Second Edition, Second Issue, Summer 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

"There are no bad Soldiers"

"We have Soldiers that are from all generations enlisted in this Great Army. We need to identify which generation gap the soldier is identified with and as a leader create new and innovative ways to improve self-motivation and instill a mindset oriented to working towards an objective until it is achieved.

We don't have bad Soldiers, just Soldiers with some concerns. We need to let them know that we are proud of them and how important their selfless service is to this 21st Century Army.

Master Sgt. Pamela Duggan

Featured AR-MEDCOM NCO...

Master Sgt. Pamela Duggan,
Logistics Management Division,
AR-MEDCOM HQ,
Pinellas Park, Fla.

"Army NCO — No One is More Professional than I..."

IN MEMORY OF OUR FALLEN SOLDIERS

173 RESERVE SOLDIERS HAVE LOST THEIR LIVES SINCE 9-11...

12 WERE MEDICAL PROFESSIONALS.

Greater love hath no man than this, that a man lay down his life for his friends.

MAJ MATTHEW P. HOUSEAL - SPC PAUL T. NAKAMURA
MAJ JOHN P. PRYOR - SPC DUSTIN C. JACKSON
CPL RACHAEL L. HUGO - SGT JAMES S. COLLINS, JR.
MSG ROBB G. NEEDHAM - SPC BENJAMIN J. SLAVEN
SGT PIERRE A. RAYMOND - SGT EDWARD R. HESELTON
MAJ CHARLES R. SOLTES, JR. - SFC DAN H. GABRIELSON

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On The Cover:

The Veterinarian Readiness Training Exercise (VETRETE) Team from the 442nd Medical Detachment (VC), Rockville, Md., vaccinate a cat during their mission in Belize. The team is made up of Maj. Nina Depinto, Spec. Christopher McAndrew, and Sgt. Christopher Holt standing behind Depinto. They visited local residents and provided preventive care treatment such as endo-parasites, ecto-parasites, rabies vaccinations and de-worming to cattle, sheep, horses, pigs, poultry and other small animals. There were 1944 animals treated during this "Beyond the Horizon" 2009 in Belize, Medical Training Exercise (MEDRETE) in the District of Corozal. In the background is a Belizean Soldier who accompanied the veterinarians everywhere they went providing force protection.

Photo by Master Sgt. Enid Ramos-Mandell, AR-MEDCOM

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 ARMEDCOMPAO@usar.army.mil., or call 1-877-891-3281, extension 3730.

Words from the Wise

From the CG...

2009: Year of the NCO

As we celebrate the year of the non-commissioned officer, I want to personally thank every NCO within the Army Reserve Medical Command. You are a vital part of our medical team and are essential for the success of our mission. Without your dedication, skills and hard work, many members of our armed forces would not have made it home alive.

Our doctors, nurses, dentists and psychiatrists rely on your skills as both a leader and as a medical professional. You are responsible for many tasks, and we need them all to properly take care of our troops.

Without our medical logistics specialists we would not be able to receive, store or record Army medical supplies. Our mental health specialists provide treatment, care and understanding to patients in conjunction with our psychiatrists, social workers, psychiatric nurses, and psychologists.

Without our radiology specialists, Soldiers would not receive the x-rays they need to diagnose and treat their injuries, wounds and diseases. Without dental specialists, Soldiers would not receive the care they need to ensure their teeth are ready for deployment at a moments notice.

I could go on and on with such descriptions, describing how important our non-commissioned officers are to the Army, the Army Reserve and AR-MEDCOM.

It is said that the NCO corps is the backbone of the Army. I would also say it is the backbone of Army medicine and the Army Reserve Medical Command.

They are essential in so many tasks that our officers could not perform their jobs without them. Our patients would also be faced with many more challenges without the care and efficiency of our NCO corps.

Many Soldiers, sailors, airmen and Marines truly owe their lives to the non-commissioned officers in this command and throughout the Army Reserve.

It is not possible for all of them to thank you personally for taking care of them, treating them, and being there in their most dire moment of need. So, I will take this opportunity to thank each and every one of you for what you do, what you have done, and what you will continue to do, in order for our Soldiers to soldier on.

Keep up the good work.

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

From the CSM...

The article below is an excellent example of how vital NCOs are in today's Army.

==========

'Practice What You Preach,' NCO Tells Others

By Army Sgt. Keith Anderson
Special to American Forces Press Service

CONTINGENCY OPERATING SITE MAREZ-EAST, - Army Sgt. 1st Class JennyAnne Bright believes noncommissioned officers have to practice what they preach.

"Soldiers look up to NCOs, because NCOs hold themselves and their Soldiers to the highest standards," said Bright, shower laundry and clothing repair noncommissioned officer for Headquarters and Headquarters Company, 18th Combat Sustainment Support Battalion, 16th Sustainment Brigade. "NCOs lead by example, take pride in the corps and are proud to be the backbone of the Army."

"An NCO is a trainer, mentor and a coach," Bright said. "They take care of Soldiers, not by giving days off, but by teaching their Soldiers everything they need to accomplish their mission, to survive in combat, and help them become successful in the Army."

Bright, a native of Virginia Beach, Va., even takes her stripes home with her. She encouraged her husband -- Army Sgt. 1st Class Terence Bright, responsible officer at the Q-West bulk fuel farm, 574th Quartermaster Company, 30th Combat Sustainment Support Battalion, 16th Sustainment Brigade -- to attend the Sergeant Audie Murphy Club board, and studied with him over the phone and the internet. He became a club member at the 3rd Expeditionary Sustainment Command's board on May 21.

