly trained. A wounded soldier either had to walk off the battlefield or wait and hope that someone would find him still alive.
WALL: Ambulance photos	If he were extremely lucky, a Northern soldier might be found by a member of the newly formed Ambulance Corps but the springless, two-wheeled wagons provided such a rough ride that many soldiers died in transit.
WALL: Andrew Jackson photos	It was all too common for soldiers to die as Stonewall Jackson did wounded in the leg and killed by an aneurysm during a rough ride to the field hospital.
WALL: Field surgery	A field hospital consisted of little more than a sturdy table in a building or tent near a source of water hopefully clean water, because water purification was unknown.
SFX: Light up surgeon's equipment	94% of the wounds in the Civil War were

display WALL: Field surgery	caused by small arms. And for a bone shattered by a rifle ball, the only treatment was amputation so medical technology of the day consisted mainly of knives, ligatures and bone saws.
SFX: Light laudanum and whiskey display	For pain management, the medical officer had whiskey and sometimes opium. A
WALL: Soldiers bathing in river, lying sick on beds and stretchers	new technology, chloroform, was introduced for surgery. But he had nothing to prevent infection or stop the spread of disease.
WALL: Field hospital photos	Soldiers who survived the field hospital were taken to a state-of-the-art pavilion general hospital, where they had a decent chance of survival.
WALL: Battle scenes, dead and dying	The Civil War was a war of great suffering but many lessons were learned and many new military medical innovations resulted from this terrible war.
WALL: Freeze on shot of individual wounded soldier, fade to 1/2 brightness	MUSIC: out
SFX: exit lighting	

Viet Nam Section

WALL & VIDEO: Collage/montage of Viet Nam battle scenes	MUSIC: Flight of the Valkyries
SFX: explosions	SFX: Battle sounds
WALL & VIDEO: Battle scenes	NARRATOR: In the one hundred years

between the Civil War and the war in Viet Nam, the US Army learned a lot about minimizing casualties and treating combat wounded.

WALL & VIDEO: Inoculation scenes, jungle scenes, diseased local people

SFX: Light display of prophylaxes

WALL & VIDEO: Soldiers eating, drinking, working in the field

SFX: Light display of rations and water purification kit

WALL & VIDEO: Soldiers with dog tags SFX: Light dog tags display

WALL & VIDEO: Soldiers in jungle, hot sun, etc.

SFX: Light up mannequin

WALL & VIDEO: Close-ups soldiers wearing helmets, using helmets as wash basins, etc.

SFX: Spotlight helmet on mannequin

WALL & VIDEO: Jungle fighting scenes

WALL & VIDEO: Battle scenes, medical evac scenes

Before even leaving for Viet Nam, US soldiers were inoculated against a range of indigenous diseases and given prophylaxes against malaria.

Water purification kits were standard issue. Rations provided balanced nutrition. And, most importantly, the Viet Nam soldier knew the importance of clean food, clean water and personal hygiene.

Metal dog tags carried the soldier's blood type.

Combat uniforms, made of cotton, and jungle boots ventilated to help keep a soldier's feet dry and clean, were well suited to the climate in Viet Nam.

Steel helmets and flak vests gave protection from shrapnel and flying debris, but were not worn because they were too hot and heavy.

In Viet Nam, soldiers were often wounded a long way from a medical unit.

Caring for soldiers wounded far from doctors and hospitals required three new innovations: the highly skilled medic, the

radio and the helicopter.

WALL & VIDEO: Medics at work on the battlefield	Medics in Viet Nam were trained to function independently. In addition to diagnosing and treating a range of diseases, they were able to give sophisticated first aid, resuscitate and sustain the seriously wounded for evacuation.
SFX: Light display of medic's kit	The medic's standard issue included dressings and ligatures to arrest bleeding, intravenous infusions for the management of fluid loss and morphine for pain management.
WALL & VIDEO: Radio's in use SFX: light field radio display	The radio enabled soldiers in the field to call for rapid medical evacuation.
WALL & VIDEO: Helicopter images SFX: Light helicopter model	And the helicopter, often at great risk, flew in to provide the fastest and most effective medical evacuations ever performed, usually getting the soldier to a hospital in less than an hour.
WALL & VIDEO: Field hospital images	Evacuation in Viet Nam was to well equipped, fixed facility hospitals, in safe areas, capable of providing world-class care of war trauma and disease.
WALL & VIDEO: closing montage - battle scenes, first aid, evac and hospital images	As a result of the medical and protective technologies employed in Viet Nam, only 3% of soldiers evacuated from the battlefield died of their wounds, compared

to a 10% rate in World War I.

However, the killed in action rate remained at 19%, little-improved since World War I. The post-Viet Nam technology effort has been aimed at reducing this figure.

