

Second Edition, First Issue, Spring 2009

WARRIOR MEDIC

An Army Reserve Medical Command Publication



Professionally Managed Soldiers, Trained Warrior Medics, Army Medical Units Ready to Deploy

ARMY RESERVE MEDICAL COMMAND

Celebrates

2009 - The Year of the NCO



*Featured
AR-MEDCOM
NCO...*

*Staff Sgt. Danielle Primerano
Dental Hygienist &
NCO for the
7202nd Medical Support Unit,
Richmond Va.*

*“Army NCO —
No One is
More Professional
than I...”*

*“She put her commission on hold so she could
come to this AT as an NCO.”*

*Lt. Col. John S. Ferrara, Commander,
7202nd Medical Support Unit.*

*“I knew the paperwork could get messed up
if I took my commission before the mission and I
wanted to be here for my Soldiers.”*

Staff Sgt. Danielle Primerano





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Maj. Gen. Alan D. Bcll, DCAR

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Army Reserve Ambassadors are private citizens who serve the Army Reserve by establishing lines of communication with communities across the country. Ambassadors educate organizations, community leaders and citizens about the capabilities, skills and value of the Army Reserve. They also work with local leaders to recognize and support Army Reserve Soldiers and their families.

- Provide advice to the CAR, Commanding Generals and other Army Reserve Commanders. This includes, but is not limited to, public attitudes toward the Army Reserve.
- Maintain contact with commanders within their areas.
- Disseminate information about the Army Reserve's objectives, roles, requirements and major programs through speeches and personal contact with national, state, county and local leaders and elected officials.
- Provide advice concerning the development of programs and methods to attain maximum understanding and cooperation between the civilian community and the Army Reserve.



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Ambassador Program Coordinator,
Office of the Chief, Army Reserve
Army Reserve Communications,
Phone: 703-601-0871



To get more information on the Ambassador program, e-mail the Ambassador coordinator at ambassador@usar.army.mil.

Table Of Contents

Words from the Wise4-5

Expanding Readiness Capabilities6

Company Affirms Support of Reserve.....7

Panama Residents Benefit from Army Reserve Medical Training.....8

Reserve Surgeon Buried With Honors9

Commentary: Community Events

 Unite Civilians, Soldiers10

Historic Command Tenure Ends11

Soldier Saves a Life12

Officer Receives Leadership Award.....12

74-year-old Set for Another Combat Tour..13

An Optical Milestone13

Healing Iraq14

AR-MEDCOM Solder Helps Inaugurate New Commander-In-Chief.....15

'Paradise' is a Medical Nightmare for Some Locals16-17

Angels of the Battlefield18

Unit Trains Iraqi Nurses19

AR-MEDCOM NCO Feature Story:

 369th CSH NCOs.....20

'Combat Gynecologist' Returns21

At 52, Dallas Cardiologist Answered Call to Serve.....22

Soldiers Help Homeless Vets23

Commentary: A MER Can Help24

Yellow Ribbon Reintegration Program25

Bike Ride Unites Unit, Community26

AR-MEDCOM Soldier New MALO27



On The Cover:

Lt. Col. Thomas Murphy, a physician serving with the Army Reserve's 7202th Medical Support Unit, from Richmond, VA, examines Jeanette M. Fine, a North Shore area student during the free medical health clinic at the BYU-Hawaii. The clinic was organized in conjunction with the Kahuku Medical Center, in Kahuku, HI, the Hawaii Air National Guard, and the Hawaii State Department of Health to provide various medical and dental screenings to North Shore area residents during the "E Malama Kakou" (To Care for All) program during their recent annual training.

Do you have a story to tell?

The goal of the Army Reserve Medical Command's Public Affairs Officer is to feature stories in this publication that represent units from all over our command's region of responsibility. We are always seeking stories that would be of interest to our readers. Contributions are welcome. Story ideas as well as written articles and photos for consideration should be submitted to ARMED-COMPAO@usar.army.mil, or call 1-877-891-3281, extension 3730.



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Words from the Wise

From the CG...

I want to take this opportunity to thank each of you for your service to our country and the Army Reserve Medical community.

I also want to take this opportunity to remind each of you of the need for successful communication and email etiquette while we conduct our business.

Communication is the key to successful relationships, military missions and everything in between.

Very frequently problems are caused by the lack of communion or poor communication rather than true differences in philosophy or ideology.

As we are rapidly moving into the electronic age, email is a key component of our overall communication strategy. We need successful email communication and etiquette to convey our messages correctly.

It is essential that all communications, needing full distribution, make it down to the individual unit and Soldier level. Higher commands and senior staff must ensure that the messages intended for everyone, in fact reach each Soldier within their chain-of-command.

This headquarters and the Emergency Operation Centers (EOCs) that operate within it, distribute a lot of good material that each individual Soldier need to be aware of. Please ensure that this is happening.

At the same time however, you do not want to send your message 'to all' in AR-MEDCOM if not everyone needs the message. Send the email only to personnel having an interest in the correspondence being sent.

Do not 'reply all' with every email. Decide who needs to see your reply and send it only to them. This limits the traffic on the network, speeding it up, and limits the exposure of information to the wrong individuals.

When communicating through email, remember to use the proper etiquette to effectively convey your message.

Ensure your message is constructed in a clear, concise manner free of error in grammar, spelling and usage.

Your subject line should be meaningful and adequately identify the content or topic of the message.

Write out all of your acronyms and abbreviations the first time. Remember, not everyone is familiar with the same set of



acronyms you are and the message you are trying to distribute may be misunderstood if you do not spell them out.

Maintain a professional tone in all correspondences. Your language should be the same over the digital airwaves as it would be in person.

Refrain from using all capitals in your messages, unnecessary priority marks, and the sending copyrighted material without permission.

Finally, remember operational security (OPSEC) when you correspond via email. Do not send classified information over our traditional internet email system, utilize secure internet email addresses.

The freedom of information act permits the release of only certain Soldier data to the public and a non-secure email is in fact a public domain.

Limit what you send via non-secure methods.

As medical professionals we have access to Soldier's medical and personnel files. Let's ensure only those that need to see that information does. We can service the needs of our Soldiers while protecting their information.

**Maj. Gen. James Hasbargen,
Commanding General, AR-MEDCOM**

From the CSM...

Great NCOs "Lead by Example"

The two enduring expressions we use to define leadership in the Army don't quite define what makes an NCO a great NCO.

The acronym we use to define Army Values (LeaDeRSHIP: Loyalty, Duty, Respect, Selfless Service, Honor, Integrity and Personal courage) and the core concept of Army Leadership Doctrine (Be, Know, Do) are enduring because they work, but the one piece that's missing from both is buried deep in FM 6-22 (Army Leadership) and not mentioned at all in our values.

You can't learn about it in a book, field manual, or lecture; you must actually be part of the learning process. The quality is self-perpetuating and perhaps so basic it's forgotten in our texts, but any Soldier will tell you it's one of the strongest qualities in the NCO he or she admires the most. What makes an NCO great is his ability to "Lead By Example."

A shining example of this is an NCO you haven't yet heard of (though it's a safe



bet you'll read about him at some point in the future). U.S. Army World Class Athlete Program track and field Paralympic hopeful Sgt. Jerrod Fields is a leader at home, on the track, and within the wounded warrior community. He leads by example, and he does so effortlessly.

Fields lost a leg to an IED within months of enlisting in the Army. He didn't allow it to slow him down. He never regretted his decision to enlist, never allowed it to enrage him against the Army, God or Fate, and refused to wallow in what he couldn't do.

Instead, he started an amputee basketball team. He's actively involved in raising his pre-school daughters (in fact, he calls that his "real" job). He joined the WCAP Wounded Warrior Sports Program to be able to continue to actively compete in sports. And recently, he took his first swing at a golf ball.

"There comes a time in the sport where you're not even aware that you're an amputee or that you have a disability." Fields said after his first few balls on the driving range. "So when I got out here, especially when they taught me how to do the follow through and the turn, I forgot I was an amputee. I'm just like anybody else. Why can't I hit it? I felt equal. I felt like I was a golfer, and not an amputee."

Fields recently took part in the Army's First Swing program, which teaches golf professionals how to be inclusive to wounded warriors in their programs, and then assists wounded warriors with adapting their game to be able to play, regardless of their injuries.

Fields said taking part in sports beats being in a house depressed. He urges all wounded warriors to get out and have fun. But he doesn't just say it. He does it. He leads by example, just like the other instructors in the First Swing program—those training the pros. Every one of them has lost at least one limb on active duty, and they're currently touring the country bringing the program to as many wounded warriors as they can reach.

While he was, literally, the first Wounded Warrior to swing a club through the First Swing program, he's not the first to lead by example. However, the impact these men — including Fields — will have on the wounded warrior community is immeasurable.

It's a shining example of how important "Leading By Example" is to be a successful leader.

Maybe we should make the E in

Words from the Wise

LEADERSHIP stand for “lead by Example.”

Command Sgt. Maj. Roger Schulz,
CSM, AR-MEDCOM
With thanks to Mr. William Bradner.

From the Chaplain... We Can't Just Sit Here!

A few weeks ago, I was privileged to hear a minister tell the true story of a California man and his well publicized misadventure. It seems that 33-year-old Los Angeles truck driver Larry Walters was growing a little tired of his daily routine.

One day while sitting in his backyard he wondered what his neighborhood would look like from an aerial view. Larry's curiosity took over and he purchased 25 small weather balloons and tied them to his lawn chair.



The adventurer then secured his lawn chair to the ground and filled the balloons with helium. Being a quartermaster at heart, he took care of the logistics of his flight and packed peanut butter sandwiches, soft drinks and a “BB” gun that would control his altitude.

Larry would simply shoot the appropriate number of balloons to control his ascent and to descend.

After calling some neighbors together for what he judged to be a 100-foot ascent, Larry directed his neighbors to cut the lines securing him to the ground. He took off like a rocket, holding on for dear life; and was too afraid to let go of the chair in order to fire his “BB” gun.

The new pilot almost became an astronaut, climbing not only to 100 feet but to 10,000.

An inbound Continental Airlines flight radioed to Los Angeles International Airport that there was a man in a lawn chair in the flight pattern. Soon after, a helicopter saved the day and somehow got Larry Walters to the ground. Amazingly, when asked why he went on this crazy flight,

Larry simply responded “I couldn't just sit there.”

This adventurer teaches us a great lesson on life. We can actually learn from his rationale for releasing himself into the sky... He couldn't just sit there!

Change is all around us, always around us, always around all of us. No one is exempt. No organization or institution escapes. These are tumultuous days in our society, and in our Armed Forces. Flexibility, adaptability and a sense of adventure are a must for all of us. Our ties to the way things used to be are hard to cut sometimes, but it is certain that in order to meet our new requirements and opportunities, and in order to “fly” higher than ever before, there are some tie downs that have to be released. This truth is practical for our everyday lives, and an absolute necessity for our spiritual journeys in particular.

God's will is clear, and spoken by the Apostle Paul when he declares that he had learned to “forget those things behind” and to “reach for those things ahead.”

Larry Walters would agree- we can't just sit here.

Lt. Col. Ed Northrop,
Command Chaplain, AR-MEDCOM

From the Safety Office...

The Commanding General, AR-MEDCOM is the Safety Officer with ultimate responsibility for the safety of all AR-MEDCOM personnel; however, the management and reduction of risk is the responsibility of every leader in the chain of command. The overall mission of the Commanding General, AR-MEDCOM, the Command Sergeant Major, AR-MEDCOM and the AR-MEDCOM Safety Office is to preserve combat power and material assets thru the reduction of accidents.

The only way to ensure mission success is through education and training. The following safety courses are mandatory; Commanders Safety Course, Composite Risk Management, Vehicle Accident Avoidance and the Motorcycle Safety Foundation (MSF) course for all motorcycle riders prior to operating or registering a motorcycle on or off a DoD installation.

Courses are available through the Combat Readiness University (CRU) at <https://crc.army.mil>. For information on MSF courses, see the Additional Duty Safety Officer in your unit. As of July 2007, there were 33,425 motorcycles registered on U.S. Army installations. This shows that motorcycling has become a popular sport in the Army. With the rise of interest in motorcycles, the motorcycle accident rates have increased as well.

The AR-MEDCOM strives to keep accidental losses of manpower and materials to an absolute minimum; therefore, the Motorcycle Mentorship Program (MMP) was put in place throughout AR-MEDCOM in an attempt to reduce the amount of motorcycle accidents.

Another goal of the AR-MEDCOM commander is to foster mission accomplishment by recognizing excellence in both military and civilians in the organization and by motivating personnel to achieve and sustain high levels of performance and safe behaviors. The Commander's Annual Safety Awards Program recognizes a MSC, unit and the individual who achieves outstanding safety achievement. Nomination packets are voluntary, and must be signed by the MSC commander only. The nomination packet should include outstanding contributions to AR-MEDCOM Safety during FY08 and supporting documents should be included.

Our ever changing missions in the military takes us to different parts of the world and as you enjoy brief breaks from your regular duties, we must all continue to remain vigilant in terms of safety. Our goal remains no loss of life at anytime; but in preparation for the upcoming summer, I want us to join in a separate goal of not having a single fatality during the vacation season.

Sgt. 1st Class Donta Brown
Safety Office, AR-MEDCOM

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Expanding Readiness Capabilities

The Readiness Academy

Story by Col. Allen C. Schmidt, Deputy Commander, Readiness, Army Reserve Medical Command



PINELLAS PARK, Fla. - "We must continue the pace and expand our capabilities." That was the outcome of the strategy session held with the Medical Readiness and Training

Command (MRTC) and Maj. Gen. Richard A. Stone concerning the effects to Army Reserve Medical Command's (AR-MEDCOM) transformation. There is no doubt that the past year has been one of significant change for the AR-MEDCOM as it reduced its command footprint from 28,000 Soldiers to a population of approximately 10,000. This change affected the entire command to include the Deputy Commander for Readiness (DCR) which transitioned into the Director of Readiness (DOR), reducing its Medical Readiness Team personnel by 1/3rd.

However, the DOR retained the same mission of assessing and assisting mobilizing units from the entire inventory of all 260 medical MTOE (Modified Table Of Organization & Equipment) and TDA (Table of Distribution and Allowances) units.

The force, which is now broken into three two-star medical commands with the advent of the 3rd and 807th Medical Commands (Deployment Support) (MDSC), continues to support the Global War on Terrorism with the same operational tempo it has since the war began. The Medical Readiness Team (MRT) is the "first responder" of sorts for assessment and assistance support to units that have been selected (sourced) for mobilization and deployment for Operations Enduring and Iraqi Freedom, the Balkans, and CONUS (Continental United States) support base missions. A successful readiness improvement program requires the analysis, assessment, and assistance of all functional areas

including recruiting, retention, leadership, personnel, training management, and logistics (equipping and maintaining the force). This is accomplished by conducting both standardized assessments and by teaching, coaching, assisting and mentoring personnel at all levels of command.

