

from an article called Stopping Power
http://members.tripod.com/aphdmansoc/streetsmarts/id21_m.htm

The Human Target: What To Shoot At

Shot placement is the single most important variable in stopping and surviving an attack. The beauty of the research by Marshall and Sanow is that for practical purposes they introduced some control for shot placement by limiting their study to single shots of the torso. Of course, there is variation in where someone was shot with any particular bullet but over many shootings the differentials should wash out (when comparing shooting between calibers - unless there was some compelling reason to believe that the level of marksmanship varied significantly for those shooting different caliber weapons). Their research represents a very practical and useful guide in evaluating the terminal or stopping power of a particular cartridge.

A brief examination of table 2 indicates some significant variation between the smaller caliber weapons (.32, .380 and .38) and the larger calibers. Since all these shootings involved someone being shot in the chest area we get a good indication of the relative effectiveness of any particular round. Using one of the better loads significantly improves your chance of stopping an attack and surviving a lethal encounter.

With the exception of a cranial brain shot there is no guarantee that a person shot, even with one of the better loads, will be put out of action so quickly as not to pose a threat to your survival.

If the bullet does not enter the brain you have a head shot but not a brain shot. A person shot in the head and not the brain can continue to be a threat to you. With that in mind consider some basic strategic and tactical considerations.

In a defensive situation if you have to use a firearm, the assumption is - your life or someone else's life is in immediate danger. So what do you aim for?

What appears to be a simple question does not necessarily have a simple answer. Ain't that always the case?

If you have time to aim - which is always a good idea - imagine a line running down from the center of the forehead and face all the way to the groin area. Along this line would be a good place to focus on shooting someone who threatened you.

More specifically, starting from the forehead. Between the eyes, the eyes, and the middle of the nose (which is a good focal point since it is almost in the middle of a highly stoppable area and a slight miss to this part of the target is still likely to hit a vital area). From the mouth down (if it is opened) to the middle of the throat represent good target areas. Head shots are difficult to make and what you really want is for the bullet to enter the brain. It is not unheard of that small caliber bullets - and some larger ones too - have failed to penetrate the skull and enter the brain!

Most experts suggest that you aim at the chest. This area, often referred to as the Center of Mass, is rather large and contains vital areas, that if hit, are likely to lead to incapacitation - lungs, heart, and in the back of the body, the spinal column.

Chest area - the spinal column runs down the back in the center of the body. A shot that hits the spinal column is likely to take down the target immediately. The heart and lungs are in this area. From the base of the throat down to the chest area where the nipples are located represents a good triangular area to aim at. You might think of the underarms as a reference point.

A few inches above or below this point along the middle of the body would represent a good shot. A bullet to the heart will generally stop an attack within seconds.

The stomach, pelvis, and groin represent target areas with lower probabilities of an immediate stop. A person shot in the pelvic area is almost certain to go down. A person on the ground can still shoot at you but you obviously have the advantage if the person shot is bleeding and on the ground. Just be careful and take your time. If you're the good guy time is on your side, hopefully the cops are coming.

If you shot someone two or three times in the chest and they are still a threat to you or you see no apparent affect of them being shot, and you are sure you hit them, you may have to consider that they may be wearing body armor or they may be high on drugs. In such a case a brain or pelvic shot may be necessary to stop them before they get to you.

If you are quick, reasonably well trained, and calm - and who isn't when their life is threatened? - and prepared for the confrontation before it occurs you might consider getting the hell out of there or finding cover.

One series of target acquisitions - what I call walking the dog downtown - head, chest, and if necessary stomach or pelvic area shots. Another series, in reverse order is walking the dog uptown - which consists of stomach or pelvic shot, chest shot, and if necessary a head shot in that order. You can modify these approaches by selecting a different target area. The key is to have a plan before you have to implement it.

Remember, these are just points to consider and mull over in the back of your head. The advantage to doing this is that you won't suffer the downtime of thinking now what do I do? You will have a series of ready made quick responses to fall back on. In a real life situation, things may go as you anticipated or you may have to improvise.

Any shooting scheme must be based on having a target to shoot at. Typically recommended shooting scenarios include:

Double taps to the chest, and if that doesn't stop the action follow through with a head shot (Most gun trainers advocate this approach)

Double tap to the chest, and if necessary follow up with a pelvic shot (Marshall likes this approach because he thinks its too difficult to make a head shot and his concern that a head shot might not be a brain shot - which is the shot you would like to have).

If you've shot someone, take your time to assess the situation - for the inexperienced this is a lot easier said than done. Stay behind cover. Wait for the police to arrive. If you have a compelling reason to get up closer to the person move any weapons that can be used by the assailant out of their reach. Remain alert (the person you shot may have friends about) and wait for the police. If you move the weapon tell the police why and where it was located (or wait and talk to your attorney).

