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**ІСТОРИЯ СТАНОВЛЕННЯ ВИСОКОГО МИСТЕЦТВА
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Бадюк Михайл, Бірюк Ігорь, Жупан Богдан, Цыркот Ігорь, Куковская Ирина, Сикирицька Татяна. Історія становлення високого мистецтва сучасної військової медицини України. В статті розглядаються питання сучасної військової медицини в Україні як самостійного державного утворення. Були складені основні етапи національної військової медицини, і були виділені особливості її реформи. Також в статті представлено аналіз заходів регулювання та підтримки реформи військової медицини. Враховуючи дані, отримані з великої кількості архівних джерел та адміністративних матеріалів, особливу увагу було приділено трансформації управління державною медичною підтримкою Збройних Сил України. Визначено деякі недоліки в організації військово-медичної освіти, показані основні перспективні напрями її розвитку.

Ключові слова: історія військової медицини, охорона здоров'я, реформа збройних сил.

Introduction. The urgency of studying the problems of the formation history of military medicine at the present stage of development is due to the fundamental qualitative changes in warfare and significant restructuring in the organizational structure of the armed forces. Any ill-considered reforms of military medicine can cause new problems during military operations and this radically changes adopted rules and regulations on the organization of medical support of troops. Therefore, there is a need for careful study of the past experience of military medicine and its further usage according to the today's requirements. Detailed study of modern military medicine offers a rich material for theoretical generalizations and practical consequences of opening patterns and trends in the principles development of medical care, and how to predict the future direction of military medical science.

Nowadays defense reform in Ukraine is carried out under hard military-political, operational-and-strategic and economic conditions as a result of military aggression of Russia against Ukraine, the occupation of the sovereign territory of Ukraine – the Autonomous Republic of Crimea and Sevastopol by the Russian Federation. The transformation of the Armed Forces of Ukraine and its medical service

is going on under conditions of warfare on the part of the Donetsk and Lugansk regions within the framework of anti-terrorist operation (ATO). Despite the difficulties of the present and relatively short (25 years since Ukraine gained independence) historical period, Ukrainian military medicine has already had extremely difficult way of transformation. At the same time, given the level of acquired own experience and its direct impact on the organization and principles of medical support of the armed forces in the ATO, it became possible to improve significantly and upgrade the measures and means of providing medical care in the pre-hospital phase.

The objective of the study is an attempt to analyze some methodological issues that point to approaches to the investigation of connections and relationships in the history of national military medicine and how it can be used for explaining certain events and facts that affected essentially the major milestones of the present stage of the military medicine formation and development.

The object, materials and methods. The object of the research is the medical support system of the Ukrainian Armed Forces and the methods of the study are system and historical analyses. Legislative, legal and regulatory docu-

ments related to reforming the medical support system of the Ukrainian Armed Forces serve as materials of the given research. Scientific publications with information on reforming the military have also been used. Philosophical methods are a means of disclosure of military history and medical measures and promote the full use of the whole arsenal of knowledge to disclose the patterns of the processes and phenomena development in the history of military medicine.

Results and discussion. In accordance with the documents (the reform program and development of the Armed Forces of Ukraine), the development of the Armed Forces of Ukraine is officially¹ divided into five main stages: 1st (1991-1996) – the basis *formation* of the Armed Forces of Ukraine; 2nd (1997-2000) – *development* of the Armed Forces of Ukraine; 3rd (2001-2005) – *reform* of the Armed Forces of Ukraine; 4th (2006-2012) – *development* of the Armed Forces of Ukraine; 5th (from 2013) – *improvement* of the Armed Forces of Ukraine. Of course, the aforementioned division of historical periods that meets the terms of government programs is rather conventional. However, in our opinion, this division is logical because all state programs were formed by the new leadership of the Armed Forces of Ukraine introducing certain mechanisms of financial support.

According to O. Melnyk², the first stage of the Ukrainian Armed Forces development, in general, was characterized by the simultaneous introduction of administration control structure, the creation of the legal framework, the structures and number troops reduction. This phase began with the adoption of relevant Resolution by Verkhovna Rada of Ukraine, August 24, 1991³ which took control of “all military units stationed in the republic” started the creation of a national army and Ministry of Defense. The first attempts of reformation or transformation of the military grouping of the former Soviet army didn't have a clear strategic vision for the future model of the national army and, thus, were limited mainly to indiscriminate cuts. The magnitude of the reduction was unprecedented: only in the first five years of independence over 3500 different military structures, almost 410,000 people personnel have been reduced. The number of weapons and military equipment was significantly reduced: combat aircraft – by 600 units, helicopters – almost by 250, tanks and armored combat vehicles were reduced by 2400 and 2000 respectively. From 1992 to 1996 the number of troops was reduced by 48% and to 370 thousand people. In parallel with the processes taking place in the Armed Forces of Ukraine, there was a transformation of military medicine.