To meet the high OPTEMPO, the DOR needed to expand its capabilities. Supported by Maj. Gen. Stone and Brig. Gen. David Smalley, the concept of developing a "Readiness Academy" to provide training, hands-on experience, and certification necessary to expand the MRT reach. The Readiness Academy was designed to provide both classroom and hands-on training. The DOR and MRTC built programs of instruction (POI) for each functional area involved in the readiness process. The classes were organized to reflect fundamentals of readiness assessment and detailed functional assessment and analysis. When the classroom portion of the training was completed, students began the hands-on lab portion of the instruction by actually performing the assessment and assistance on one or more local units. The areas of instruction included personnel, supply, maintenance, medical logistics, medical maintenance, training management, recruiting, retention, leadership, medical readiness, and clinical readiness. Also included were sessions on understanding the unit culture and leadership climate.

The first Readiness Academy, conducted in July 2008 in Fort Sam Houston, Texas was exclusive to the MRTC with the objective of augmenting the MRT with subject matter experts in most of the functional areas. The 228th Combat Support Hospital (CSH) hosted the lab portion of the training. The second Readiness Academy was conducted in November 2008 in

Independence, Missouri for the training of Soldiers from both MDSCs, AR-MEDCOM, and MRTC. The 325th CSH, 139th Medical Group, and 912th Dental hosted the lab portion of the training. One of the nine USARC Command Readiness Teams (CRT) also participated in the training. U.S. Army Medical Command sent a senior officer to observe the training.

Upon graduating from the Readiness Academy training, Soldiers are capable to augment both the MRT and the USARC CRT while providing their respective commands a fully trained and capable force to perform assessments and assistance visits for their down-trace units. The Academies trained over twenty-five Soldiers from the 3rd MDSC, 807th MDSC, AR-MEDCOM, and MRTC. With some additional training by the AR-MEDCOM MRT and practical application of their newly acquired skills during an upcoming unit visits, Soldiers of the MDSCs will be fully prepared to provide assistance and assessment support to their own units plus unique medical assessment skills to support to USARC's CRTs. MRTC Soldiers will participate in many assistance visits as members of the AR-MEDCOM MRT.

As they have done since the activation of AR-MEDCOM, the Medical Readiness Team and the entire DOR section, with supporting staff, search out new opportunities to support our mobilizing units to the fullest extent possible. Increasing capabilities by training and certifying additional subject matter experts was the objective of the Readiness Academies. The success led to the decision to conduct an academy every six months to keep skills current and train new incoming personnel. The next Academy is scheduled for August 2009 at the 75th CSH in Tuscaloosa, Alabama.

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Company Affirms Support of Reserve

HCA's TriStar Health System Continues Support of Guard and Reserve

Story and photos by Maj. William D. Ritter, Army Reserve Medical Command Public Affairs Office



BRENTWOOD, Tenn. - Calling employer support critical to maintaining the strength and readiness of the nation's National Guard and Reserve units, Brig. Gen. David Smalley, joined HCA/ TriStar officials to

witness their signing of the Employer Support of the Guard and Reserve (ESGR) Statements of Support.

Smalley, deputy commanding general for the Army Reserve Medical Command, traveled to Nashville to take part in ceremonies hosted at Hospital Corporation of America (HCA)/TriStar Health System offices.

The signing was a gesture on HCA/ TriStar Health System's part to reassure it's employees throughout Kentucky, Tennessee and Northwest Georgia of the organization's continued support of its employees who are Citizen-Soldiers.

"Their service certainly deserves the highest possible support and by signing these Statements of Support today we are reaffirming our company's long-standing commitment to support the Guard and Reserve," said Larry Kloess, president of TriStar Health System. "We are proud to support the men and women, and their families, who make significant sacrifices to answer our country's call to service."

Kloess was joined by twenty hospital CEOs within the HCA's TriStar Health System organization, all reaffirming their support of the nation's Guard and Reserve troops.

The signing continues the company's proud tradition of supporting our Citizen-Soldiers. According to Kloess, HCA was awarded the ESGR Above and Beyond award in 2005. That award recognizes organizations whose support of employees

who serve in the military, goes above and beyond the requirements set by law.

At HCA, while employees are deployed, they pay any difference between the employees's military and HCA salaries while continuing to provide insurance benefits for family members and accrue paid time off and seniority for the service member.

"Our Soldiers need to be able to serve their country with confidence and peace of mind, knowing their employment is secure when they have completed the job of serving our nation, said Brig. Gen. Smalley, "The events of today's signing are the type of support our Soldiers need from their civilian workplace."

Smalley was joined at the ceremony by Army Reserve Ambassador Dr. Sherman Reed and Joe Thomas, ESGR State Chairman.

According to Mr. Thomas, the Statement of Support program asks employers to recognize the critical role the



LEFT: Brig. Gen. David Smalley, Deputy Commanding General Army Reserve Medical Command, observes Larry Kloess, president of TriStar Health System, sign the company's ESGR Statement of Support during recent ceremonies in Brentwood, Tenn.

TOP: Smalley and Kloess pose with 20 CEOs of TriStar Health System's medical facilities, along with other local Tennessee service members. HCA TriStar Health System operates 14 facilities in three states and currently has 147 employees on military leave.

Reserve Components play in our Nations' defense and pledge support for their employees who participate as Citizen-Soldiers in our "community based defense force."

HCA TriStar Health System operates 14 facilities in three states. Many of its medical professionals also serve as Warrior-Citizens. Currently, 147 of their employees are on military leave serving their country, and fellow Soldiers around the globe in military healthcare facilities. They join the more than 600,000 Guard and Reserve Soldiers that have left their families and employers since September 11, 2001, to serve on active duty in the Global War on Terrorism.

Panama Residents Benefit from Army Reserve Medical Training

Story and photos by Sgt. 1st Class Dave S. Thompson, U.S. Army South Public Affairs Office



CANITAS, Panama - As the Medical Readiness Training Exercise, or MEDRETE, got underway Feb. 2, a long line of people waited patiently outside a grade school in this small, rural town for their turn to be treated by teams of Panamanian health officials and U.S. Army medical practitioners. Across the school playground, Army animal care specialists administered medicine, vaccine and vitamins to a steady flow of reluctant cats, dogs, rabbits, goats, cattle and horses. Children ranging in all ages ate snow cones and ran around playing tag as their parents looked on in curious anticipation.

The Soldiers are primarily members of the 7218th Medical Support Unit, an Army Reserve detachment from Louisville, Ky. They arrived here eight days ago for their two-week annual training as part of a U.S. Army South initiative to build hemispheric relationships with countries in Latin America and the Caribbean.

The chief benefactors, however, were the citizens of agricultural communities like Canitas, who have limited access to medical, dental and veterinarian facilities. Canitas is the final stop on the Soldiers' itinerary after completing MEDRETEs in the nearby towns of Torti and Paso Blanco.

A number of the Soldiers have performed this type of humanitarian mission before, while others, such as Pvt. 1st Class Lashawndra Conley, a patient administrator in her second year in the Army, are on their maiden assignment overseas.

"I am very excited to be here to meet these people and experience a new culture," said Conley. "This is also giving me a lot of

experience to sharpen my job skills. My dream has always been to work in the medical field and help people, and to see how my work is doing that here, that's the best part of all."

After passing through the welcome entrance where personal data and health concerns are recorded, patients move to the triage station where nurses evaluate their condition, take vital signs and give them

medicine, vitamins and other health items. From there it's on to the doctors who perform a basic check-up, prescribe medication and give advice and referrals as

needed.

Capt. Gigi Manuel-East, a triage nurse and 16-year Army veteran, is also on her first visit to Panama. The Kentucky native's infectious smile and warm personality kept everyone around her light hearted as she and her triage team-members fawned over the local babies and comforted the ones who were simply overcome by all the activity.

Patients were then directed to the dental treatment area where they underwent an oral examination. The dental area, equipped with two reclining chairs and tables laden with sterile dental tools, gauze pads and injection needles, was without a doubt the least favorite stop amongst those unlucky numbers requiring tooth extractions.

"We are only set up to do basic dental procedures here," said Capt. Kirk Yegerlehner, one of two dentists who, along with their assistants, worked tirelessly to

keep up with the steady stream of patients going through. "We're seeing a lot of tooth decay and gum disease from inadequate oral hygiene and inaccessible dental care. If a tooth is causing discomfort and is in poor condition, we will extract it to give pain-relief to the person."

The optometry area was a welcome site for those patients suffering from vision problems. Here, patients received an eye examination and were fitted with glasses on the spot. Many emerged from the room wearing their new glasses along with big smiles at their newfound ability to see things in focus.

The Army has designated 2009 as the "Year of the Non-Commissioned Officer" and NCOs from the 7218th have taken a leading role in ensuring their Soldiers get the quality training they deserve while providing a real-world humanitarian service to the Panamanian people.

"What happens on a lot of these missions is that the officers do the initial planning then they pass the baton over to the NCOs," said Sgt. 1st Class William Pierce, the NCO in charge. "Of all the missions I've been on like this, the NCOs basically run it, so it's good for the Soldiers to see that the NCOs are taking a lead position and we're running it. We're also taking care of the Soldiers."

In addition to the experiences gained from two weeks of treating some 400 animals and administering health care to more than 4,000 people, the Soldiers will return home knowing that their service benefitted the Panamanian people.

"Back home, we have so much and so many opportunities to walk into a doctor's office and receive medical care that it's easy to take it for granted," said Manuel-East. "A lot of these villagers haven't seen a doctor in several years, so it just makes me feel good that I'm actually doing something to help improve the lives of other people."



Villagers line up at the Climaco School in Canitas, Panama to receive free basic medical care from members of Panama's Ministry of Public Health and the U.S. Army's 7218th Medical Support Unit out of Louisville, Ky., during a Medical Readiness Training Exercise.



Army Staff Sgt. Christopher Mease, a Veterinary Food Inspector with the 949th Medical Detachment, Ames, Iowa, gives a shot of de-worming medicine to a villager's horse during a training Exercise in Canitas, Panama.



Staff Sgt. Selena McGee tests the eyesight of a Panamanian villager during a Medical Readiness Training Exercise in Canitas, Panama.



Army Capt. Allison Wright performs an extraction with Spc. Shawn Macintire, on a Panamanian boy during a Medical Readiness Training Exercise in Canitas, Panama.

Reserve Surgeon Buried With Honors

Army Reserve Doctor Killed in Action in Iraq

Story by Michael Matza and David O'Reilly, Philadelphia Inquirer Staff Writers



PHILADELPHIA. - In a far corner of a Cherry Hill cemetery, amid the doleful strains of Taps and sharp reports of a rifle-team salute, the U.S. Army posthumously awarded the

Bronze Star and Purple Heart to Maj. John Pryor, an Army Reserve surgeon killed in Iraq.

Pryor, 42, of Moorestown, N.J., head of the trauma unit at the Hospital of the University of Pennsylvania, was mortally wounded Christmas Day when a mortar struck near his quarters in Mosul.

He was also father of three young children, who sat at the graveside among hundreds of mourners at Colestown Cemetery. Lt. Gen. Eric Schoonmaker, surgeon general of the Army, knelt before Danielle, 10, Francis, 8, and John Jr., 4, and presented each with a folded American flag and a set of their father's medals and awards. He spoke quietly to the youngsters, who listened solemnly, without tears, while relatives behind them wept openly.

"He chose to give his life to protect his family and my family," Schoonmaker told everyone. "We will never forget him."

The Army also awarded Pryor the Meritorious Service Medal and the Army Commendation Medal, among more than a dozen decorations.

The flag from his coffin was given to his widow, Carmela V. Calvo, who sat with their children and her husband's brother and parents. Four helicopters flew over the grave, the last one peeling off in "missing man" formation.

Earlier, more than 1,300 mourners had filled the Cathedral Basilica of SS. Peter and Paul in Philadelphia for the funeral. They heard the Rev. Damian McElroy, pastor of Our Lady of Good Counsel, Pryor's home parish in Moorestown, deliver a eulogy tinged with sorrow, but also with recollections of joy.

"We called him by many names - John, Johnny, JP, Baby John, Dr. John, Maj. Pryor," McElroy said. "He was known by many names, and blessed by many friends."

Pryor was serving his second tour as a reserve officer in Iraq when he was killed while stationed with a risky frontline surgical hospital.

The tear-stained faces in the cathedral

included uniformed officers from every branch of the military, as well as staff from emergency medical services throughout the region.

McElroy said Pryor was a beloved son, husband, father and friend who from his earliest days near Albany, N.Y., as a Boy Scout, through his service as an emergency medical technician and later as an accom-



plished surgeon, took to heart the old scouting Order of the Arrow creed to help others and live selflessly.

"In John's mind," McElroy said, "you never waited for others to do what you could do."

McElroy recalled how Pryor rushed to New York City to offer his services as a surgeon on the day of the 9/11 attacks. Initially, he was asked to wait in a room at St. Vincent's Hospital with hundreds of others doctors.

"John didn't wait to be called," McElroy said. He went outside, flagged down a passing ambulance, hitched a ride to Ground Zero, and began to act."

Pryor met his future wife in medical school in Grenada. He was a casual every-

day student who was brilliant on exams. She was a star pupil who struggled with big tests. They married in 1985, did their medical residencies in Buffalo, N.Y., and moved to Philadelphia in 2001, a year after their second child was born.

She described him to others as her "one and only."

A dedicated doctor, Pryor also loved to snuggle in bed with his children, watching cartoons and surrounded by the remnants of the pizzas they loved to share.

"He had a personality that would light up a room and light up others emotionally and intellectually," McElroy said. "He was a great teacher . . . but without haughtiness. He was approachable."

In 2004, Pryor made the difficult decision to join the Army Reserve.

"He was concerned about the Soldiers and wanted to save lives," McElroy said. In addition to getting basic weapons training, Pryor took the trouble to learn Arabic.

His first tour of duty in Iraq lasted four months.

He returned to Philadelphia energized but also "guilty that he was living his life in comfort and wasn't over there saving lives," McElroy said.

To love, to serve, and not to count the cost - that was how colleagues remembered Pryor.

So, few were surprised when he shipped out again on Dec. 6, although many of those closest to him wished he hadn't. In a letter he left to be read posthumously, he asked for their understanding and forgiveness.

Outside the church, Dr. Iris Reyes of HUP's emergency medical department said medicine was more than Pryor's profession, it was his calling. And he imparted this message to his students: "You're not going to [the hospital] to work. You're going there to serve."