Anatomically Correct Torso Target

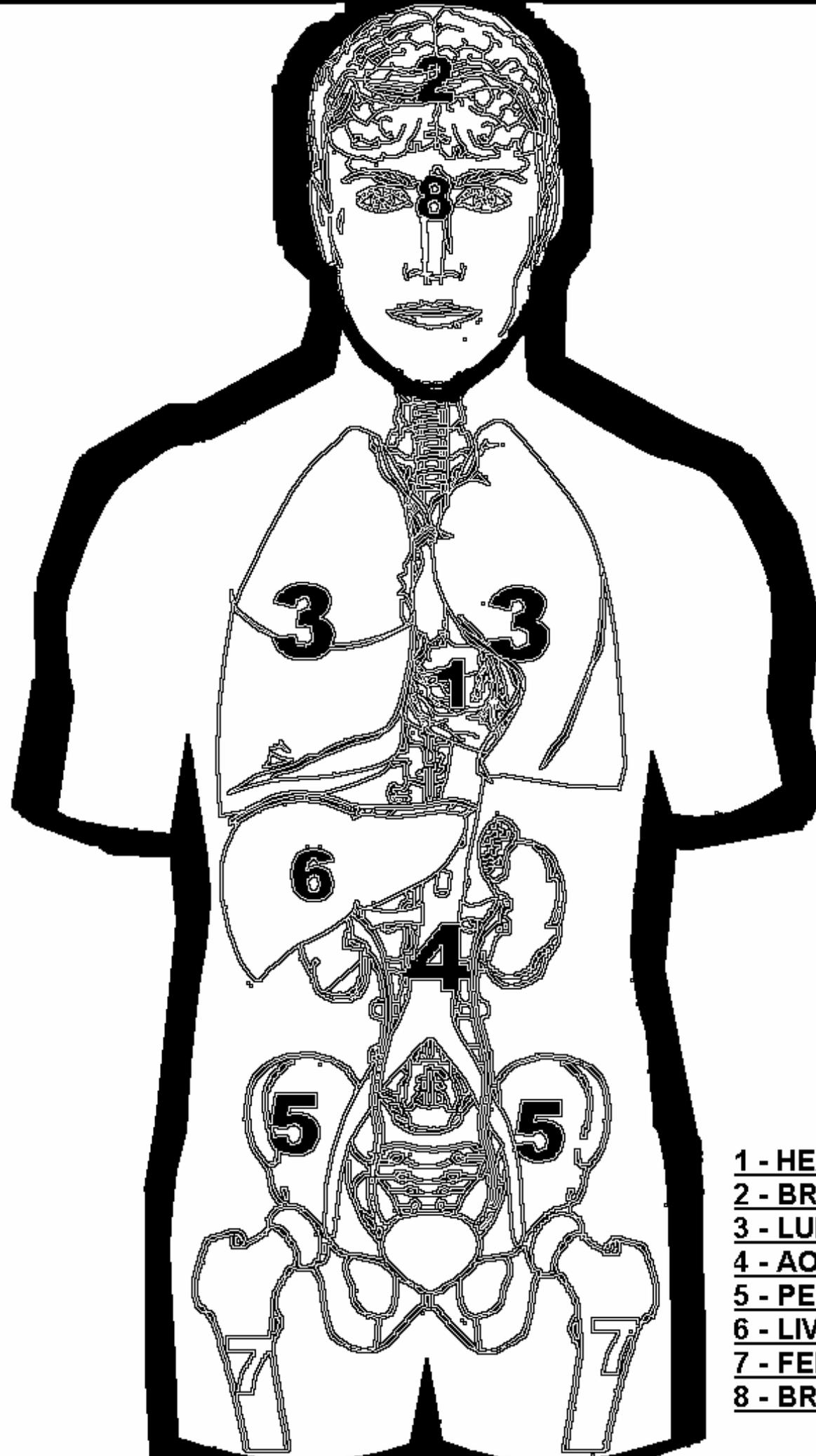
This PDF file will give you a one-page target, that you can use at 25 meters.

It will also give you one you can paste up from eight separate pages.