"JennyAnne is an outstanding NCO who always strives to improve daily as a leader," her husband said. "She continues to encourage me to become a better NCO and leader, constantly learning and always teaching, mentoring, and training Soldiers to strive for excellence."

Being a drill sergeant shaped her career, Bright said.

"Being a drill sergeant was the best job I have held so far in the Army," she said. "It was very challenging, but in the end, it was a rewarding experience. It was a great job because I was able to train so many Soldiers with different [specialties] to prepare them for the operational Army. This job enhanced my abilities to lead. It sharpened my skills as an NCO."

Bright, who entered the military in 1997 and is on her second deployment, said the thing she will remember most about service in the Army is the opportunity she's had to touch lives.

"When I look back at my career, what I will remember most about being an NCO are all the Soldiers I have trained and made an impact on. Training Soldiers is the best job to have. Being an NCO enabled me to teach a Soldier everything from marching, conducting personal hygiene, digging a fox hole and disassembling weapons to leading other Soldiers."

Bright offered some tips for new NCOs.

"Take charge and fulfill the responsibilities that come with the rank," she advised. "Soldiers look up to you for direction, purpose and motivation. Soldiers are always looking at you, even when you think they are not looking."

She said doing the right thing is its own reward.

"Always train to standard to prepare them for combat," Bright said. "The NCO rank is a powerful rank. Use it to teach, coach and mentor Soldiers. Take care of Soldiers to the best of your abilities, and they will take care of you in return without question."

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Soldiers rely on NCOs. Don't let them down!

Command Sgt. Maj. Roger Schulz,
CSM, AR-MEDCOM

2009
The Year of the Noncommissioned Officer
AR-MEDCOM NCO FEATURE STORY #2

COMMENTARY: Mentorship - The Art of "Passing Down Knowledge"

Story by Maj. William D. Ritter, Army Reserve Medical Command Public Affairs Office. Photos courtesy of Kris Gonzalez.

FORT BRAGG, N.C. - I recently had the honor of administering the oath of office to a Staff Sergeant who gained her commission.

It was a privilege to be asked. Staff Sgt. Yves-Marie Daley was a great non-commissioned officer (NCO) who worked for me in the past as a photo-journalist.

What better way to celebrate the "Year of the NCO" than being able to welcome one of the finest NCOs I've worked with into the officer corps with me.

Daley considered me a mentor, and therefore wanted me to administer her oath of office.

This made me reflect on the importance of mentorship in the Army; and the importance of "passing down knowledge."

I was delighted to have affected this junior Soldier in a positive manner. I was glad the lectures, discussions and training sessions together not only helped her, but were appreciated.

It also made me thankful for Lt. Col. (Ret.) Seth F. Braverman, whom I considered a mentor.

Many of the tasks, skills and leadership traits, that I was able to impart on 2nd Lt. Daley, came from the tutelage of Braverman.

More times than not, on-the-job training administered by then Major Braverman, enhanced my abilities as a junior officer, and I dare say, helped shape me into the officer I am today.

Without his patience, and willingness to share his expertise with a junior officer, I would have not been able to positively affect then Staff Sgt. Daley's career, and motivate her in the manner that I was able.

I "passed down" the skills and knowledge obtained from my mentor to Daley. Indirectly, Braverman trained her; he mentored her. And I bet if you'd asked him, he too would thank someone for helping him navigate the world of public affairs and proper soldiering.

According to another colleague from Daley's past, Master Sgt. Tawanna Dawson, Daley has long valued mentorship.

"We would often talk, NCO to NCO. She'd ask me how I was doing something, if I had experience in different topics, and so forth," she said. "She's a very energetic Soldier. Knowing her the way I do, she wants to make a difference. I think she'll make a huge impact on the officer corps if she remembers her NCO skills. They will make her a better officer," added Dawson.

"I need to find a seasoned NCO of my own for mentorship"

"Someone who has more experience than I do, who I can learn from. They can help me be a better leader"

Daley's own sister, and now fellow officer, Air Force 1st Lt. Marie Casimir, agreed with Dawson's assessment.

"She (Daley) will do well as a lieutenant. When you combine her civilian public affairs experience with her NCO knowledge, she knows how to manage and motivate people," she said. "She has more passion for what she does than many of the NCOs I've worked with in my career.

When I received the call asking me to administer 2nd Lt. Daley's oath-of-office, I was filled with satisfaction knowing I positively affected this NCO.

But as I talked with the new Lieutenant after the ceremony, I was even more prideful of the officer before me, who without prompting uttered what was most important to her, as she moved into day two of her commissioned officer career.

Top: Staff Sgt. Yves-Marie Daily recites the oath off office, as an officer in the Army Reserve, administered by Maj. William Ritter. Right: Air Force 1st Lt. Marie Casimir, helps 2nd Lt. Daily's son, Nicholas, put his mother's new ranks on during recent ceremonies.

"I need to find a seasoned NCO of my own for mentorship," she said. "Someone who has more experience than I do, who I can learn from. They can help me be a better leader. I also want to find some junior NCOs with potential, so I can help them grow in this field (public affairs)," she added.

Mentorship: The art of "passing down knowledge."

Recognize how important it is, not only to your Soldiers, but to your career as well.

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The PDHRA: Views From a Soldier

Post-Deployment Health Reassessment Helps Troops

Story by Lt. Col. Sophia Tillman-Ortiz, PDHRA Program Manager.

To facilitate a Soldier's transition from Army to civilian life, the U.S. Army has taken steps to safeguard the health and well-being of those who served in a combat deployment with the Post-Deployment Health Reassessment (PDHRA) screening.

