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FOR DOCTRINE DEVELOPMENT AND EDUCATION



ANNEX 3-17 AIR MOBILITY OPERATIONS

COMMAND AND CONTROL OF AEROMEDICAL EVACUATION

Last Updated: 5 April 2016

Command and control (C2) functions exercised over aeromedical evacuation (AE) missions are consistent with those for all air mobility missions and are conducted in accordance with the C2 processes described in JP 3-17, Air Mobility Operations, and Annex 3-30, Command and Control. AE assets should be integrated within the mobility structure established to support airlift operations through the Air Mobility Division (AMD) to the wing and down to each element. AE squadron operations are conducted through operational wing C2 channels. The 618th Air Operations Center (AOC) (Tanker Airlift Control Center [TACC]) or theater C2 node provides C2 for tasking and execution for AE missions within their respective operational areas. AE cells should be established within each of those organizations to provide the link between C2 of airlift operations and medical/joint interface. The theater validating flight surgeon and patient movement requirements center provides clinical and administrative oversight of patients requiring AE; once validated, these movement requirements are sent and coordinated with the appropriate C2 agency for obtaining space on AE airlift missions.

AE begins once a validated patient movement request is passed to the Air Force component agency for execution. AE is not the only mechanism for movement of patients. Casualty evacuation refers to the movement of unregulated casualties aboard vehicles or aircraft (most often rotary wing aircraft). Medical evacuation traditionally refers to US Army, Navy, Marine Corps, or Coast Guard patient movement using pre-designated tactical or logistic aircraft temporarily equipped and staffed for en route medical care. Patient evacuation from point of injury to initial treatment at a health care facility is the responsibility of each Service component.

Contingency

Deployed expeditionary forces are organized to ensure unity of command. Deployed AE forces are organized and tailored based on the size and scope of the operation. C2 of theater AE forces in contingency operations should be defined in the warning/execution/operations order. The commander, Air Force forces normally exercises operational control (OPCON) of Air Force AE assets. Direct liaison authorized with the joint task force surgeon is normally authorized. Deployed AE units normally operate under the direction of an air expeditionary wing commander whether collocated or geographically separated.

Intertheater

Intertheater AE assets normally remain under the OPCON of US Transportation Command. Coordination of airlift, patient movement items, and asset requirements to support AE is requested through the AMD of the theater AOC. The 618 AOC (TACC)/CC and AMD may coordinate the use of theater AE assets to support mobility air forces or intertheater missions. Theater AE assets tasked to support MAF intertheater missions normally fall under the tactical control of 618 AOC (TACC) during execution and repositioning back to the theater. When theater AE assets are used to support intertheater AE missions, provisions should be made for expeditious return of these assets.
