As at 16 Nov 2026

MILITARY HEALTHCARE ETHICS - TRAIN-THE-TRAINER – PILOT COURSE

Wed 09 Dec 2026 – War and Disaster Medicine Centre (WDMC), Tartu, Estonia

INTRODUCTION

1. It has become increasingly recognised by NATO members that healthcare professionals need formal education on the topic of Military Healthcare Ethics (MHE). In June 2025, NATO published STANAG 6562 AMedP 8.19 Military Healthcare Ethics. This document provides a baseline for the knowledge in MHE needed by health professionals serving in a NATO framework. The AMedP 8.19 includes an indicative curriculum and a suggested decision-making framework to support implementation by NATO members.

2. Professor Bricknell and Dr Beardmore, from The King's Centre for Military Ethics, were lead editors for the AMedP 8.19 (Biographies are at Annex A). They have delivered educational activities on MHE to over 2000 health professionals. This 'train-the-trainer' pilot course has been developed in association with the War and Disaster Medicine Centre (WDMC). It is designed to enable participants to develop their own teaching package to support the implementation of MHE education within their own organisations. Participants will be awarded a certificate of attendance, but it is not a formal confirmation of assessment of their competence to teach this topic.

AIMS AND EDUCATIONAL OUTCOMES

3. The aim of the 'Military Healthcare Ethics - Train-The-Trainer – Pilot Course' is to introduce participants to the resources available to deliver and educational programme on MHE to meet the NATO indicative curriculum on MHE.

4. The Educational Outcomes for participants from attendance on the 'Military Healthcare Ethics - Train-The-Trainer – Pilot Course' are to:

a. understand the content of STANAG 6562 AMedP 8-19 Military Healthcare Ethics
b. apply the NATO indicative curriculum on MHE to the development of a MHE course for their context
c. to use the MHE Decision-Making Framework to facilitate small group discussions to teach MHE
d. to be aware of educational resources to support the teaching of MHE

TIMETABLE

5. The outline timetable for the 'Military Healthcare Ethics - Train-The-Trainer – Pilot Course' is shown below: **NOTE START TIME 09:30**

Time	Activity	Speaker	Remarks
9.30-11.00	Museum of the Estonian National Defence College and KGB Cells Museum. Optional for attendees. Riia 15b, Tartu	WDMC team	To discuss Estonian experience of war in 20th Century
11.00-11.30	Registration and Welcome Refreshments. Estonian Military Academy (main building), Riia 12, Tartu (classroom V406, V312 ja K300)	WDMC team	Walking (cross the street)
11.30-12.00	Personal introductions		Welcome
12.00-13.00	Review of STANAG 6562 AMedP-8.19 Military Healthcare Ethics	Prof Bricknell	Overview to development and content of AMedP 8.19
13.00-14.00	Group discussion 1 - Strengths and weaknesses of the STANAG	Prof Bricknell	Focus on curriculum at Annex B
14.00-14.15	Break - Refreshments		
14.15-14:45	Military Healthcare Ethics Analysis Framework	Dr Beardmore	Focus on Annex C
14.45-15.30	Group discussion 2 - Strengths and weaknesses of the Analysis Framework	Dr Beardmore	Scenario discussion 1 Familiarisation with on Decision-Making Annex C
15.30-15.45	Break - Refreshments		
15.45-16.30	Group discussion 3 - Resources to teach Military Healthcare Ethics	Dr Beardmore	Scenario discussion 2 Focus on facilitation skills
16.30.-17.00	Reflections and Closure	Prof Bricknell/Dr Beardmore	

EDUCATIONAL APPROACH

6. The 'Military Healthcare Ethics - Train-The-Trainer – Pilot Course' is designed for participants with a strong foundation in MHE to be able to prepare an educational package on MHE to meet the suggested curriculum at Annex A of AMedP 8-19. Participants will be expected to review the material listed in the section on 'Prior Preparation' and to have good foundational knowledge on the core topics contained in AMedP 8.19. The course is designed for maximum participant engagement and discussion. It will focus on the use of the scenarios contained in the KCL Military Healthcare Ethics Smartphone App to facilitate group discussion.

