Objective
To describe early iLA initiation and use in patient transport under battlefield conditions.

Study Design
Case Report.

Study Population
One young adult with blast injury to the lung, traumatic lower leg amputation and subsequent acute lung failure.

Methods
iLA was initiated after rapid clinical deterioration subsequent to initial stabilisation.

Results
iLA allowed protective ventilation and transport to advanced medical facilities from Bagdad to Europe. After 15 days iLA was removed and the patient could be extubated shortly after that. No major complications occurred.

Commentary
This case has several interesting aspects: Blast injury is a complex and difficult to treat condition, combining indirect and direct damage to the lung. The ease of use of the system allowed treatment commencement and MEDEVAC under battlefield conditions. Several patients from this scenario underwent similar procedures.