Capt. Clinton Rogers, a Reserve Soldier with the 80th Training Command (TASS), returned home from Iraq in 2006 and faced a whirlwind of emotions that left him excited and stressed. "You can go ahead and say I got my limbs, thank God and think you're alright. However, it's the Family and friends who can tell you help is still needed," explained Capt. Rogers.

The PDHRA Program is part of the Department of Defense's overall Force Health Protection Program and is a global health initiative based on solid research.

The United States Army requires all Soldiers, who have returned from a combat zone since 10 March 2005, to complete the PDHRA.

The PDHRA includes Soldiers taking part in "Battlemind II Training," which emphasizes safe and healthy personal relationships and teaches Soldiers to look out for each other's health. Soldiers must complete the DD Form 2900, that asks about physical and behavioral health concerns. Also, Soldiers will speak with a healthcare provider. When issues are identified, the Soldier is referred for follow-up care.

After his deployment in 2006, Capt. Rogers benefited from the PDHRA. "I knew it was important to have an honest dialogue with the doctor to see if anything was wrong. When I went through it, I had no problems discussing my concerns. You're only fooling yourself if you can return home and think everything is normal." Spending two years as an active duty Soldier between 1986 and 1988, Capt. Rogers returned to Virginia where he completed his bachelors degree at Virginia Commonwealth University. After his last deployment in 2006, Capt. Rogers used his skills to help fellow Soldiers. As a therapist at the Hunter Holmes McGuire Richmond VA Medical Center, Capt. Rogers has seen the benefits of the PDHRA. "Everyday, I see Soldiers who fought in Iraqi Freedom taking advantage of the VA programs." Capt. Rogers has witnessed many Soldiers receive therapy as a result of the PDHRA.

As a recreational therapist, Capt. Rogers is used to helping Soldiers with their transition to civilian life. Recently, Capt. Rogers had the opportunity to work with a Soldier he fought beside in theater and who was referred to Capt. Rogers by the PDHRA. He remarks: "One of my friends is currently at the VA where he receives counseling so he can be the type of husband and father his Family deserves." Capt. Rogers' work with Soldiers has helped make a difference in their lives.

Currently, the Army Reserve has screened 95% of all required Soldiers and continues to make strides to ensure all Reserve Soldiers are screened and referred for further evaluation, if necessary. Soldiers can complete the PDHRA by either attending an on-site screening event or Yellow Ribbon Reintegration Program event, or logging into their "My Medical Readiness Page" via AKO. For more information on the PDHRA Program, visit http://www.armyg1.army.mil/hr/pdhra/default.asp or https://www.hrc.army.mil/site/Reserve/soldierservices/medical/pdhra.htm.

Exercise Tip

Consider Exercise Bands, Balls for Home Workouts

Story by Lt. Col. Karen E. Hawkins, Defense Commissary Agency.

FORT LEE, Va. - It is possible to get a really good workout at home using an exercise ball, exercise bands and a good pair of tennis shoes. Many of us don't have time to go to the gym so we can use this convenient workout equipment to tone and strengthen our muscles, along with regular aerobic activity, such as walking, to help burn calories.

Exercise bands are great for strengthening muscles and increasing endurance. They are also compact and portable so you can use them at your desk during break time at work and when you travel. According to the American Council of Exercise, you can get a whole body workout in 10 to 20 minutes, twice a week. Normally, you need to do about 10 repetitions for each move. Some exercises using bands recommended by ACE include hamstring curls, squats and chest presses. Keep the directions after you buy the band to help you get the technique down.

Choose a band tip:

Exercise bands come in multiple resistance levels from light to heavy. When starting out, choose an exercise band that offers enough resistance to work your muscles without excessive strain. Once the exercises begin to feel too easy, you may need to graduate to a band with greater resistance.

An exercise ball is great for helping develop balance, stability and strength. Exercise balls are great to use for strengthening your core muscles as you have to work at staying stable when on the ball. You can also use the ball to do weight training, stomach exercises and stretching.

Choose a ball tip.

As exercise balls come in different sizes, choose one that is right for your height. When sitting on the ball, your hips should be level or slightly higher than the knees. This will help you maintain comfortable control while using the ball.

What's neat about using a ball or a band is that they are so versatile. You can use them when you are watching TV; or try sitting on the ball instead of using a chair when working on your computer. Your muscles have to work to hold you up so you are toning while typing.

When you first start using the equipment you may want to use a chair or the wall to help support yourself. Perform each exercise using slow and controlled movements and concentrate on what you are doing. This will help you get the most out of your workout.

And after your workout, enjoy a whole grain cookie from your commissary. You've earned it - not to mention the more than 30 percent savings you'll realize by shopping there.

For more information about making healthy choices, visit Ask the Dietitian on http://www.commissaries.com and post your questions on the DeCA Dietitian Forum. Be sure to look for other useful information in the Dietitian's Voice archive. Also Sign up with the DeCA Dietitian on http://www.twitter.com and get messages sent to your cell phone today. For delicious recipes, check out Kay's Kitchen. And to enjoy all your commissary has to offer, sign up for the Commissary Connection.

Financial Readiness Training

Tools That Help Soldiers Beat Debt and Build Wealth

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

PINELLAS PARK, Fla. - In conjunction with the two Department of Defense (DOD) initiated programs called "Military Saves" and "Money Wise in the Military", the headquarters of the Army Reserve Medical Command (AR-MEDCOM) held a financial readiness training program utilizing the Dave Ramsey Financial Freedom University (Military Edition).

The class, initiated by the Chaplain's Office, consisted of a 13-week video presentation, covering topics such as how to budget your money, eliminating debt, saving and investment techniques, how to end mortgage payments early, how to eliminate unneeded credit cards, and how to pay off loans.