"He mastered everything that he touched," said Rear Adm. Kenneth J. Braithwaite II, vice chief of information for the Navy, who came from Washington to attend the funeral. "We've lost a lot of people in this war. Each death is a sad loss to the nation. But the special gifts that John possessed makes his loss seem that much sadder."



Commentary: Community Events Unite Civilians, Soldiers

All-American Bowl Premier Community Event

Story and photos by Master Sgt. Enid Ramos-Mandell with Maj. William D. Ritter Army Reserve Medical Command Public Affairs Office



SAN ANTONIO - Calling it the Army Reserve's foremost showcase, Army Reserve leaders brought Soldiers, students and community members together for a one-week extravaganza called the All-American Bowl (AAB). The event showcased America's premier high school football talent, some of whom will go on to college and even pro careers in the sport.

More importantly the AAB showcased the Army Reserve to the potential Soldiers of tomorrow; It highlights the careers,

Star, Distinguished Flying Cross, Bronze Star or the Purple Heart during the Global War on Terrorism. They were lauded for their sacrifices in front of 32,000 football fans, but more importantly in front of a demographic so often in need of a hero or maybe even a role model. Who better than our men and women in uniform that live, walk and breathe the Army values.

During the week leading up to the football game, the Army Reserve set up booths manned by Soldiers with knowledge to share. They were not recruiters, they were everyday Soldiers who already enjoy what the Army Reserve has to offer and can share their experiences with anyone who approached their booth.

The Army Reserve has over 100 military occupational skills, and while not all were represented, the attending populous was able to get a good flavor of the job skills available.

There was also equipment on hand for visitors to climb over, experience and have fun with, giving them some insight to what Soldiers work with.

And while the AAB events brought national high school football talent to the Alamo Bowl here, and the events leading up to the game have a feel and flavor of a mini Super Bowl week, an event like this could have been planned at any level, in any town, across America.

Every town in America has a sports team of some type; or a fair, parade, carnival, farm show, career

day, car show, boat show, hog show or any countless number of other events that could be utilized like the AAB.

Engage the community around you at these events. It helps the community understand what the Army Reserve does and it helps get our Soldiers publically recognized for their volunteer service.

In these trying economical times, many students (and parents) will need aid paying for college. Many students will be trying to figure out what they want to do with the rest of their lives.

Reach out to them.

Let your Soldiers of today reach out to potential ones of tomorrow. The venue size does not have to be as large as the Alamo Bowl, as a matter-of-fact, it could be as simple as a parking lot.

As long as you have hardworking Citizen-Soldiers willing to share their knowledge and experiences with fellow Americans, it will help that citizen and community learn more about their Soldiers, their mission and the Army Reserve.

It might also help get a new Soldier.



Members of the Central Medical Area Readiness Support Group display medical life saving techniques at the All American Bowl community event in San Antonio.

financial and educational benefits of the Army to the parents of our nation's young adults; and it brings today's courageous Soldiers and war heroes in front of the community, earning them the praise they deserve.

Eighty-five such Soldiers were celebrated. All of whom were awarded the Silver



Civilians get an opportunity to experience life in the Army Reserve at community events, interacting with Soldiers and their equipment.

Historic Command Tenure Ends

First Female Army Reserve Medical Brigade Commander Leaves Command

Story and photos by Maj. John Heil, 332nd Medical Brigade Public Affairs Office



NASHVILLE, Tenn. - The first female commander of the 332nd Medical Brigade (MED BDE), Brig. Gen. Margaret Wilmoth, formally handed over command to Col. James Snyder at the Gaylord Opryland Resort on Saturday, September 13.

Brig. Gen. Wilmoth started her command of the 332nd MED BDE when she was a Colonel in December 2003. "I was an interim commander of the Brigade, while our CG was deployed, until January 2005" said Wilmoth, "Then I became full-time commander as a Brigadier General in May 2005."

Wilmoth was presented the Legion of Merit by Maj. Gen. James Hasbargen, commander Army Reserve Medical Command, after the change of command, for her meritorious and distinct service as commander of the 332nd Medical Brigade.

Brig. Gen. Wilmoth commanded the Brigade until July 2008 and then accepted a position as the Assistant for Mobilization and Reserve Affairs with Force Health Protection and Readiness for the Office of the Assistant Secretary for Health Affairs. She was the first female and Army Nurse Corps Officer to command an Army Reserve Medical Brigade.

During her tenure of command, Wilmoth commanded all Reserve medical units in the Southeastern United States to include Puerto Rico.

"I am proud of our Soldiers who demonstrate their patriotism and devotion to duty by following through on their commitment to serve whenever and wherever called by their country," said Wilmoth, "We are blessed to have Soldiers who love their country enough to be willing to make the ultimate sacrifice

and wear the uniform of our country."

The Brigade participated in many exercises throughout Wilmoth's command and deployed troops around the globe in support of the Global War on Terrorism and humanitarian missions.

Col. James W. Snyder took over as interim commander on July 2.

As Wilmoth leaves the 332nd MED BDE, she expressed having fond memories. "Every moment with our Soldiers was a proud moment," said Wilmoth, "But I would say that welcoming our returning Soldiers from deployment and thanking them and their families for serving our country has been my proudest."

"There is a special bond among those of us who serve, which surpasses the bonds we have with colleagues in civilian careers," said Wilmoth, "While I was in command and ultimately responsible and accountable, leadership doesn't happen in a vacuum and I had an outstanding staff, subordinate commanders and NCO's who supported our efforts."

"I am also proud of the work done by my Brigade staff and leaders throughout the command who ensured that our units and Soldiers were ready to deploy when called," said Wilmoth.



Command Sgt. Maj. Donnie Montgomery, 332nd Medical Brigade command sergeant major, hands Brigade colors to Brig. Gen. Margaret Wilmoth, 332nd Medical Brigade commander, as she prepares to formally hand over the command on Saturday, September 13, at the Gaylord Opryland Resort in Nashville, TN. Maj. Gen. James Hasbargen, Army Reserve Medical Command commander and Col. James Snyder, incoming commander of the 332nd Medical Brigade observe and prepare to receive the passing of the Brigade colors.

Wilmoth inducted into American Academy of Nursing



SCOTTSDALE, Ariz. - Brig. Gen.

Margaret C. Wilmoth, former commander of the 332nd Medical Brigade in Nashville, Tenn., was formally inducted into the American Academy of Nursing as one of its 2008 new Fellows and selected by the Academy's Fellow Selection Committee for her outstanding achievements as a leader in the nursing profession.

Wilmoth, who holds a PhD, is a professor at the School of Nursing, College of Health and Human Services at University of North Carolina, Charlotte. She was inducted as a fellow with 92 other nursing leaders during the induction ceremony.

"In the Academy's constitution, one commitment is to anticipate national and international trends in health care," said Wilmoth, "and address resulting issues of health care knowledge and policy."

The fellowship induction recognized Wilmoth's and fellow health care leaders' accomplishments within the nursing profession. It also affords them as well as other nurses the opportunity to work with other leaders in the health care industry to address health care issues of the day.

Wilmoth is a graduate of the University of Maryland, with a Bachelor and Master of Science in Nursing. She received her doctoral degree from the University of Pennsylvania and a Masters Degree in Strategic Studies from the United States Army War College. Dr. Wilmoth, also a Registered Nurse, is engaged in teaching across the nursing programs and conducting research in the area of psycho-social oncology.

She is currently assigned to the Office of Assistant Secretary of Defense for Health Affairs, and recently completed her tenure as Commanding General, 332nd Medical Brigade. As commander, Wilmoth was the first nurse in the history of the U.S. Army to command a medical brigade. She commanded more than 6,000 Soldiers assigned to 59 units across the southeast and Puerto Rico, and ensured their readiness for mobilization and deployment.

Soldier Saves a Life

Story and photo by Maj. John Heil, 332nd Medical Brigade Public Affairs Office



NASHVILLE, Tenn. - On November 16, Pfc. Dustin Hayes, 332nd Medical Brigade Soldier, was awarded the Army Commendation Medal for saving the life of six-year old Jayden Stine.

Hayes, a convenient store clerk at the Comet Mart, in Bucksport, Tenn., spent a normal October 10 working when he noticed a commotion near the gas pumps and proceeded to help.

"My children and I went to the Comet Mart where Dustin works," said Carol Stine, Jayden's mom, "I went in the store to pre-pay for gas and I came out and started pumping gas while my children were goofing off."

"They were knocking on the window and waving to me," said Stine, "We kept doing it for a few minutes then all of a sudden they stopped I waited for a minute and went to the driver's side and noticed that Jayden was choking I asked him if he was OK and he didn't answer me."

"I immediately jerked open the back door of my van and pulled him out of his car seat," said Stine, "and started giving him the Heimlich maneuver."

"He was not responding to it and he was reaching for me wanting me to pick him up," said Stine, "I told him to hang on I was trying to help him and that he was going to be OK."

Stine said she made several attempts to give Jayden the Heimlich maneuver but he was not responding to it.

"He was reaching out to me," said Stine, "By this time Jayden was turning blue and drooling and I started to panic."

Stine indicated that she was hollering, but that people that she had known for years must have thought they were playing and walked right by ignoring her calls for help.

She continued trying to dislodge whatever was stuck in Jayden's windpipe and get help but was unsuccessful while trying to get someone to help her.

Stine said she ran toward the store and almost made it to the door when she saw Hayes coming towards them.

"I thought I just ran outside," said Hayes, "but the next day one of my cus-

tomers said to me, I didn't realize you could jump over that counter."

"He (Hayes) immediately seen that Jayden was choking," said Stine, "and that we were panicking and he started to help us."

Stine said Hayes grabbed Jayden and started the Heimlich maneuver and was getting no response so she hollered for other people to call 911.

"Dustin continued trying everything for Jayden," said Stine, "and finally got his gum to come out." "He never gave up until Jayden started crying and was able to breathe again."

"I don't consider myself a hero," said Hayes, "Anyone in the unit would have done the same thing - it just happened to be me."

Hayes was awarded the ARCOM for meritorious service and heroics in saving the life of another. "He is a true hero said, Col. James Snyder, 332nd MED BDE commander, "and is an example for others to follow-we are proud of him."



Pfc. Dustin Hayes is congratulated after being awarded the Army Commendation Medal on November 17 in Nashville, Tenn.

Officer Receives Leadership Award

AR-MEDCOM Soldier Receives MacArthur Leadership Award

Story by Master Sgt. Enid Ramos-Mandell, Army Reserve Medical Command Public Affairs Office. Photo courtesy of DA Public Affairs



PINELLAS PARK, Fla.- Outstanding achievements landed an Army Reserve Medical Command Soldier (AR-MEDCOM) a nomination as one of the outstanding young leaders in the Army Reserve.

Capt. Robin M. Ruybal was nominated for Gen. Douglas MacArthur Leadership Award (GDMLA) due to her outstanding achievements as company grade officer.

Ruybal served as the initial headquarters commandant of the AR-MEDCOM when it activated in 2005. She served in that capacity for over for two years and was instrumental in the development of the new headquarter's company responsible for supporting over 27,000 Soldiers throughout the United States.

Only four Soldiers are nominated throughout the entire Army Reserve, and Capt Ruybal's nomination was a first for AR-MEDCOM.

The Gen. Douglas MacArthur Foundation, in coordination with the Department of the Army, established the Gen. Douglas MacArthur Leadership Award program 21 years ago to recognize company grade officers (Lieutenants, Captains, Warrant Officers One and Two) who demonstrate the ideals for which MacArthur stood; "Duty," "Honor," "Country."

After Ruybal found out she was selected as one of the four ARS, said, "I was very humbled that my contribution were so highly appreciated and acknowledged."

She believes that her accomplishments successfully leading this new functional command from its inception led to the commendation of this award, but also believes she had a good support team.

"While I am thankful for this award, a leader is only as good as the Soldiers around them and I had some excellent Soldiers supporting me during the activation

of AR-MEDCOM," said Ruybal. "I am thankful for all the assistance I received."

Every calendar year, Headquarters, Department of the Army (HQDA) releases an Army wide message to Commanders to nominate company grade officers who have proven to be outstanding junior leaders in their commands for the prestigious GDMLA.

Ruybal added, "One hundred percent 'leadership' and caring for Soldiers are the ideals that this award stands for, this Army's most valuable asset. Quality leadership of Soldiers makes our Army the finest in the world."

The GDMLA competition is open to Active, Guard and Reserve Component company grade officers.



74-year-old Set for Another Combat Tour

Reserve Doctor Volunteers for Third Tour- Spent Time with Saddam

Story by Moni Basu, The Atlanta Journal-Constitution



ATLANTA - John Burson waited a lifetime to go to war, and when he did, he returned to Georgia with a whopper of a story.

Four years ago, at 70, Burson - an ear, nose and throat specialist from Carrollton and a retired Army Reserve lieutenant colonel - volunteered for a three-month combat tour in Iraq.

For two weeks, he was assigned to examine none other than Saddam Hussein while the Iraqi dictator was awaiting trial for war crimes.

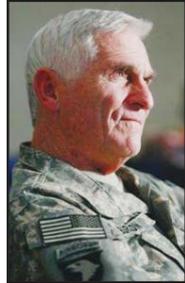
Burson, now 74, and on his third combat tour, said he was aware of Saddam's ruthless ways but, under the circumstances that the two men met, the dictator was an affable guy.

"He was very interesting, sort of like Bill Clinton," Burson said in an interview.

Charismatic and savvy, Burson described him.

"He really loved the Americans," he said. "He knew they were his best hope for survival. He was sanguine. He could be phony about things when he needed to be."

Burson spent 12 hours a day watching Saddam. It was a fitting assignment for the Georgia man who longed for adventure.



Lt. Col. John Burson

Burson grew up in a modest home in Carrollton. He knew engineering would be big after the Russians put up Sputnik, so he earned a Ph.D in chemical engineering from Georgia Tech. But when he was 37, he entered medical school at Emory University to pursue his dream of becoming a doctor.

Before all that, he became a commissioned officer in the Army Reserve but never got called up. He missed Korea and Vietnam and finally hung up his uniform in 1985, thinking he would never see a battlefield.

With the Iraq war raging in 2005 and the Army in need of medical personnel, Burson heeded an inner calling.

"I'm a kid from the Deep South. I lived through tough times and made it," he said. "I lived the American dream. Other people made the sacrifices."

Lt. Col. George Wright, a Pentagon spokesman, said Burson is one of the oldest to volunteer, but the Georgia doctor met the requirements, including the Army's physical fitness test.

He went through a mini boot camp at Fort Benning before boarding the plane for Afghanistan. It's his third overseas deployment - Burson did a second stint in Iraq in 2007.

The doctor acknowledged the deployment

to Afghanistan would be particularly challenging because he asked to be assigned to an infantry unit in the storied 101st Airborne Division.

