

## Notes for the Test Board

POC	Item/Task	Completed
Test Board Chair(TBC)	TBC is responsible for the entire EFMB event (he/she is in charge)	
Test Board Chair(TBC)	Ensure all test board members have earned the EFMB and are in the rank of MSG or above	
Test Board Chair(TBC)	Ensure the Test Board and Overall OIC/NCOIC read AMEDDC&S HRCoE PAM 350-10, have a copy, and understand their roles and responsibilities	
Test Board Chair(TBC)	Ensure the event leadership read their designated section of AMEDDC&S HRCoE PAM 350-10 (listed in their validation checklist) and understand their roles and responsibilities	
Test Board Chair(TBC)	Ensure all test board members are present during the entire validation process	
Test Board Chair(TBC)	Ensure a minimum of two test board members will be on site during standardization and testing. They will consistently rotate the site area to reinforce standards and troubleshoot issues identified with reoccurring questions and/or rebuttals. Recommend creating a schedule posted in the TOC for who will be on site with contact information.	
Test Board Chair(TBC)	Ensure that study hall is conducted daily throughout standardization and testing (this includes land navigation days)	
Test Board Chair(TBC)	TBC and TCO must be present for all rebuttals.	
Test Board Chair(TBC)	If a candidate misses any part of standardization due to injury, illness or loss of equipment, it is not required to afford them another opportunity to be standardized on anything they missed. It is up to the TBC to determine if the candidate continues on in the competition, or is removed.	
Test Board Chair(TBC)	The TB will conduct a thorough pre-validation of all tested events prior to TCO arrival.	
Test Board Chair(TBC)	The TB will make determinations for grey areas in the PAM and ensure cadre and candidates are briefed on those decisions. (TCO will send Grey Area Notes/Discussion document)	
Test Board	Create and issue the overall EFMB OPORD to candidates; CTLs will issue FRAGOs.	
Test Board Chair(TBC)	Ensures all documentation is submitted in accordance with the chart listed below.	

NLT Date	Item	Completed
60 Days prior to test start date	EFMB Concept Brief	
60 Days prior to test start date	Score Sheet Modification Requests	
45 Days prior to test start date	Exception to Policy Requests	
10 Days prior to test start	MEDCoE Form 1243-1 Verification of Written Test	
5 Days prior to test start date	MEDCoE Form 1243-2 Verification of Evaluators	
5 Days prior to test start date	MEDCoE Form 1243-3 Verification of Land and Equipment	
5 Days prior to test start date	MEDCoE Form 1243-4 Verification of Land Navigation	
5 Days prior to test start date	MEDCoE Form 1243-5 Verification of 12- Mile Foot March	
3 Days post test	MEDCoE Form 1200	
3 Days post test	EFMB Database	
3 Days post test	Request for Orders for EFMB Awardees (4187, Memo, ERB/ORBs)	
3 Days post test	MEDCoE Form 1232 for awardees	
5 Days post test	MEDCoE Form 1243-6 Destruction of EFMB Written Test Materials	
1 month post test	After Action Review (AAR)	
1 month post test	Rebuttal Forms	

### Rebuttal Process:

The TBC will chair the rebuttal board.
TB cannot overturn black and white.
TB will review score sheet, rebuttal sheet, and all relevant documents/photos/videos prior to meeting with candidate.
TB will discuss NOGO with evaluator.
TB will notify TCO to bring candidate in. Candidate will report to TBC (recommend using a hand salute). TB will ask candidate questions pertaining to the rebuttal. TB will dismiss candidate to deliberate. Candidate will salute on way out.
TB will deliberate and will render a decision on the rebuttal. During the rebuttal boards, the TBC will only vote if the other test board members do not render a majority decision.
Test Board Chair signs the rebuttal form with optional comments.
TB will notify TCO to bring candidate back in. Candidate will report to TBC. TBC will state the <u>outcome for each rebuttal and dismiss the candidate. Candidate will salute on the way out.</u>
TBC/TCO will change NO-GOs to GOs (if applicable) and annotate approval or disapproval in comments section on score sheets.
TBC/TCO will mark on the top of the tested score sheet a GO/NOGO
Test board chair keeps copy of rebuttal form and scans them in per day to send to the TCO.
Only evaluate task at hand, no other tasks or packets- Do NOT look into if they will stay or go home.