7. The course will open with optional visits to the Museum of the Estonian National Defence College and the KGB Cells Museum in Tartu town. The purpose of these visits is to discuss why International Humanitarian Law (IHL) and ethics is important with a

focus on the experiences of the Estonian population to war and dictatorship during the 20th Century. This will complement the displays that participants may choose to view in the Estonia National Museum (the location of the War and Disaster Medicine Conference).

8. The directly delivered course will then provide a background the writing of AMedP 8-19 including links to other NATO STANAGs in the medical series. We will discuss the strengths and weakness of AMedP 8-19 including the importance of referencing national law, regulations and guidance in educating national military health professionals. The main focus of the reminder of the course is to enable participants to use the MHE Decision-Making Framework, the KCL MHE Smartphone App and other resources to facilitate group discussions with learners to enable them to apply foundational knowledge in MHE to practical examples. Participants will complete the course with the knowledge and skills to enable them to develop their own teaching packages in MHE for their own audiences.

PRIOR PREPARATION

9. The success of this course for participants is dependent on their foundational understanding of topics in MHE. Participants should note this 'train-the-trainer' course is deliberately compressed to maximise the time efficiency of their attendance by shifting 'knowledge acquisition' into their pre-arrival time. This will require some pre-course preparation both reading and familiarisation with key online resources. A full list of essential and desirable reading and other resources for participation is at Annex D.

10. **Specific preparation**. Small group discussion is a core component to this course. Participants are requested to download the Kings Military Healthcare Ethics App (see Annex D) and select one card from the 'deployed healthcare' pack and one card from the 'non-deployed healthcare' pack. Participants should review both the scenario and the 'learn more' section (accessed by pressing the 'learn more' button) to a level that would allow them to act as a facilitator for a small group discussion with their peers as indicated within the course timetable.

ANNEXES

ANNEX A – BIOGRAPHIES – PROFESSOR BRICKNELL AND DR BEARDMORE
ANNEX B – INDICATIVE MHE EDUCATIONAL CURRICULUM – ANNEX B to AMedP 8.19
ANNEX C – MILITARY HEALTH CARE ETHICS ANALYSIS FRAMEWORK – ANNEX A to AMedP 8.19
ANNEX D – EDUCATIONAL RESOURCES FOR MHE

ANNEX A – BIOGRAPHIES – PROFESSOR (MARTIN) BRICKNELL AND DR (CHARLIE) BEARDMORE

Professor Bricknell is Professor of Conflict, Health and Military Medicine at King's College London. Previously he served 34 years in the UK Defence Medical Services, finishing as the Surgeon General of the UK Armed Forces. He undertook operational tours in Afghanistan, Iraq, and the Balkans with numerous additional overseas assignments. He was awarded the Companion of the Order of Bath, the Order of St John and the US Bronze Star. He is a specialist in General Practice, Public Health and Occupational Medicine. His multiple academic papers cover: how organisations learn, care pathways in military healthcare, military healthcare ethics, civil-military relations in health, and the political economy of health in conflict. He convenes a MA module in Global Health, Security and War, and co-convenes a MA module in Conflict and Health. He is also Deputy Director of the KCL Centre for Military Ethics, Veterans Adviser for the King Edward VII (Sister Agnes) Charity, Editor-in-Chief of the Military Medical Corps Worldwide Almanac, and on the editorial board for the Journal of Military and Veterans Health. In 2025, he was a member of the UK Strategic Defence Review panel on the Defence Medical Services.

Dr Charlie Beardmore, is currently completing PhD research within the Department of War Studies at Kings College London. He served for over 30 years in the UK Defence Medical Services and qualified as a General Practitioner and Consultant Occupational Physician. He undertook numerous operational tours including in: Rwanda, Bosnia, Kosovo, Saudi Arabia, Iraq and Afghanistan. He holds Masters degrees in Medical Law and Ethics, Occupational Health, Defence Studies and Business Administration and is a Member of both the Royal College of General Practitioners and the Faculty of Occupational Medicine. He was principal author for AMedP-8.19 (Military Healthcare Ethics) working closely with Prof Bricknell and the NATO Military Healthcare Working Group. He is lead author on two related papers published in Military Medicine. He lectures and conducts workshops in Military Healthcare Ethics is also President of a UK registered anti-cancer charity.