"When you're 70, where are you going to find that kind of excitement?"

Burson first met Saddam in December 2005, a week into a hunger strike started by the dictator. He recalled that Saddam threatened to continue not eating until he saw Burson take out a feeding tube to be inserted into his throat.

"He decided he didn't need it," said Burson, one of several U.S. military doctors who examined Saddam and spent 12 hours a day with him for two weeks.

Burson read his medical books and tried to make the time go by. Sometimes, the two men talked.

The Iraqi dictator spoke English well enough but wrote love poems in his native Arabic for some of the British nurses.

"Under those circumstances, he was likable," Burson said.

Burson spent most of his time in 2005 at Ibn Sina, the combat hospital in the Green Zone. He went back one time to visit Saddam during his trial for crimes against humanity.

Saddam recognized the septuagenarian. The dictator, soon to be sentenced to death, told the doctor: "I'm glad they sent me a guy with gray hair this time."

An Optical Milestone

Reserve Sergeant Keeps Troops Seeing Clearly

By Bill Shea, Messenger Staff Writer



FORT DODGE, Kan. - Hundreds of American Soldiers in the Middle East have a clear view of the world, thanks to the work of a Fort Dodge Reserve Soldier and her team.

Army Reserve Sgt. Katrina Waynar is the optical lab technician in charge of production at a facility in Qatar that makes eyeglasses for the troops.

Earlier this month, her lab reached a milestone when it completed its 1,000th pair of glasses.

For Waynar, ensuring people can see properly is more important than racking up big production numbers. She described helping others as the most rewarding part of her job.

She is a member of the 388th Medical Logistics Co., based in Fort Hays, Kan. Her Army Reserve service began on Feb. 7, 2002, months before she graduated from high school. In April, she re-enlisted for another three years.

Her unit deployed to Camp As Sayliyah in Qatar to work at the U.S. Army Medical

Center Southwest Asia.

"When we first arrived, we had a small building with a short supply of materials and no hard-wire electrical power or network access," Waynar said.

"We needed to put this new lab together," she said. "Once it was finished, we started to take on more and more work by reaching out to units elsewhere. With the help of Area Support Group Qatar and the installation commander, many have been surprised by what we have made available.

Waynar added that it's safe to say that her lab has the largest supply of eyeglasses frames in the Middle East.

That lab serves Camp As Sayliyah and a nearby air base. It also helps with the workload of other military optical labs in the region. Additionally, it serves troops rotating

through the camp for rest breaks.

"Some people lose their glasses,"

Waynar said. "Many get destroyed. We try everything to find their prescription, which is easily available for all glasses ordered through the military. Lenses are made based on the service members' most recent prescription."

Lt. Col. Scott

Carpenter, the commander of the Army Medical Materiel Center Southwest Asia, said that Waynar and her fellow non-commissioned officers have really raised the bar in efficiency there.

Waynar's unit will return to the United States late this summer. When that happens, she'll get back to a civilian life that she hasn't really experienced since graduating from Iowa State University in July 2007. Two weeks after getting her bachelors degree in biology, she went on active duty.



Sgt. Katrina Waynar, from Fort Dodge, Kan., prepares a glass fabrication process at Camp As Sayliyah. She is the 388th Medical Logistics Company optical lab technician overseeing lens production at the Qatar facility.

Healing Iraq

“Good Cases, Where You Feel Like You Made a Difference, Carry You Through”

Story and photo by The Tribune (San Luis Obispo, Calif.)



SAN LUIS OBISPO, Calif. - Jim and Jessica Malone celebrated their sixth wedding anniversary separated by a 10-hour time difference and nearly 7,900 miles of ocean and sand.

Jim sent flowers and a life-sized photo of himself to the San Luis Obispo office where his wife works as a cardiologist nurse practitioner. She mailed a collage of wedding pictures to her husband, stationed in Iraq.

“Deployments are tough. They’re not easy,” said Jim Malone, a hematologist based on the Central Coast. “It’s getting harder and harder to do as time goes by.”

A 12-year veteran of the U. S. Army Reserve, Jim recently spent four months at Camp Bucca in southern Iraq, where he supervised medical care for 20,000 Iraqi detainees.

Pairing military service with a medical practice is

a tough job, Malone said, with long hours, miserable weather and constant danger. Still, he’s willing to undergo such hardships for the sake of his country and his mission to heal.

“I’m not a trigger puller. I’m not a war fighter. This is how I fight. I cure people,” Malone, 40, explained.

“As physicians, we help. Being in uniform you get to help a different way,” explained Dr. Lewis Gamarra, an internal medicine specialist based in Los Osos. He retired from military service in April after 24 years with the Army Reserve.

“It’s been a very rich experience because you meet a lot of people,” Gamarra said.

At the same time, military service can mean personal and professional hardship.

“We all know what we’re volunteering for but at the same time we make sacrifices,” Gamarra said.

Looking back, the military was always in Jim Malone’s future.

His father, a Vietnam War veteran, spent three decades with the U. S. Air Force.

“I always knew I’d serve,” said Malone, who grew up in Nebraska. “I owe the country and its people something for everything I’ve got.”

He and a friend joined the Army Reserve while attending medical school in Omaha, lured by the promise of travel, adventure and training.

Malone moved to California in 1998 to study blood and bone marrow diseases. He spent five years as a full-time faculty member at Stanford University, where he met his future wife.

In October 2005, he and Jessica—who grew up in Arroyo Grande—moved to Atascadero.

Jim Malone set up shop in San Luis Obispo. He shares his cancer care practice with doctors Thomas Spillane and Deborah Villa and physician’s assistant Tim Soucek.

Many of the patients at Oncology/Hematology Medical Associates of the Central Coast need complicated, long-term care, so it places a strain on the

practice when Malone leaves.

Still, Spillane said, he’s supportive of his fellow physician.

“He believes that’s the best way to win over the hearts and minds in that part of the world,” the oncologist said. “That’s the way he approaches fighting that battle - treating those people with passion and respect and dignity.”

Over the past decade, Jim Malone has been stationed in the Balkans twice on NATO peacekeeping missions.

For his first tour in Iraq, Malone was assigned to a military police battalion from Tennessee as a surgeon. The unit was deployed in last year.

Malone remembers plenty from his four months at Camp Bucca.

In the mornings, he’d don 20 to 45 pounds of body armor and walk to work in dusty, windy heat that would soar to 110 degrees by 8 a. m.



At first, he spent four or five weeks as a doctor “on the wire”—or, within the concertina wire garlanding the camp’s compounds - caring for about 2,000 detainees. During biweekly clinics, he’d diagnose and treat everything from bumps and bruises to diabetes and high blood pressure.

After that, Malone took over as the officer in command, supervising 16 doctors and 100 medics. Collectively, they provided medical care for detainees housed in an area covering a square mile.

One of his pet projects was implementing an electronic system to better manage detainees’ medical records.

According to Malone, the camp’s inmates ranged from dangerous “bad guys” with ties to terrorist organizations to simple folks trying to feed their families.

“Some of them come in with a sense of ‘Oh man, I’m in trouble,’” he said, terrified by reports of abuse and torture at Abu Ghraib prison and other detention facilities.

At Camp Bucca, “I saw zero abuse. Zero. And I saw everything there,” Malone said.

What he did witness were constant brawls and turf wars between detainees, which often resulted in injuries, even deaths.

There was also the threat of outside attacks.

“There were occasional bullets that would just drop out of the sky,” said Malone, adding that no mortar and rocket attacks occurred during his tour there.

Meanwhile, Malone and his wife, Jessica, corresponded via e-mail and phone calls just a few minutes long.

Every day, Jessica sent packages stuffed



Dr. (Maj.) Jim Malone hugs his wife, Jessica, upon arriving last month at the airport in San Luis Obispo after a four-month tour of duty in Iraq.

“I’m not a trigger puller. I’m not a war fighter. This is how I fight. I cure people.”

Dr. (Maj.) Jim Malone

with Gatorade, Pop Tarts and magazines devoted to her husband's hobby, flying small aircraft. "That was my lifeline" during a difficult time, she said.

"We do everything together. We commute to work together, eat lunch together, exercise together," the 34-year-old woman said. "Your whole life, (he's) your best friend. Your buddy. You do everything together and then one day, he's gone."

During Jim's absence, she focused on household projects: refinishing the deck of their Atascadero home and planting a garden.

Jessica Malone also fielded questions from some about her husband's purpose overseas.

"People think he chooses to go. He has to go ... He's serving the country as a physician," she said, adding, "That's why

we're both in the medical field-to serve others."

As a commissioned officer who has served his obligatory eight years, Jim Malone has the option to leave the Army Reserve at any time. Although he's sometimes frustrated by bureaucracy and mounting requirements, Malone said he has no current plans to leave the military.

"Whenever (that happens), I do feel very strongly that I've done my part," the physician said.

Jim Malone said he hopes to change the minds of those who view the United States as the enemy. "Medicine's the great equalizer. We all want to be taken care of," he said.

So "whether you're good, bad or indifferent, we're going to take care of you, treat you with respect and provide you with good

medical care," he added.

For the hematologist, that mission included passing out toys, snacks and school supplies to the families of detainees, and treating Iraqi civilians seeking medical aid.

During his stay at Camp Bucca, Malone got a call about a 2-year-old boy covered with second-degree burns from hot water. "He had tried to go to the hospital in Basrah and they sent him away," the doctor recalled. The American military flew the boy to Baghdad, where he received skin grafts and made a full recovery.

"Things like that are really rewarding ... It makes your whole mission," Malone said.

"You get a few good cases or situations where you feel like you made a difference and it carries you through."

AR-MEDCOM Soldier Helps Inaugurate New Commander-In-Chief

Meeting President-elect was a 'Once-in-a-lifetime Experience'

Story by Maj. William D. Ritter, Army Reserve Medical Command Public Affairs Office, DoD Photo



PINELLAS PARK, Fla. When 1st Lt. Michael Meyer of the Army Reserve Medical Command looks back to President Barack Obama's inauguration, he will certainly

remember some of the dignitaries and war heroes he met as part of the Public Affairs team in Washington. But I am sure his most vivid flash back will be when the man of the hour, then President-Elect Obama, stopped by his offices and personally thanked him for his hard work.

Meyer met Obama on Jan. 8 while serving as part of the Armed Forces Inaugural Committee. Obama shook Meyer's hand, along with all the members of the committee during a surprise visit to their headquarters.

Meyer recalls what the 44th president told committee members.

"Thank you for all the hard work you are doing here. My staff, my family, and I really appreciate it. I think the event is going to go well. It might be a little cold, but I'm sure everything is going to turn out just great."

Meyer called the meeting with Obama an "once-in-a-lifetime experience."

"I will never forget meeting the President of the United States," said Meyer. "It is an honor and a privilege to be a part of the planning during this historic event. The Army has given me many opportunities over the years, but this has to be the best of

them."

Meyer was assigned to the inaugural committee in December. While in Washington, his responsibilities include seating the 25,000 VIPs on the White House's west front lawn including 47 Medal of Honor recipients and a number of Tuskegee Airmen. He was also responsible for training the joint ushers in public affairs and media affairs to help promote positive media coverage of the committee and the Armed Forces involvement.

Meyer said he is optimistic about Obama's upcoming term.

"I am convinced President Obama will successfully guide America through the difficult times ahead," he said. "Because, I have confidence in the spirit of the American people, that we will pull together during difficult times and confront the challenges that face us," he said.

The Armed Forces Inaugural



Committee carries on the tradition of honoring the new commander-in-chief by providing military ceremonial support during the inauguration. The tradition dates back more than 200 years.

Meyer is assigned as the Broadcast Officer in the AR-MEDCOM Public Affairs Office. He volunteered for the two month tour to get additional public affairs experience.

Volunteer tour opportunities, such as this, are posted at the Human Resources Command (HRC) website.



Captains Dale K. Fitzke (left) and Wanda Harrel-Mitchell, members of Army Reserve's 7202nd Medical Support Unit, from Richmond, VA, provide no-cost eye screening for North Shore area residents during the free medical health clinic at the BYU-Hawaii. The clinic was organized in conjunction with the Kabuku Medical Center, in Kabuku, HI, the Hawaii Air National Guard, and the Hawaii State Department of Health to provide various medical and dental screenings to North Shore area residents during the "E Malama Kakou" (To Care for All) program during their recent annual training.



Homeless residents of the North Shore area of Oahu, Hawaii, live in tents near the ocean.

'Paradise' is a Medical Nightmare for Some Locals

Army Reserve Provide Medical Care to Oahu Residents in Need

Story and photos by Maj. William D. Ritter, Army Reserve Medical Command Public Affairs Office



KUHUKU, Hawaii - In this lush tropical paradise where many go for retirement or their dream vacation, local residents are faced with an on-going medical nightmare. But

thanks to one Army Reserve Unit, residents slept easy for a few weeks knowing the care they normally lack, was right around the corner.

Members of the 7202nd Medical Support Unit, from Richmond, VA, came to this North Shore community as part of their two weeks annual training. Their mission was simple: Provide medical and dental assistance to the regions citizens. Many were unclear as to exactly what that would entail, but looked forward to visiting the union's 50th state.

They were working in conjunction with the Hawaii Air National Guard, and partnering with the Hawaii State Department of Health during the "E Malama Kakou" (To Care for All) program

that was planned for the region.

But, what they found surprised and even shocked some.

According to Staff Sgt. Danielle Primerano, a dental hygienist from Buffalo, NY, "If I would not have known we were in Hawaii, I would have guessed we were in El Salvador or Nicaragua. I have served there before on humanitarian missions and this climate and atmosphere unfortunately reminded me of those trips. The need here really surprised me."



Staff Sgt. Danielle Primerano, a dental hygienist serving with the Army Reserve's 7202nd Medical Support Unit, from Richmond, VA, examines Christopher Robertson, a North Shore area resident during the free dental clinic hosted by the Kabuku Medical Center, in Kabuku, Hawaii. Dr. (Maj.) James J. Dunne, an Army Reserve dentist looks inspects the procedure.

The community of 22,000 lacks the basic medical and dental care services that most American take for granted. For the last 12 years there have been zero dentists operating in the region and the local hospital, the Kuhuku Medical Center has only 23 beds, 10 of which house long-term care patients. Their facilities are capable of basic care

only. Any specialty care or surgery require hours of driving over the Island mountains

to doctors in Honolulu.

Once on the ground, the 7202nd divided into three teams, with three distinct missions.

Team one visited local schools and provided the students with medical, dental and vision screenings. Budget cuts have halted the schools ability to provide these services for students. Additionally, athletic physicals and scoliosis exams were available to all students. During the team's visits, they screened over 500 students, many off whom come from families that have little or no health insurance.