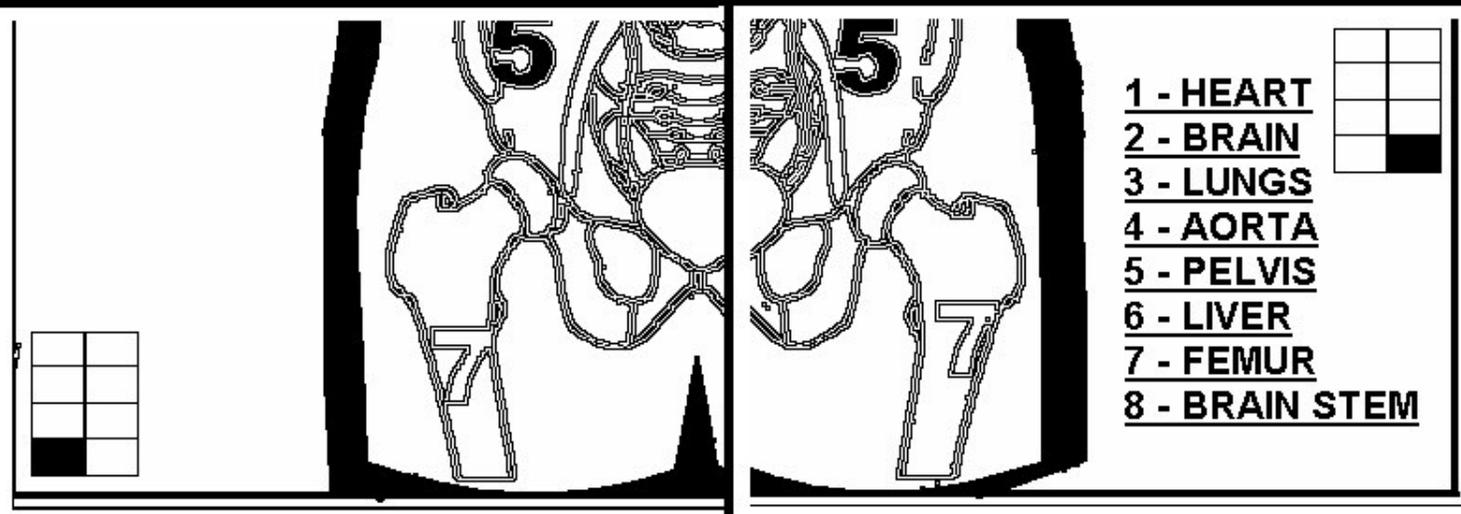
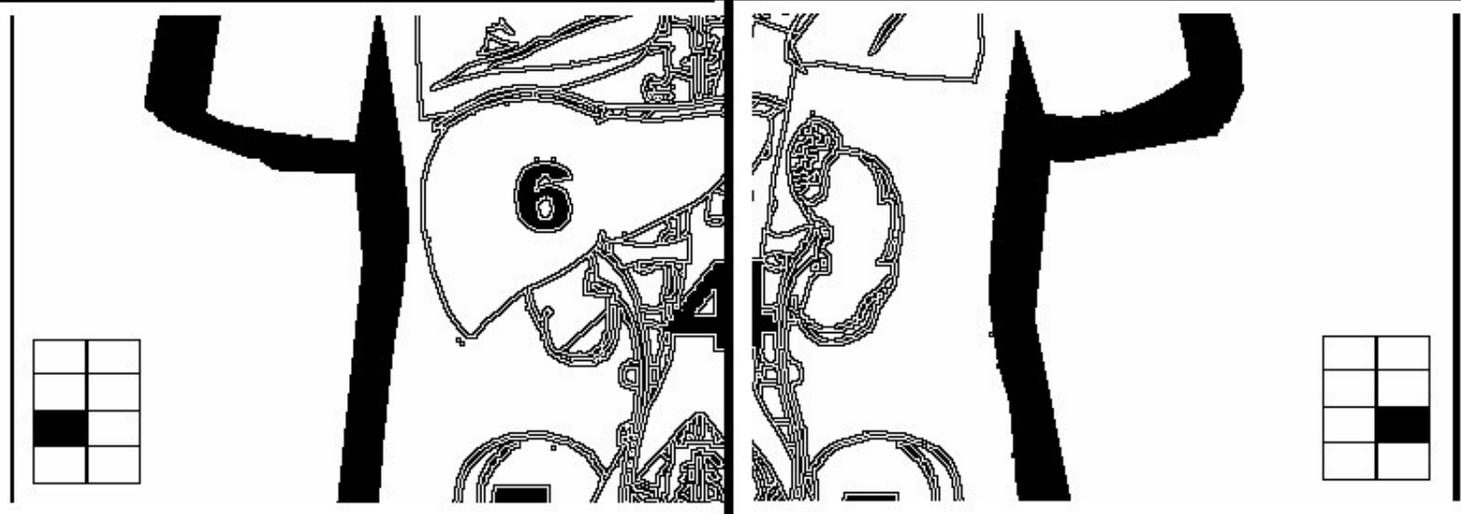
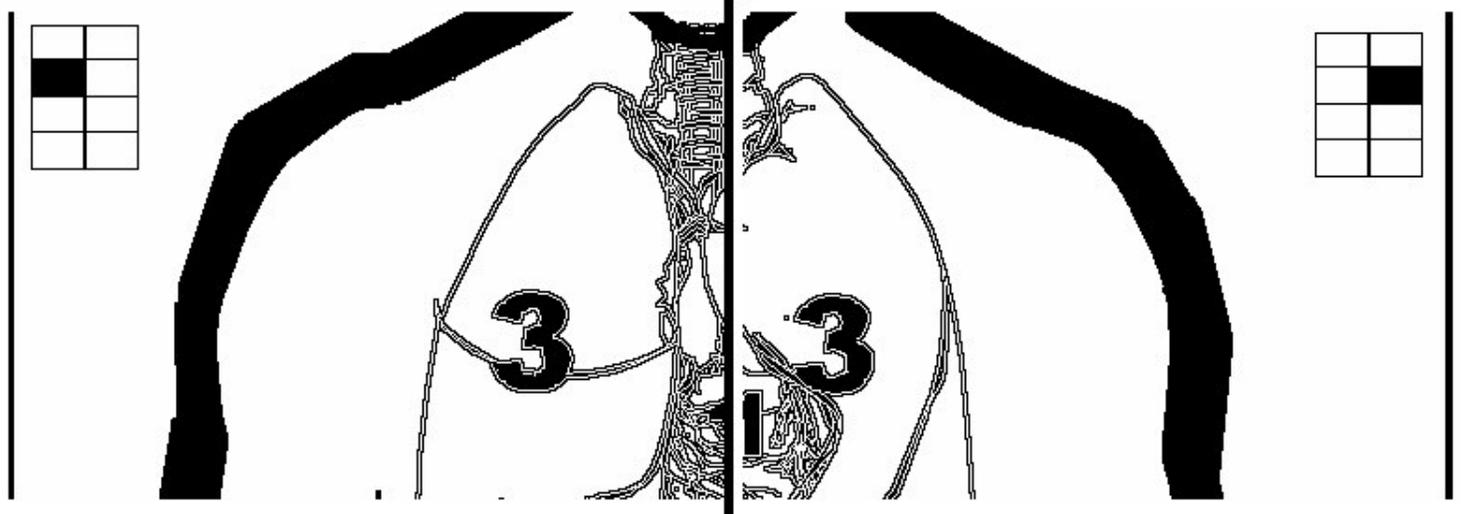
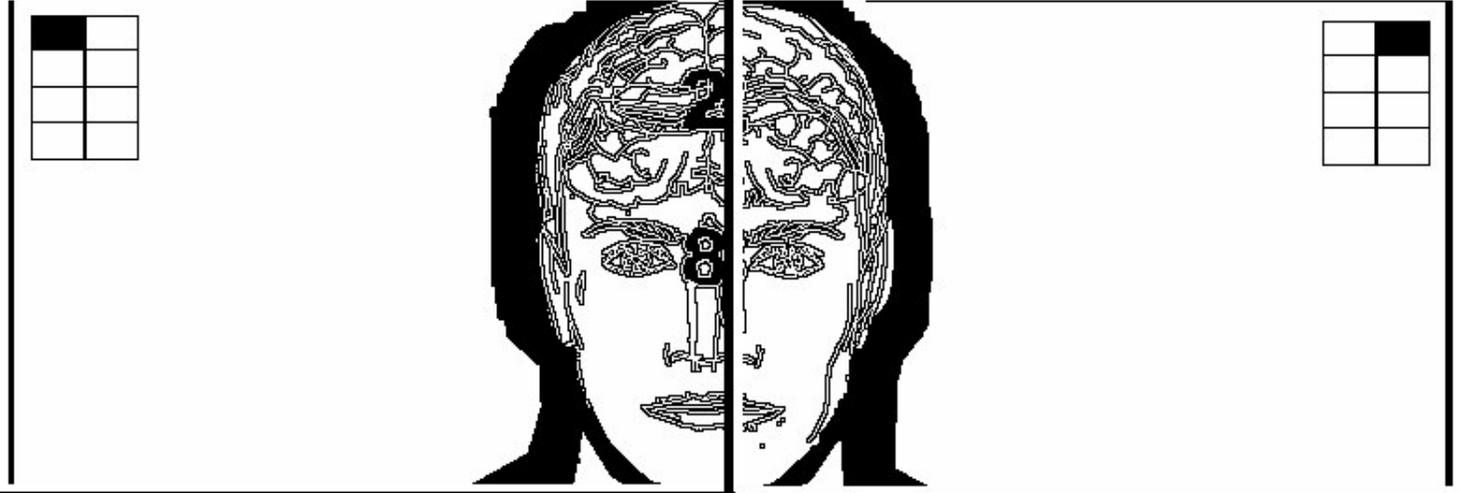