ANNEX B – INDICATIVE MHE EDUCATIONAL CURRICULUM – ANNEX B to AMedP 8.19

OVERVIEW

1. This indicative curriculum is designed to meet the Training Objective (TO) 'Understand Military Healthcare Ethics in order to practice health care ethically in the military setting'. This TO may be inserted into health professional courses delivered to members of NATO. Subordinate Enabling Objectives (EO) are separated into military operations (1.0) and professional practice (2.0). The EOs under 1.0 focus on knowledge, skills and attitudes for the operational environment. The TOs under 2.0 focus on general professional practice across the wider military health system.

2. The curriculum shows in Bold those Enabling Objectives (EOs) that should be taught to all personnel; in *Italics* those TOs that should be taught to middle grade leaders; and in normal font, a small number of TOs that should be taught to specific professional groups. children, women, disabled, non-native speakers, different religions, and cultures.

TRAINING OBJECTIVE: **Understand Military Healthcare Ethics in order to practice health care ethically in the military setting**

ENABLING OBJECTIVE 1: Understand the Laws of Armed Conflict (LOAC) and International Humanitarian Law (IHL) as applied to military health care personnel during military operations.

1.1. **Undertake LOAC training to comply with military service standards**.
1.2. **Identify the components of military service LOAC training that particularly apply to healthcare workers**.
1.3. **Identify the provisions within the Geneva Conventions and other International Humanitarian Law that apply to military healthcare workers**.
1.4. **Demonstrate the application of LOAC/IHL in the care of individual patients in the following categories: national military patients, international military patients, civilians, enemy combatants, non-state armed actors, criminals**.
1.5. **Describe the application of LOAC/IHL in the conduct of military medical units during conflict**.
1.6. *Prepare a teaching session on LOAC/IHL for ORs/junior NCO health professionals*.
1.7. *Prepare a teaching session on LOAC/IHL for senior NCOs/OF1-3 health professionals*.

ENABLING OBJECTIVE 2: Understand ethics in military health care as applied to professional practice as a healthcare worker (service personnel and civilians) within NATO.

2.1. **Interpret the ICRC et al Ethical Principles of Health Care in Times of Armed Conflict and Other Emergencies and other key references as applied to clinical professional practice for operations**.

2.1.1. **Demonstrate the ethical application of Triage in military medical practice**.

2.1.2. **Demonstrate the ethical application of Entitlement to care/Medical Rules of Eligibility in military medical practice**.

2.1.3. **Describe the additional responsibilities and arrangements for the provision of healthcare to specific populations under LOAC/IHL:**

2.1.4. **Describe the use of the Protective symbol such as the Red Cross by healthcare personnel, ambulances, and medical facilities, including identity documentation**.

2.1.5. **Describe the authorities and limitations for the 'arming of healthcare personnel' under the Geneva Conventions and the restrictions of the use of force by healthcare personnel**.

2.1.6. *Understand the ICRC Healthcare in Danger project (http://healthcareindanger.org/), WHO Attacks on Healthcare Initiative (https://www.who.int/activities/stopping-attacks-on-health-care) and the WHO Violence Against Healthcare Workers project (https://www.who.int/violence_injury_prevention/violence/workplace/en/) and the duties of healthcare professionals*.

2.1.7. **Describe the application of ethical principles to standards of clinical practice on operations**.

2.1.8. **Describe the specific duties of healthcare personnel in regard to prisoners, captured enemy personnel, and detainees**.

2.1.9. Demonstrate the medical examination of a captured person (all doctors and nurse practitioners) and record-keeping.

2.1.10. **Describe the specific prohibitions of actions/behaviours by healthcare personnel under LOAC/IHL**.

2.1.11. **Demonstrate a process for making decisions in ethically uncertain circumstances on operations**.

2.1.12. *Describe the roles of a Commanding Officer, Senior Medical Officer, Senior Nurse (or equivalent national roles) in the ethical leadership of military medical units*.

2.2. **Understand the duties and potential conflicts associated with the duality of professions between the armed forces and healthcare workers**.