According to a Center on the Family community profile, during a statewide Department of Health screening, the Kuhuku area had the second highest percent of untreated tooth decay, suggesting the lack of dental healthcare facilities.

Ruth E. Holmberg, school principle at the Sunset Elementary School, stated the Soldiers and this program brought much needed services to the community and her students.

"It was a real wonderful thing for us (working with the Army Reserve), with budgets being cut all over the place whatever kind of partnerships we can put together is a great benefit for the school," she said. "The screenings also help bring potential

problems to the surface and help us reemphasize some of the precautionary steps our parents need to take with their children.

Unit dentist, Maj. Karen B. Fitzhugh, indicated that the school visits came just in time for some of the students.

“We identified 13 students that had critical needs,” she said. “We were able to refer them to the Hawaii Air National Guard immediately for follow-up treatment on their issues.”

With the aid of the 7202nd, students were made aware of state agencies that could provide low cost or no-cost treatment to fix the problems discovered during the schools visits.

Unfortunately, many in the community are also in need of financial assistance for other health related issues.

The same 2003 Center on the Family community profile indicated that the per capita income in the region is almost 25% lower than the state average; unemployment is higher than the state average at 7.7% and families receiving food stamps is at 20.3%.

Team two of the unit reopened the dental clinic at the medical center for anyone in need of dental services. Since the facilities have lain dormant for over a decade they first had to repair some of the equipment. With the aid of the Air Guard and Schofield Army Barracks, the unit was able to get the parts they needed to put the clinic into operation.

Their services were advertised throughout the community on flyers posted all over the region. They offered exams, cleanings, and fluoride sealant for all ages. They averaged 25 patients a day who, on average, had not had a dental screening in over 10 years.

Residents and unit members alike were overjoyed by the program.

“This is what I joined the Army Reserve to do,” said Fitzhugh, a resident of Suitland, Md., “We are getting good training helping good people in this community. We have seen a lot of patients that need fillings and some that have gum and bone disease. We were able to refer these residents to the right individuals to address their care needs,” she added.

In addition to the dental staff of the 7202nd that reopened the closed clinic, another part of the second team worked side-by-side with the doctors and nurses of the Kuhuku Medical Center emergency room.

Working in two shifts, the unit’s medical professionals examined patients, ordered x-rays and labs if needed, performed triage and developed treatment plans for the patients.

According to Stephany Vaolet, Assistant Hospital Administrator, the unit’s involvement has been invaluable to the medical center.

“There are certain requirements we have from the state for our long-term care patients that we cannot do with our current staff. It is next to impossible to get someone to come up to our facility to see 10 patients. Having the Army Reserve personnel here and being able to utilize their skills has enabled us to complete those requirements for the year,” she said. “The best

cuts to a maggot infected foot that could have been life threatening. Five of the homeless they encountered were veterans, the youngest only 40. They were able to refer him to the right VA contact to get the benefits he had coming, yet didn’t know how to collect.

If they need medical care beyond what could be provided on site, the unit aided the individual in getting to the North Shore Health Clinic for free treatment.

According to Lt. Col Felix Roche, Executive Officer for the unit and officer in charge of the community outreach team, the 7202nd made a difference.

“We treated one man whose chief complaint was pain and a burning sensation on his foot”, he said. When we inspected the wound, I noticed that it was cellulites, a common, yet potentially serious life threatening bacterial skin infection. We made a huge difference in this man’s life and many other less fortunate residents of Hawaii,” he added.

One area mother agreed.

“The Army Reserve personnel have been so kind. They took time to talk to me about my son’s condition (MS) and the best course of treatment for him,” said Donna Brown, a 30-year resident of the area. “I have been to other free clinics and the services offered by the Army here have been the most thorough of any event I have attended.”

Despite Hawaii being a vacation mecca deemed paradise by so many travel publications; this Oahu community faces many challenges ahead.

Unfortunately, when the sun sets over the Pacific for their last day of annual training, and the 7202nd departs for their Virginia home station, the community will again have no dentist; they will still have countless uninsured residents, and all too many homeless people to truly be worthy of Webster’s definition of paradise.

But for two short weeks, over 500 people of this community were able to smile a little brighter because 44 Army Reserve Soldiers used their medical skills to better their lives and help their community. All with a giving spirit.

“This is a great mission,” said Lt. Col. John Ferrerra, commander of the 7202nd.

“The Army Reserve draws its talent from the civilian sector, in communities around the country, especially in the medical field. This mission has enabled us to give back to the U.S. community as a way of saying ‘thank you’ for supporting us while we volunteered to serve our country,” he added.

“My Soldiers are getting real world training while serving this community’s medical needs.”



Top: Capt. Wanda Harrel-Mitchell and Maj. Diane Miller, nurses with the Army Reserve’s 7202th Medical Support Unit, from Richmond, VA, aid a patient of the Kahuku Medical Center, Kahuku Hawaii, during their recent annual training.

Right: Mr. Sea Ray, right, a homeless person from Honolulu, Hawaii, is treated in the park he lives, by Dr. (Lt. Col.) Felix Roque, center, and other members of the 7202th Medical Support Unit, during their annual training for cellulitis.



Photo courtesy of Dr. (Lt. Col.) Felix Roque

thing for our staff though is just being able to share experiences with the Soldiers. They come to us with such diversified backgrounds.”

The final team worked with the Koolauloa Health and Wellness Center community outreach program going out to the beaches and parks seeking out area homeless residents and checking them for preventable illnesses.

Though the North Shore community is famed for its surfing and is visited by over one million tourists each year, it also has a large homeless population. Drive away from the resorts that house those temporary visitors and you are painted a grim picture not portrayed in travel brochures. High costs of living and the warm climates have caused tents to pop up all around becoming home to many who cannot afford conventional housing.

The outreach team treated 150 individuals, some as young as two years old. Entire families were homeless in some cases. The parents went to work and the children to school, but the cost of housing made it impossible to afford a home in this region that has a per capita income of \$16,000.

They treated everything from simple

Angels of the Battlefield

War-zone Nurses Put Their Skills on the Front Line

Story by Andi Esposito Telegram & Gazette Staff, Worcester, Mass.



WORCESTER, Mass. - Severely injured with a tunneling wound through his liver, the Marine lay sedated, clinging to life, in the intensive care unit at the 399th Combat Support Hospital in Al Asad, Iraq, under the care of

U.S. Army Reserve 2nd Lt. Melinda A. Nekervis of Sterling.

"He ended up getting well over 100 different blood products," said Nekervis, a soft-spoken Army ICU and flight nurse who returned in October from Mosul and Al Asad, Iraq. When everything but whole blood was exhausted, Nekervis asked if the Marines keeping vigil would donate their own.

"They were more than willing to do that," she said. "We transfused the buddies' blood into the patient. It was quite a moving experience. We were very lucky not to lose him. He was pretty sick. They had to do surgery right at the bedside, and he survived."

Stabilized, the Marine was later sent to Germany aboard an Air Force medical evacuation flight.

"I know that the doctors, from the extent of his injuries, didn't know if he would make it and what his deficits would be," said Nekervis, 32, who in civilian life is a registered nurse working in intensive care at UMass Memorial Medical Center - University Campus.

"I had him for four long days," she said. "I will never forget him, but he will never remember me."

Military nurses in Iraq and Afghanistan are a critical link in a chain of medical care that has enabled more Soldiers to survive injury than ever before in the nation's history of warfare. In World War II, about 30 percent of Soldiers died from wounds, a rate that fell to 24 percent in the Vietnam War. Since the start of combat seven years ago in Afghanistan, and since 2003 in Iraq, more than 32,000 service members have been wounded in action. Statistics recently released by the Department of Defense show that 4,579 have been killed in action or died under non-hostile conditions during Operation Iraqi Freedom and Operation

Enduring Freedom.

But the survivability rate - the portion of people dying from wounds on these fronts - has fallen to about 10 percent.

"We are doing such a good job saving Soldiers that there is a much higher rate of survival," said Col. Andrea J. Wallen, chairperson of the Department of Nursing at Worcester State College and chief nurse with the 804th Medical Brigade at Devens, which oversees the 399th and 12 other medical units.

Nurses and military medical experts say the survival rate is higher because Soldiers wear more and better equipment, and because medical help has been pushed closer to the battlefield and dispersed into

smaller teams reaching more locations. More people are being trained in lifesaving procedures, specifically in response to trauma; surgery is done earlier; and better communication has allowed medical equipment and supplies to be quickly sent where needed.

But most important is the speed at which the wounded are attended.

People are moved in record time by helicopters, aircraft and specially fitted flying hospitals - in C-17s and KC-135s - to higher-level or more specialized care in Germany and the United States, including Brooke Army

Medical Center in San Antonio, known for its burn center.

"The goal was to get the critically injured to Landstuhl (Regional Medical Center) in Germany within 72 hours," said 2nd Lt. Nekervis, who also logged 50 hours of retrieving and nursing the wounded aboard a Blackhawk helicopter medevac air ambulance and earned a Bronze Star Medal for her service.

Much as Civil War Soldiers called Oxford's Clara Barton, founder of the American Red Cross, "angel of the battlefield" for care she gave the injured in

makeshift hospitals close to the battlefield, military nurses, often working under fire, help make the difference between life and death. Most are in the National Guard or Reserve on deployment from hospital and health care jobs. These weapons-carrying nurses, wearing Kevlar body armor, helmets and dressed in desert fatigues, are combat-ready professionals who, faced with the terrible consequences to flesh and bone of roadside bombs, guns and rockets, save lives under challenging conditions and at risk to their own safety.

Many have been deployed several times; most would go again in a moment.

"Battlefield nursing is about service, and if you can serve your country, make a difference and be a powerful force on the battlefield helping people, that is life-changing," said Col. Bruce A. Schoneboom, a nurse anesthetist and acting dean of the Graduate School of Nursing of the Uniformed Services University of the Health Sciences, Bethesda, Md. The school specializes in military and public health medicine and trains people for battlefield medicine in Iraq and Afghanistan.

Within days of her arrival as chief wardmaster for the 399th's Combat Support Hospital in Mosul, Iraq, U.S. Army Reserve Master Sgt. Kimberly L. Luce, 42, of Shrewsbury, a licensed practical nurse, said the 36-bed hospital was hit by mortars. She remembers the sounds of war - alarms, the "earth-moving" rumble of U.S. Stryker armored vehicles on patrol outside the hospital walls and the 60 mm rocket she didn't hear on the way to chow.

"Thank God it hit a tree. There were six of us on the road that day," said Master Sgt. Luce.

But more than sound, the scenes that arrived with the day's casualties are stuck in her mind.

"The challenge for me, being a nurse, is to get over the shock of what you see. You don't have war every day," said Master Sgt. Luce, who in civilian life works for Verizon with customers who have disabilities. "It doesn't change how you nurse or the quality of the care you provide, but it is shocking to see a human being so severely injured, and whether you can save his life. What you feel for that human being will affect you in one way or another."

Responsible for 125 enlisted service members, including medics, LPNs, operating room, X-ray and lab technicians, Master Sgt. Luce worked muscle and mind. Among chores, she moved concrete T walls that protected against bomb blasts, laid side-walks and constantly assessed the mental health of her troops.

She speaks in blunt, precise and



U.S. Army Reserve Master Sgt. Kimberly L. Luce of Shrewsbury comforts an injured boy in Al Asad, Iraq. She served as chief wardmaster for the 399th Combat Support Hospital in Mosul and Al Asad. (Photo courtesy of Master Sgt. Kimberly L. Luce)

descriptive words about her experiences.

"It was very stressful in Mosul, especially for younger troops. They had never seen a body dead or with limbs missing. They had never been exposed to it. Some of these people are landscapers, mechanics, full-time students. They were being exposed to the remnants of war."

Master Sgt. Luce remembers the Marine in 2nd Lt. Nekervis' care as the most critical and complicated of cases handled at Al Asad, where she also served.

"Mindy did remarkable things for him. He ended up surviving. He was at death's door," she said.

"Going to Iraq was scary, overwhelming and exciting. But you learn to adjust and do your job. It was real. I can say I went to war. Now I truly feel like a veteran. I served overseas in a combat zone and was fired upon. And I would do it again in a heartbeat."

If one end of the medical care spectrum begins on the battlefield, the other arrives by air.

U.S. Air Force Reserve Capt. Susan E. Hodges, 32, of Paxton, spent six months as a flight nurse on medical evacuation flights carrying the ill and most severely wounded from Balad Air Field in Iraq and Kandahar, Afghanistan, to Ramstein Air Base in Germany, where she was stationed.

Before departure, the seven-member

flight teams would be told of the injuries they could expect and equipment they would need.

"But in the eight hours it takes to fly down, anything can happen," said Capt. Hodges, a registered nurse. Casualties may have been evacuated on another flight; medical conditions change. "So you improvise fast. You have to; you will sink if you don't," she said.

Adaptation and improvisation - nursing skills also considered critical by 2nd Lt. Nekervis and Master Sgt. Luce - serve Capt. Hodges well in civilian life as an operating room nurse at St. Vincent Hospital in Worcester. "Being adaptable to the changing situation in surgery is the biggest skill I have pulled from the Air Force," she said.

Carrying cargo from Germany, the C-17 and KC-135 planes had to be emptied and transformed into flying hospitals within hours of their arrival, with patient litters secured and defibrillators, oxygen, electrical lines and other medical equipment and supplies set up.

Capt. Hodges most frequently handled the effects of trauma from mortars and IEDs, and illness. Some were not physically injured, she said, "but their minds, the things they had seen. How do you turn off



2nd Lt. Melinda A. Nekervis, of Sterling, working in the intensive care unit of the 399th Combat Support Hospital in Al Asad, Iraq, prepares a Marine for airlift to Germany. (Photo courtesy of 2nd Lt. Melinda A. Nekervis.)

that feeling? They may not be that hurt, but they've got a lot more going on than a broken arm."

Like family pictures on a mantelpiece, the memory of certain patients stays with her.

"I had 10 in my head that I will think about for the rest of my life, and I will never know how they are doing," she said. "You wonder and hope that they made it through and are healthy. I hope to God I don't forget about them. I don't want to."

Unit Trains Iraqi Nurses

Combat Support Hospital Trains Clinically Skilled Nurses

Story by Col. Linda K. Connelly, 345th Combat Support Hospital with Maj. William D. Ritter, Army Reserve Medical Command Public Affairs Office



TIKRIT, Iraq - The 345th Combat Support Hospital (CSH), recently back from Iraq, did its part to help build capacity and capability in the Iraqi healthcare system, through their "Iraqi Emergency

Nursing Train the Trainer Program."

The ninety hour course, initiated and developed in coordination with the local Provincial Reconstruction Team (PRT), at the request of the Iraqi Director General (DG) of Health, focuses on training Iraqi citizens to be nurses for emergency and trauma care.