WALL: Freeze on image of wounded being loaded onto helicopter, fade to 1/2

MUSIC: out

SFX: exit lighting

Desert Storm Section

WALL & VIDEO: Desert Storm battle scenes	MUSIC: Contemporary military theme
SFX: explosions	SFX: Battle sounds
	NARRATOR: In the thirty years between Viet Nam and Operation Desert Storm, the medical technology continued to advance but so, too, did the lethality of weapons.
WALL & VIDEO: Burning tank & truck images	Underneath the soldier's cotton uniform, a heat-dissipating Nomex undersuit
SFX: Light Nomex display	protected aircraft and tank crews against burns.
WALL & VIDEO: Soldiers in helmets & flak jackets	Kevlar helmets and improved flak jackets with kevlar chest plates were mandatory
SFX: Light up helmet & vest display	wear.
WALL & VIDEO: Soldiers in NBC suits	Nuclear/biological/chemical suits and
SFX: Light mannequin	respirators gave protection against the greatest real threat of chemical and biological warfare.
WALL & VIDEO: soldiers in gloves & goggles	Gloves and light ballistic eye protection were standard wear.
WALL & VIDEO: Soldiers being vaccinated	Soldiers in Desert Storm were vaccinated against biological warfare agents and
SFX: Anti-chemical drugs display	drugs were issued to counteract the effects of nerve agents.
WALL & VIDEO: Soldiers in the field	Clean water was plentiful and high-calorie rations readily available.

SFX: Light up rations display	
WALL & VIDEO: training footage	Individual training and acclimatization was so good that Desert Storm enjoyed the lowest disease and non-battlefield injury rate in history.
WALL & VIDEO: Medics in action SFX: Light up medic's kit display	Medics in Operation Desert Storm were trained to a high level and equipped with state-of-the-art equipment, including IV fluids, airways, high-quality splints, burn dressings and morphine.
WALL & VIDEO: Battalion aid vehicles	The first level of care in Desert Storm was provided by battalion aid stations using tracked or wheeled vehicles, which used global positioning systems to locate casualties quickly.
WALL & VIDEO: Computers, phones and radios SFX: light up computer, phone, radio display	Lap-top field computers, satellite telephones and secured radios were used to transmit medical information at great speed.
WALL & VIDEO: Evacuation images SFX: Light up Hum-vee/Black Hawk/Huey models model	Evacuation from the battlefield in Operation Desert Storm was performed by Hum-Vee ambulances, the aging Huey "Dustoff" and state-of-the-art Black Hawk Air Ambulances,
WALL & VIDEO: DETMEDFS images	Far-forward medical aid was provided by Combat Support Hospitals, using the ultra- modern Deployable Medical Systems, or DETMEDFS, mobile equipment.

Equipped with an array of state-of-the-art SFX: Light up display of monitoring equipment diagnostic and treatment technology, medical technology advances in Operation WALL & VIDEO: Battle scenes Desert Storm contributed to the fact that the died-of-wounds rate was a mere onehalf-of-one percent, the lowest in military medical history. The killed-in-action rate, however, remained at 19%. Little changed since the beginning of the century. This is the focus of modern combat medicine and technology research. WALL & VIDEO: Freeze on evac shot MUSIC: out and fade to 1/2SFX: exit lighting

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Soldier of Tomorrow Section

WALL & VIDEO: Current images of soldiers training in high-tech gear, smart bomb footage, soldiers in high-tech support roles

SFX: light up mannequin

MUSIC: Futuristic military theme

NARRATOR: The soldier of tomorrow will not only be physically and psychologically tough, but will also be a skilled technician who takes years to train and millions to equip. Replacing tomorrow's soldier -- whether he's taken out by a missile or microbe -- will be difficult and expensive. Even today, training an Apache pilot costs an estimated 1/2 million dollars and takes 52 weeks. In tomorrow's military, the soldier will be the most valuable asset on the battlefield.

So the goal of tomorrow's military health care system will be to keep our soldiers in optimum health at all times, through an increased emphasis on prevention -- and the earliest possible intervention. New telemedicine and advanced medical technology will be used to enhance medical readiness, provide battlespace medical awareness and enable more effective employment of medical forces.

WALL & VIDEO: Montage/collage of new technologies, civilian and military, especially communications, computer and video technologies In pursuit of this goal, the US Department of Defense will seek out new technologies with new capabilities. But in this age of unprecedented technological proliferation,

great potential will not be enough. Only those technologies which offer real value -- by being practical, dependable and easily deployable, in addition to offering great promise -- will be good enough for tomorrow's soldier.

Already, new high-value technologies are emerging:

Tomorrow's soldier will wear a smart suit that incorporates body armor that is lighter and stronger than previous issues and Nuclear/Biological/Chemical protection, complete with built in respirator.

The helmets will feature built-in communications devices, hearing protection, laser protection and heads-up visual displays. They will also have high ballistic protection.

Tomorrow's soldiers will be given immunity against a wide range of disease threats, such as anthrax and other genetically engineered diseases.

Nuclear, Biological,/ Chemical warning systems will be miniaturized an simplified for personal use.

