

APPENDIX E

EXAMPLE LESSON PLAN

LESSON TITLE: IDENTIFY, TREAT, AND PREVENT BATTLE FATIGUE

COURSE PRESENTED TO: Officers, warrant officers, and NCOs at battalion, company, and platoon level of all divisional and nondivisional, active duty, Reserve, and National Guard units.

PLACE: Classroom or field training site.

REFERENCES:

FM 21-20 Physical Fitness Training
FM 22-9 Soldier Performance in Continuous Operations
FM 22-51 Leaders' Manual for Combat Stress Control
FM 22-100 Military Leadership
FM 100-5 Operations
Unit Combat Mission Statement
Unit History

STUDY ASSIGNMENT: As directed by the instructor or commander.

STUDENT UNIFORM AND EQUIPMENT: As directed by the instructor or commander.

TOOLS, EQUIPMENT, AND MATERIALS:

GTA 21-3-4, Battle Fatigue, Normal, Common Signs, What to Do for Self and Buddy.

GTA 21-3-5, Battle Fatigue, "More Serious" Signs: Leader Actions.

GTA 21-3-6, Battle Fatigue, Company Leader Actions and Prevention.

PERSONNEL: One Instructor.

INSTRUCTIONAL AIDS: Chalk, chalkboard, eraser, and lectern.

TROOP REQUIREMENTS: None.

TRANSPORTATION REQUIREMENTS: None.

RISK ASSESSMENT LEVEL: As directed by the instructor or commander.

SAFETY REQUIREMENT: As directed by the instructor or commander.

METHOD OF INSTRUCTION: Conference/discussion with examples from real situations.

I. INTRODUCTION

A. Opening Statement. During heavy fighting in past wars, the Army usually had one battle fatigue casualty for every three to five soldiers evacuated with wounds. In the 1982 Lebanon Crisis, one Israeli armor unit had one case of battle fatigue for every one wounded in a desperate night action. Israeli CSS soldiers (for example, truck drivers, ordnance technicians) became stress casualties when they saw what modern weapons do to human bodies, even though they themselves were not under attack. However, in elite units (such as Airborne and Rangers in WWII), less than one battle fatigue casualty for every ten wounded occurred, even in extremely intense or prolonged fighting.

This teaching applies specifically to your units and your missions in any level of combat intensity, whether you are combat arms, combat support, or CSS. History shows that most battle-fatigued soldiers can be restored to duty quickly if they rest close to their units and are treated positively as soldiers, not as weaklings, cowards, or sick patients. This restoration requires planning and coordination. If they are evacuated too far to the rear, many may never recover. In the continuous battlefield of war, even the short-term loss of so many trained, combat-experienced soldiers could be disastrous. The Army initiated this combat stress control training program to ensure that all senior NCOs and company-grade officers know what to do about battle fatigue (how to identify it, how to treat it, and how to prevent it). You, in turn, are responsible for teaching your subordinates what they need to know to control battle fatigue and accomplish the mission.

B. Objectives.

1. Enabling Learning Objectives.
 - a. State the definition of battle fatigue.
 - b. State the normal, common signs and the warning (more serious) signs of battle fatigue.
 - c. List the leaders' treatment of normal, common signs and warning signs of battle fatigue.
 - d. Define mild (duty), moderate (rest), and severe (hold/refer) battle fatigue in terms of where each is sent.
 - e. State the principles of preventing battle fatigue.
2. Terminal Learning Objective. Discuss leaders' responsibility for identifying, treating, and preventing battle fatigue as discussed and identified in FM 22-51.

C. Class Procedure and Lesson Tie-in. Lecture. This lecture pertains to leaders' responsibility to identify, treat, and prevent battle fatigue. Additional subject areas pertaining to leaders' responsibilities will be discussed in subsequent classes.

II. EXPLANATION

A. Definition of Battle Fatigue.

1. Battle fatigue is a broad group of physical, mental, and emotional signs that naturally result from the heavy mental and emotional work of facing danger under difficult conditions. Its symptoms have in common that they—

- a. Feel unpleasant.
- b. May interfere with mission performance.
- c. Improve with reassurance, rest, replenishment of physical needs, and activities which restore confidence.

2. Battle fatigue is the US Army's official, doctrinal term for combat stress behaviors which fit the definition given (AR 40-216).