This course was developed to address identified needs, according to the Iraqi Deputy Minister of Health of Salah ad Din Providence, working with the Providences' Iraqi physicians.

Currently, Iraq lacks clinically skilled nurses. In Salah ad Din Providence alone, there are 36 physicians to every nurse.

The 345th CSH, a U.S. Army Reserve unit from Jacksonville, Fla., developed this training program as one means of bridging the gap in Salah ad Din Province with the

intent that the program can be duplicated in the other provinces throughout the country.

The training, presented by 345th's nurses and medics, covers



topics from biomechanics and mechanism of injury to advanced cardiac life support. Books and reference materials are provided by the University of California Los Angeles "Operations Medical Libraries" and the Salah ad Din Provincial Reconstruction Team (PRT).

Because the 345th CSH worked closely with the Salah ad Din PRT and DG Health in developing this program of instruction and obtained the Iraqi Ministry of Health approval, the Iraqi nurse participants will receive certification in basic life support and advanced cardiac life support upon successful completion of the program.

In addition, participants will receive a monetary stipend from the Ministry of Health.

This training is being conducted on an U.S. base near Tikrit, where the 345th was stationed since May 2008. They elected to develop this unique training on their own accord, outside of their normal mission duties, as a way of improve the nursing skills of local professionals.

The 345th CSH provides an expert mix of nursing professionals for this education program. The sole purpose of this mission is to improve the nursing education in Iraq. The 345th returned to the U.S. in March.

Digital illustration by Maj. William Ritter, from photo by Col. Linda K. Connelly. Capt. Stephen Aycock Emergency Nurse for the 345th Combat Support Hospital, works with his interpreter teaching Clinically Skilled Nurses while deployed to Iraq.



2009

The Year of the Noncommissioned Officer

AR-MEDCOM NCO FEATURE STORY #1

369th Troops Seek Purpose in their Lives; Find it as Soldiers, NCOs

Story and Photos By Maj. William D. Ritter, Army Reserve Medical Command Public Affairs Office



PUERTO NUEVO, P.R. - During 2009, The Year of the NCO, I have made it the mission of this Public Affairs Office, to meet those professional AR-MEDCOM Soldiers face to face, and share with you

their stories.

My travels started with the 369th Combat Support Hospital (CSH) in Puerto Rico.

In talking with the sergeants during my visit, I noted a common theme in what they were hoping for from their service in the Army Reserve; Purpose.

A purpose for something greater than individuality.

A direction to their life that otherwise lacked vision.

A desire for more discipline to persevere in all they do in life.

And a desire to help others benefit from their life experiences.

During my discussions with the 369th CSH's sergeants, I spoke to a personnel specialist, a nutritional specialist and an administrative specialist.

Each one joined the military seeking that intangible, unobtainable 'something' that was missing from their respective lives. They found it in the Army Reserve and now each, as NCOs, preach what they practice.

Staff Sgt. Ninostshka Cruz joined the Army nine years ago.

"I wanted to do something with my life, something I can be proud of," she said. "I didn't speak English and I needed to grow up professionally. The Army offered me a lot of opportunities to explore."

Today, thanks to her Army Reserve training and discipline, her life has changed for the better.

In addition to her Soldier duties, she is a student, pursuing her degree in marketing, while working in data entry on the side.

"I do not have to offer advice to prospective Soldiers, because they see me; the way that I was before the Army and the way I am now," said Cruz. "The Army gave me the education I needed, the drive to focus on it and the family to encourage me. As a NCO I want to pass on my good fortunes to others."

Sgt. Iris Polanco, a dietician, is passing on her good fortunes, not only to junior Soldiers, but to her patients in the community around San Juan where she works.

Polanco entered the Army Reserve 13 years ago needing vision in her life.

"I needed to do something in my life and becoming a dietician was kind of exciting and a challenge for me," she said.

Needing money for college, she utilized the GI Bill to get her Bachelors in Nursing from the University of PR.

Now a registered nurse in a private oncology office here, she applies her dietician skills the Army trained her with, to help her cancer patients.

"I am not the dietician of my office, but I am close to the patients so I can help them with nutritional care," she said.

As a nutritional NCO of the 369th and a community caregiver, Polanco seems to be the dietary backbone for many ailing in her community as well as for the troops in the unit.

The final sergeant I spoke with was Staff Sgt. Yanira Constance.

When she entered the military ten years ago, with Bachelors in Office Management, she was unclear on how to best utilize those skills.

"I wanted to make something of my life, learn the English language," she said. "I liked the Army Reserve because it is very disciplined. I needed structure. It would help me focus on setting goals, and advancing my civilian career," added Constance.

After joining the military, and training as an admin specialist, Constance found that her military duties where similar to those she utilized while working as a secretary for the Puerto Rican government, but her Army Reserve occupation came with the chance to become a leader to other Soldiers and advance.

When Constance was promoted to the NCO ranks, her goal was to inspire

incoming and younger Soldiers, and help them get ahead with more knowledge than she had as a new Reserve Soldier. To accomplish this goal, she quit her job as a secretary and applied and was hired as Unit Administrator (UA) for the 369th.

"I like the interaction of the UA job. I get to deal with a lot a different people and learned more to help more," she said. "I can increase our Soldiers professional and personal skills better and directly since I am here daily. Plus in these economic times, the extra pay and job security was a nice plus."

Her personal motivation as a NCO not only drives her to succeed, but now directly effects the 170 enlisted Soldiers that make up the 369th.

"Even though she has only been the UA for a short period of time, you can see the difference she is making," said Command Sgt. Maj. Jose R. Vazquez, Command Sgt. Maj. for the 369th. "I have known her since she joined the unit as a private and has always been an outstanding Soldier. Now, she is an outstanding NCO training new outstanding Soldiers."

According to Staff Sgt. Constance, "I always tell my young Soldiers: Be responsible and disciplined in all you do."

She continues applying those virtues to her own life as well, using the GI Bill to pursue a Masters degree. And while she has no plans to leave the military, she wants to continue to plan for her future success.

"I am the type of person that likes to see things through, so I'll be here until I'm satisfied with the work I've done for my Soldiers," she said. "If that means staying 20 years, then I'll do it, but I love my job."

In this Year of the NCO, we will continue to seek out quality Soldiers that are truly leading by example.

These three Soldiers all show that high quality NCOs can be generated with the correct nurturing and training by superiors over their junior subordinates and lead to the next generation of great NCOs.

Each one of these Soldiers- The personnel specialist, the nutritional specialist and an administrative specialist - had a caring NCO to train and guide them. As a result, each of them continue to give back long after their original contract expired.



Top: Staff Sgt. Yanira Constance, Unit Administrator for the 369th Combat Support Hospital (CSH) Puerto Nuevo, P.R., works at her desk during a recent Battle Assemble.



Right: Sgt. Iris Polanco, a dietician for the 369th Combat Support Hospital (CSH) Puerto Nuevo, P.R., works preparing lunch for her troops during a recent Battle Assemble.



Staff Sgt. Ninostshka Cruz, left, personnel specialist for the 369th Combat Support Hospital (CSH) Puerto Nuevo, P.R., aids her Soldiers in preparing a ceremony for her unit during a recent Battle Assemble.

'Combat Gynecologist' Returns

Medical Professional Earns Nickname in Theater

Story T.J. Greaney, Columbia Tribune



COLUMBIA, Mo. - Over the summer, Raymond Foster of Columbia found himself performing a complicated surgical procedure on an Iraqi policeman after the man was injured in a bomb blast.

During 2½ hours of surgery, Foster reattached two ends of the eye muscle that controls lateral movement and sewed up the man's scalp, which was peeled open when he was thrown from his vehicle.

Stabilized, the man was airlifted to Balad Air Force Base, where he recovered. Weeks later, Foster re-examined him and noted the same sutures were still in his skin and his left eye had full mobility. What the man will likely never know is that Foster, the Army surgeon who helped him, is trained as a gynecologist.

"You have to remember, I don't operate on the head," said Foster, flashing a smile during a recent interview in his office at Columbia Regional Hospital. "I was called 'the combat gynecologist.' That was kind of the joke around the hospital."

Foster is one of the few people in Mid-Missouri who have served in the military both in a combat role and as a doctor. In long hours and less-than-ideal hospital conditions - surgeons operated with sand under their feet - he said medics are seeing varied and tricky casualties that push the limits of their training. Still, he said, surgeons are managing to keep infection rates low and are saving more lives of critically wounded Soldiers than in any other conflict.

Foster, 45, has served in the Army since he was 17. He graduated from the United States Military Academy at West Point in 1985 and was an infantry Soldier during the 1989 Operation Just Cause invasion of Panama to capture Manuel Noriega. The next year, he commanded an infantry company during Operation Desert Storm.

"I learned a long time ago it pays to pray rather than worry because God has him in his hands," said his wife, Sharon Foster, who was separated from her husband during their 20th wedding anniversary this summer.

In 1994, Foster transferred to the Army Reserve and joined the Medical Corps as he began 13 years of medical training, including medical school at the University of Missouri and a fellowship at Duke University. Sharon Foster said her husband never complained in April when he was called up and had to leave his practice and four children. "He has the kind of loyalty - and he internalized that as a kid, basically, at West Point - in a way that it has solidified

what's important to him," she said. "It's not a question of whether or not he'll serve. It's simply, if he's called he goes."

But nothing fully prepared him for the three months he spent on Contingency Operating Base Speicher near the Tigris River south of Tikrit. The region is in the heart of an area known as the "Sunni Triangle" and home to some of the fiercest fighting in the country.

There, on 12-hour shifts, Foster treated everything from bullet wounds and bomb blasts to a Soldier's twisted ankle after a game of soccer.

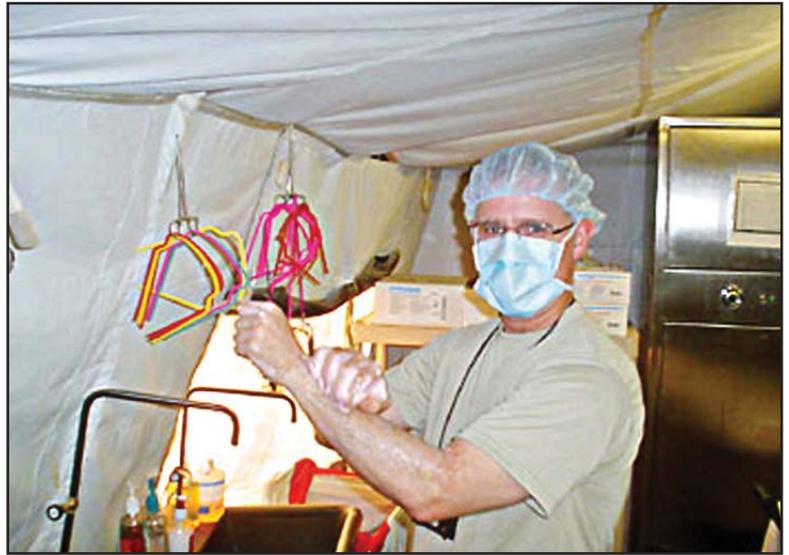
"There's no doubt that I'm a better doctor today than I was five months ago," he said. "I've learned so much from it, but I've learned from everything I've ever done in the Army."

Foster said he was typically the fourth surgeon - his specialty is pelvic surgery - on a team that included trauma, general and cardiothoracic surgeons. The patients treated were usually flown in by helicopter and included American Soldiers, foreign security forces, contractors and some Iraqis who aided the coalition. Surgeons follow a strict code of ethics that dictates they must treat all patients without prejudice.

"Our motto was basically, 'we shoot 'em, we fix 'em,'" Foster said of the multiple Iraqi and foreign enemy combatants his group treated after they were captured. "I took care of a guy who would have killed me if he didn't come in shackled hand and foot." The man, he said, was a suspected terrorist to whom he gave an electrocardiogram after he complained of chest pains.

Foster said it was not unusual for surgeons to treat an American Soldier in one bed and the man who attacked him in the next. He also treated patients in his own specialty, including a female MP who suffered from a ruptured ectopic pregnancy.

Foster speaks some Arabic, which he



Raymond Foster, a gynecologist specializing in pelvic surgery by trade, scrubs up as an Army combat surgeon at Contingency Operating Base Speicher near the Tigris River south of Tikrit, Iraq. Photo courtesy of Raymond Foster

learned at West Point, and found one of the most rewarding parts of the mission the opportunity to connect with people across cultures.

One particularly poignant encounter occurred when he met an Iraqi head and neck surgeon, Dr. Saad, who had served as a brigadier general in Saddam Hussein's army and fought against American troops during the first Gulf war. Saad grew up in Tikrit with Hussein and was friendly with the future dictator as a child. He later ran a hospital for Hussein's army that admitted more than 1,500 casualties per month during the Iran-Iraq war.

Saad was fiercely anti-American at the beginning of the U.S. occupation. Today, Foster said, "his blood is red, white and blue. He is an absolute believer in the American system."

Two events changed his mind: first, the terrifying kidnapping of his daughter by terrorists, and second, the assistance given by U.S. doctors to the Iraqi medical establishment.

Saad has been granted asylum in the United States, and Foster hopes to invite him to speak in Columbia in several months when he arrives. The two men who once faced each other on the battlefield have become friends.

"He wants a secure country, he wants freedom, he wants a car, he wants his kids to get educated, and, yes, he's Arab and of the Islamic faith," Foster said. "The bottom line is he wants the same things for his family that you want for yours."

At 52, Dallas Cardiologist Answered Call to Serve

Heritage Draws Doctor to Serve

Story by David Tarrant, photo by Jim Mahoney, The Dallas Morning News



DALLAS - Within days of the 9/11 attacks, Jerrold Grodin responded in a way thousands of other Americans did: He marched into an Army recruiter's office and signed-up.

But Grodin wasn't your typical fresh-faced recruit. He was a 50-something doctor, a board-certified cardiologist with a long-established group practice at Baylor Hamilton Heart and Vascular Hospital. And he had three college-age daughters and a wife of 26 years, whom he hadn't yet told of his plans. At a time when his peers were thinking ahead to retirement, Grodin was about to trade in his blue scrubs for green Army fatigues.

Now, approaching the end of his commitment with the Army Reserve, he is being called a hero for his service, which included two tours in Iraq as an internist and critical care doctor.

But eight years ago, his decision caught even those closest to him by surprise.

What would cause a doctor, with a prestigious and lucrative practice, a family man with deep roots in his community, to willingly turn his life upside down and throw himself into the most dangerous place on earth?

The decision brought a feeling of release from an old burden: Grodin was finally answering a calling avoided for decades. The only thing he wasn't certain of was how the Army would react.