## TOC

POC	Item/Task	Completed
EFMB OIC/NCOIC	Recommend OIC/NCOIC read all of AMEDDC&S HRCOE PAM 350-10 to ensure they understand all requirements	
EFMB OIC/NCOIC	Review risk assessments for each tested event/lane (each CTL should have a risk assessment)	
EFMB OIC/NCOIC	Randomly select files for candidates (10-15); check for the following:	
	Commander's Memo	
	ORB/ERB	
	Expert Weapons qualification - check dates, hits, and signatures/initials	
	CPR certification or memorandum (no MODS print out)	
	Permanent Profile (if applicable)	
EFMB OIC/NCOIC	Does the TOC have a candidate packet deficiency list?	
EFMB OIC/NCOIC	Plan for deficiencies? Typically candidates will be required to bring any outstanding documents during in-processing	
EFMB OIC/NCOIC	Review EFMB Orders for Cadre (Best practice to separate them by TB and lane/event)	
EFMB OIC/NCOIC	Review admin procedures for in/out- processing (Will the candidates leave the same day or wait?)	
EFMB OIC/NCOIC	When/Where will layouts occur? Who will conduct the layouts? Place for magazines in FLC or TAPS. Headlamps don't count as hand-held flashlight. What will they allow for flashlight? Color? (no small LED lights) Do they anticipate that many candidates will have a particular equipment deficiency? (ex. CIF does not issue ponchos anymore) How long will candidates have to acquire any equipment deficiencies?	
EFMB OIC/NCOIC	Review process for Certificates of Training for 68W sustainment (TCO will provide)	
EFMB OIC/NCOIC	Review any materials given to candidates - study materials? What providing?	
EFMB OIC/NCOIC	Recommend TOC creates all DA 705s and verify ages at in-processing to make AFPT grading easier on site	
EFMB OIC/NCOIC	If letting PT test failures continue, only put up to the failed event for PT test in database. Need accurate numbers for stats	
EFMB OIC/NCOIC	Review standardization and testing week schedule, posted in TOC; Need to schedule 1-2 hours for the TCO to conduct the survey and a brief to the candidates prior to the APFT (usually done the evening prior to the start of test week)	
EFMB OIC/NCOIC	Discuss LSA rules (ex: ordering food, family visitation, laundry pickup, energy drinks, smoking) and ensure candidates are briefed on what will send them home	
EFMB OIC/NCOIC	Discuss weapons accountability. The Test Board can make a decision on consequences for weapon being out of arms reach during standardization, but it is required to be within 1 meter of the candidate at all times during testing. Recommend limiting the amount of time candidates are without their weapon to create stronger muscle memory to always have it with them.	
EFMB OIC/NCOIC	Ensure completed score sheets are put in the candidates file	
EFMB OIC/NCOIC	Discuss keeping the EFMB files for at least 2 years following testing	
EFMB OIC/NCOIC	TCO will review how to input data into the EFMB database. (limit use) (3-4 Max: 2 day/2 night) Recommend inputting data as the packets come in, and not waiting until the end of the day	

## 68W Sustainment

POC	Item/Task	Completed
Test Board Chair	Ensure primary instructor is a 68W SFC and is current on Tables I-VIII within 2 years or MSTC staff; does not need to have the EFMB	
Test Board Chair	Primary Instructor:	
Primary Instructor	Read AMEDDC&S HRCoE Pam Paragraph 3-4.g. and Chapter 9	
Primary Instructor	Ensure all instructors are 68W NCOs and are current on Table I-VIII within 2 years or are MSTC staff; do not need to have the EFMB	
	-Present MODS screen shots to TCO for each instructor during validation, or e-mail to TCO for pre-validation	
Primary Instructor	Ensure the training area can support candidate population, has appropriate IT capabilities, and ample supplies are available for training	
Primary Instructor	Designate the Medical Control Officer (MCO) who is a provider or registered nurse:	
	-MCO will only sign off on Tables IV, VI and VII. The rest will be done by the TCO.	
Primary Instructor	Verify Instructor to candidate ratios: 1:24 instruction, 1:1 testing, 1:6 P.E.	
Primary Instructor	View Training Schedule/Timeline (see EFMB website)	
	-18 hours of training over 3 days- Day 1-I, II, III, VI; Day 2-IV and VII; Day 3-testing	
Primary Instructor	Verify sign-in roster and DA Form 7442s (see EFMB website)	
Primary Instructor	Risk Assessment (if applicable)	
Primary Instructor	All materials for didactic portion on EFMB website	
Primary Instructor	SMs show up 3 days early to participate. SMs only get credit for table VIII if get 12/15 TCCC tasks during testing. Option to backload 68W who don't make it through the TCCC lane, let them conduct the TCCC tasks again, or run through TCCC on Land Nav day if they fail early on.	
Primary Instructor	Must provide the following to TCO for input into MODS upon completion of 68W sustainment: Medical Scenario Testing Sheet DA 7741 x2, DA 7442, schedule, sign-in rosters for candidates and instructors	