NOTE: The term *battle fatigue* is to be used whether the signs occur in a new soldier or in a veteran after months of combat. It is to be used whether the signs start before shooting starts, during the action, or in a letdown period before further action. It can occur in headquarters and CSS soldiers who are not themselves under fire but are performing demanding duties under the threat of danger or serious failure.

3. There are differences among the terms *battle fatigue*, *stressors*, *combat stress*, and *other combat stress behaviors*.

a. Stressors are the causes of combat stress. They are events or situations which require a change, create internal conflict, or pose a threat. Combat stressors are any stressors which occur in the context of performing one's combat mission (whether under fire or not). For example:

- (1) A 155 mm round exploding 100 meters away.
- (2) Your platoon leader being wounded.
- (3) Receiving a letter from wife or girlfriend which says she is going away with another man.
- (4) A windchill factor of -10°F.

A stressor plus the soldier's perception of that stressor causes stress.

b. Combat stress is the internal psychological and physiological process within the individual soldier of reacting to and dealing with the combat stressors. Stress depends much on the individual's appraisal of the stressor and its context. For example:

(1) Was that 155 mm round you heard an enemy one catching you in the open, or was it the final round of friendly protective fire just as the enemy is about to overrun you?

(2) Have the class think of examples for each of the other stressors listed above which would greatly influence the resulting stress.

Combat stress at any given time is the result of many stressors: fear of death, fear of failure, other intense painful emotions like grief and guilt, uncertainty, boredom, worries about what is happening back home, and the many physical and mental demands of combat duties. Combat stress is the cause of battle fatigue.

c. Combat stress behaviors are the observable behaviors which the soldier shows as the result of the internal stress (either to overcome the stress, to escape it, to make it more tolerable, or to have a side effect of it). Battle fatigue is one group of combat stress behaviors. There are also other combat stress reactions.

(1) Some are positive (like alertness, exceptional strength and endurance, loyalty to comrades, and acts of heroism).

(2) Some are negative (like malingering, self-inflicted wounds, committing criminal acts, abusing drugs, going absent without leave, or refusing to obey orders). These others are not called battle fatigue, although battle fatigue may be present along with them if they really are reactions to combat stress. These are misconduct stress behaviors.

(a) The misconduct may or may not interfere with specific combat tasks and may even be done by otherwise excellent soldiers, but it is harmful to discipline, is illegal, and is contrary to the UCMJ.

(b) The misconduct stress behaviors can be prevented by good leadership, but once they occur, they require administrative action, specific medical or surgical treatment, and/or punishment. For example, malingerers must be counseled and returned to their units. Soldiers with self-inflicted wounds require line-of-duty investigations which may warrant disciplinary action. If line-of-duty is no, these soldiers may incur all cost associated with their treatment, hospitalization, and recovery. Soldiers who desert or violate the Law of Land Warfare must be punished.

(3) Combat stress or good combat performance do not excuse criminal acts. Misconduct stress behaviors must be prevented.

d. The difficult combat conditions (stressors) which cause battle fatigue may include sleep loss, dehydration, muscular fatigue, and such physical stressors as heat, cold, or noise. However, these are not necessarily the causes.

e. Like physical fatigue, battle fatigue can develop at either a slow or fast rate. Its speed of onset depends on the intensity and duration of the stress and on the soldier's prior training, experience, and fitness.

f. Battle fatigue usually improves when a soldier can rest and replenish himself with food, water, and sleep. It is just as important to restore his self-confidence.

g. Battle fatigue is a simple, common sense name for a natural, common condition which is not a medical or psychiatric illness.

NOTE: You may explain to the class that experience from WWI and WWII shows that soldiers tend to develop signs that are harder to manage if dramatic terms like "psych casualty" or "battle shock" are used. Fatigue is a better word than exhaustion. It applies to the mild as well as to the heavy cases and implies that the condition improves quickly.

4. The terms *stress fatigue* or *conflict fatigue* can be used for the same signs occurring under stressful conditions where no actual combat is involved. For example, stress fatigue is common among officers and NCOs at the National Training Center. All the information in this lesson can and should be used there and in garrison.