"I wasn't sure they would take a 52-year-old guy," he said. "And I wasn't in the best shape."

His calling:

To understand Jerry Grodin's calling, you have to know where he and his family come from.

His grandfather, David Kaplan, was born in Poland. He studied to become a rabbi. But he repeatedly got in trouble for reading U.S. history instead of doing his lessons. He'd read the Federalist Papers and other books by American political thinkers, hiding them inside his Talmud, a collection of texts on Jewish law.

Kaplan arrived in El Paso in the 1930s

after fleeing Poland to escape the Holocaust. Turned away from Ellis Island because of immigration quotas, he came ashore at Veracruz, Mexico, made his way to Juarez and crossed the Rio Grande into El Paso.

During World War II, Grodin's grandfather took in Jewish Soldiers from nearby Fort Bliss, offering home-cooked meals. "They called it Kaplan's USO," Grodin said.

Grodin's father, from Brooklyn, N.Y., met his mother, one of Kaplan's daughters, over one such meal. Irwin Grodin fought in World War II, flying a B-29 bomber on missions over Guam.

Jerry was born in El Paso in 1949, the oldest of six children. After synagogue, Jerry often walked home with his grandfather, listening to his stories. The old man would talk about how he felt the day he crossed the Santa Fe Bridge from Mexico into downtown El Paso to become a U.S. resident. "He'd say that to everybody else, the

streets of El Paso may be just dust and mud. But to him, they were streets of gold!"

Grodin still treasures a book that his father, who died last April, gave him - "Brave Men," by legendary war correspondent Ernie Pyle. "That book molded me. We'd look at photos of my dad during the war, shirtless, standing by his plane. "Brave Men" was my Dad," Grodin said.

Grodin said he's always "felt a debt of obligation to repay this country for keeping our family from the Nazis." And he felt that military service was the definitive way to repay that debt.

His first chance to serve was during the Vietnam War. He was in medical school, however, and a high lottery number in the draft allowed him to finish his studies. "I never felt well about that," he said.

His second chance came during the first Gulf War in late 1990. Again, Grodin thought about enlisting. But his children were too young.

That was that. Until Sept. 11, 2001.

Time to choose:

Grodin's second daughter, Shoshana, was a senior at New York University and lived three blocks from the World Trade Center. After the second plane struck the

Twin Towers, the Grodins could not get through to her. Anxious hours passed until Shoshana called. She had escaped by foot across the Brooklyn Bridge.

The next day, just weeks after celebrating his birthday, Grodin called a recruiter who told him to report to the Federal Building in downtown Dallas.

Grodin showed up at the appointed hour, 5 a.m., waiting in line with kids more than half his age to undergo a battery of tests and physical exams. At the registration desk, he recalled, a sergeant asked: "Are you here about your son?"

"No," Grodin said, flustered. "I'm here to serve my country."

For several weeks, he didn't tell anyone about his visit to the Army office. He knew his wife, Julee, would be angry, and he didn't want to tell her until he was certain the Army would take him.

When he finally broke the news, Julee let him have it.

"I was not happy," she said on a recent Sunday afternoon at the Grodins' home in North Dallas.

Others were mystified. "I'm sure some people thought, 'Is he crazy? What the heck is he doing?'" said Dr. John Schumacher, a founding partner with Grodin of Cardiology Consultants of Texas.

Schumacher, however, saw something in the impulsive move by his longtime associate that made sense.

"Jerry has always been a very passionate man and always very patriotic and very committed to his Jewish faith," he said. "It isn't surprising to me that he would run out and do this."

Grodin didn't see his act as impulsive, but a long time developing.

Just as Pyle's "Brave Men" had influenced him, Grodin had been inspired as an adult by Theodore Roosevelt, often re-reading the famous speech called "The Man in the Arena."

Another favorite quote was one attributed to Rabbi Hillel, a Jewish leader who lived around the time of Christ: "If I am not for myself, who will be for me? If I am not for others, what am I? And if not now, when?"

In the aftermath of 9/11, Grodin said, "I was very aware that I was at a crossroads, that if I was going to do this, I had to do it now. There was no question there was a national emergency. I knew in terms of my age that I was pushing the envelope [and] that they might not even take me. And I knew that if not now, then when?"

He was commissioned a major on Dec. 23, 2001, and assigned to the 807th Medical Brigade, in Seagoville, southeast of Dallas.



Jerrold Grodin, a cardiologist at Baylor Hamilton Heart and Vascular Hospital, recites the Pledge of Allegiance with his wife, Julee, and Dr. Kevin Wheelan. Friends gathered to welcome Grodin home from a tour of duty in Iraq.

By the time he was activated, the war on terror had shifted to Iraq, mired in a bloody insurgency.

Operating under fire:

In early 2004, Grodin deployed to Kuwait and then transferred to the 67th Combat Support Hospital at Forward Operating Base Diamondback in Mosul, Iraq. That spring saw a violent uprising among the Iraqi Shiite population.

His first night in camp, Grodin awoke to explosions and a loud voice over the base intercom shouting: "Bunkers! Bunkers! Bunkers!"

In the dark, as he staggered into the concrete bunker, he stubbed his foot and fell. "Who's that?" someone asked, shining a flashlight and revealing a shelter crammed with nurses and doctors. "Oh, that's the new guy, Maj. Grodin," someone answered. He realized with a jolt that he was the only one stripped down to his skivvies.

The heaviest action came the nights of April 8 and 9, 2004. A stream of casualties came into the hospital. Because of nearby sniper fire, the medical staff was in "full battle rattle," wearing body armor and helmets and carrying weapons.

Grodin triaged the wounded and provided post-operative care. He worked 48 hours straight. Most of the casualties were American Soldiers, but the medical staff also treated Iraqi locals and enemy combatants.

"You're talking about combat trauma, which is primarily high-velocity projectiles, gunshot wounds, very destructive," Grodin said. "You're talking about blast injuries from mortars and rockets. You're talking about burns."

In one case, his cardiology training helped save a life. A special forces Soldier had been shot through the back and the bullet had deflated his lung. What the medical staff didn't know was that the bullet had also nicked his heart.

"It was a good thing he had a cardiologist working in the ER that day," Grodin said.

Back home:

After Grodin returned from his first deployment, his wife noticed a difference. "He had a hard time relating to the simple, everyday things, like going to a movie, going to lunch, going out to dinner, the things I was used to doing," she said.

Grodin said it was hard to leave the war behind at first. After treating Soldiers with gaping chest wounds, routine tasks like tracking his patients' cholesterol levels seemed almost superfluous. "It's very hard when you leave your men and women behind in your units and you know they're still doing all that."

In 2006, he spent four months at Landstuhl Regional Medical Center in Germany, where he cared for U.S. Soldiers

evacuated from Iraq. Most recently he went to Tikrit, Iraq, on another 120-day deployment that ended last month and revealed a relatively more peaceful Iraq than the one he saw in 2004.

Now 59 and a lieutenant colonel, Grodin's commitment to the Army Reserve ends in December. The couple recently celebrated their 34th anniversary at a favorite Greek restaurant. Julee Grodin said she loves her husband even more than when she married him, "because I know him so much better."

Looking back, he regrets the hardship his decision caused his wife and his medical partners, who had to cover for his patients as well as his night and weekend rotations. But if he hadn't acted when he did, he would have felt a deep void - an emptiness potentially leading to disappointment and unhappiness, he said.

The experience hasn't changed him so much as enlarged his life, he said. It gave him a chance to meet other reservists, "Civilian-Soldiers" like himself, who in the middle of comfortable lives left careers and families to serve their country.

"I've been made a better man by the people I served with. I've been imbued by their patriotism, selflessness and courage," he said.

"I will be sad when my eight years are up."

Soldiers Help Homeless Vets

Reserve Medical Troops Support Former Colleagues in California

Story by Sgt Eric W. Jones; Photos by 1st Lt. Michael Meyer, Army Reserve Medical Command Public Affairs Office



PLEASANTON, Calif. - Army Reserve Medical Soldiers recently put their military training to good use, aiding San Francisco area homeless veterans during the East Bay Stand Down.

A "stand down" is a military term used to describe the practice of removing combat troops from the field and taking care of their basic needs.

The event is an opportunity for homeless veterans to get some good food and enjoy a safe place to sleep for a few days while taking advantage of some of the services offered.

During the Stand Down, the Army Reserve Medical Command (AR-MEDCOM) provided no-cost medical, dental, chiropractic and ophthalmology care to the vets.

According to Col. Jon Donnelly, North-Western Medical Area Readiness Support Group, "We have outstanding army reserve health care providers here. They are performing their medical skills by helping to take care of the veterans here at the encampment. The Stand Down is a very important program for us because it gives our Soldiers a chance to use their skills in the real world, and it gives us a chance to

help our community."

The first Stand Down was held in San Diego in 1988, but is now held in 70 cities across the U.S. Denver Mills, a psychologist from the Veterans Administration hospital, started San Francisco's first "East Bay Stand Down" in 1988.

"I knew how effective stand downs were for veterans on the street," said Mills. "I knew that they really responded well to this type of work, so I was motivated by the opportunity to save lives."

In addition to AR-MEDCOM, the state of California offered other services, including driver's license renewals and legal aid where participants could take care of outstanding legal issues with the municipal Judges and District Attorneys present in a court set up specifically for the event.

Drug and alcohol abuse counseling and intervention were offered along with religious and spiritual services.

Local community organizations were also involved. They offered new clothes,

laundry services, barbers and beauticians, new glasses and personal hygiene supplies at no cost to the vets.

One participant spoke to the importance of the East Bay Stand Down.

"I only look as good as I do today due to this event and the efforts of those here



at this Stand Down," said Jerry Irvin, Vietnam veteran and Stand Down participant. "This event is a life saver to me and so many other events. I am very grateful."

The VA estimates that nearly 400,000 veterans are homeless at some point during the year, accounting for 23% of all homeless people.

The East Bay Stand Down is only one of many stand downs offered across the United States by Department of Veterans Affairs. For a list of upcoming events visit <http://www1.va.gov/homeless/page.cfm>.

Commentary: A MER Can Help

Marriage Enrichment Retreats Can Aid Marriages

Story and Photos By Maj. William D. Ritter, Army Reserve Medical Command Public Affairs Office



NASHVILLE, Tenn. - After catching bits and pieces of several Marriage Enrichment Retreats (MER) over the years, as I covered them for the Public Affairs Office, I decided to attend one on my own, from start to finish, to see what they were all about. Besides, it was a win-win scenario. With my wedding anniversary right around the corner, I could surprise my wife with a weekend away, claim all the glory and Uncle Sam picks up the tab while improving my marriage.

I am pleased to report; it was a really nice weekend. Not 'Maui Nice' or 'Skiing in Vail Nice', but ten-fold nicer than 'My Living Room Nice.'

The Army goes through a lot of preparation to pick out nice vacation spots around the country to host the MER. Once my wife got over the disappointment that I had taken her to Nashville, and not the American Virgin Islands as she had been visualizing as her surprise, she too had fun.

We had fun as a couple and as a group with other couples. But, best of all, we were as a couple enjoying quiet time, as we left the children at grandma and grandpa's house.

Our fellow couples were Specialists to Colonels married 39 days to 39 years.

The focal point of the weekend was simple. Anyone who wants to improve their marriage can by attending a MERs.

I'd like to share some of the things I learned with my PAO, non-rocket-scientist brain, which I picked up on.

I learned amazingly that if you apply some of the same principles to your marriage that you would in preparing for a media interview, you can be successful in both.

For example, when you are conducting an interview, you want to state your main idea first. Same applies to communicating with your spouse. Say what you want to say upfront and make sure it is clearly understood by the reporter - err, spouse.

Secondly, when you are conducting an interview you want to listen to the reporter's question in its entirety before answering. This assures you know what information the reporter is seeking. Same thing should apply when listening to your spouse. Don't

cut them off in mid-sentence just because 'you think you know' what's coming next. Be patient - and kind; to hear the complete question.

You certainly don't want to anger a reporter by cutting them off, as that may lead to a 'hard-ball' question you are not prepared to answer. So, why wouldn't you give your spouse the same courtesy? After all - the reporter will leave (you hope); and your spouse will stay (we hope you hope).

Next, think about your answers before opening your month. As a PAO, I do not want you to blurt out the first thing that pops into your head, during a CNN interview. Pause and give it some thought first, you'll sound more intelligent.

This applies to the heat of discussions (OK, arguments) with your spouse as well. You do not want to utter the fastest rebut you can spew out of your lips to them. Take the time needed to answer intelligently without malice. Remember, a bad quote in the news will fade. A bad quote in your marriage can live for the life of the union.

Finally, choose your words in a discussion with your spouse with as much care as you would with Fox News.

In interviews, it is not only what you say (the content) as it is how you say it (the words and tone). How that translates into marital bliss is this.

Never say the phrase 'whatever' in response to a question from your

spouse. It is a very dismissive communication term that is sure to only agitate your partner to a higher level than she/he was previously experiencing.

For better results, try 'I understand'. You may not agree with what they are saying but at least you are acknowledging the statement in a non-abrasive way that will not inflame them more. Who knows, when the dust settles, you may even be able to spark the flame of romance because you left the inflammatory words in the dictionary.

I learned a lot of other good things from the chaplains as well, but I do not want to spoil the fun for you.

The main point I took away from the weekend however is that 'communication is the key to a successful marriage' and 'talking is not communication'. Just as a quarterback



The Hilton Nashville Downtown was the romantic backdrop for the Marriage Enrichment Retreat.



Chaplain (Lt. Col) Ed Northrup toasts his wife Vicki during the Nashville Marriage Enrichment Retreat. The symbolic gesture of toasting ones spouse at the MER is a way to publically thank them for their love and support.

needs a receiver to complete the pass, the speaker needs the listener to understand what is being said for the receptive communication to go through.

Use those remedial training skills the Army blessed you with until you figure out what is talking and what is communicating. Work with your spouse on 'tone and terms' as well. Bettering each will lessen the arguments and increase the smiles.

And by all means, get additional assistance at a MER near you. As mentioned, I am a Public Affairs Officer and not a rocket-scientist. The chaplains at the MER have been trained to help you and your spouse live a better life together. But remember, they are there for marital training, not marital counseling.

As far as my wife was concerned, we attended the MER at just the right time. She was in dire need of a stress free weekend to jostle her memory on what it was she loved about me.

My secret squirrel plan was a success earning me a 'gold-star smiley-face' from my former teaching spouse.

But despite the four-star hotel, visiting 'Music City USA', the Symphony, and some Greek sounding restaurant where the lights were too dim to tell if she was still sitting on the other side of the table from me, her weekend was a joy for one reason.

"I didn't have to cut up anyone's dinner," she said.