The main objectives of the military medicine establishment during the first phase of laying the foundations of the Ukrainian Armed Forces (1991-1996) were the following: a) awareness of the need for a modern health care system; b) formation of the highest governing body; c) the concept development of combining disparate types of medical services of the former USSR Armed Forces; d) examination of ways of the plan practical implementation.

After the creation of the new ministry, at the directive request of Ministry of Defense of Ukraine, on the basis of

the medical service of the Kiev military district, the office of medical support of the Ukraine Armed Forces Rear Staff was formed, which was renamed in the future to Military Medical Department of the Rear Staff of the Armed Forces of Ukraine. In May 1994, the Military Medical Department of the Rear Staff of the Armed Forces of Ukraine was reorganized into the Central Military Medical Department of the Rear of the Armed Forces, and from October 1994 – into the Main Military Medical Department (MMMD) General Staff of the Armed Forces of Ukraine. At the same time, at the office of the Minister of Defense of Ukraine the office of Service Personnel Health was formed.

The first step in practical formation of the Ukrainian military medicine was the medical service reformation of three military districts (Kiev, Odessa and Prykarpatska district) and units, formations and associations of the Air Forces and Air Defense Troops, 43 Missile Army, Railway Troops, military and construction offices of the Black Sea Fleet of the former USSR into a single medical service of the Armed Forces of Ukraine. The medical services of the above mentioned military associations were independent and subordinate to the military districts rear chiefs, and with the special issues – to the Central Military Medical Department (CMMD) of Ministry of Defense of the USSR. The medicines and medical property supply was completely centralized and depended on CMMD decisions of Ministry of Defense of the USSR.

The first results of a new system of medical provision were not the only association of separate health services into a single national health service of the Armed Forces, but also the governing body exclusion (MMMD) from the direct subordination of the Ukrainian Armed Forces Rear, resulting in further medical care formation as a separate species of comprehensive troops support.

In the same period, creation of a national system of military medical education and research in Ukraine begins. The decision of the Cabinet of Ministers of Ukraine dated August 19, 1992, №490 “On the Reform of Military Education” stated: “p.9. To the Ministry of Education, Ministry of Health and the Ministry of Defense – for preparing officers with specialties that are not in military schools, to form a Military Medical Branch (MMB) at the Ukrainian State Medical University at the military departments of the Kiev Medical Institute and the Kiev Institute of improvement of doctors eliminated”.

Later this date was seen as establishing the Day of Ukrainian Military Medical Academy. According to the order of the chief of General Staff of Ukraine an organizational group, which began processing the MMB staff, methods and techniques of teaching and educational process, curricula and training programs for students, approval and introduction of the MMB staff, was formed. The enormous preparatory work made it possible to conduct a first intake of students and adjunct in July-August, 1993.

Furthermore, the teachers of Military Department of Bogomolets Kiev Medical Institute, Kyiv Institute of Postgraduate Doctors, and military doctors who come from Ukraine and served in the various regions of the former Soviet Union and returned to his native Ukraine, played a fun-

¹ Informatsiya rozdil “Istoriya” [Information Section “History”], Ofitsiynnyy sayt Ministerstva oborony Ukrainy, URL: www.mil.gov.ua.

² Mel'nyk O. “Oboronna reforma: pevni uspihky, nepevni perspektivy” [Defense reform: some success, uncertain prospects], *Natsional'na bezpeka i oborona*, 2010, N. 4, P. 42-45.

³ Postanova Verkhovnoyi Rady Ukrainy “Pro viys'kovi formuvannya na Ukraini” vid 24 serpnya 1991 r., N. 1431 [Resolution of the Verkhovna Rada of Ukraine “On military forces in Ukraine” dated 24 August 1991], URL: zakon.rada.gov.ua/laws/show/1431-12.

damental role in the organization of this work.