## APFT

**\* Must achieve 80 in each event for a GO\***

POC	Item/Task	Completed
Test Board Chair	Designate an MFT OIC/NCOIC; Do not need to have the EFMB	
APFT OIC/NCOIC	-Verify certificate of training or ASI orders	
APFT OIC/NCOIC	Read AMEDDC&S HRCoE Pam Paragraph 3-4.h. and 5-1	
APFT OIC/NCOIC	Validate area for sit-ups and push-ups (flat and dry) and alternate sites	
APFT OIC/NCOIC	Validate 2 mile and 2.5 mile courses with wheel (host provides this during TCO validation)	
APFT OIC/NCOIC	-If a 400m track is used, the event OIC/NCOIC will add the additional 61ft 4 in to ensure candidates complete 2 miles.	
APFT OIC/NCOIC	-If a road route is used, establish plan to ensure all candidates complete the entire run/walk route, establish mile marker	
APFT OIC/NCOIC	Ensure course is clearly marked	
APFT OIC/NCOIC	Review medical evacuation plan	
APFT OIC/NCOIC	Verify water points	
APFT OIC/NCOIC	Review process to ensure entire course is negotiated (cadre posted?)	
APFT OIC/NCOIC	Bathrooms? Not required, but recommended	
APFT OIC/NCOIC	Must have area established to conduct HTWT screening and tape	
APFT OIC/NCOIC	Risk Assessment on site; it is a working document	
APFT OIC/NCOIC	Conduct an overview of grading standards IAW FM7-22 with all APFT graders	
APFT OIC/NCOIC	-All graders must be in the rank of SGT or above	
APFT OIC/NCOIC	-Push-ups: when do you stop a candidate who performed any of the first 10 incorrectly? Recommend no more than 3 corrections before sending to back of line. Only one shot at return to back of line. -Sit-ups: What is the "back of the head"? establish standards for graders (recommend more than half hand on the back). What is interlocked? Ensure it is standardized.	
APFT OIC/NCOIC	Have graders grade each other. (No Run)	
<b>There are no rebuttals for this event.</b>		
<b>Notes:</b>		
Grading discrepancies must be limited- Graders need to know and enforce the standards		
Don't count bad reps (if you correct with go lower, then that rep doesn't count)		
Option that once they fail, they do not proceed		
Option to stop at 80 points		
If there is no 80 point standard for an event, then the candidate must achieve the 81 point standard; the PAM states they must score a minimum of 80 points.		
Recommend TOC creates all 705s; just verify age is still correct on day of testing		
Recommend having score tables laminated with each grader (highlight 80% standard)		
Recommend limited spectators to include candidates (face away)- This can distract graders and		
Can remove a grader who does not uphold the standard mid-way through - all previous grades still stand, will then need to redistribute candidates		
<b>TCO makes final decision on validation.</b>		

## Written Test

**\* Must correctly answer 60 out of 80 for a GO\***

POC	Item/Task	Completed
Test Board Members	Read AMEDDC&S HRCoE Pam Paragraph 3-4.i., 5-2 and 5-3	
Test Board Members	Review all questions on TWO versions of the written test in comparison to references and answer keys (all will be provided by TCO) TCO will work with Test Board to ensure questions are clear, make sense, and that the correct answer is recorded on the answer keys. This is when the Test Board can recommend questions be reworded.	
Test Board Chair	Sign MEDCoE Form 1243-1 for each version of the test	
Test Board Members	Make one copy of WT for each candidate. Recommend doing this after the APFT, so you don't print out too many and waste paper.	
Test Board Members	- Ensure all pages are present in each test booklet	
Test Board Members	- Each written test will be numbered 001-XXX	
Test Board Members	Ensure WT is held in an adequate area that does not place candidates too close together. (chair space in between)	
Test Board Members	Review WT instructions with Test Board Members (page 5-8 and 5-9 of the PAM)	
Test Board Members	Conduct a dry run on how the WT will be administered, turn in procedures, grading and rebuttals (or can do this the morning of the WT to ensure everything is fresh in their minds)	
Test Board Members	Assign adequate Officer or NCO EFMB holders as proctors for the exam; can be the Test Board	
Test Board Members	Ensure all personnel involved with the WT are properly briefed and understand roles (duties of test proctors: Only answer questions on procedures, time checks, and purpose and use of exam)	
Test Board Members	Required equipment- written test, scrap paper, #2 pencils, 2x stop watches for official time (1 hour and 30 min), place to write start and end times (TCO will provide score sheets prior to test, and bring all scoring and reference materials)	
Test Board Members	Upon test turn-in, ask "did you answer all 80 questions with only one answer per question?" "Do you wish to rebut?" Ensure answer sheets properly filled out, ensure all pages of the test booklet are present (no stray marks - only if reusing test books/missing info)	
Test Board Members	- If a candidate wishes to rebut, they get a rebuttal form, test booklet and any notes they made while taking the test. The candidate will not keep their answer sheet. Candidates must be separated from others until rebuttal board.	
Test Board Members	Identify a waiting area for candidates who finish the WT. (Must be separated from any candidates that have not tested in cases where more than one testing session occurs.) Also must separate rebuttals.	
Test Board Members	Once WT is complete account for all tests by number.	
Test Board Members	Use answer key cut-outs provided by TCO for grading. Mark incorrect answer with blue or black pen only. Put total number of correct answers on top front of answer sheet. All answer sheets will be graded by two different test board members. Proctors cannot grade.	
Test Board Members	Option to grade tests as they come in, or wait until all rebuttals are completed.	
TCO	The TCO is the only one who can throw a question out.	
Test Board Chair	Sign MEDCoE Form 1243-6 for each version of the test upon destruction	
<b>Notes:</b>		
Can have an Army Values/ Integrity NOGO (Candidates suspected of cheating must be allowed to complete the exam)		
Only test board members are allowed to handle tests- TCO holds on to test as long as possible		
Leave enough time for setup and briefings		
Candidates need 60 OUT OF 80 to be a GO		

