



Leadership Under Pressure



Michael R. Melia, MD, MPH, CPE, FACEP
Chief & Lead, Emergency Medicine
Northern Light, Eastern Maine Medical Center
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USMC Leadership Traits

- Bearing
- Courage
- Decisiveness
- Dependability
- Endurance
- Enthusiasm
- Initiative
- Integrity
- Judgment
- Justice
- Knowledge
- Loyalty
- Tact
- Unselfishness





USMC Leadership Principles

- 1. Know yourself and seek self-improvement***
- 2. Be technically and tactically proficient***
- 3. Know your Marines and look out for their welfare***
- 4. Keep your Marines informed***
- 5. Set the example***
- 6. Ensure the task is understood, supervised, and accomplished***
- 7. Train your Marines as a team***
- 8. Make sound and timely decisions***
- 9. Develop a sense of responsibility among your subordinates***
- 10. Employ your command in accordance with its capabilities***
- 11. Seek responsibility and take responsibility for your actions***





Discussion

- 1) Do you have a leadership Philosophy?
What is it?**
- 2) Where have you found success as a leader?**
- 3) What are you doing to develop your leadership abilities and mentor your staff?**
- 4) How has Covid-19 changed the way you think about resiliency?**



DARKHORSE

- **Situation**: 3/5 taking heavy casualties. Numerous en route deaths. Hot LZ
- **Mission**: Establish a Role 1E, Embedded with BAS and provide stabilization and advanced resuscitative care.
- **Execution**: 1 week warning order to relocate to Forward Operating Base. No TO/TE, No avail AMAL
- **Admin**: Min Requirements
- **Command And Logistics**: Designated OIC of STP SQD, Grab what you believe to be mission essential from existing FRSS





Shock Trauma Platoon Sabit Qadam

- **Role 1 (Enhanced)**
 - ***(1) EM Physician***
 - ***(1) PA (FP Physician)***
 - ***(1) Nurse***
 - ***(5) Hospital Corpsman -8404***
 - ***(2) Marines***
- ***Initial Stabilization and Resuscitation. No COC or holding.***



Obstacles and Opportunities

- **9 line Medevac request to aircraft arrival was 13-15mins**
- **Hot LZ, Aircraft will not land until ready to receive casualty**
- **Young inexperienced team**
- **Resupply (Theater priority air for blood and return of flight nurse)**



Preparation

- **IED Explosion**
- **3 min ETA to FOB**
- **Darkhorse COC Standing by for 9 line**
- **Pedro 13 Mins Out**
- **How do you complete a full resuscitation of a hypothermic, hypovolemic, triple amputee in under 15 mins**
- **First causality received immediately upon team arrival**



MAINTAINING FOCUS WHEN HIGH INTENSITY EVENTS ALSO BECOME HIGH FREQUENCY EVENTS

Explosion or Weapons Fire

- Turn Up heat
- Warm Blood
- Constitute Meds
- Assume Assigned Roles

9-line Dropped

Receive Casualty

- Implementation of treatment package
- Ownership of roles and Responsibilities



Debrief and Reset

- No day would go without a Resuscitation
- All Resuscitations would be debriefed

CASULTY HAND OFF

Verbal and Medical Tape



Trigger Warning, Graphic Slide:

Though this is an Emergency Medicine Audience, all of us have different professional and personal experiences and associations. Next slide will show acute injuries and traumatic amputations

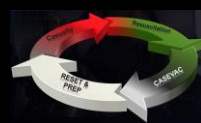


Field Care:

- Explosion
- Tactical Combat Casualty Care (TCCC)
- 3-15 min enroute care

STP Activation:

- Darkhorse COC inbound casualty, Standing by for 9 line
- Boil Water to warm blood
- Only Heat on the FOB raised to Max.
- Meds Drawn
- Stationed Manned

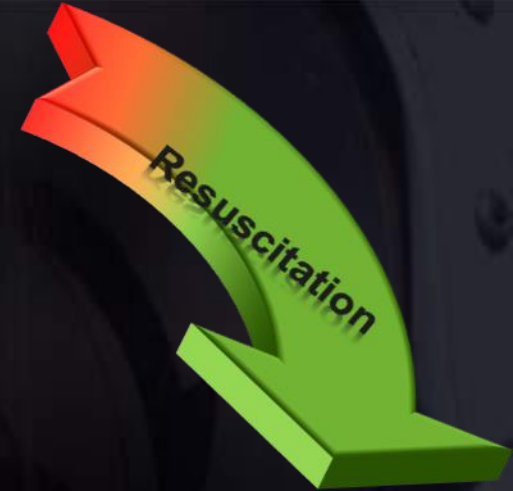




MAINTAINING FOCUS WHEN HIGH INTENSITY EVENTS
ARE ALSO BECOME HIGH FREQUENCY EVENTS

Interventions Standardized

- Primary survey (TQT, Chest Seal, Finger Thoracostomy)
- Right humeral head IO If available
- Pre-drawn Medication
 - Ketamine 200mg for sedation and analgesia
 - RSI with 140 mg succinylcholine
- Secondary Survey
 - Vital signs
 - Role over, Pelvic Binder, APLS/Bair Hugger/Chemical Blanket used for hypothermia prevention/reversal, Foley
 - RSI with 140mg) Airway secured following and 7-5 ETT
- 4u PRBC's
- Vecuronium (10mg) & versed (3mg)





- Verbal turnover with treatments and meds written on tape
- Depending on platform would have to launch nurse to maintain airway.



Dustoff, Pedro, or the British MERT:





Sustainment & Resiliency

Training and Success:

Three up / Three Down
High Performance requires ongoing training (24hr rule)

Resiliency:

Is like a battery that you need to maintain the charge.

Everyone knew there would be a resuscitation TODAY

Moral Injury:

Ownership of roles and ability to give input

Team Building: No cocooning
MovieNight: Every night
P90X, Family Dinner





Life Continues

- **Maintain awareness of life events outside of high intensity focus.**
 - **Loss**
 - Death, Relationships, Material
 - **Gains**
 - Birth, Promotions, Awards
- **External Stressor effect team dynamics.**





Round Up

- 96 Days in Sangin District
- 8 Mass Casualty incidents
- 84 Trauma resuscitations.
- 32 Endotracheal Intubations
- 1 Cricothyroidotomy
- 1 Pericardiocentesis
- 13 Tube Thoracostomies
- 15 Needle Thoracostomies
- 5 CVL placements
- 48 IO placements
- 4 Fracture Reductions
- 2 Procedural Sedations
- 98.8% Survival to a higher Echelon of Care
- Average Resus <15mins



COVID Comparison

- **High Intensity prolonged event**
- **Ability of leader and team to be flexible and adapt to changing environment**
- **Resiliency and Moral Injury**



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THANK YOU