In a further development, the decision of the Cabinet of Ukraine dated October, 16, 1995, №820 "On Creation of Ukrainian Military Medical Academy" was officially recognized the fact of the Ukrainian Military Medical Academy (UMMA) establishment, determined the organization and system components of military medical education and science in Ukraine. The UMMA first chief became a candidate of medical sciences (MD – in 2002), Professor (2003) Vladimir Pasko. In July, 1994, the Ukrainian military medics got the emblem of medical service – the staff of Asclepius, a snake entwined and a wreath and viburnum leaves, embedded in the bottom of the Armed Forces of Ukraine Emblem.

The Department of doctors training for the Armed Forces of Ukraine was formed as part of Bohomolets National Medical University, and in the Vinnitsa Medical College there was military and medical department, where began the military doctors assistant's training with educational level of Bachelor.

During this period, according to the order of the Ministry of Health of Ukraine and the Ministry of Defense of Ukraine dated December 15, 1995 №233/332 "On Establishment of Departments of Extreme and Military Medicine" departments of extreme and military medicine in medical universities of Ukraine were established. Based on the order of the Ministry of Defense of Ukraine and the Ministry of Health of Ukraine dated July 18, 1996 №215 / 202 "On Introduction of the Provisions of the Curriculum, Staffing Model of Departments of Extreme and Military Medicine and Organization of Their Work", training of medical students according to program for reserve officers of medical service (Military occupational specialty – 901000).

Thus, during the period of forming the foundations of the Armed Forces of Ukraine (1991-1996), Military medicine of Ukraine has managed to form a "skeleton" of the health care system, has got a capable governing body and has come from the Armed Forces of Ukraine Rear subordination and introduced its own training of personnel resources.

The starting point of the next stage of "development" in the life of the Armed Forces of Ukraine is considered an approval of the Presidential Decree of Ukraine dated January, 20, 1997 "The State Program of Construction and Development of the Armed Forces of Ukraine till 2005". The program provided an opportunity to identify areas of development of Ukrainian troops, clarify objectives, structure, number, ratio of troops, building of the organizational structure of government, joints and units etc. The Ministry of Defense of Ukraine became the central body of executive power and military control; the Armed Forces of Ukraine, the main military administration body – the General Staff of Armed Forces of Ukraine, all types of Ukraine's Armed Forces – Army, Air Force, Army Air Defense, Navy; associations, connections, units, military educational institutions and so on were in its submission.

During 1997-1998, the necessary changes in Ukraine's legislation to further legal support of the program of development of the Armed Forces of Ukraine were conducted: 1. A new edition of the Military Doctrine was developed; 2. The Laws of Ukraine "On Defense of Ukraine" and "On the Armed Forces of Ukraine" were adopted; 3. The Decree of the President of Ukraine "On the Ministry of Defense of Ukraine" and "On General Staff of the Armed Forces of

Ukraine" were approved. The Resolution of the Verkhovna Rada of Ukraine "On the Number of Armed Forces of Ukraine", adopted on December 22, 1998, provided an opportunity to begin the transition to the new system of the Armed Forces of Ukraine and create new provision system.

Military medical service as a part of the Armed Forces of Ukraine took part in all processes taking place in the Ministry of Defense of Ukraine and General Staff of Armed Forces of Ukraine. The leaders of Main Military Medical Department (MMMD) of General Staff of the Armed Forces of Ukraine developed in the short term the concept of the main directions of construction and development of the medical service of the Armed Forces of Ukraine, approved by the Ministry of Defense of Ukraine dated March 03, 1997, and a program of construction and development of medical service of the Armed Forces of Ukraine till 2005. Under the terms of the program Main Military Medical Department of the General Staff of Ukraine was reorganized into the Main Military Medical Department (MMMD) of the Ministry of Defense of Ukraine and therefore transferred to the structure of the Ministry of the Armed Forces of Ukraine. An active work on improvement of the legal framework of the Medical Service of the Armed Forces of Ukraine was continued. The Directive of the Ministry of the Armed Forces of Ukraine determined "...to consider a medical service as an independent type of provision". Thus, military medicine officially withdrew from the submission of the Rear of the Armed Forces of Ukraine.

According to the State program of construction and development of the Armed Forces of Ukraine, measures to further reform of the military health service, reorganization and improvement of medical support in peacetime and wartime were conducted. However, in this period a number of unpopular measures on planned reduction of medical units, establishments and personnel was carried out. Only in the period from 1996 to 1999, the medical service of the Armed Forces of Ukraine held a number of organizational measures for the disbandment and reorganization of 141 military medical units, eliminated all kindergartens (49), which were held by state health service. In result of organizational activities medical service personnel number was reduced to 62% of the total.