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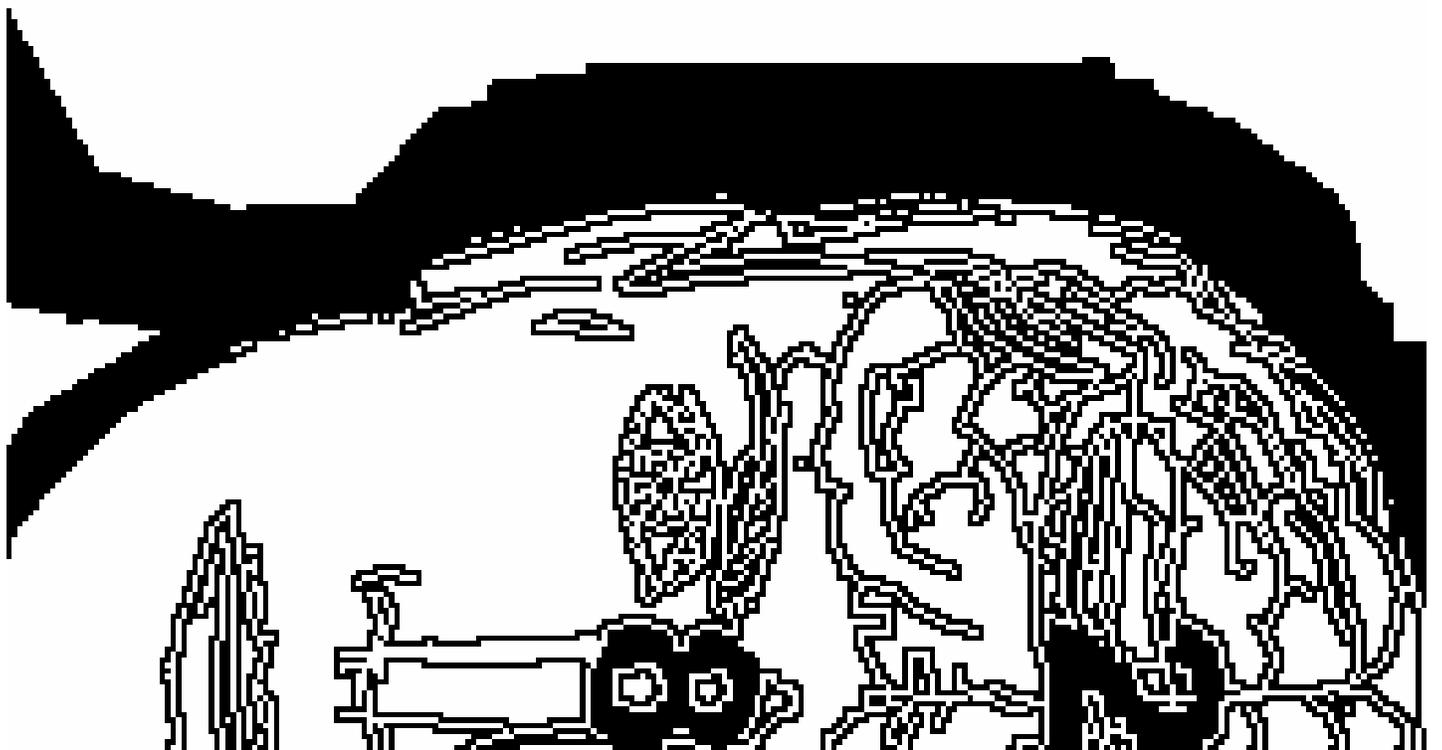
Keys are printed on each page, and there is an over-all key.

