

**PART II – TEACHING GUIDE**  
**EXPEDITIONARY MEDICAL READINESS COURSE**  
**COMBAT STRESS CONTROL**  
**Introduction (5 min)**

**OVERVIEW:**

Given instruction, students will be able to identify facts and principles about combat stress control

- (1) Historical perspective
- (2) Contributing factors
- (3) Stress reactions
- (4) BICEPS principles
- (5) Combat Stress Control Management

**MOTIVATION:**

**TRANSITION:**

## **BODY (50 min)**

### **PRESENTATION:**

Given instruction, students will be able to identify facts and principles about combat stress control

### **LECTURE/DISCUSSION**

#### (1) Historical Perspective

- (a) Civil war – called “nostalgia” or “homesickness”
- (b) World War I – called “shell-shock” from constant exposure to bombing
- (c) World War II – called “combat fatigue” resulting from participation in many battles

### **TRANSITION:**

#### (2) Contributing Factors

- (a) Problems at home
- (b) New/first exposure to combat
- (c) Loss of buddies
- (d) Sleep deprivation
- (e) Lack of information/support
- (f) Physically run-down
- (g) Inadequate fitness
- (h) Dehydration/hunger
- (i) State of being wet, cold or hot
- (j) Loss of confidence

### **TRANSITION:**

#### (3) Stress Reactions

- (a) Vary from mild to extreme
- (b) Psychological reactions

1 Fear (normal reaction for everyone)

- 2 Hyper-alertness
  - 3 Poor concentration
  - 4 Nightmares/insomnia
  - 5 Anxiety/crying
  - 6 Emotional withdrawal
  - 7 Feelings of guilt
  - 8 Hysterical blindness or paralysis
- (c) Physical signs and symptoms
- 1 Exhaustion – predominant factor
  - 2 Hyperventilation
  - 3 Increased blood pressure/heart rate
  - 4 Anorexia, nausea, and/or diarrhea
  - 5 Urinary frequency
  - 6 Gross body tremors/poor body posture

**TRANSITION:**

(4) BICEPS Principles

- (a) BICEPS approach uses six elements to aid in recovery
- 1 **Brevity**
    - a Brief treatment, no longer than three days
    - b Usually at second echelon facility
  - 2 **Immediacy**
    - a Identify the need for care early – don't wait
    - b Provide care as soon as possible
  - 3 **Centrality**
    - a Treat in separate location (not in hospital)

b Not physically sick, they just need rest

4 Expectancy

a Member must understand verbally and non-verbally they are returning to duty

b Patient is not ill

c Symptoms are passing reactions

d Recovery is rapid

e Wear of uniform while performing details allows member to maintain self-image/military bearing

5 Proximity

a Treat as close to home unit as possible

b Allow unit and friends to visit and offer support

6 Simplicity

a Keep treatment directed to patient's return to duty

b No medications unless necessary and only under doctor's supervision

**TRANSITION:**

(5) Combat Stress Control Management

(a) Treatable if recognized and treated early

(b) Principle of reconstruction

1 Phase I – Reconstruction

a Basic needs/rest

b Hygiene

c Food

2 Phase II – Reorientation

a Stress management

b Anger control

c Assertiveness training

d Relaxation techniques

e Goal setting

3 Phase III – Reintegration

a Preparation for return to duty

b Work assignments in applicable areas

(c) Individual's role

1 Don't be a loner

2 Help others

3 Know your limits

4 Get at least four hour uninterrupted sleep. Nap when you can

5 Eat enough food

6 Drink water/stay hydrated

7 Good personal hygiene

8 Stay active

(d) Supervisor's role

1 Build esprit de corps

2 Build morale before entering combat

3 Build strong, cohesive, capable unit

4 Assign new troop with older troop

(e) Medical personnel's role

1 Provide non-threatening environment

2 Undisturbed rest

3 Nourishing, appetizing meals

4 Give patient chance to talk to others who are recovering

- 5 Explain others feel the same way but continue to work
  - 6 Help patient build self confidence
  - 7 Maintain self image/military bearing by having them wear uniform, not pajamas
- (f) Occupational therapy
- 1 Function: to provide evaluation and treatment of personnel who show a decrease in performance proficiency and combat effectiveness due to stress or other mental health conditions
  - 2 During Desert Shield/Storm, teams deployed to combat units to disarm any potential problem situations.

**APPLICATION:**

Students will be able to identify facts and principles about combat stress control

**EVALUATION:**

1. Observe students and ask questions throughout the lecture.

## **CONCLUSION (5 min)**

### **SUMMARY:**

Given instruction, students will be able to identify facts and principles about combat stress control

- (1) Historical perspective
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### **REMOTIVATION:**

### **CLOSURE:**