B. Normal, Common Signs and Warning Signs of Battle Fatigue.

1. The following are facts about the normal, common signs:

a. Most soldiers have some of these signs some of the time (before, during, and after combat or danger).

b. Some soldiers have many of these signs often, yet they still fight well and perform all essential duties.

c. All soldiers, especially leaders, need to know that these are normal and common so they will not worry about them too much.

d. Key point: These signs are so normal that you should look closer at soldiers who never show any. Maybe they are just controlling their stress and fear exceedingly well. But maybe they do not realize the danger. Or, maybe the absence of the normal response is a warning sign of more serious battle fatigue.

e. The normal, common signs include some physical and some mental/emotional signs. Company and platoon leaders must ensure that squad and section leaders familiarize every soldier with these signs.

NOTE: Direct the class to look at page 2 of GTA 21-3-4 (Handout 1) which shows the normal, common signs. You may make transparencies if you wish. If time permits, stimulate discussion. Draw on the experience of any combat veterans or those who have taken part in highly competitive or dangerous sports or in training such as parachuting or rappelling. Make the following key points:

- Most of the physical signs are the result of having an increased amount of adrenaline in the bloodstream. These physical signs are likely to worsen when a person cannot be physically active or when he stays keyed up for a long time without resting.

- The mental signs are natural in situations where high stress, fear, or fatigue temporarily overload the brain's ability to process information. The emotional signs are likely to occur because bad things do happen in combat to cause normal grief, guilt, resentment, and doubt.

2. The following are facts about the warning signs:

a. Warning means that these are signs which deserve special attention and leadership action.

b. Warning signs do not necessarily mean that the soldier needs to be relieved of duty or be evacuated as a casualty. Immediate action by leaders, buddies, or the soldiers themselves may be all that is required.

c. Any of the normal, common signs become warnings signs if they interfere with essential performance even after the soldier's buddies or leaders have taken action to help them.

d. Normal, common signs should be considered warning signs if they do not improve when the soldier gets a good chance to rest. However, these signs may not go away completely while the war continues. The soldier may have to learn to live with some of them. Some of the signs may even continue for a time after the soldier's return from combat to his home.

e. The signs must be considered in relation to a soldier's usual way of reacting. Take them more seriously if they come as a big change from how that soldier usually reacts to danger or interacts with other people.

NOTE: Give examples, such as the following:

- New troops being startled at the loud sound of friendly outgoing artillery is normal and common. It is a warning sign in experienced veterans.

- It is a warning when the soldier who is usually quiet turns rowdy and complains. It is a warning when the unit complainer turns quiet.

NOTE: Direct the class to page 3 of GTA 21-3-5 (Handout 2). Alternatively, you may make transparencies. Be sure that the class understands that some of the warning signs differ from the normal, common signs only in degree or the situation. Give examples such as the following:

- Fidgeting and trembling are normal and common, while constantly moving around or obvious shaking are warning signs.

- Trembling of the hands before action is normal and common, but the same trembling while performing a critical combat task is a warning sign if it may result in mission failure.

NOTE: Some of the signs are always warning signs in the sense of requiring some immediate leader action. They may be a sign of dangerous physical or mental illness. For example:

- Seeing or hearing things which aren't there is always a warning sign. It may endanger the mission or be a sign of serious illness. However, seeing things which are not there does occur often in otherwise perfectly normal people when they go a long time without sleep. They recover when they get sleep and may not necessarily have to leave the unit or get medical evaluation.

C. Leaders' Treatment of Normal, Common Signs and Warning (More Serious) Signs of Battle Fatigue.

NOTE: This part of the lesson plan concerns what should be taught to team, section, squad, and platoon leaders about treating battle fatigue. These intervening actions for battle fatigue by junior leaders may require some soldiers to leave the small unit. These actions may require that soldiers be sent to locations where the more senior officer, NCO, or medic makes the decision pertaining to the soldiers' duty status. Company-level leaders will be familiar with treating battle fatigue and know the intervening actions they implement at their level. Company-level leaders are responsible for teaching and supervising treatment for common and warning signs of battle fatigue.

1. What soldiers should do for self and buddy when showing signs of battle fatigue is outlined in GTA 21-3-4 (Handout 1). If time permits, familiarize the class with pages 3 and 4 or use a transparency made from that section to show what is covered. Senior leaders should ensure that junior leaders review this material with their soldiers and have them practice it regularly.

2. Leader actions for normal, common signs (which also should be used for warning signs) are outlined in GTA 21-3-5 (Handout 2). Senior leaders should review the material with junior leaders and have them practice it regularly.