The program was available to any Soldier assigned to the headquarters here. It was intended to assist Soldiers to get a good handle on their finances and lessen their anxiety about financial concerns while serving their country during this economic recession.

Back in 2003, the DOD launched the Financial Readiness Campaign with the objective of providing training and education to Soldiers around the country.

Statistics showed that 56% of enlisted personnel report difficulty with their finances and 47% say they're in "over their head" with their own expenses. Financial problems are the reasons many troops lose their security clearance. It also adds stress on Soldiers while deployed and for their dependents left behind.

Educational seminars were set up at military installations around the world to work with Soldiers and their Families on financial matters. Additionally, the Dave Ramsey Financial Freedom University (Military Edition) was made available to troops.

The Ramsey course is a spiritual based financial course, teaching you to get out of debt and become wealthy enough to be able to give to others, once you have reached your financial independence.

Ramsey devotes himself full-time to helping ordinary people, and military service members, understand what caused their financial distress and how to set things right - financially, emotionally, and spiritually. His organization is among the many agencies and nonprofit groups who have established a partnership with the DOD, to use their finacial programs and services as a part of the campaign to improve the financial readiness of service members and their Families.

Chaplain (Lt. Col.) Paul Linzey ordered the program materials for AR-MEDCOM, with funds from the chaplain's budget. He had to order more books to meet the demand. The finance workshop took place during a lunch break once a week

"We were excited about this opportunity," said Linzey. "The Ramsey course material is so good and so practical. It really worked for me," he added.

Chief Warrant Officer Jose V. Molano agreed with Linzey.

"The course's greatest benefit for me was helping me better understand the importance of budgeting, eliminating debt, and seeing how many financial institutions lure customers into their web of debt," he said. "The program not only helped to breakdown the vicious cycle of debt, but it gave us tools to deal with investing, savings, budgeting, and planning for retirement," he added.

Molano expressed that the class should be for everyone, not just for service members, but also for married couples, singles, and young and old alike. The methods of controlling your income and making it work for you are goals that are real and achievable.

Personal finance has been an important issue to the DOD in the past, with each of the military services providing financial education and counseling to aid service members and their Families.

Even with this support, approximately one in four service members, in grades E1 - E4 (age 18 - 21), consider themselves as having trouble making ends meet.

The departments financial readiness campaign gives service members, and Families, a chance to learn more about personal finances and to encourage them to manage their money better.

For more information on hosting a program, contact Staff Sgt. Jennifer Fey, chaplain's assistant, AR-MEDCOM, at 727-563-3726.

Editors Note:

To find a seminar near you, visit https://www.daveramsey.com/fpu/military_saves/, and click on "locate a class near you" tab.

For additional financial aids, visit http://www.militarysaves.org/ or http://www.moneywise.tv/military/index.html

Reserve Medical Unit Cares for Belizean Residents - Man and Beast

7212th Participates in MEDRETE

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

DISTRICT OF COROZAL, Belize - As the Army Reserve set up their tents and medical facilities, under the scorching Belizean sun, residents in need of medical care started arriving at the 7212th Medical Support Unit's (MSU) camp, eager to be treated by these Citizen-Soldier professionals.

Thirty Soldiers from the 7212th MSU, a team of health care professionals headquartered in Rochester, Minn., went to Belize on a Medical Training Exercise known as MEDRETE for two weeks. They were part of the U.S. Southern Command exercise, called "Beyond the Horizon," where medical units deploy and provide humanitarian assistance to Latin American and Caribbean nations as a way of building and exchanging knowledge with host nation officials.

The unit worked with the Belizean Defense Forces, who provided security for the exercise, as well as a doctor and a medic in support of the mission.

Word of the 7212th's visit and capabilities quickly spread via radio and television, as many needed the free medical care they were providing.

Residents were greeted and briefed on how to prevent the spread of disease, with a translator, before being seen at the triage station. The medical team broke down into different sections consisting of internal medicine, general medicine, dental, ophthalmology and a small pharmacy.

Batrina Vega, a 43 year old mother of ten children, came with 2 of her children and two granddaughters for treatment. She peddled her way to the clinic on her old bicycle, stating it is her main source of transportation. She added that most locals ride bikes and will not go to the hospitals because they are too far away to ride. Plus, for most the local doctors are too expensive.

"That's why many take advantage of this opportunity to come here," she said. "I'm very grateful for the medical services that the U.S. Army, along with the Belizean officials, are offering us," she said.

This exercise was emotionally happy one for one member of the 7212th.

Maj. Paul J. Slocum takes a young child's blood pressure in the village of San Narciso during Beyond the Horizon 2009 in Belize , Medical Training Exercise (MEDRETE) in the District of Corozal

Maj. Alexander Degazzo, a family practitioner from Lawton, Okla. moved to Belize when he was just five years old. He grew up in Corozal, and lived there until he turned 18 and left for college to the U.S.

"For me, the most rewarding part of this mission is coming back to where I grew up and actually feeling I'm able to give something back to the community," he said. "At the same time, I'm helping the community which I currently live in, back in the United States, because I had the opportunity to treat uncommon illnesses rarely seen in the States," he added.

The mission was also emotionally sad at times, especially for the doctors working on special needs children within the community. Many parents have little hope of cures because of limited resources in their country.

One child who stood out was Tyrel Sutherland, a four-year old with a rare disease called ichthyosis. It's a disease that causes skin to blister and fall off the body.

"All I want is for my child to be able to go to school and not be stared at, nor made fun of, by the other students," said his mother, Karen McDougal. "I want him to be as normal as possible.