Paul.

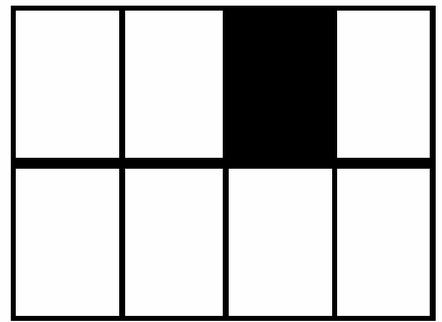


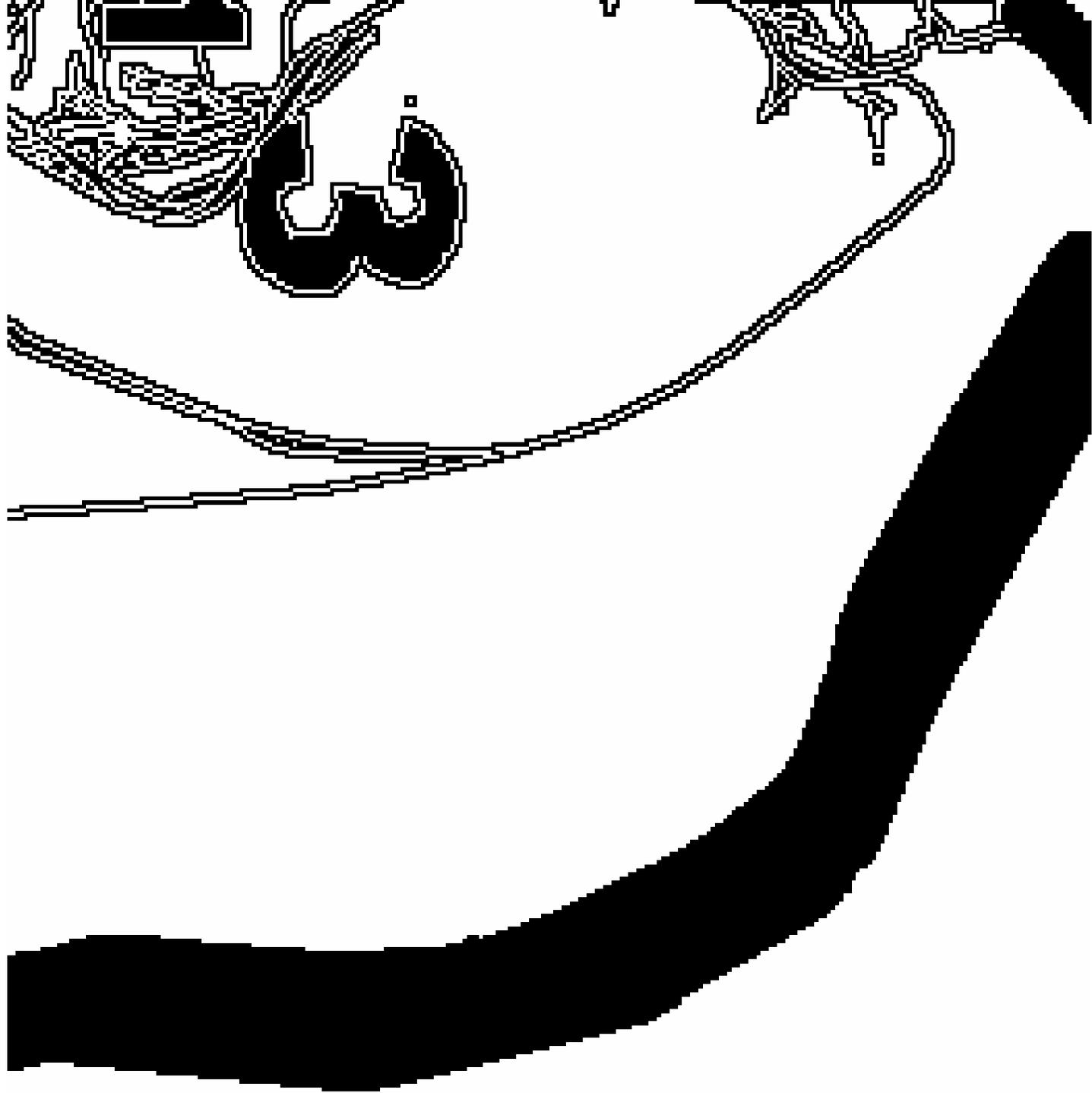
- 1 - HEART
- 2 - BRAIN
- 3 - LUNGS
- 4 - AORTA
- 5 - PELVIS
- 6 - LIVER
- 7 - FEMUR
- 8 - BRAIN STEM