NOTE: Direct the class to pages 4 and 5 of GTA 21-3-5 (Handout 2) or use transparencies. Stimulate discussion about any techniques which may be unfamiliar. Make the following points:

- These actions are basic leadership techniques with which most of you are already familiar.
- These actions are also preventive; they reduce the combat stress that causes battle fatigue and help soldiers cope with the normal, common signs to make them less likely to become more serious.

3. Leaders' actions for warning signs are also outlined in GTA 21-3-5 (Handout 2). This information should be reviewed with junior leaders.

a. These step-by-step actions safeguard the unit's mission and its members, get the battle-fatigued soldier to a safer place, and begin the process of restoring the soldier's confidence. (At least the actions do not undermine it further.)

b. One recommended action is to avoid taking a soldier's weapon away unless he seems so unreliable that he may use the weapon dangerously. The soldier's self-identity as a soldier who is trusted and needed by comrades is the strongest factor pulling him back from battle fatigue to effective duty. Taking his weapon away gives the message "We don't trust you" or "You are not a good soldier," unless you counteract this message by what you say when you take the weapon.

NOTE: If time permits, stimulate discussion about what might be involved to "do whatever must be done to control the soldier" in order to protect the mission and the unit. Consider different types of situations. Point out that crazy, dangerous, and violent behavior is unusual in pure battle fatigue but may occur more often in other types of combat stress behaviors, especially those involving drug abuse.

c. What leader and buddies do and say on the spot has an extremely important effect on how quickly soldiers recover and even on whether they ever recover. The right words may make extremely serious warning signs of battle fatigue get better in minutes or even seconds. Even if they do not work immediately, they help soldiers recover as quickly as possible.

4. Junior leaders' actions bring soldiers who fail to improve to the point where a more senior officer, NCO, and/or medic must make the decision whether these soldiers stay in the platoon or company or be sent elsewhere. This requires that battle fatigue cases be classified as duty, rest, or heavy. Note that duty, rest, and heavy were originally classified as mild, moderate, and severe in the 1986 version of GTA 21-3-6. They have been changed to duty, rest, and heavy in the 1991 updates of those GTAs to conform with FM 22-51.

NOTE: Explain that the section/squad leader does not need to know how to make this classification. The first sergeant, company commander, and company medic must know it. They should teach it to the platoon leaders, platoon sergeants, and platoon medics. Direct the class to page 2 of GTA 21-3-6 (Handout 3) or use transparencies made from that page.

D. Duty, Rest, and Heavy Battle Fatigue.

1. Cases of battle fatigue are classified according to where they can be managed. The three classifications are outlined in GTA 21-3-6 (Handout 3) and are defined below.

a. **Duty.** The soldier remains in the small unit (section or platoon) to rest and be restored to full duty.

b. **Rest.** The soldier cannot remain in the small unit and must be sent to another supporting unit for temporary rest and replenishment, but not necessarily to a medical unit.

c. **Heavy.** The soldier must be sent to a physician, physician assistant, or mental health officer for evaluation.

NOTE: Tell the class that the labels *duty*, *rest*, and *heavy* should be thought of as nothing more than "tickets" which say where the soldier should go at this time. They are temporary triage categories (like immediate, minimal, delayed, and expectant in surgical triage). The following points (or criteria) are used to decide where the soldier can be treated.

2. *Duty* applies to soldiers who—

a. Show normal, common signs, feel uncomfortable, but are 100 percent effective.

b. Show warning signs and may be partially or even completely ineffective, but are not an unacceptable risk or burden to the unit in the tactical situation.

c. Do not need urgent medical evaluation.

3. *Rest* applies to soldiers who must be sent to another nonmedical unit for a period of rest.

a. They are too much of a risk or burden to stay with their own unit at this time, given its tactical mission.

b. The soldiers' own units cannot provide a sufficiently safe, stable environment for rest and replenishment at this time.

c. The soldiers are not too disruptive or potentially dangerous for a unit with a less demanding mission at this time.

d. They do not need urgent medical evaluation to rule out some possible serious physical cause or illness for the signs they are showing.

NOTE: Point out that whether a case of battle fatigue is called duty or rest depends more on the tactical situation, mission, and resources of the small unit than it does on the signs the soldier is showing. A unit which is just being pulled back into reserve can keep a soldier who might have to be left behind if the unit were just leaving for action behind enemy lines. Use examples from your type of unit.