During 1998 such administration verticals as medical diagnostic, sanitary-epidemiological and medical supplies vertical were actively developed. The levels of medical service were determined: Main Military Clinical Hospital (MMCH), Kyiv – highly specialized medical care; Central Military Hospital (in Odessa, Lviv, Chernihiv, etc.) – specialized medical care; basic hospitals – specialized and qualified medical care; garrison military hospitals – quality medical care. The main essence of the formation of diagnostic and treatment vertical was an organization of care and treatment in the area of responsibility of health care institution for the specified level (regardless of species identity).

Due to the permanent downsizing of medical services (primarily due to military hospitals), typical staffing hospitals at the appropriate levels were developed. If necessary, there were personnel cuts military hospital, the latter was transferred to the state hospital of a lower level. Temporary provisions on the organization of the military hospitals on a territorial basis were developed.

In order requirements of the Ministry of Defense of Ukraine territorial principle of medical care giving in established Kiev and Vinnitsa military medical centers was prac-

tically implemented. In particular, the task of creating new functional association (Kiev Military Medical Center) were defined innovation of: the creation of medical-and-economic and legal foundations of the system of medical provision on the territorial principle – the development of regulations, guidelines, medical standards development, implementation and monitoring of quality of medical care giving; reorganization of primary health care through the mechanism of territorial districts; reorganization of hospital care for periods of patient care and more.

The system of medical care for the territorial principle was later approved by the Minister of Defense of Ukraine. According to this order for the first time, using the territorial principle of health care, respective military units, regardless of their specific submission, were assigned to the military hospitals.

Under Art. 33 of the Law of Ukraine “On Ensuring Sanitary and Epidemiological People’s Welfare” in the first half of 1998, the State Sanitary and Epidemiological Service (SSES) of the Ministry of Defense Ukraine, as part of a single SSES of Ukraine, was created. Hygienic Administration was displayed on a separate staff out of Main Military Medical Department structure of the Ministry of Defense of Ukraine. Existing sanitary and epidemiological institutions of different levels of subordination (sanitary-epidemiological types of troops armed forces, operational command, garrisons and sanitary-epidemiological laboratory divisions) were restructured and merged into a single sanitary-epidemiological chain of the Ministry of Defense of Ukraine (regional and territorial SES, garrison SES).

At the stage of *development* of the Armed Forces of Ukraine the formation of organizational structure vertical of medical supplies – governments and institutions of medical supplies in peacetime – was almost completed.

Despite these difficulties, the main objective of the *third* phase of construction and development of the Armed Forces of Ukraine (until 2005) was a prospective model of Ukrainian troops in 2010: – high-quality, mobile, multipurpose, armed and equipped with everything necessary.

Military medical service within the specified period continued the development of a new health care system, and to solve it, four major objectives were set:

- improve the health of military personnel;
- improve the quality and efficiency of medical care;
- more efficient use of available resources;
- ensure free access of military personnel, their families and military retirees and population to modern means of diagnosis and treatment.

For this purpose creation of a unified military medical service in the administration of three verticals: medical diagnostic; sanitary and epidemiological; military medical supplies and two systems: military medical education and research, was envisaged.

The special features of the medical service of that period include the active participation of Ukrainian military doctors in international activities and medical support peacekeeping contingents. As of 2003 Ukrainian peacekeepers were in Kosovo (323 troops) and Iraq (1621 people), Sierra Leone (680 people), Lebanon (657 people), where medical care was organized with the requirements of the UN and NATO and presented by medical units of the first and second levels. Medical support of Ukrainian peacekeeping contingents provides with 132 medical professionals, including doctors – 51, nursing staff – 63, nurses – 18 people.

Based on years of experience, a concept of medical support of Ukrainian peacekeeping contingent has been developed and implemented.

At the end of the *third stage* of reforming the Armed Forces of Ukraine for 2003-2005. a significant amount of current events in the Armed Forces of Ukraine was held: conducting of the Defense Review and implementation of defense planning; completion of the transition to Brigadier-forces battalion structure; beginning of functions separation of the Ministry of Defense and the General Staff and the beginning of a gradual transition to civilian Ministry of Defense. During this period, there was a transition in the Armed Forces of Ukraine, from the four-typed structure in three-typed one: 1. Army; 2. Air; 3. Naval forces. However, there was a further reduction in the total number of Armed Forces of Ukraine and active formation of functional structures of the Armed Forces, among them – the Joint Rapid Reaction Force.