Tomorrow's soldiers will be issued Personal Status Monitors to enable information on an individual solder's location and health to be monitored, to

WALL & VIDEO: images of soldiers in body armor, NBC suits, etc.

SFX: Light up mannequin

WALL & VIDEO: images of helmets SFX: Light up helmet

WALL & VIDEO: Third-world hospital and disease images

SFX: Light up display of vaccinations

WALL & VIDEO: NBC devices

SFX: Light up body armor display

WALL & VIDEO: images of the PSM, computer maps with blinking lights, PSM monitor read-outs

SFX: Light up PSM display

ensure fast location, treatment and execution...

WALL & VIDEO: images of the PIC & PIC read-outs

SFX: Light up PIC display

WALL & VIDEO: Current medic training and/or instructional footage

WALL & VIDEO: CATHSIM VR displays, training footage

SFX: Light up CATHSIM unit

WALL & VIDEO: METI data displays, training footage

SFX: Light up METI display

WALL & VIDEO: contents of current medic kit

WALL & VIDEO: images of palm top computers

SFX: Light up palm-top display

and a Personal Information Carrier on which the soldier's medical treatment can be voice-recorded, photographed and updated at every point of intervention.

The medics of tomorrow will be highly skilled medical professionals -- more highly trained than any medics in history -- thanks to new training technologies like virtual reality trainers and patient simulators.

Virtual-reality trainers are technologies that train medics in performing tasks such as intravenous infusions.

Patient simulators and medical mannequins are computerized patients, programmed to demonstrate the vital signs and symptoms of a variety of traumas -giving medics realistic training and practice in trauma care.

And tomorrow's medics will be equipped with powerful new trauma-treatment technologies, like:

A palm-top personal computer device which allows the medic to record voice data on a soldier's PIC, record visual data through a small camera and use voiceprompts to step through difficult medical

procedures.

WALL & VIDEO: Fibrin bandage images SFX: Light up Fibrin bandage display	Fibrin bandages a rapidly impregnated bandage that stops hemorrhaging from major wounds, including heavy arterial bleeding
WALL & VIDEO: Blood substitute images SFX: Light up blood substitute display	Blood substitutes that have the capability and characteristics of blood
WALL & VIDEO: New airways & splints images SFX: Light up new airways & splints display	New airways for more effective tracheotomy respiration, and modern splints for better immobilization of shattered limbs.
WALL & VIDEO: Smart stretcher images SFX: Light up smart stretcher display	Tomorrow's medic will use a new lightweight smart stretcher which can maintain and sustain the patient in transport.
WALL & VIDEO: Dustoff images SFX: Light up Dustoff/Osprey models	Evacuation from tomorrow's battlefields will be accomplished through technologies especially adapted for that purpose, like the UH60Q Blackhawk Dustoff helicopter, and the new tilt-rotor Osprey.
WALL & VIDEO: Aztec exterior images, including close-ups of identifying signage	Evacuation of tomorrow's soldier will be to a unique medical unit in a far-forward position. The Advanced Surgical Suite for Trauma Casualties or ASSTEC combines state-of-the-art medical technologies with far greater mobility and lower logistical cost than any field hospital ever deployed. It's purpose will be to

	provide life and limb-saving surgery and to stabilize patients for evacuation to definitive care in hospitals out of the combat zone.
	The ASSTEC is equipped with::
WALL & VIDEO: 3D ultrasound images SFX: Light up ultrasound display	3D Ultrasound diagnostics
WALL & VIDEO: Hand-held X-ray images	Hand-held X-ray units
SFX: Light up Hand-held X-ray display	
WALL & VIDEO: Mini-anesthetic images	Mini-anesthetic devices
SFX: Light up Min-anesthetic display	
WALL & VIDEO: Old satellite link images SFX: Light up satellite phone display	And a complete telemedicine suite linked to the Internet through satellite phones a fraction of the size of previous units.
WALL & VIDEO: Images of telemedicine suite, Internet conferencing, transmitted patient information screensSFX: Light up remote monitors display	In the telemedicine suite, remote monitors transmit the patient's blood pressure, EKG, pulse, temperature and other status information, in real time, to medical consultants thousands of miles away giving ASSTEC physicians immediate access to specialized expertise anywhere in the world and giving tomorrow's soldier the finest medical care in the world.
WALL & VIDEO: Soldiers using high- tech weapon systems	Tomorrow's soldier will be much more highly trained, much more expensively

	equipped and far more difficult to replace than any soldier in history.
WALL & VIDEO: high-tech military medical facility images	That's why tomorrow's military medical system must be the most effective health care system in history.
	Having learned through trial by fire the value of technology in minimizing casualties but facing rising medical costs and shrinking military budgets tomorrow's military will create that system by employing only those technologies which offer the greatest value because nothing else is good enough for tomorrow's soldier.
WALL & VIDEO: Freeze frame on close- up of soldier in high-tech gear, fade to 1/2	MUSIC: out