4. *Heavy* applies to any soldier with more serious warning signs who fits within one or both of the categories below.

a. The soldier is too burdensome, disruptive, or possibly dangerous to keep in the small unit or in any available nonmedical support unit at this time.

b. The soldier's symptoms could be due to a physical cause which may need urgent medical/surgical treatment (for example, head or spine injury, drug abuse).

NOTE: *Heavy* is now being used instead of *severe* because too many people kept confusing *severe* with the more serious signs and reading into the word more negative meaning than it deserves. The difference between *rest* and *heavy* is influenced more by the kind of signs the soldier is showing than was the difference between *duty* or *rest*, although the availability of other CSS units can still affect this classification.

NOTE: Once the soldier reaches the medical system, they subdivide *heavy* into *refer* (meaning send to the next echelon medical facility for evaluation) and *hold* (meaning hold for treatment at this medical facility). However, there is no need to explain this distinction to nonmedical audiences since it applies only after the soldier has reached and has been evaluated by the physician or physician assistant.

5. There is no easy rule for deciding whether a warning sign makes the soldier a case of duty, rest, or heavy battle fatigue. That will require judgment based on what the leader and, perhaps, the unit medic know about the individual soldier: what has happened to the soldier; how the soldier responds to helping actions; what is likely to happen to the unit next; and what resources are available to the unit. Any warning sign that can be listed in a few words may be duty battle fatigue in one case, be rest in another, and be heavy in a third case.

6. Signs which would usually cause the case to be sorted as heavy include the following:
- a. Dangerous, threatening behavior which is not just a disciplinary problem.
 - b. Hallucinations and delusions not explained by sleep loss.
 - c. Serious memory loss.
 - d. Extreme pain.
 - e. Loss of a major physical function, such as vision or the ability to move an arm.
 - f. Complete unresponsiveness; not moving or answering at all.

NOTE: Any of these cases might still be classified as rest or even as duty if the signs occur in response to extreme stress and clear up quickly.

7. The heavy classification does not necessarily mean that a soldier is less likely to recover or will take longer to recover than cases classified as duty or rest.

8. Company leaders' actions for duty and rest battle-fatigued soldiers are outlined in GTA 21-3-6 (Handout 3). Company commanders, first sergeants, and company medics should know and practice them and teach them to platoon-level leaders and medics.

NOTE: Direct the class to Handout 3, page 2, or use transparencies made from pages 2 and 3, or briefly discuss the list. You should adapt these recommendations to your unit. Stimulate discussion on how it needs to be adapted. For example:

- The supporting units where soldiers can be rested will be different for maneuver companies in an armor or a light infantry battalion, for an artillery battery, for a dispersed corps-level signal company, or for a maintenance or a transportation company.
- Options include resting the soldier in another platoon of your company; in another line company in the battalion; or at the battalion headquarters and headquarters company in the field trains.
- Some small detachments may not have first sergeants or platoon/company/battalion organization. They may be attached to other units for support. Determine where to rest battle-fatigued soldiers in your situation.

9. The following are key points:

a. The first sergeant or NCOIC has to take the soldiers and find them a safer, quieter place to rest and work for a day or two. Note that instructions for the leader of the unit who receives the soldiers temporarily are included in GTA 21-3-5, page 6.

b. If the soldier's small unit cannot wait for the first sergeant/NCOIC to take the soldier, it may be necessary to evacuate to the supporting medical element. If so, every effort should be made there to remove the soldier from medical channels to a nonmedical unit for further rest, replenishment, and reassurance.

c. A first sergeant/NCOIC who cannot find a suitable support unit can try to arrange a place to sleep at a medical unit which has empty cots. This alternative is not preferred, and the soldier must understand he is not a patient, just a tired soldier.

d. The soldier must remain accounted for and not get lost in the shuffle. There must be a positive plan to return the soldier to the original unit in a short time, and the soldier must know this.

e. Every reasonable effort should be made to maintain personal contact between the soldier and the original unit.

10. Leader actions for *heavy* battle-fatigued soldiers are the same as for the *rest* battle-fatigued except that the soldiers are evacuated medically, as soon as possible, to be examined by a physician or physician assistant.

a. They may be successfully treated and released within hours (as *duty* or *rest* battle fatigue), or may be held there for rest and treatment for a day or two, or may be evacuated further to the rear. What happens depends on their signs and the medical unit's situation.

b. If treated close to their units, 50 to 85 percent (average: 75 percent) of heavy battle fatigue casualties return to duty within 1 to 3 days. About 15 to 20 percent more may return to other duty (usually in other units) in 1 to 2 weeks. Only 5 to 10 percent have to be evacuated home, and they usually have other problems besides battle fatigue.

c. However, if evacuated too far too fast, few battle-fatigued soldiers return to duty. Many may remain permanently disabled.