The 7212th MSU was able to offer options for treatment to make the child more comfortable. Additionally they suggested treatment out of country, where more medical options are available and

Col. Hector Nevarrez an ophthalmologist, examines and cleans an elderly Belizean patient in the village of San Narciso during Beyond the Horizon 2009 in Belize , Medical Training Exercise (MEDRETE) in the District of Corozal

In the village Libertad Col. Ocie Drake anesthetizes patient before extraction of a molar as Sgt. Eric Worma provides better visibility by improvising with a flashlight what would normally be a dental spotlight in a dental clinic .

provided referrals to the District of Corozal Hospital.

In addition to the special needs patients, the 7212th witnessed a lot of optical problems.

According to unit ophthalmologist, Col. Hector Nevarrez, there is a great need for glasses and education in the area.

"The most urgent need for these patients is eyeglasses to read and do their sewing," he said.

Many patients also had vision problems due to cataracts and a condition know as pteryguim, because of living so close to the equator, where the sun is stronger.

"Every other patient that walks in has pteryguim," said Nevarrez. "It's a growth on their eyes that blocks their vision. It is caused by the sun's strong ultra violet light and the lack of the residents wearing UV protective sunglasses," he added.

Nevarrez and his team provided preventive education and gave residents medicated drops that decongest the eyes for comfort. They then referred them for proper care and surgery at the District of Corozal hospital.

"It is very important to educate and stress the need to wear UV protection sunglasses here," he said.

The dental team headed by Col. Ocie Drake, provided preventive education, identified cavities, and extracted teeth that were beyond repair. They also distributed dental hygiene items to reinforce the preventive care instructions.

"I wanted to have my teeth pulled," said Batrina Vega, thinking they were too decayed to save. But, once she was examined she was happy to know that all she needed was a filling.

During the MEDRETE, the 7212th MSU also participated in a Veterinarian Training Exercise or VETRETE, caring for the areas animals, both domestic and farm animals. This ensured the health of those animals and prevented the spread of diseases that could be passed to the balance of the animal population.

The unit examined for many diseases, including H1N1 "swine flu." They were also able to treat many of those diseases. The veterinarians worked along side the Belizean Agricultural Health Department to locate the areas with the greatest need and found no H1N1 cases.

At the end of the two-week mission, the unit departed Belize knowing they made a positive contribution to the residents of the District of Corozal.

According the Staff Sgt. Ronda Parker-Lojo, the unit's acting 1st Sgt., the unit helped thousand of residents in need.

"Over 3,000 patients were seen by our professionals. We were able to issue over 300 pairs of eyeglasses and examine over 700 patients in our optometry section. Our dentists completed over 200 dental extractions from the hundreds of patients they examined," she said. "Additionally, we examined over 2,000 animals."

She added that the most common medications dispensed were antibiotics, pain relievers and treatment for worms and other parasites.

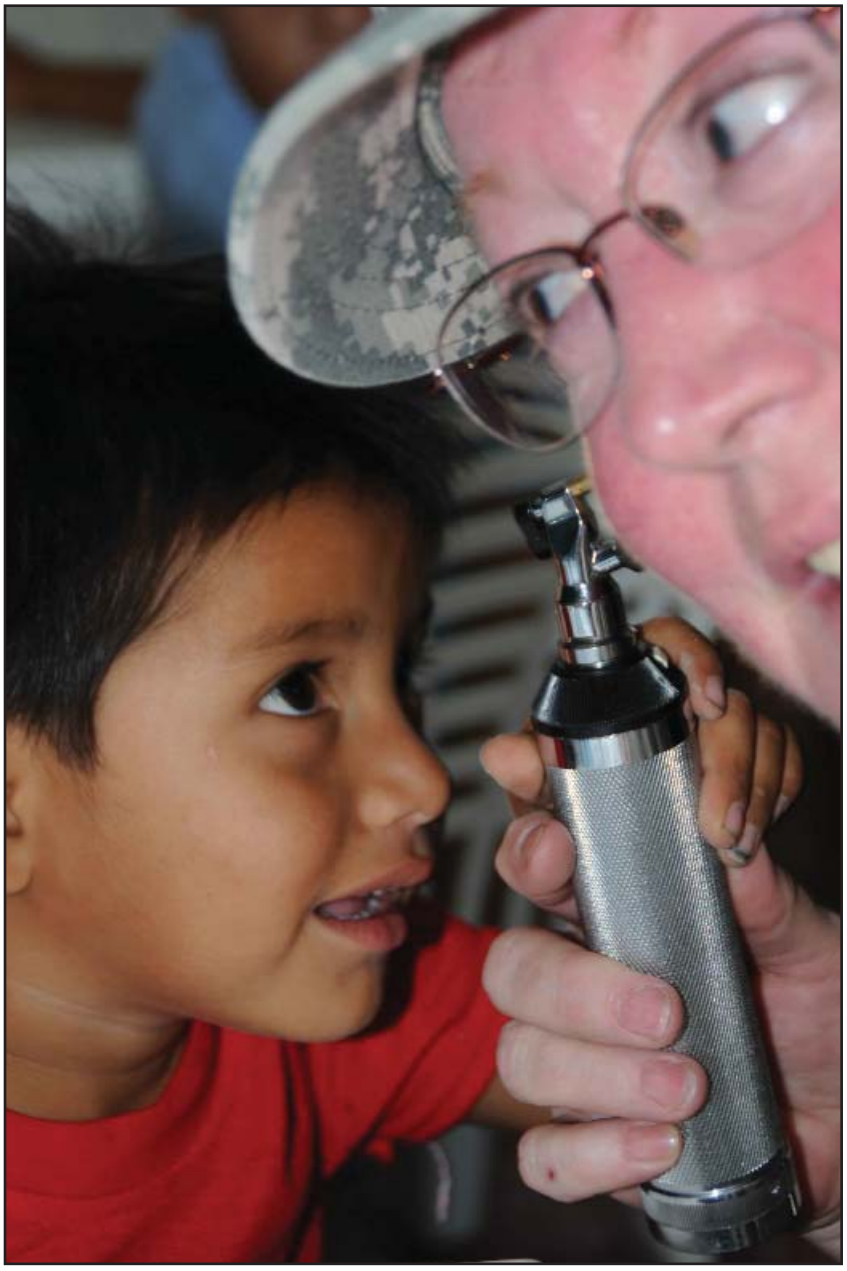
"Many of the basic items we take for granted, such as antibiotics, aspirin and sunglasses, are luxury items here," said Parker-Lojo. "I was glad the Army Reserve gave me the opportunity to help in this exercise. The MEDRETE helped us help others with our training. That is what I call a successful mission," she added

