MED-05 — MEDEVAC Request Report

The 9-Line Report

How to build a MEDEVAC request that holds together under pressure — and how to tell when plain, ordinary language is what the moment actually calls for instead.

BOTTOM LINE UP FRONT

MED-05 teaches the 9-line MEDEVAC request format used to report a casualty and request evacuation on a MAG radio net.

It does not teach patient triage (that's MED-04) and it does not teach how to talk to 911 — a 911 dispatcher has never heard of a 9-line, and the numbered format is not what you use with them.

WHY THIS MATTERS

The people who can send help only know what you tell them.

A MEDEVAC request is not a form for medics only — in a MAG, whoever is on the radio when a casualty is found has to be able to build this report cleanly, because a scrambled, out-of-order report costs the one thing you can't get back: time. The nine-line format exists so the information holds together the same way every time, even over a broken connection, so the receiving end can process it fast under pressure.

Nine lines, same order, every time — that's what lets a request survive a bad radio day.

KEY TERMS

Precedence	The category (Urgent, Urgent-Surgical, Priority, Routine, Convenience) that sets how fast evacuation is needed.
DTG (Date-Time Group)	The timestamp that opens every report, in the same format every time.
Pickup Site	The exact location patients will be extracted from, reported as a grid coordinate.
Security of Pickup Site	Whether the area is safe to approach, should be approached with caution, or requires an armed escort.
Special Equipment	What the evacuation platform needs to bring: nothing, a hoist, or extraction equipment.
Marking Method	How the pickup zone will be identified on approach — panels, pyrotechnic signal, smoke, or another method.

COURSE LESSONS

1. When and Why to Call a MEDEVAC	Separates a plain-language 911/SAR call from the formal MAG radio-net 9-line report, and connects the request to MED-01/02/03 assessment data and MED-04 triage decisions.
2. Lines 1–4: Setting Up the Request	Date-time group, unit, pickup location, and radio frequency, with a cross-reference to grid coordinate reporting (NAV-01).
3. Lines 5–7: Patients and Equipment	Reporting precedence, special equipment needs, and litter versus ambulatory patient counts.
4. Lines 8–9: Site Security and Injury Type	Reporting pickup-site security and the nature of the wound, injury, or illness, adapted for a MAG context.
5. Lines 10–11: Marking the Site and Patient Info	Marking method at the pickup zone, patient category, and a full assembled nine-line walkthrough.
6. Practical Application	Scenario-based radio call practice and a capstone knowledge check.

DOCTRINAL SOURCES

FM 101-5-2	U.S. Army	Defines the 9-line MEDEVAC Request format (Report M030) taught in this course.