## Land Navigation

**\* Must correctly location 3 out of 4 for a GO\***

POC	Task	Completed
Test Board Chair	Assign OIC (1LT or above) and NCOIC (SFC or above) - don't need to be badgeholders	
LN OIC/NCOIC	Read AMEDDC&S HRCoE Pam Paragraph 3-4.j. and Chapter 6	
LN OIC/NCOIC	Ensure adequate personnel are assigned to support LN (10x lane walkers, personnel to conduct shake-downs, personnel to walk candidates to their SPs and wait until they depart the SP, at least 2x personnel to grade, medical support) and that they fully understand their roles and responsibilities (read Chapter 6)	
LN OIC/NCOIC	All assigned personnel must be present for validation	
LN OIC/NCOIC	Risk Assessment on site; it is a working document	
Test Board Chair	Complete MEDCoE Form 1243-4	
LN OIC/NCOIC	Inspect all items given to candidates: maps are to scale 1:50,000; protractors fit map squares	
LN OIC/NCOIC	-Recommend using re-sealable plastic bags to create weatherproof packets for the candidates; include map, score sheet, lane strip, protractor, and pencil, can also include whistle or chem light if part of the risk assessment	
LN OIC/NCOIC	Establish shake down area prior to and after completing land nav course. Recommend NCOs conduct shake down. Recommend no cutting devices, no notebooks.	
LN OIC/NCOIC	Ensure timeline for utilizing multiple iterations accounts for the minimum time stated in the PAM (1 hour for day; 45 min for night)	
LN OIC/NCOIC	Establish turn in procedures upon completion of the course (including final shake-down) and collection of map and score sheet at end point. Turn in score sheet, map, grid paper (if applicable), notecard/paper (if applicable), pencil, protractor, chem light.	
LN OIC/NCOIC	Ensure steps are in place to limit course/land access to EFMB cadre only	
	<b>At least one test board member will:</b>	
LN OIC/NCOIC/Test Board Member	Accompany the Land Nav OIC/NCOIC to ensure every point is validated with 2 GPS devices (DAGR) (No more than 20m variance between devices) and that the answers keys match with the alpha numeric and unique punch on each point	
LN OIC/NCOIC/Test Board Member	Ensure every point on the course is IAW the standards in Chapter 6 (reasonable chance of being found, no self-correcting points on course (meaning no grid coordinates on points or structures), all points are at least 100m apart (including SP and EP))	
LN OIC/NCOIC/Test Board Member	Review every lane to ensure they have a SP, 4 navigation points, and an EP, and that they are within the prescribed total distances (point to point 800-1000 day, 600-800 night and total course 4500m day 3500m night) See LN Point and Lane Workbook	
LN OIC/NCOIC/Test Board Member	- Total lane distance includes distance to end point; distance to EP can be less than the 600 or 800 required distance, but cannot be longer than the maximum distance	
LN OIC/NCOIC/Test Board Member	Ensure that personnel starting at the same SP do not have the same first point (helps to limit candidates following each other)	
LN OIC/NCOIC/Test Board Member	Ensure there are enough lanes to accommodate candidate populations (no more than 3 iterations)	
LN OIC/NCOIC/Test Board Member	Establish a compass verification and pace count (properly measure with a DAGR)	
LN OIC/NCOIC/Test Board Member	Ensure OIC/NCOIC conduct lane and safety briefings to include candidate expectations and requirements to pass; show an example point; clearly discuss how to fill out the score sheet, discuss distance from each other, talking, light source use, first aid responsibilities	
LN OIC/NCOIC/Test Board Member	Ensure cadre understand that only the OIC/NCOIC are authorized to give the candidate a 'GO' or 'NO GO' for the lane; OIC/NCOIC cannot tell them which points they found or didn't find. The OIC/NCOIC may provide training recommendations to the candidate. Recommend that they do give recommendation to ALL candidates that don't pass.	
LN OIC/NCOIC/Test Board Member	Ensure OIC/NCOIC understand their role in the rebuttal process (Ask if they wish to rebut, ensure they initial the score sheet, provide rebuttal sheet, ensure there is a designated rebuttal area, keep rebutting candidates separate from other completed candidates)	
LN OIC/NCOIC/Test Board Member	Ensure personnel assigned to support LN fully understand their roles and responsibilities (read Chapter 6)	
LN OIC/NCOIC/Test Board Member	Review risk assessment plan to ensure that all hazards are identified and control measures are in place	
<b>Notes:</b>		
Bathrooms?		
Night land nav start time will be identified per location no earlier than one hour after sunset		
Host unit will run same procedures during standardization and testing, except if having a second LN day (buddy teams for struggling candidates on second day)		
3 hour time limit for day and night; must find 3/4 points to pass		
Test Board establishes authorized flashlight and lens standard (red, blue, green). Establish use of headlamps as extra with assuming risk on candidate. Recommend headlamp around neck, not on head. Recommend covering themselves with a poncho while plotting on the course.		
Recommend having extra compasses on ground in case a candidate's compass becomes faulty		
TCO will go over the checklist above and walk to 3-5 random points to verify the answer key/grid coordinates are correct; clackers must be placed prior to validation		
Recommend sending TCO the LN Point and Lane Workbook prior to validation to speed up the validation process		
<b>TCO makes final decision on validation.</b>		