2.2.1. **Describe the general principles of medical ethics**.
2.2.2. **Identify national sources of policy, procedures, and general information on military medical ethics**.
children, women, disabled, non-native speakers, different religions, and cultures.
2.2.3. **Describe your professional/ethical responsibilities in routine clinical practice within a NATO and national context in regard to: confidentiality, consent, reporting medical fitness to work, prescribing/administration of force health protection measures, record keeping, information sharing, relationships with patients, conflicts of interest, conduct of medical research, refusing treatment, seeking alternative/non-standard treatment, national security, safeguarding, practice within competence/training**.
2.2.4. **Give examples of potentially unethical/unlawful commands that might be given to a healthcare provider**.
2.2.5. *Describe the arrangements within your nation and NATO for the ethical oversight of service evaluation and health research*.
2.2.6. *Describe the ethical risks associated with the use of national and NATO military health capabilities for resilience activities (e.g. vaccination of civilians, augmentation to civilian health services)*.
2.2.7. Complete an example of a national application to a Research Ethics Committee.
2.2.8. Describe how NATO reviews the introduction of novel/new medical practice/devices/pharmaceuticals.

2.3. **Describe how you would access advice in support of your ethical healthcare practice**.

2.4. **Describe how you would raise concerns regarding the application of ethical principles by your colleagues or the superior chain of command**.

2.5. *Demonstrate how you would address an example of unethical practice by a subordinate*.

2.6. **Discuss examples of failures by healthcare professionals to comply with ethical standards**.

Key:
BOLD – to be taught to all personnel
Italics – to be taught on career development courses JNCO/junior officer
Normal – to be taught to specific groups (listed in brackets)i

ANNEX C – MILITARY HEALTH CARE ETHICS ANALYSIS FRAMEWORK – Annex A to AMedP 8.19

STEP 1 – IDENTIFY THE PROBLEM(S)

- Briefly state the **Scenario**
- List the **Issues** that arise from the scenario
- Identify **Critical Information** required and **Assumptions** to be made

STEP 2 – ANALYSE Patient:

What are the views of the Patient? (and 'patient group')?

How do 4 principles of: Autonomy, Beneficence, Non-maleficence and Justice apply?

Other perspectives?

Legal:

Is scenario covered by IHL, Geneva Conventions, military law, other law?

Other perspectives?

Clinical:

What is the clinical diagnosis, prognosis, treatment options?

Is this scenario covered by professional regulation or guidance?

What are the views of individual members of the clinical team?

Other perspectives?

Societal/Military:

Is there a military necessity?

Is this scenario covered by military regulation or military perspective?

Is this scenario covered by public health or societal ethics?

Other perspectives?

Step 3 – FUSE

- Summarise conclusions
- Insert citations to key reference sources for your analysis
- Determine the exact Decision(s) to be made

Step 4 – DECIDE

- **What is your Decision**?
- **Why** (can you justify it)?
- Residual uncertainly, need for review?

ANNEX D – EDUCATIONAL RESOURCES FOR MHE

ESSENTIAL PRE-STUDY

Please read the following documents:

NATO STANDARD AMedP-8.19 MILITARY HEALTHCARE ETHICS Edition A, Version 1 JUNE 2025 https://www.coemed.org/files/stanags/03_AMEDP/AMedP-8.19_EDA_V1_E_6562.pdf

ICRC Ethical Principles of Health Care in Times of Armed Conflict and Other Emergencies. https://www.icrc.org/en/document/common-ethical-principles-health-care-conflict-and-other-emergencies