Yellow Ribbon Reintegration Program

Program Helps Citizen-Soldiers Reintegrate Into Civilian Life

Story and photo by Sgt. Eric W. Jones, Army Reserve Medical Command Public Affairs Office



CHICAGO - The Army Reserve has rolled out a new program aimed to reacclimate its Citizen-Soldiers back in to their civilian lives quicker and with more support.

The Yellow Ribbon Reintegration Program is for Reserve Soldiers and National Guard members returning from combat operations. It is designed to help Soldiers who have already returned to their normal civilian routines and roles, as many individuals are not affected by the war until later in the reintegration process.

This program addresses the needs that may arise for the Soldiers after the normal demobilization process.

It is mandated by the Department of Defense and is designed to educate Soldiers and their Families about the resources available to them should they need assistance in the future. It will help connect troops and Families with service providers who can assist them in the challenges they face with reintegration.

Many Soldiers face some very significant challenges when returning home; Combat Stress and Post Traumatic Stress Disorder (PTSD) are two of the most significant threats returning Soldiers and their Families face.

These conditions, left untreated, can lead the Soldiers down a path of self destruction. A lot of Soldiers are also apprehensive about seeking help for those conditions because of the social stigma placed on those who seek mental health

help and the perceived negative effect it could have on a career.

This problem is especially acute for Reserve Soldiers when they are released from Active Duty and return home to their Families', jobs and communities where the necessary services are not readily available.

Active component Soldiers return to their home installations where their Families are waiting and the needed services are local and readily accessible. Reserve Soldiers and Families however, were not receiving all the care needed either through non-availability or not being aware of the services available. The Yellow Ribbon Program fixes that.

"The Army is understanding that they train Reserve Soldiers to go to war, but hasn't been training them to come back," said to Col. Jon Aswegan, 88th Regional Readiness Command Yellow Ribbon Program planner. "This program will allow us to identify Soldiers issues quickly and address them effectively."

The Hyatt Regency, was the setting for the first of the Yellow Ribbon Reintegration Events. It was hosted by the Army Reserve 88th Regional Support Command from Fort Snelling, Minn. Soldiers and their Family members converged for the weekend long event aimed at helping the returning combat Soldier's transition back to the citizen side of their Citizen-Soldier roll.

Representatives from a wide variety of service agencies were represented. Some offered on the spot services, while most offered referrals to trained counselors in the Soldiers home areas. Confidential counseling was also offered. The topics presented



Soldiers line up to register at the Yellow Ribbon Reintegration Program recently hosted by the 88th Regional Support Command

in the two-day forum included: marriage counseling, substance abuse awareness and treatment, financial counseling, mental health awareness and treatment, anger management counseling, domestic violence awareness and prevention, employment assistance, post-traumatic stress disorder or traumatic brain injury awareness, VA services and medical referrals.

Soldiers of the 325th Combat Support Hospital, from Independence, Mo., recently back from Iraq, were among the first of the returning Reserve Soldiers to undergo the reintegration process.

All returning Reserve Soldiers are authorized to attend. For more information contact your command or visit <https://www.arfp.org/yellowribbon>. Family members are encouraged to join their Soldier with the travel and hotel costs being covered by the military.

The Yellow Ribbon program was adopted into law as part of the 2008 National Defense Authorization Act. It illustrates a continued support to our Reserve combat veterans returning home by our military and Congress.

Life-long Soldier Home

Vietnam Vet Set to Retire in December After Three Tours, Multiply Wars

Story and photo by gkennedy@ksl.com



SALT LAKE CITY, Utah - Master Sgt. Gerald Evans spent his life serving our country. Recently, at Salt Lake International Airport, he got a big welcome home.

At the bottom of an escalator inside Terminal 2, an impromptu welcome-home party for Reserve Soldier who's almost 60 erupted.

"I was the oldest Reserve Soldier to enlist in the Alpha Palace in Baghdad," said Evans.

He is with the 2nd Medical Training Brigade out of Fort Douglas. He spent the last year in Iraq securing lost equipment and medical supplies.

This was actually his third tour, and

tonight he received the Iraqi Campaign medal.

"This is outstanding! This is amazing! It's amazing because in Vietnam we didn't get this," Evans said.

Yes, he served in Vietnam.

"As far as uniqueness, there aren't that many people willing to stay in the military that long," Evans' wife, Terry, said.

"Well, he's one of our heroes. There's no question about that," said Col. Randy Schwalle, also of the 2nd Medical Brigade. "Especially to be a Vietnam vet, and have that kind of experience, is invaluable. When I went to the Gulf War, we had 12 Vietnam vets, and they were truly the backbone and heartbeat of those operations."

"There's not very many people who are



Master Sgt. Gerald Evans, center is greeted by his family upon return from his third deployment. Evans, a Vietnam veteran, will retire in December.

willing to stand up and fight for their country as long as he has, so I'm very proud of him," Terry said.

Come December, Master Sgt. Evans is headed for retirement. For his wife, it means relief and a true homecoming.

But what does it mean for the Sergeant? "It's time to call it quits, let the younger ones do it," Evans said.

Even in retirement, the Master Sergeant says there's a chance you can get called for duty again. If he does, Gerald Evans says he will answer that call.

Bike Ride Unites Unit, Community

Soldiers Bike with and Support Community Riding Across Iowa

Story and photo by Ms. Tish Butts, Army Reserve Medical Command Public Affairs Office



DES MOIS, Iowa - Soldiers from the 949th Veterinary Services Detachment of Ames, Iowa added a 472-mile bike ride across the state to their combat training, all the while supporting



their home state with their military acquired medical skills.

The unit tactically moved a convoy from the Missouri River on the west to the Mississippi River on the east as 12 Soldiers participated in the Register's Annual Great Bicycle Ride Across Iowa (RAGBRAI).

During the annual seven-day bicycle ride, eight other Soldiers from the team supported the riders by setting up and taking down camp each day.

The unit mission was designed to enable the unit to practice needed military

skills while interacting with the community.

While moving from town to town, following the riders, Soldiers were able to practice their convoy skills essential during combat operations. These included reacting to ambushes and IEDs (improvised explosive device).

According to the Unit Commander, Maj. Leonard Anderson Jr., lower enlisted Soldiers played the part of convoy commander during the ride.

"The unit was able to move from one area of operation to another for new Soldiers' training," said Maj. Anderson. "Lower enlisted did well, and I'm thrilled the way the Soldiers pulled together."

Each day a noncommissioned officer briefed new Soldiers on duties of the role, Staff Sgt. James Doolittle said.

According to Spc. Eddie Vandeo, each "Soldier had to plan a different convoy."

He said he had planned a convoy once before, and this time the mission was not difficult but "repetitive."

"The repetition is good as it helped the new Soldiers commit it to memory faster," he added.

Soldiers also had to practice their vehicle maintenance skills to keep their convoys moving from town to town. Once they reached their destination, they set up tents and equipment that would act as the unit's work and living quarters had they been in a deployed environment.

The last two days of training were the quickest the team set up and took down camp, Vandeo said. "We had it down pat."

Participating in RAGBRAI was the unit's first Extended Combat Training since returning from deployment where they performed civil affairs and gave vaccinations to animals such as goats, cats and dogs, according to Sgt. Lacy Anderson.

This event was the first time the Soldiers participated



Riders, as well as support Soldiers from the 949th Veterinary Services Detachment of Ames, Iowa, practice maintaining vehicles at each stop on the convoy.

in RAGBRAI as a unit, Sgt. Anderson

More than 10,000 other bike riders joined the Soldiers on the ride this year - a drastic difference from the 300 that took the first ride in 1973.

Maj. Anderson said the event was also great exposure to the community.

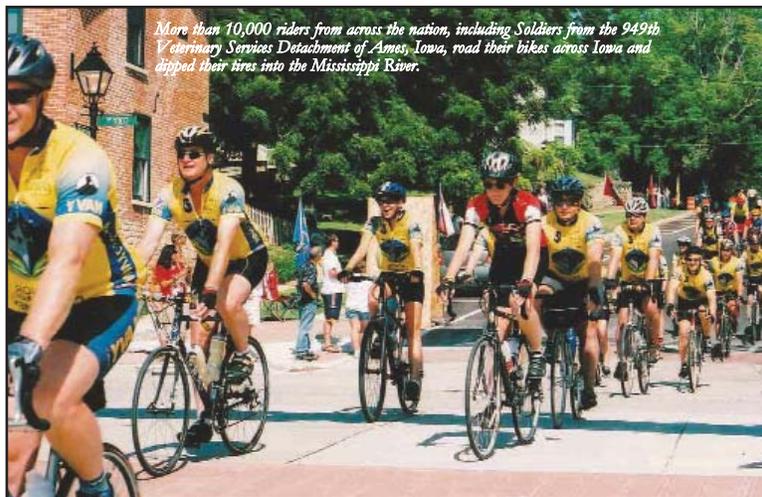
"It's good for them to put a face with the Army," he said. "I think one of the humbling things as you go through this process is how many people thanked us for the things that we do."

The unit served their community face to face during the event by pulling a bus out of the mud, and later, using their military medical skills to aid a dehydrated diabetic rider from another team.

Although the team was ready to respond to additional emergencies, the Soldiers agreed that they were glad they only had to simply train and ride across Iowa with the very people they protect.



Soldiers from the 949th Veterinary Services Detachment of Ames, Iowa, dip their tires into the Mississippi River at the end of the week long trek across Iowa



More than 10,000 riders from across the nation, including Soldiers from the 949th Veterinary Services Detachment of Ames, Iowa, road their bikes across Iowa and dipped their tires into the Mississippi River.

AR-MEDCOM Soldier New MALO

Soldier New Military Academy Liaison Officer in Florida

Story by Master Sgt. Enid Ramos- Mandell, Army Reserve Medical Command Public Affairs Office



PINELLAS PARK, Fla. - A Reserve Soldier from the Army Reserve Medical Command (AR-MEDCOM) was recently appointed as a Military Academy Liaison Officer (MALO) in

Florida.

Capt. Charles Cook, a mobilized Soldier in the Operations (G3) section of AR-MEDCOM, currently serving on active duty as their Special Projects officer, was chosen to be the MALO for Florida's 13th Congressional District.

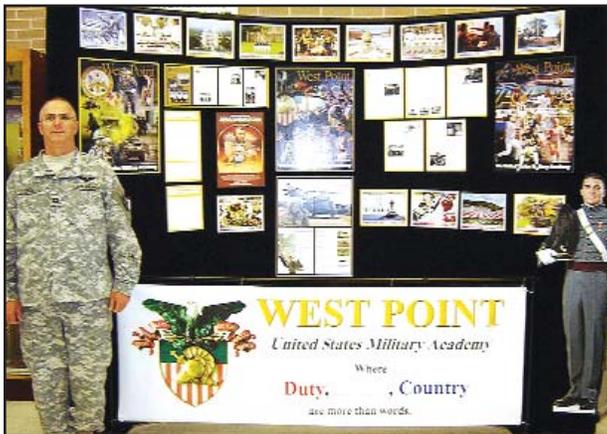


Photo courtesy of Capt. Charles Cook.

Cook, who is heavily involved in volunteerism, wanted to give back to the academy he went to many years ago.

"I was a cadet at West Point when I left to pursue my dreams of flying in the Air Force," he said. "In spite of physically leaving the academy, I never left the character foundations that West Point instilled. I am now very proud to be able to continue supporting West Point and its mission to train and educate the future Army leaders," he added.

The MALO program seeks Army Reserve officers to become local representatives of West Point's Admission Department. The program takes advantage of Reserve Soldiers and retired veterans' extensive military and civilian experience to aid potential new cadets with the admissions process, all the while sharing their life lessons with them.

"As a MALO I also monitor the completion of the admissions information in each candidate's folder, providing assistance, guidance and helpful reminders when a can-

didate's information is lagging behind the assigned due dates," said Cook.

Cook found out about the MALO program in a magazine back in 2007, and after much research Cook found out that the counties surrounding his residence in Florida were in need of a MALO and decided to submit an application to the admissions office at West Point.

Shortly after being accepted, he completed a required one week MALO's training course and was selected and appointed in managing the informational requirements of cadet candidates as they progress through the ascension process to nomination and appointment by their congressional or senatorial office for the 13th Congressional District.

MALO appointments are for as long as the Reserve Soldier or veteran wishes to continue participating in the program, even after retirement from military service.

Cook plans to stay active as a MALO in FL-13 as long as he is able to perform the duties.

"I feel that no one achieves any sense of success alone and believe that behind everyone are people who have had hands in their achieving success," he said, "I believe this (the MALO program) is a way of giving back to the community."

Capt. Cook is married and has one son. He uses his MALO duties as a way of spending time together as a family, while teaching his son the virtue of giving.

"In many cases I try to involve my family in my community work. Almost every event I am involved in, my family can join me and enjoy the event, the people, and the experience," he said. "It is a great way to spend time together and help out."

Cook has been in the military for 17 years. When not mobilized to AR-MEDCOM he is a Senior Healthcare Inspector with the VA Office of Inspector General, St. Petersburg, Fla., and an aviation instructor pursuing his civilian FAA ratings for instrument pilot, commercial pilot, certified flight instructor, and multi-engine ratings.

To get more information about the MALO program, contact Capt. Cook at (727) 563-3840.

Are you ready for a disaster?

What's in
**YOUR
closet?!**



Supply Closet Suggestions

7 Day Supply Recommended

Canned meats, fruits and vegetables	Batteries
High-energy foods: nuts, raisins, granola	Matches in a waterproof container
Infant/baby food and supplies	Candies and charcoal
Pet food	Toilet paper, lowelettes
Non-perishable food	Soap/detergent, disinfectant/bleach
Over-the-counter medications	Personal hygiene items
Garbage bags	Paper cups/plates, and plastic utensils
Water (at least a gallon per person daily)	First aid kit, hand sanitizer
Manual can opener	Plastic storage containers

Other important items: flashlight, battery-operated radio, extra clothing, blankets, prescriptions, money (paper and coins), eyeglasses, and important documents.

Be Prepared...Save Money!
Pantry loading at your commissary is a GOOD idea!

This list of items may not be all you need. For more on disaster preparedness:
www.ready.gov/america www.pandemicflu.gov www.redcross.org

www.commissaries.com



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Thanks to a paid scholarship from the U.S. Army, **2nd Lt. Kathryn Graves, Fourth-Year Veterinarian Student and Army Scholarship recipient, Oklahoma State University, Okla.**, is able to fully focus on her veterinary education. Her veterinary school tuition is completely covered, and upon graduation she will be able to help animals help her fellow Soldiers with some of the world's most advanced equipment. There's strong. Then there's Army Strong. Apply today for a scholarship; call 800-569-8867 or visit healthcare.goarmy.com/hpspvvet.



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