### Combat Testing Lanes

POC	Task	CTL1	CTL2	CTL3
Test Board Chair	Assign OIC (1LT or above) and NCOIC (SFC or above)			
CTL OIC/NCOIC	Ensure each CTL has the proper number of sub-lanes and evaluators (1 sub-lane for every 50 candidates; 4 evaluators per sub-lane) (TCCC evaluators must be EFMB holders)			
CTL OIC/NCOIC	Ensure all evaluators are trained and validated prior to standardization.			
CTL OIC/NCOIC	Ensure all personnel involved in the lane are aware of their responsibilities and knowledgeable on the standards in this publication.			
CTL OIC/NCOIC/Evaluators	Read AMEDDC&S HRCoE Pam Paragraph 3-4.k. and Chapter 7			
Test Board	Ensure all CTLs are established IAW the approved concept brief and that the flow of the lane makes sense			
CTL OIC/NCOIC	Each CTL sub-lane must have the same sequence of tasks and be approximately the same length.			
Test Board Chair	Complete MEDCoE Forms 1243-2 and 1243-3			
Test Board	Ensure lane OIC/NCOICs prepare lane and safety briefings prior to candidate arrival.			
OIC/NCOIC	Risk Assessment on hand; it is a working document			
Test Board	Discuss administrative/safety NOGOs, what is considered "secure", and any actions that are considered to cause further injury to the casualty to be standardized throughout all CTLs. (kicking PT, weapon hits PT, weapon out of reach, aid bag out of reach, etc.) (Recommend using "Grey Area Discussion/Questions")			
OIC/NCOIC	Ensure CTLs have enough ammo/arti-sims/etc. per candidate			
OIC/NCOIC	Review FRAGO/Scenario Brief being issued to candidates; Ensure grid coordinates, call signs, and frequencies change for testing			
CTL OIC/NCOIC/Evaluators	Conduct a walk-through on one sub-lane for each CTL. Randomly select an evaluator to talk through a task. Each evaluator should be able to talk through and execute tasks without the use of notes/score sheets. TCO will discuss task ambiguities and things that have sparked good rebuttals to ensure everyone is on the same page.			
CTL OIC/NCOIC/Evaluators	One evaluator must negotiate the lane at combat speed with arti-sims/ammo/smoke, etc. to demonstrate the lane is prepared to conduct standardization and testing.			
CTL OIC/NCOIC/Evaluators	Designate a lead evaluator. Each evaluator will practice grading and timing the lane while the combat speed run-through is executed. Once the lane is complete, the lead evaluator and TCO will lead a discussion and grading comparison of the tasks. TCO validation may require more than one run-through. No interruptions during this. Explain the importance of all the graders being on the same page to limit rebuttals.			