Unit commander, Lt. Col. Douglas B. Peterson, agreed.

"Overall the mission was a success," he said

In addition to the 7212th MSU, over 350 other service members deployed to Belize during the exercise. The "Beyond the Horizon" program has been a Southern Command fixture for the last several summers, providing excellent training for military members while aiding others.

"This was my first MEDRETE," said Spc. Kevin Wood. "It's an experience to remember,"



Maj. Brenda Johnson, serving with the 7212th Medical Support Unit, Rochester, MN, is 'examined' by a curious young Belizean child during 'Beyond the Horizon 2009', Medical Training Exercise in the District of Corozal, Belize. The 7212th medical personnel travels to five different locations throughout Belize to provide free medical care and examinations during their two-week annual training.

Remembrance Ceremony Honors Fallen Military Medics

Since 9/11, 210 Active, Guard and Reserve Medical Professionals Where Killed Trying To Save Others

Story by Army Staff Sgt. Michael J. Carden, American Forces Press Service.

ARLINGTON, Va.- Beneath the rows of simple white headstones evenly spaced beneath a dull and cloudy mid-March sky, the stories of those who rest at Arlington National Cemetery here today are anything but ordinary.

Some were killed by heavy machine-gun fire. Others were showered with rockets or mortars. And many were surprised by the explosion of an unexpected roadside bomb. But for the more than 210 military medics, corpsmen, doctors and nurses who lost their lives in Iraq and Afghanistan since 9/11, they were killed trying to save others, the Defense Department's top medical official said.

"Their motto is 'Good medicine, bad places,'" Dr. S. Ward Casscells, assistant defense secretary for health affairs, said during the first remembrance ceremony and wreath laying for military medical personnel killed in the war on terror. "When it mattered most, they answered the call."

More than 100 friends, relatives and military members turned out for what officials plan to make an annual event to honor their loved ones and pay homage to a profession that almost always places its practitioners in difficult situations.

Casscells, who's also an Army Reserve colonel in the medical corps, talked of his fellow medics and corpsmen who never hesitated to treat their enemy. He read excerpts of medics who were so badly wounded they died giving first aid instructions calmly to others, because they couldn't provide the treatment themselves. He talked of others who gave their last minutes of life bandaging Iraqi children after a suicide bomb detonated.

"The decisions these medics and doctors and nurses make on the battlefield are a triumph of the human spirit," he said. "No greater love has any man than this than to lay down his life for his friends -- and they have done exactly that.

A lone U.S. Army bugler plays taps at the conclusion of the First Annual Remembrance Ceremony in Dedication to Fallen Military Medical Personnel at Arlington National Cemetery, March 11, 2009.

Photo credit Navy Petty Officer 1st Class Chad J. McNeeley

Combat medics have one of the highest-risk jobs in the military, he said, noting the intense, rigorous training they undergo to save lives.

"They had training that didn't exist in Vietnam or World War II," he said. "They're training to the level of [emergency medical treatment] and higher because of the tactical combat environment. They're so intensively trained in things that would make a [civilian] doctor pause."

More than 5,000 U.S. military lives have been lost on the battlefields of Iraq and Afghanistan under the backdrop of guerilla warfare and unpredictably sophisticated tactics and military capability. However, thousands more may have been lost if not for medics and corpsmen first responders in the field, he said.

"Their skill and their bravery is the single most important reason why the fatality rate today in Iraq and Afghanistan is 10 percent vs. 23 percent in Vietnam," he said. "This is despite much more powerful munitions, munitions which explode right under your vehicle."

Deborah Mullen, wife of Navy Adm. Mike Mullen, chairman of the Joint Chiefs of Staff, offered her condolences and praised the military medical corps for their devotion to others. She said to remember them not for the life that was lost, but for the lives they saved.

"We come here today to pay tribute to the heroes of our heroes -- the men and women who risked their own lives and limbs to save the lives and limbs of others," Mullen said. "Time cannot describe and words fail to convey the fidelity and ardor in which these brave souls did their duty."

Medical Soldier Killed In Iraq Laid to Rest

Amarillo Doctor's Service Lauded as a 'Gift' to Nation

Story by Chris Ramirez, Photos by Michael Norris, The Amarillo Globe-News.

AMARILLO, Texas - He was a Soldier, a respected doctor, a steady-handed pilot, all qualities worth bragging about. But Matthew Philip Houseal wasn't the chest-beating type, his sister said.

He often melted quietly into the background. For that, many people knew him as "the invisible man," she said.

John Brewer is the lone piper for the at Maj. Matthew Houseal's funeral in Amarillo, Texas.

"He always was there for people," said Anne Houseal, a U.S. Air Force colonel. "He was a great example of service and honor."

Family and friends gathered recently at St. Ann's Church in Canyon, Texas to pay their final respects to the slain Amarillo physician. Hundreds of American flags waved outside the church as a bell tolled and a lone bagpiper played softly in the distance.