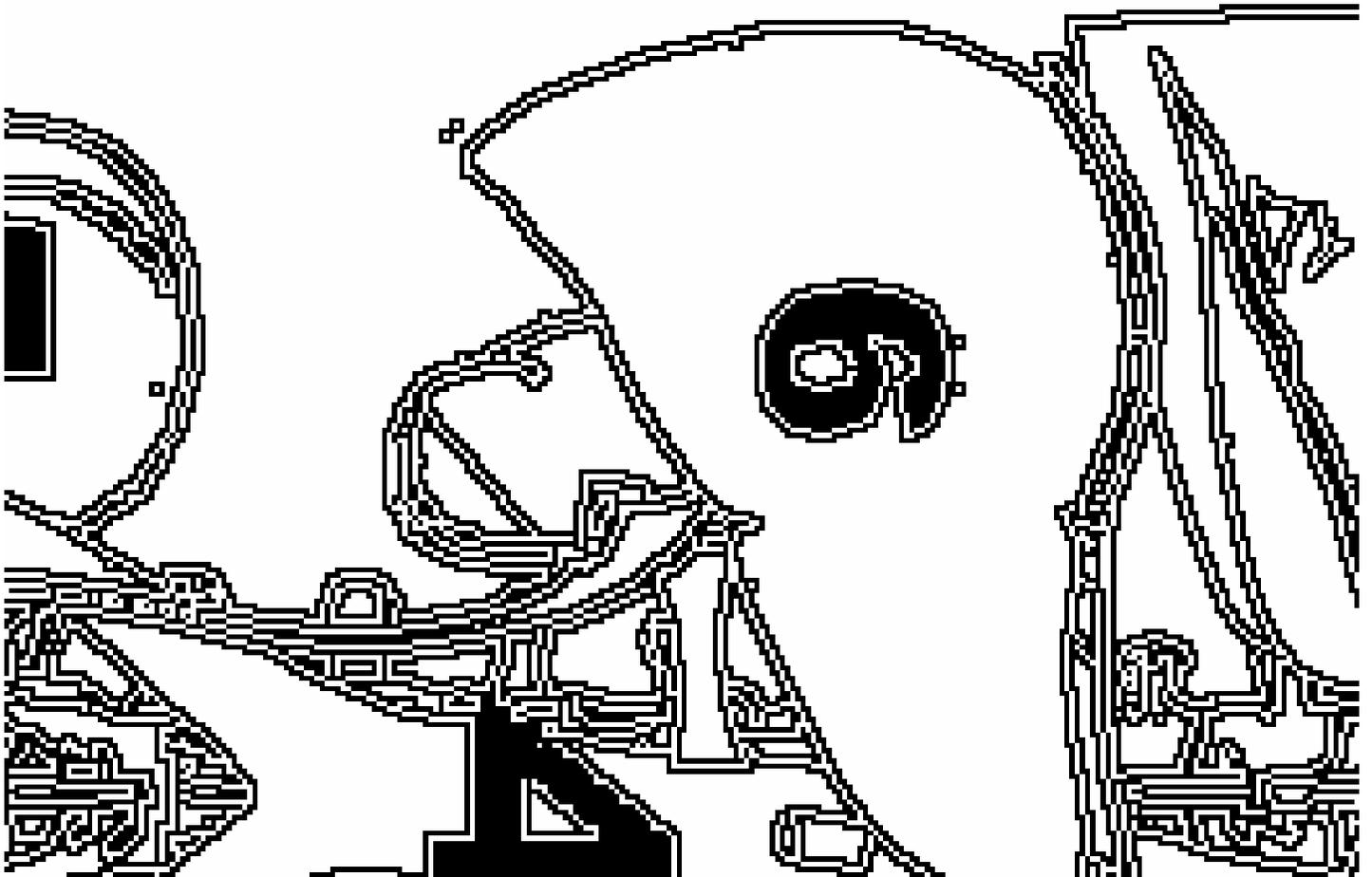
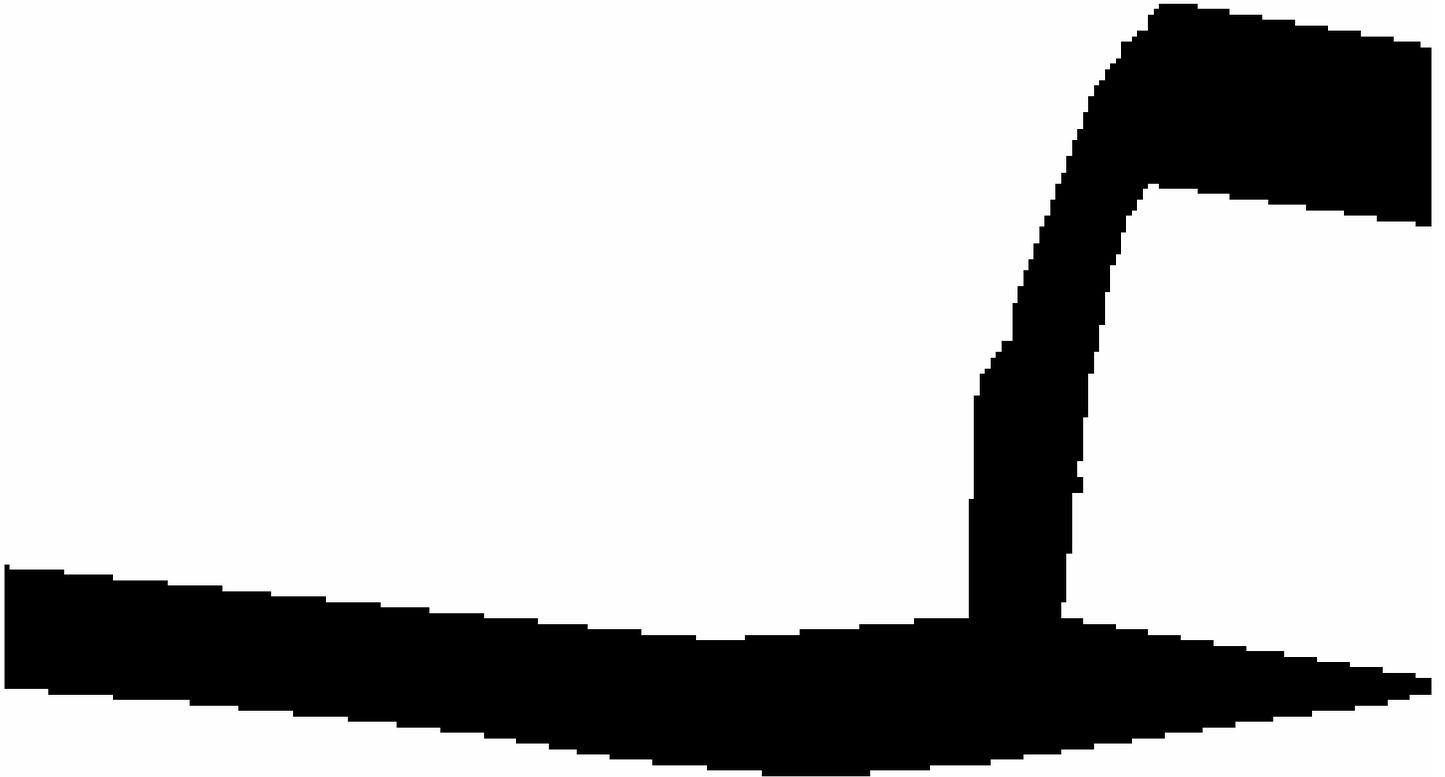
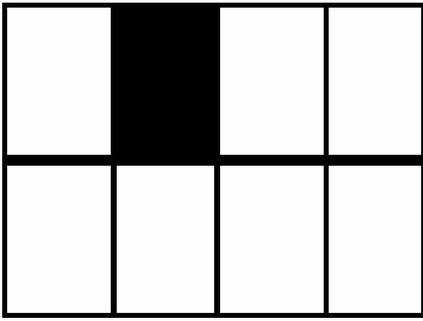