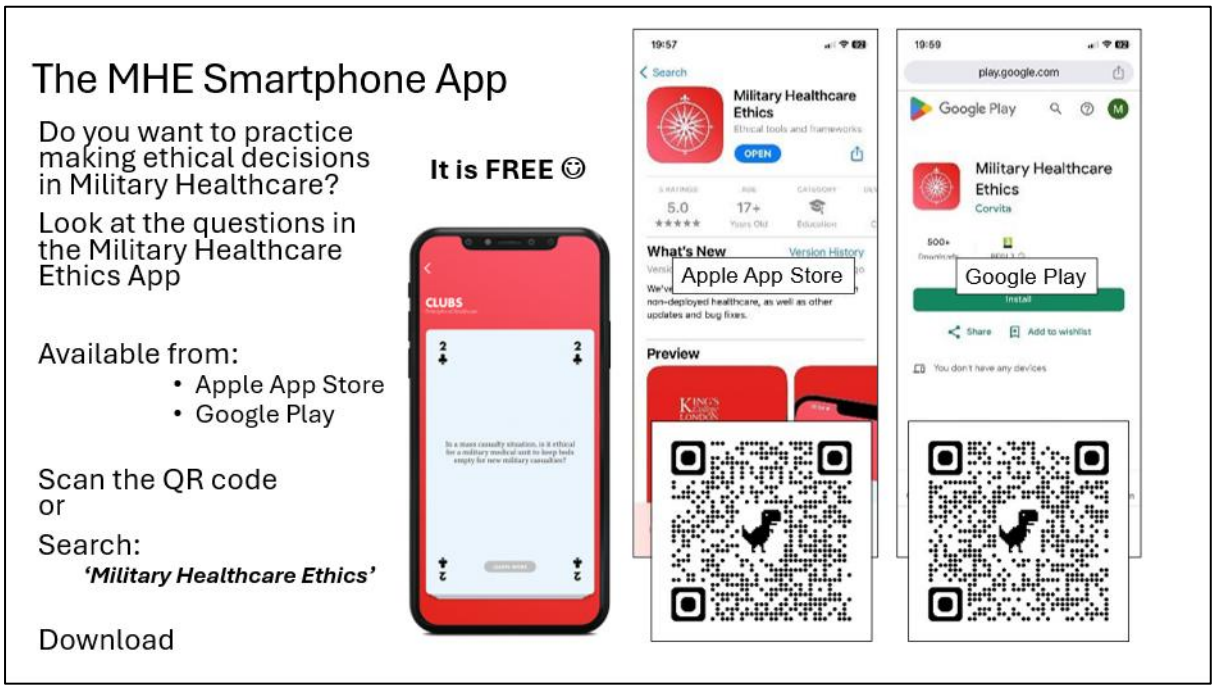
Bricknell M, Story R. An overview to military medical ethics. Journal of Military and Veterans Health. 2022 Apr 1;30(2):7-16. https://jmvh.org/article/an-overview-to-military-medical-ethics/

Bricknell M, Smart T. Military Healthcare Ethics —What is New? Journal of Military and Veterans Health. 2026;34(2). doi: https://doi-ds.org/doilink/02.2026-43961931/JMVH

Please review the Centre for Military Ethics webpage at: https://militaryethics.uk/en/ (especially the medical resources and the medical playing cards).

Please watch the YouTube video: An Overview to Military Healthcare (Medical) Ethics – 2022 https://www.youtube.com/watch?v=9e-04As4JnI&t=9s&pp=ygUXbWlsaXRhcnkgbWVkaWNhbCBldGhpY3M%3D

Please download:



DESIRABLE PRE-STUDY

Consider studying this Online Course. It is free to audit the course or you can also pay to receive a certificate.



Consider watching this online video:

YouTube Video: Medical School Interview [UK] - The 4 Pillars of Medical Ethics - https://www.youtube.com/watch?v=Xyu1JLbrYHc

Consider reading:

Health Care in Danger: The Responsibilities of Health-Care Personnel Working in Armed Conflicts and Other Emergencies. ICRC 2020 https://shop.icrc.org/health-care-in-danger-the-responsibilities-of-health-care-personnel-working-in-armed-conflicts-and-other-emergencies-pdf-en

Protecting Healthcare: Guidance For The Armed Forces ICRC 2021 https://healthcareindanger.org/wp-content/uploads/2021/03/4504_002-ebook.pdf

World Medical Association – International Code of Medical Ethics at: https://www.wma.net/policies-post/wma-international-code-of-medical-ethics/

GMC Good Medical Practice at: https://www.gmc-uk.org/professional-standards/good-medical-practice-2024

The ICN Code of Ethics for Nurses - https://www.icn.ch/resources/publications-and-reports/icn-code-ethics-nurses

The Core Humanitarian Standard. https://www.corehumanitarianstandard.org/the-standard

Beardmore C, Bricknell MC, Kelly J, Lough F. Commentary—A Military Health Care Ethics Framework. Military medicine. 2024 Jul 6:usae351. https://doi.org/10.1093/milmed/usae351

Beardmore C, Bricknell M, Faas A. Commentary—The Development of the North Atlantic Treaty Organisation Standards on Military Healthcare Ethics From Concept to Publication. Military Medicine. 2026 Oct 15: EPub before print https://doi.org/10.1093/milmed/usag480