Heads bowed and eyes welled with tears as a military color guard brought his flag-draped casket into the church. Arms curled gently around heavy shoulders.

"It's a sad day in America," said Jack Barnes, president of America Supports You Texas. "A good man was taken away from us."

Houseal, 54, a major in the Army Reserve, was one of five Soldiers killed May 11 when a U.S. Soldier allegedly opened fire in a mental health clinic at Camp Liberty in Baghdad.

In his sermon, the Rev. Phu Phan praised Houseal for sacrificing for his country and for placing the needs of others, often strangers, above his own.

"He found meaning in his desire to help others," Phan said. "We need to thank God for the gift of his life."

Troubled by the rising suicide rates among veterans, Houseal joined the Army Reserve to use his training as a psychiatrist to help stem the tide.

An Army honor guard folds the flag from Maj. Matthew Houseal's casket before presentation.

Houseal's body later was taken to Llano Cemetery in Amarillo, where hundreds of other military personnel are buried.

There, Houseal's daughters laid long-stemmed flowers on his wooden casket. His wife, Dr. Luzma Houseal, hugged the casket and mouthed the words "I love you" while dabbing her eyes with a tissue.

Raised in Michigan, Houseal was a psychiatrist at Texas Panhandle Mental Health Mental Retardation in Amarillo. The father of seven had worked there since February 1997. He was in Baghdad fulfilling obligations as a Reserve Soldier.

Anne Houseal said her brother never focused on his accomplishments. His penchant for helping others emerged early in life, but seemed to intensify in his college years, when he also developed an "insatiable appetite for learning," she said.

Houseal, a certified flight instructor, often gave flying lessons to aspiring pilots while putting himself through medical school.

Early in his career, he also practiced his surgical techniques on stuffed animals, fixing them up to give to young children.

"Matt would never define himself as a hero, and he would never ask for or expect anything like the honor he's receiving today," his sister said. "Truly his service was a gift to our nation."

Editor's Note: Houseal was serving with the 55th Combat Stress Company, Indianapolis, Ind. at the time of the incident.

Soldiers fire three volleys in a gun salute. at Maj. Matthew Houseal's funeral in Amarillo, Texas.

AR-MEDCOM Soldier Named "Best N

Soldier Competes to "Bring Out The Best in Myself as a Person"

Story from a U.S. Army Reserve Command Public Affairs Office Press Release. Photos by Mr. Tim Hale, U.S. Army Reserve Command Public Affairs Office.

FORT MCCOY, Wis. - The Army Reserve named Staff Sgt. Aaron D. Butler, 4225th Medical Hospital in Helena, Mont., and Spc. Shiloh Becher, 461st Engineer Company, Fargo, N.D., Best Warriors for 2009. The two were chosen NCO and Soldier of the Year for the Army Reserve after a grueling week-long competition.

The Army Reserve's Best Warrior Competition is the culmination of an entire year of competitions across the nation. Butler spent the week tackling physical and mental challenges such as a timed 10 K (6.2 mi) march with 70 pounds of gear, day and night land navigation and shooting range qualifications, timed essays, hand-to-hand combat and an Army physical fitness test.

Butler, a Helena area resident, entered the Best Warrior Competition for the opportunity to "bring out the best in myself as a person," he said.

The Staff Sergeant is a medical logistics sergeant. He was named Best Warrior in the non-commissioned officer category. He bested 24 other Reserve Soldier NCO finalists who scored the highest throughout the entire 206,000-strong Army

Staff Sgt. Aaron D. Butler, left, 4225th Medical Hospital, battles for position during his Army physical fitness test, part of the Best Warrior Competition he recently won at Fort McCoy, Wis.

USAR "Best W

CO Warrior" for Entire Army Reserve

Reserve, to finish and win the competition.

He will go on to compete against Active Component and National Guard Soldiers, in the Department of the Army Best Warrior competition this fall, for the right to be call the Best Warrior in the United States Army.

Only 21 years old, Butler deployed to Qatar, Iraq, Afghanistan and Djibouti in 2006-7. There he was awarded the Army Achievement Medal by Maj. Gen. Thomas Robison, commander of the 377th Theater Support Command, for his support of the 20th Special Forces Group in the Horn of Africa. His outstanding work ensured that combat units remained stocked with vital medical supplies.

In his civilian occupation, Butler is a rancher on KG Ranch in Three Forks, Mont.

Staff Sgt. Aaron D. Butler, top, 4225th Medical Hospital, battles for supremacy during his Army Combatives Tournament, part of the Best Warrior Competition he recently won at Fort McCoy, Wis.

AR-MEDCOM Soldier Finishes Well in Army Reserve's Best Warrior Competition

Story from a U.S. Army Reserve Command Public Affairs Office New Release. Photos by Mr. Tim Hale, U.S. Army Reserve Command Public Affairs Office

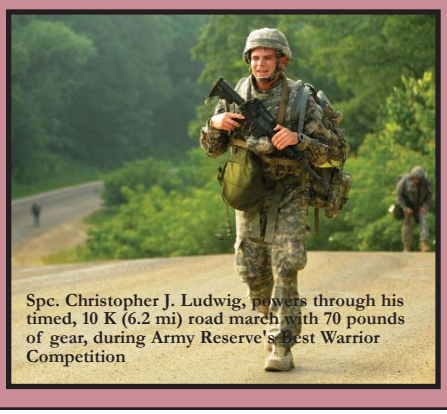
FORT MCCOY, Wis. - Spc. Christopher J. Ludwig, a healthcare specialist with the 4225th U.S. Army Hospital in Fort Harrison, Mont., was a top five finisher in the Army Reserve's 2009 Best Warrior Competition. He was one of only 26 enlisted Soldiers in the 206,000-strong Army Reserve to be selected to compete for this honor after winning Soldier of the Year for the Army Reserve Medical Command.