11. Recovered battle-fatigued soldiers who return to their units and are welcomed there do not have a higher rate of battle fatigue than other soldiers. They are less likely to break again (or to be killed or wounded) than is a new replacement who is a stranger in the unit.

NOTE: Emphasize to the class that a good soldier will be good again. A new soldier who becomes a battle fatigue casualty deserves another chance. Being new to combat and a stranger in the unit are two high-stress/high-risk factors. These factors have been partially overcome if that soldier returns to

the same unit and is welcomed there. But also emphasize the following point and stimulate discussion on how it should be handled.

12. Someone who has always been a poor soldier is not going to be made into a good one simply by treatment for battle fatigue. The soldier may need to be reassigned to some other job or unit (or be discharged as unsuitable).

E. Basic Principles of Preventing Battle Fatigue.

1. While the average ratio of battle fatigue casualties to wounded in action is one for every three to five, elite units consistently have fewer than one for ten wounded. We cannot prevent battle fatigue in highly stressful combat; however, we can prevent battle fatigue casualties who require treatment in the medical system.

2. GTA 21-3-6 (Handout 3) shows factors that increase battle fatigue casualties and leaders' actions to prevent them. These should be taught by battalion and company leaders to their platoon leaders.

3. The following are key principles for reducing the stress of combat and preventing battle fatigue casualties:

a. Encourage unit cohesion by integrating new replacements quickly, assigning buddies, and using other team-building techniques. Unit cohesion is the personal trust and loyalty of soldiers who have worked together to overcome hardship and danger to achieve a common objective.

b. Stabilize the home front by helping soldiers resolve their home front problems. An Israeli study found that having uncertainties at home was the strongest factor which distinguished soldiers who became stress casualties from those who were decorated for valor. Unit cohesion was second strongest.

c. Instill unit pride by honoring historical examples of initiative, endurance and resilience, of overcoming heavy odds, and of self-sacrifice leading to triumph. This is needed to give direction and hope to the cohesive unit so that it does not become preoccupied solely with the survival and comfort of its members.

d. Assure physical fitness. This must enhance muscle strength and agility as well as endurance through a regular training program. Not being physically fit almost guarantees battle fatigue when the going gets rough.

e. Conduct tough, realistic training that is as much like the combat mission and environment as possible (sights, sounds, pace, confusion, fatigue, discomfort, and feedback). Soldiers' first exposure to combat, to enemy weapons and tactics, and to strange, hostile climates produces battle fatigue.

f. Practice casualty care and evacuation routinely. Everyone must know lifesaving techniques for self and buddy. Talk about the possible loss of leaders and comrades. Prepare junior

leaders (and yourself) to take over. This way soldiers know that they can receive immediate care and the chain of command will not break.

g. Plan and practice sleep discipline. Plan ahead to make sure all soldiers get enough sleep, especially leaders and those with critical tasks. Sleep discipline means reviewing sleep as a resource to allocate to soldiers just like water, food, ammunition, and fuel.

III. SUMMARY

A. When in combat, you, the leader, must try to conserve the soldiers' strength and well-being with food, water, shelter, hygiene, medical care, and rest. In contrast to the training situation, you do not deliberately seek hardship. When you must accept it because of circumstances or better accomplishment of the mission, you will explain the reasons to the troops. And, because you have trained hard together, you can remind the soldiers of how all of you suffered in training and still accomplished the mission just to prepare for this kind of combat situation.

B. Use the three handouts. They are available at the local US Army Training and Audiovisual Support Center. They are intended for leaders to use as aids in opportunity training for their subordinates during field exercises. They will also serve as a reminder (checklist) in mobilization and combat.

1. GTA 21-3-4 (Battle Fatigue, Normal, Common Signs, What to do for Self and Buddy) is intended for all soldiers, especially the junior enlisted.

2. GTA 21-3-5 (Battle Fatigue, "More Serious" Signs: Leader Actions) is intended for all leaders, especially those at team, squad, section, and platoon level.

3. GTA 21-3-6 (Battle Fatigue, Company Leader Actions and Prevention) is intended for platoon leaders and above.