

9 Line Medical Evacuation Request

Air/Ground

1. Grid location of pickup site
2. Radio frequency, call sign
3. Number of patients by precedence
 - a. Urgent
 - b. Urgent-Surgical
 - c. Priority
 - d. Routine
 - e. Convenience
4. Special Equipment
 - a. None
 - b. Hoist
 - c. Extraction Equipment
 - d. Ventilator
5. Number of patients by type
 - L ____ # Patients litter
 - A ____ # Patients ambulatory
6. (Peacetime) Number and type of wound, injury. Specific information regarding casualty(ies).
7. Method of marking
 - a. Panels
 - b. Pyrotechnic signal
 - c. Smoke signal
 - d. None
 - e. Other
8. Patient Nationality and status
 - a. U.S. Military
 - b. U.S. Civilian
 - c. Non U. S. Military
 - d. Non U.S. Civilian
 - e. EPW
9. NBC/terrain description (wartime)
 - N. Nuclear
 - B. Biological
 - C. Chemical N/A
9. (Peacetime) detailed terrain feature description