**CTLs are not re-testable.**

**Notes:**

Talk through with OIC/NCOIC how standardization week will be conducted, review terrain model, lane and safety briefs, hours of training, and discuss study hall.
-Minimum requirement to conduct a combat speed run-through with any arti-sims for candidates (Put best foot forward and try to get as many GOs as possible); do this first and then break candidates into smaller groups for hands-on
-standardize as they will test; go through tasks in sequence; use moulage during standardization; no notionalized BSI (even for evaluators during standardization)
Questions: don't create new standards; stick to black and white
-Flow for questions that evaluators may not know the answers: OIC/NCOIC -> Test Board -> TCO
-Recommend collecting all candidates questions and providing answers to the whole group at the end of the day to ensure all personnel get the same answers
Discuss plan for selecting candidates during testing; ensure it is standardized across all CTLs. (Recommend volunteers, then random)
Ensure any necessary supplies (chem lights, GTAs, etc.) are provided to candidates prior to starting the lane.
Recommend asking candidates "Do you have all necessary equipment?" prior to starting the lane
Discuss what going out of order by the big number is; how this differs in tasks that state "in sequence" in the standards; annotate as a NO-GO in "Met all administrative requirements for this task"
Encourage evaluators to capture only the NOGOs while the candidate is on the lane. This allows more time for them to see what the candidate is doing. Evaluator must check each box but the GOs can be done after the lane is complete. Annotate all NO-GOs in comment section referencing the exact sub-tasks NO-GOed. Annotate Admin NO-GOs in comments section.
Discuss writing "GO" and "NOGO" on the first page of each task; must wait on NOGOs until candidates decides to rebut or not and on rebuttal outcome
Evaluators should not be checking candidates work as they are still working (Ex. UXO Report)
Cameras and videos are authorized but should not be distracting to the candidate (ex. noise) They should only be taken if the opportunity presents itself, but not needed to prove the candidate got a NOGO.
When authorizing breaks for the candidate do not state time allotment
Don't get into altercations with the candidates, elevate issues, stay professional
No need to show them that the stopwatch is zeroed out prior to starting a timed task
Candidate can ask for time hacks if it doesn't interfere with grading (distraction)
Equipment malfunction: If there is an equipment failure, the candidate needs to address it, evaluator will pause time, show the candidate, check the failure then take one of the following actions: continue because there is not a verified equipment failure or say noted so the candidate will not be graded for it
Weight of dummies need to be 200-220, TCO will ask how they measured
Lack of motivation NOGO- Test Board can determine that candidates must attempt all tasks; if they don't then they will be an Admin NO-GO for EFMB
Badge protecting will not be permitted. Making the candidate feel like they are going to fail no matter what. Making comments that "no one has passed your lane yet." "You are going to get a no-go on my lane." Posting things on social media that present the idea that you will not grade fairly. Everyone should have a fair opportunity to earn the badge, regardless of their grader and his/her beliefs. Personnel identified as badge protectors will be removed as evaluators.
If an evaluator is removed, all previous evaluations stand. Test Board cannot overturn all given NOGOs. Move forward, not backward
Review grading process (Evaluator annotates NO-GOs while candidate executes lane; Candidate completes lane; Evaluator completes score sheets; OIC/NCOIC review score sheets and pictures/videos with evaluator; OIC/NCOIC can overturn NO-GO at this point; OIC/NCOIC meet with candidate to review score sheets and show candidate the pictures/videos; Candidate completes rebuttal forms, if desired; Candidate meets with Rebuttal board; TCO will bring packet back to OIC/NCOIC upon completing of Rebuttal board)
OIC/NCOIC/Evaluators must not inform candidates on whether they are still competing or not. That information should only come from the TOC (TB for admin removal), as they are the only ones who know all the tasks the candidate has NOGOd. Cadre can remind candidates how many tasks they are able to miss in each category.
Once CTL is validated, no changes can be made without notifying the TCO.
<b>TCO makes decision on validation</b>

## Tactical Combat Casualty Care (TCCC) Tasks

**\* Must receive 12 out of 15 GOs\***

(1) Perform a TCCC patient assessment

- must conduct call outs; ensure they have a security perimeter after care under fire, state medications verbally, DCAP-BTLS before TIC, teach blood sweeps head to toe (more likely to save lives), not a NOGO if they don't do this but still get the whole body; BVM/pulse ox required for task; put a weapon with the TCCC patient assessment casualty (and dog tags if they want)

(2) Submit a TCCC card

-must write down meds, spelling errors are ok within reason, have the same template for standardization and testing; use template for grading

(3) Control bleeding using a tourniquet

- hasty goes directly above deliberate; What is directly above? Touching?

(4) Control bleeding using a hemostatic device

-pack wound from packaging; Does white showing mean the intervention is ineffective? NOGO?

(5) Triage casualties

-no BSI, but prior to touching each casualty need to take BSI precautions

(6) Control bleeding using dressings

(7) Initiate treatment for hypovolemic shock and prevent hypothermia

-needs to be done before IV task so BSI knocks out both tasks by order sequence

(8) Initiate a saline lock and intravenous infusion

-Recommend reassuring casualty and BSI prior to initiate IV to knock out BSI for both tasks in proper order

(9) Insert a nasopharyngeal airway

-look for obstructions prior to measuring NPA; if doing this task in triage then should be conducted prior to NCD

(10) Treat a penetrating chest wound

-Don't NOGO if candidate goes to immediate casualty first and provides treatment. This still follows the proper triage order.

(11) Perform needle chest decompression

(12) Treat an open abdominal wound

-No pressure on the wound; don't use pressure bar

(13) Treat an open head injury

(14) Immobilize a suspected fracture of the arm

-Don't use injured arm to prepare splint; only 3 pulse checks, don't add more

(15) Treat lacerations, contusions, and extrusions of the eye

-must ask if patient is wearing contacts- not just state COBBLES, conduct visual acuity test

### Notes:

Can't set a time limit for packing the aid bag. Can only give a recommended amount of time and encourage the candidates to hurry up.

Set 65-75 minute timeline for TCCC tasks

Time starts when candidate reassesses TQ intervention after one person drag; time ends after candidate reports the medical situation to close out the triage task

Acronyms must be stated prior to lane to not count against time, if during lane used ask for definition and that goes against time. If the candidate states the acronym wrong then they do not get prompted again during the lane, they must correct themselves.

All tasks are by the big number. This is listed in Para 7-1.b.(6). Make sure graders are tracking for instruction and validation.