Military Medical Service at the time held the subordination of all health care and sanitary facilities with operational commands directly under the Department of health care of the Ministry of Defense of Ukraine. To analyze the health care system in wartime and evaluation of events, field health care institutions were organized: Military field mobile hospital (2003), Military field surgical hospital (2004), Military mobile hospital (2005).

From March 1, 2003 a new order of the Minister of Defense of Ukraine, the Ministry of Education and Science of Ukraine and the Ministry of Health of Ukraine dated February 10, 2003, № 31/68/53 “On Improving Training of Reserve Officers of Medical Service” was adopted. Under this order the Department of Extreme and Military Medicine was renamed the Department of Disaster Medicine and Military Medicine.

In June 2005, the Military Medical Department of the South and West operational command (OC) were reorganized into Regional Medical Administration (RMA) and subordinated directly to the Department of Health of the Ministry of Defense of Ukraine. The following tasks were put at the regional medical administrations: organization of medical support training and daily activities of the region troops (forces); interaction with operational commands and main types commands of Armed Forces of Ukraine on troops medical support (forces); control and coordination of treatment and diagnostic process in medical institutions in the region.

In accordance with the requirements of Directive the Ministry of Defense of Ukraine, medical service identified basic prospective indices of formation of “Reformation Programme of medical provision system of Armed Forces of Ukraine for the period 2006-2011”.

To improve medical support of military units and efficiency of medical care under the territorial principle, the experiment was conducted in military units and institutions of Kiev and Vinnitsa garrisons, to improve the efficiency of medical staff usage. The basis of the experiment was the idea to include doctors and nursing staff of medical units to staffs (outpatient departments) of military hospitals. The use of medical personnel in the military units was viewed as a business trip to the hospitals. Thus, the chief of a military hospital was assigned responsibility for all health care units in the zone of responsibility.

Since the beginning of the *fourth phase* (2006 – 2012), governing body of the Armed Forces of Ukraine enhanced

significantly its legislative work. Among the set of priority measures, conducted by military medical service, there was, reorganization of the Central Military Clinical Hospital in Military medical clinic regions centers (MMCC) (Western, Central, Southern, Northern, Crimean and Main) with determination of regional areas of responsibility; RMA of OC dissolution and introduction of MMCC staffs, in June 2007, operational health departments (OHD), which served as the governing body of the medical support on a defined territory; establishment of the regions (except the Main – Kyiv) of five military mobile hospital (MMH) at MMCC; establishment of Scientific Medical Council at DHC of the Ministry of Defense of Ukraine; establishment of the regional evacuation and transport departments at MMCC; creation of air-transport unit of air ambulance; reforming of military health centers in rehabilitation centers with relevant specialized departments and others.

It should be noted that the implementation of the Program of development of medical support of the Armed Forces of Ukraine, during 2008 the leadership of DHC of the Ministry of Defense of Ukraine for participation MMCC regions a number of measures to check the combat readiness of established military mobile hospitals and special tactical training of field units, scheduled for a particular period, are held. Thus, during September 2008 a simultaneous MMH deployment of MMCC of Central and the Crimea regions and Military field infection hospital based on MMCC of Southern region. About 40% of disposable medical personnel were involved in this exercise.

At the beginning of 2011 in Ukraine General Staff there were created another supreme governing body of Medical Service – Central Military Medical Department (CMMD) of Armed Forces of Ukraine. The main purpose of CMMD creating was the need to plan and implement medical support of Ukraine's Armed Forces in peacetime and times of crisis. At this time, the main problem was the separation of functions and tasks between Ukraine and the MMD of the Ministry of Defense of Ukraine and CMMD of Armed Forces of Ukraine. Despite the Decree of the President of Ukraine, dated April 06.11 №406 / 2011 “On the Regulation of Ministry of Defense of Ukraine and the Regulations of the General Staff of the Armed Forces of Ukraine”, where the main task of the medical support system was delineated between the two governments, all the same finite understanding of functions, tasks and responsibilities could not be reached. This, in our view, is the end of the fourth stage of development (2006 – 2012) as the Armed Forces of Ukraine as its component – military medicine.