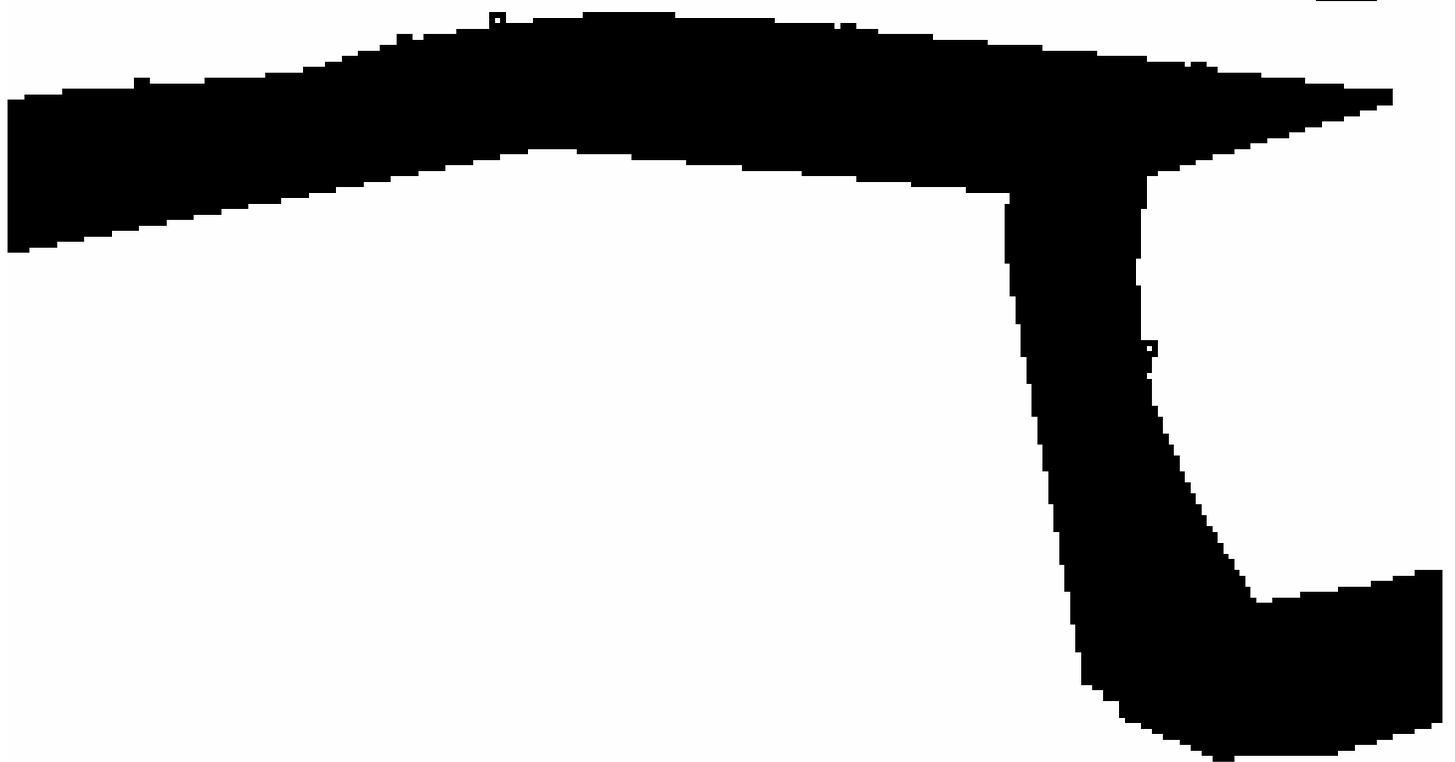
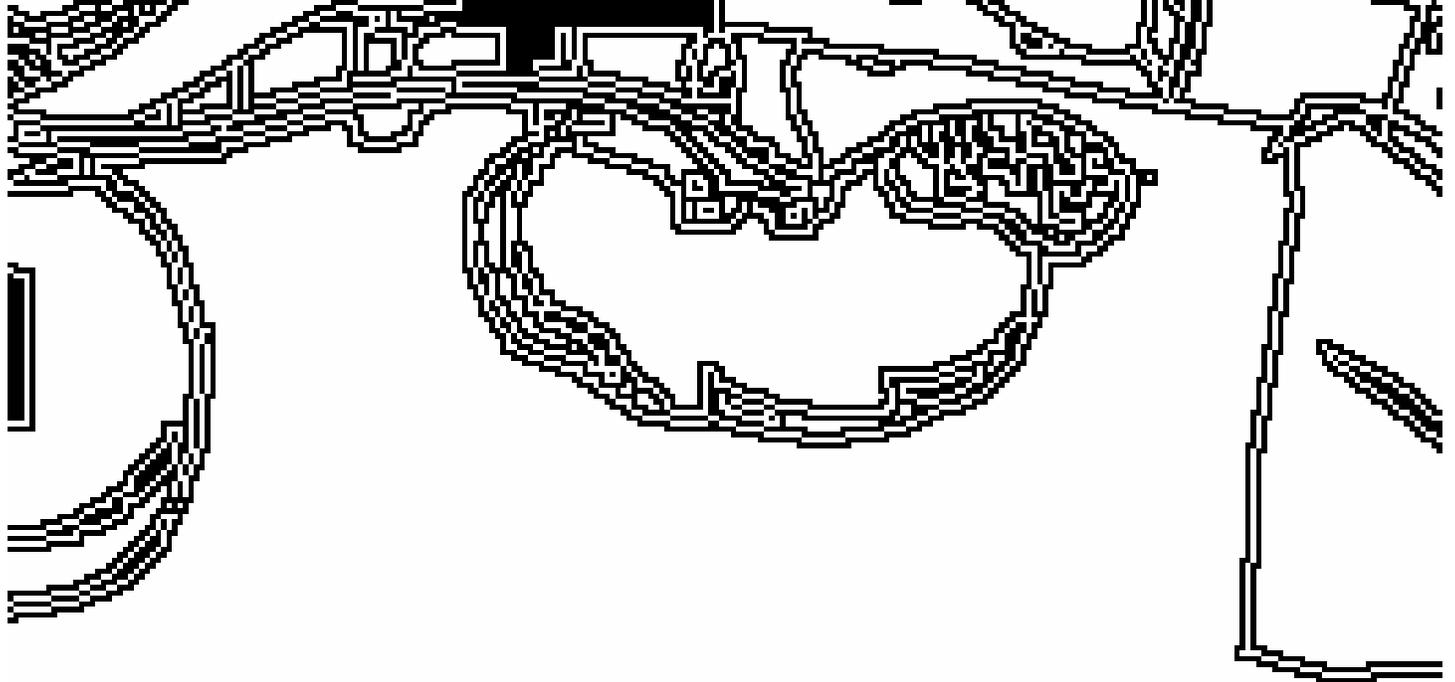