## Medical and Casualty Evacuation Tasks

**\*Must receive 8 out of 10 GOs\***

(1) Establish a helicopter landing point 10 min

- 1 step = 1 meter

(2) Load casualties onto two different medical evacuation platforms (i.e. UH-60 helicopter, M997, M113, Stryker MEV, Hoist (12 min), etc.) all but hoist 15 min

-can talk to helpers without starting time, but that is all; must survey and prioritize (Use DD1380s), then check straps, then configure vehicle to be in order; time will start when they do any of those tasks; candidate must configure vehicle, helpers can't do this; candidate only has to call out commands, doesn't need to be in #1 position on litter; instruct candidate helpers to be careful and not cause further injury to casualties; time ends when door/hatch closes, or standardized signal is executed; if using hoist: don't need to re-do sked task, F H H F

(3) Load casualties onto two different nonstandard vehicles (i.e. 5-ton, 2 1/2 ton, 6x6, cargo truck, 4x4, M998, M114, MRAP, etc.) 15 min

-Same as (2), TB can determine safety precautions (requiring 4 people to lift from ground; jumping from vehicle, etc.)

(4) Extricate casualties from a vehicle 25 min

-Candidate must verbalize if vehicle is on fire, under direct fire, and mechanism of injury; time starts at call outs; Twisted straps a NOGO?, What is too loose?; must secure spine board to casualty, not just set spine board on litter and put straps around the patient and litter; Recommend having candidates state "done" to end time when they have completed reassessing all straps

(5) Evacuate a casualty using a SKED litter

-Twisted straps a NOGO? No designated length for drag, must be the same length/slope for all sub-lanes.

(6) Evacuate casualties using a one-person carries or drags

-How many carries or drags will your unit teach/standardize? Candidate can use any carry if done correctly.

(7) Evacuate casualties using a two-person carries or drags

-How many carries or drags will your unit teach/standardize? Candidate can use any carry if done correctly.

(8) Evacuate casualties using litter carries

-select 2-4 of the obstacles to be tested with litter carries

### Notes:

No weapon safe zone; candidates must have their weapon within 1m of their person at all times

Standardize the requirements for security of straps, candidate must check straps

Standardize the requirements for security of cravats using nonslip knots, do not penalize candidates for equipment issues

Standardize what is considered causing further injury to the casualty

All tasks are by the big number. This is listed in Para 7-1.b.(6). Make sure graders are tracking for instruction and validation.

## Communication Tasks

**\*Must receive 4 out of 5 GOs\***

(1) Radio - Assemble and operate a single channel ground and airborne radio system (SINCGARS) [Advanced System Improvement Program]) 5 min

-time starts when candidate touches equipment, time stops with proword "over". There is no evaluator prompt needed after the radio check. Candidate moves right into FH/COMSEC. Do not fix any equipment.

(2) Radio Net - Load frequency hop (FH)/ communications security (COMSEC) data and conduct radio check using SINCGARS (ASIP) 10 min

-Admin stop if candidate is risking damaging equipment or starts going somewhere they shouldn't in the machine, grader reset back to "home" page; determine how many times the candidate can incorrectly enter username/password before cadre interferes and inputs it (Will be NOGO); time ends with "Over"

(3) Prepare and transmit a MEDEVAC request (using secure mode radio- fix if necessary) 5 min

-address line 9, standardize line 9 as none? Use proper radio procedures and prowords (especially numbers and "over"; break must be used in line 3 and 5 between patient category/type - cannot NOGO for more breaks; must write and then submit verbally, verbal is graded on lane not from tape recording, that is for the OIC/Test Board; How are you handling corrections?

(4) Submit CBRN 1 report 10 min

-time on report is when observed the NBC threat not when writing report (back up ten minutes)

(5) Submit explosive hazard spot report 5 min, can be completed during react to UXO/IED

### Notes:

No prescripting reports for testing week. Recommend handing candidates index cards to prevent scripting.

Must change call sign, frequency, and grid coordinates between standardization and testing week.

Utilize templates for each report to assist evaluators with grading

All tasks are by the big number. This is listed in Para 7-1.b.(6). Make sure graders are tracking for instruction and validation.

## Warrior Tasks

**\*Must receive 10 out of 13 GOs\***

- (1) Protect yourself from chemical/biological contamination using your assigned protective mask 9 sec  
-Recommend letting candidates with glasses take them off prior to walk up to task without starting time; Recommend evaluator cue "gas, gas, gas" to standardize; candidate must close mask carrier before next task or NOGO
- (2) Decontaminate yourself using chemical decontaminating kits  
-standardize what is sufficient when decontaminating
- (3) Protect yourself from CBRN injury/contamination with JSLIST chemical protective ensemble/MOPP gear 8 min  
-in-sequence task- What is causing further injury (Ex. Leaning on trees, falling over, laying out MOPP gear on ground)?
- (4) Perform self-aid for mild nerve agent poisoning 5 min
- (5) Protect yourself from chemical or biological injury/contamination when removing mission oriented protective posture using JSLIST/MOPP gear 20 min  
-same as #3; standardize what decon means (ex. Pat each side and shake at least twice)
- (6) Store your assigned protective mask  
-removing moisture in mask by shaking
- (7) Disassemble, assemble and perform a function check on a M4 or M16 series carbine 4 min  
-time starts when SM picks up weapon; all parts set down, no need to raise hands above head; time ends when insert magazine, don't need to set it down or put it on safe in time
- (8) Disassemble and assemble an M9 pistol and perform a function check 3 min  
- time starts when SM touches weapon; all parts set down, no need to raise hands above head; time ends when SM pulls trigger to check single action
- (9) Correct malfunction of an M4 series carbine or M16 series rifle 10 seconds  
-10 seconds starts when weapon fails to fire
- (10) Move under direct fire
- (11) React to indirect fire
- (12) Move over, through or around obstacles  
-Can't limit how many times they throw grappling hook (adding to task); what is being standardized as low profile over wall? (ex. Helmet on wall)
- (13) React to an unexploded ordinance (UXO) or possible improvised explosive device (IED)  
-5-10m away at least (don't walk up to UXO); What are they marking with? Looking for key words? Chemical threat?