From 2013 the final stage of development (stage of *improvement* of the Armed Forces of Ukraine) began whose starting point could be the approval of the Strategic Defence bulletin of Ukraine. Of course, this was preceded by extensive and painstaking work of central executive bodies, involved in solving the problems of security and defense of Ukraine. However, with the beginning of the aggression of Russia (2014) in the south and east of Ukraine, statute of the aforementioned defense bulletin was abolished and gradually lost their validity.

At the request of President of Ukraine Decree №240 / 2016 dated June 6, 2016, a new Strategic Defence Bulletin of Ukraine was put into operation. It identified the need to establish the principles and standards adopted in the states – members of NATO, effective, mobile, equipped with modern weapons, military and special appliances of Defense

forces with model of the year 2020, which can ensure state defense as well as respond adequately and flexibly to military threats to Ukraine's national security, using efficiently the available capacity (ability) and resources of the state.

The main direction of further development of military medicine defined by objectives and major tasks of defense reform is to develop a system of medical support of the Armed Forces of Ukraine, capable to support all components of the defense forces of the state.

Conclusions. 1. The study made it possible to determine the phasing of military medicine of independent Ukraine, to identify the main achievements and challenges accompanying the transition process. 2. In conducting the investigation of medical provision and effectiveness of medical care to wounded and sick in a particular war or military operation, it is necessary to consider the decisive influence of the complex of factors, among which the leading role belongs to the nature of the society's political system and level of economic development. 3. During the period of forming the foundations of the Armed Forces of Ukraine (1991-1996), Military medicine of Ukraine has managed to form a “skeleton” of health care system, got competent governing body and come from subordination of Ukraine’s Armed Forces Rear and introduced its own training of personnel resources.

Бадюк Михайло, Бірюк Ігор, Жупан Богдан, Циркот Ігор, Куковська Ірина, Сикирицька Татяна. Історія становлення високого мистецтва сучасної військової медицини України. У статті наведено результати аналізу історичних аспектів становлення і розвитку військової медицини України в період незалежної держави та реформування системи медичного забезпечення ЗС України. Проведено структурування основних віх вітчизняної військової медицини, яке дозволило встановити особливості її реформування та умовно виділити п'ять основних етапів: 1-й (1991-1996 рр.) – формування основ ЗС України; 2-й (1997-2000 рр.) – розбудова ЗС України; 3-й (2001-2005 рр.) – реформування ЗС України; 4-й (2006 -2012 рр.) – розвиток ЗС України; 5-й (з 2013 р.) – удосконалення ЗС України. Проведений аналіз нормативно-правового забезпечення заходів з реформування військової медицини дозволив виявити головні завдання щодо її становлення впродовж всіх етапів формування основ ЗС України

Встановлено, що за період 1991-1996 рр. відбулося усвідомлення необхідності створення сучасної системи медичного забезпечення; формування вищого органу управління; розробка концепції об'єднання розрізнених медичних служб видів ЗС колишнього СРСР, а також опрацювання шляхів практичної реалізації цього задуму, що супроводжувалося створенням в Україні національної системи військово-медичної освіти і науки. У 1997-2000 рр. продовжувалася активна робота щодо удосконалення нормативно-правової бази функціонування медичної служби Збройних Сил України, реорганізації та удосконалення системи медичного забезпечення на мирний і воєнний час. Період 2001-2005 рр. характеризувався продовженням розробка нової системи медичного забезпечення, що передбачало створення єдиної військово-медичної служби в складі трьох управлінських вертикалей: лікувально-діагностичної; санітарно-епідеміологічної; військово-медичного постачання і системи військово-медичної освіти. Встановлено, що впродовж 4-го періоду розвитку ЗС України мало місце створення Центрального військово-медичного управління (ЦВМУ) ЗС України, головною метою якого стала необхідність планування і здійснення медичного забезпечення ЗС України у мирний час та особливий період.

З 2013 року основним напрямом розвитку військової медицини, який визначений оперативними цілями та основними завданнями оборонної реформи, стає розробка системи медич-

ного забезпечення ЗС України за принципами і стандартами, прийнятими в державах – членах НАТО.

Враховуючи дані, які отримані з великої кількості архівних джерел, адміністративних та нормативно-правових матеріалів, зроблено особливий акцент на трансформуванні органів управління медичного забезпечення Збройних Сил України. Вказано також на окремі недоліки у реформуванні військово-медичної освіти, виявлено основні перспективні напрями її розвитку.

Ключові слова: історія військової медицини, медичне забезпечення, реформування Збройних Сил

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