

TacMed UPDATES

Committee for Tactical Emergency Casualty Care (C-TECC) Update: Summer 2014*

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Global Event Summary

The first anniversary of the Boston Marathon bombings reminds us of the critical importance of multiagency operational plans for high-threat civilian trauma response. Through the commitment of the many national and local leaders, we are more prepared than we were in 2013. Still, we must remain vigilant and continue to drive forward. The Department of Homeland Security, Department of Health and Human Services, and Federal Emergency Management Agency continue to lead the development of federal standards for response to active shooter/IED mass casualty incidents. C-TECC leadership is appreciative of the opportunity to help shape these conversations and provide “feedback from the field.”

Administration

C-TECC is a best practice development group dedicated to advancing the science and practice of trauma care in high-threat civilian settings. The TECC guidelines are open source and can be used by any entity to produce a training program. However, it is important that organizations claiming to train TECC provide a high-quality product that accurately reflects the principles and language detailed in the TECC Guidelines. In order to protect recipient agencies, the C-TECC is currently finalizing a method to recognize educational entities that adhere to an Ethical Use Agreement, committing to train TECC in a manner consistent with the C-TECC-approved guidelines. The Ethical Use Agreement will be voted on at the June 2014 meeting and posted on the C-TECC website for interested parties.

Training

Multiple federal, regional, and international organizations continue to integrate TECC into their TTPs. The

Department of Health and Human Services continues to fund the prominent ALERT Active Shooter program that incorporates TECC for law enforcement officers. The ALERT program is officially partnered with the FBI to conduct best-in-class active shooter education for law enforcement. The Joint Counterterrorism Awareness Workshop (JCTAWS) also recently completed an integrated TECC program in Miami, Florida. On the international front, TECC training was conducted for the London Fire Brigade, London Metro Police, and London Ambulance service. Early-stage TECC program development is under way in Mexico and Argentina. Mr. J Payo and Dr. Baez have produced a Spanish version of TECC and can be contacted through the TECC website.

Conclusion

The 2014 Spring/Summer C-TECC meeting will be hosted by the Johns Hopkins Division of Special Operations Medicine, Department of Emergency Medicine, on 9–10 June in Baltimore, Maryland. The meeting will focus on follow-up actions from the Department of Health and Human Services-sponsored Active Shooter/IED Response Stakeholder meeting in January, review of the TECC Pediatric Guidelines, approval of the Ethical Use Statement, and review of 2014 partnership agreements. The 9 June 2014 meeting is open to the public; please e-mail us through the “Contact us” link at www.c-tecc.org for additional details.

More information on TECC is available at www.c-tecc.org.

Note: *Our apologies to the Committee for Tactical Emergency Casualty Care (C-TECC). We missed adding the C-TECC Update: Summer 2014 to our Summer print edition. The digital edition was updated as soon as we noticed our error and we have included it in this edition, which is followed by their Fall Update.