### Notes:

If task does not say "in sequence" in standards, then it is only by the big number (1., 2., 3., etc.) This is listed in Para 7-1.b.(6). Make sure graders are tracking for instruction and validation.

## 12 Mile Forced March

POC	Task	Completed
Test Board Chair	Assign OIC (1LT or above) and NCOIC (SFC or above) - don't need to be badgeholders	
RM OIC/NCOIC	Read AMEDDC&S HRCoE Pam Paragraph 3-4.I. and Chapter 8	
RM OIC/NCOIC & Test Board	Validate length of the route (measure route while walking with a wheel or GPS device to validate the proper distance) (12 mile s= 63,360 feet = 19,308 meters)	
RM OIC/NCOIC	Ensure a plan is in place to clearly mark the route (can use engineer tape, personnel, etc.) (If using personnel, ensure they know where the candidates need to go at the intersection)	
RM OIC/NCOIC	Establish mile markers	
RM OIC/NCOIC	Ensure the medical evacuation plan is adequate to support number of candidates on course and medics/CLS are positions throughout the course	
RM OIC/NCOIC	Ensure aid station at finish line has good infill and exfill routes	
RM OIC/NCOIC	Ensure aid station has hot weather injury treatment (ice, IV supplies, rehydration salts, water, AED, etc.)	
RM OIC/NCOIC	Establish water points on route (ONLY water)	
RM OIC/NCOIC	Establish plan to ensure candidates negotiate the entire course. (i.e. roster at turn around, popsicle stick)	
RM OIC/NCOIC	Establish plan for number of pace personnel per candidate and ensure they do not occupy the course until 300 m after start line and exit 100 m before finish line.	
RM OIC/NCOIC	Establish areas for candidates packing list inventory prior to and following event (Recommend conducting the pre-ruck inspection the night prior paired with a ruck packing class)	
RM OIC/NCOIC	Brief candidates in detail on the route, mile markers, water points, and direction changes. Visual aids are	
RM OIC/NCOIC	Ensure no other events or obstacles will hinder execution of the event	
RM OIC/NCOIC	Utilize at least 2 stop watches to maintain official time (Recommend also using a large race clock at the finish line)	
RM OIC/NCOIC	Ensure test board members are positioned at the 6 and 9 mile marks. Candidates who fail to reach the 6 mile mark by 2:00 hours and the 9 mile mark by 2:30 hours must be removed from the course.	
RM OIC/NCOIC	Establish plan to keep candidates separated from non-candidates prior to final inventory check	
RM OIC/NCOIC	Ensure adequate personnel are designated to conduct post-ruck layouts, must be CTL evaluators	
RM OIC/NCOIC	Ensure the forced march is the last tested event and end time is within 144 hours of testing week	
RM OIC/NCOIC	Risk Assessment on site; it is a working document	
Test Board Chair	Complete MEDCoE Form 1243-5	
<b>There are no rebuttals for this event.</b>		
<b>Notes:</b>		
Are you providing any snacks to the candidates prior to the road march? Following the road march?		
Are there latrines accessible near the start point? Along the route? At the finish line?		
TCO will go over checklist above and then see the route; TCO may want to wheel the route, ensure a calibrated wheel is on site for validation		
<b>TCO makes final decision on validation.</b>		

## Recommended TCO Validation Schedule

Event	Time
<b>Day 1: 0800 - UTC</b>	
Intro Briefing: Audience- Test Board and all OICs/NCOICS	0800 - 0900
TOC	0900 - 1000
Written Test	1000 - 1200
Lunch	1200 - 1300
68W Sustainment	1300-1400
Land Navigation	1400 - UTC
<b>Day 2: 0800 - UTC</b>	
CTL 1	0800 - 1200
Lunch	1200 - 1300
APFT	1300 - 1500
<b>Day 3: 0800 - UTC</b>	
CTL 2	0800 - 1200
Lunch	1200 - 1300
12 Mile Forced March	1300 - UTC
<b>Day 4: 0800 - UTC</b>	
CTL 3	0800 - UTC
Lunch	1200 - 1300
Make-Up Validation	1300 - UTC