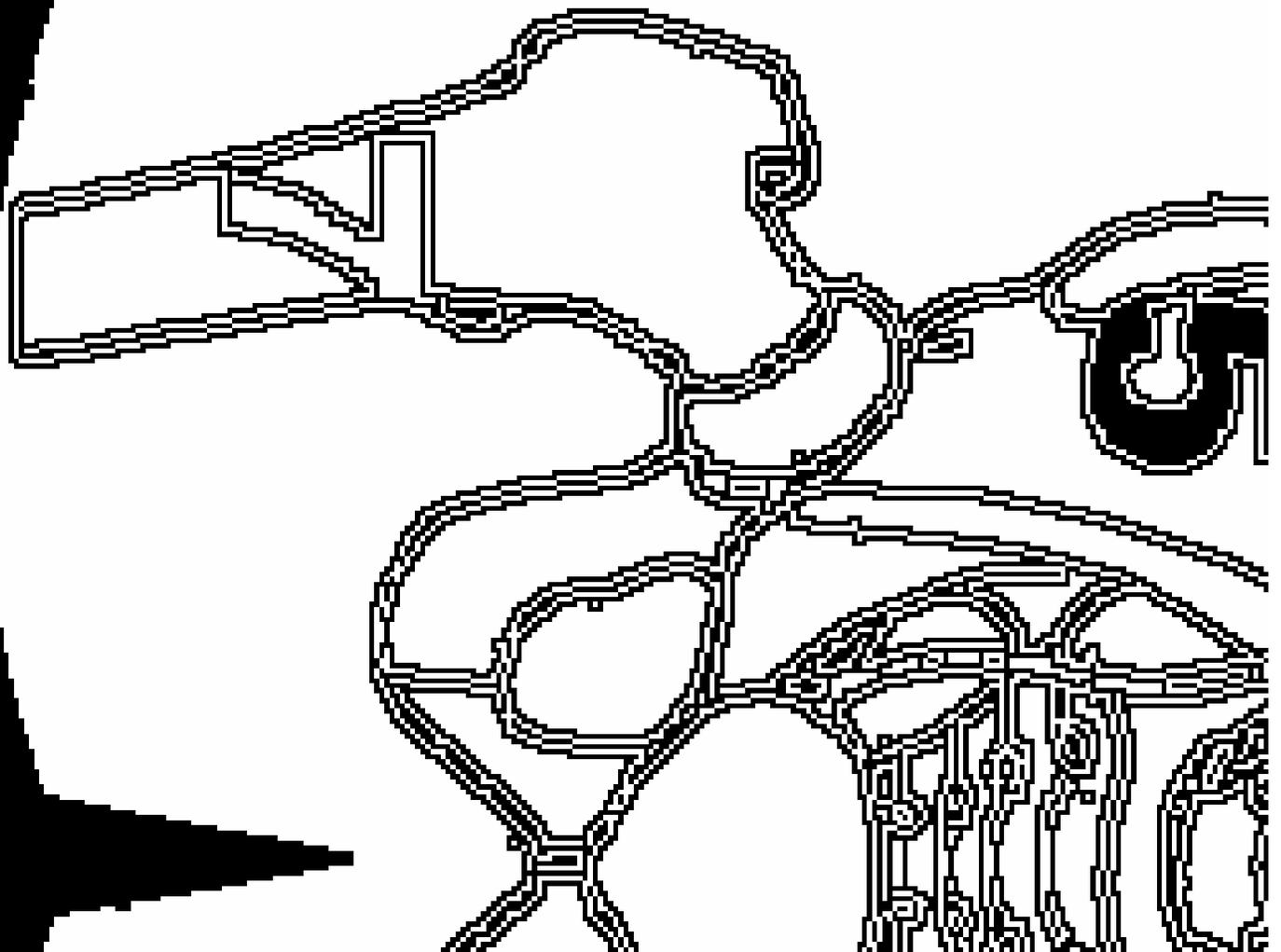


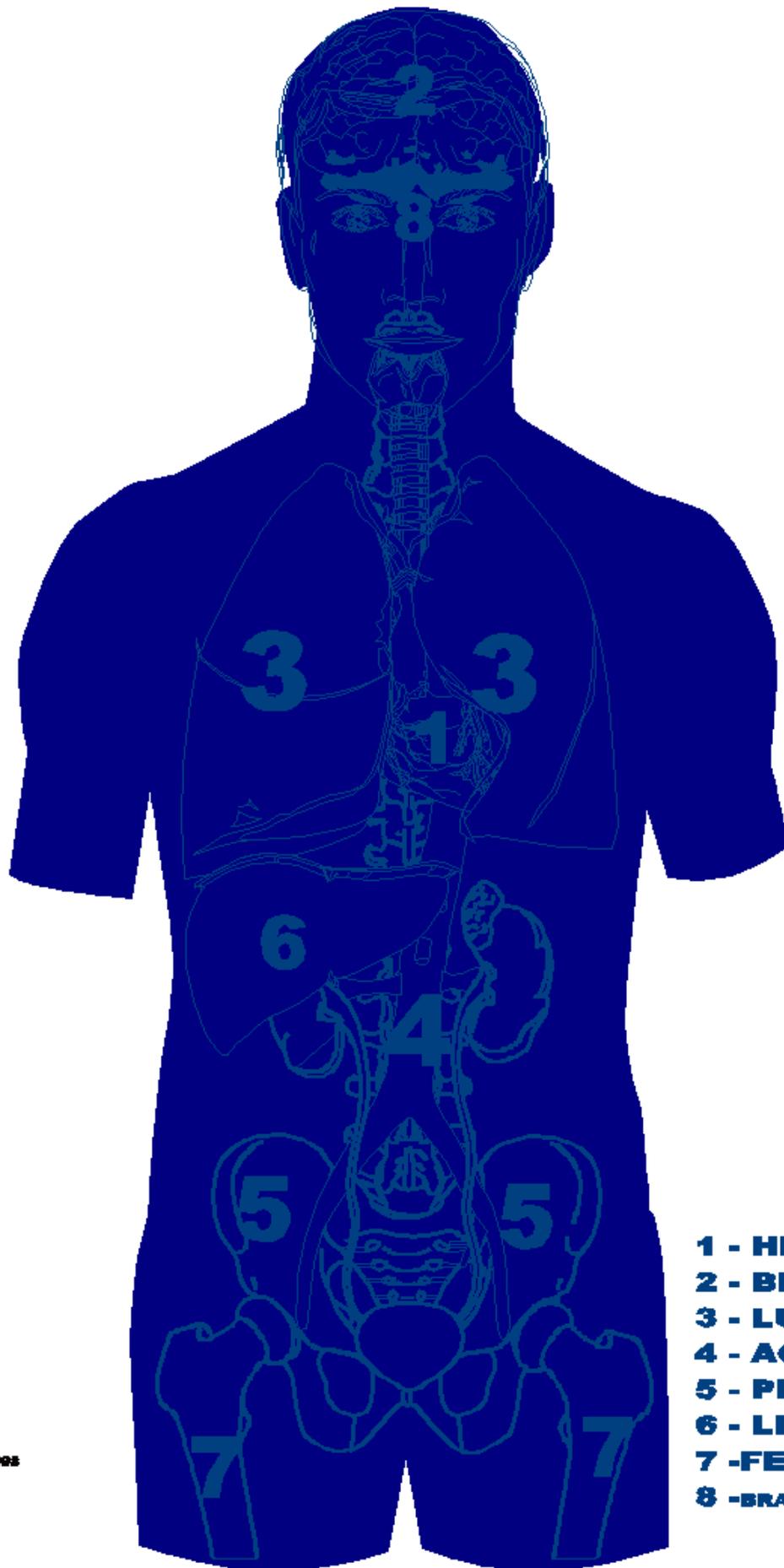






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- 2 - BRAIN _____
- 3 - LUNGS _____
- 4 - AORTA _____
- 5 - PELVIS _____
- 6 - LIVER _____
- 7 - FEMUR _____
- 8 - BRAIN STEM _____

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Brian J. Fehrele