Ludwig, a native of Townsend, Mont., has been in the Army almost two years.

According to Ludwig, he sought to participate in the competition because he wanted to test his skills against the best the Army Reserve has to offer.

He is Combat Lifesaver and Combatives Level 1 certified. He is currently pursuing a degree in Bio-Chemistry from Minnesota State University Moorhead.

In his civilian occupation, Ludwig is a wildland firefighter for the U.S. Forest Service.



Spc. Christopher J. Ludwig, powers through his timed, 10 K (6.2 mi) road march with 70 pounds of gear, during Army Reserve's Best Warrior Competition

Soldiers Train with Flight Crews

Flight Crews Give Warrior Medics "Top-Notch" Training

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

FORT GORDON, Ga. - Flight crews from the Army National Guard provided medical evacuation (MEDEVAC) training for the 332nd Medical Brigade and its down trace units participating in Exercise Global Medic on June 9 at Fort Gordon, Ga.

During the training, flight crews trained Soldiers on loading and unloading litters. They were initially briefed on the safety procedures, given instructions and demonstrations on the litter carrying procedures.

"Even though we are in a medical brigade, not all Soldiers work in medical slots," said Spc. Valencia Robertson, patient administration specialist, 332nd Medical Brigade, "We should understand air medical evacuation because we may be needed to help at any time."

"When we're taking care of patients, we may need extra hands and that means all Soldiers," said Pfc. Aleea Vicks, medic, 865th Combat Support Hospital (CSH), "It's important that everyone gets this training."

When flight crews are alerted about wounded on the battlefield, the alert gives much information, some of which includes the status of the patient, the type of support needed to MEDEVAC the patient out, the location of the patient and the status of enemy activity in the area. The flight crews staffed by medical personnel will assess the call and proceed to the location of the wounded.

Combat medics on the ground ensure they treat and stabilize the patient until the helicopter arrives. Once the medical aircrew arrives, the combat medic gives them a report of the patient's condition and at that time the flight crew takes over.

Soldiers from various units across the United States participate in a medical evacuation (MEDEVAC) exercise on June 9 at Fort Gordon,Ga. as part of Exercise Global Medic (GM) 2009. Soldiers during this exercise were rehearsing litter load and unload procedures from and to ground ambulances and the Blackhawk (UH1H) helicopters. The exercise provided essential training to Soldiers in order to ensure secure, stable and safe loading of patients for transport to the next level of medical care. GM is the Army Reserve premier medical exercise and a joint exercise with Army, Navy, Air Force and Marines participating at Fort Gordon, Ga., Fort Hunter Liggett, Calif., and Fort McCoy, Wis.

During this training exercise, the flight crews flew two Blackhawk (UH1H) helicopters equipped for patient delivery and care systems.

"This training brings a reality to what we are doing," said Col. Chris O'Connell, observer trainer for the 7303rd Medical Training Support Battalion (MTSB), "Training as we fight."

Soldiers have to prepare themselves for actual situations and must be prepared to provide sufficient transport for the patient from aircraft to stretcher and from stretcher to ambulance. The patient is stabilized and secured on the stretcher both in the ambulance and helicopter before being carried and loaded.

"You never know when you're going to get tasked to do different jobs in the military so you have to be prepared for anything," said Pfc. Sheena Cox, dental assistant for the 7245th U.S. Army Hospital.

Soldiers first trained by talking to each other, loading and unloading in the ambulances and helicopters, and then by giving hand and arm signals to communicate with each other.

"I wanted to be sure that we were comfortable with every member before we began training with the rotor blades from the Blackhawks spinning," said Staff Sgt. Gina Manning, flight crew chief of the 832nd Medical Company, nicknamed the "Med Dawgs."

"They will be loading people and it's better if they have rehearsed it many times in order to give their patients the best chance for survival," said Capt. William Cabaniss, pilot for the 832nd Medical Company.

After awhile I felt comfortable and everyone did an outstanding job," added Manning.

Warriors Kick off Global Medic

332nd Medical Brigade Leads Warrior Medics in Training

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

FORT GORDON, Ga. - Six hundred Soldiers from various Army units, descended upon Fort Gordon, Ga., for Exercise Global Medic (GM), which began June 6.

Exercise Global Medic is the Army Reserve's premier exercise which incorporates assets from all services participating. This provides units an opportunity to plan, prepare and execute medical training as part of a deployed task force. The exercise replicates all aspects of war fighting functions on the battlefield and allows units to train as they operate.

"We are here to learn, mentor and to demonstrate to everyone around us that the 332nd Medical Brigade is the most prepared medical brigade in the Army," said Col. James Snyder, exercise commander from the 332nd Medical Brigade, "It is important that Soldiers understand that they are on a real world mission, know why they are here and receive realistic training."

This year GM will operate at Fort Gordon, Ga., Fort McCoy, Wis., and Fort Hunter-Liggett, Calif. The exercise will build upon the successes of the first GM held last year and its predecessor Exercise Golden Medic held during previous years.

The 332nd Medical Brigade, Nashville, Tenn., had command and control of nearly 20 units participating in the exercise at Fort Gordon. "Units from across the United States are participating," said Capt. Judith Brown, personel officer for the 332nd Medical Brigade.

Most medical units sent an advance team in order to stage tactical operational command tents, living tents, communication equipment, the hospital, the mess hall, shower points, washing points, and much more in order to set up their main body personnel for mission success.

"We (in the G-1 administrative section) prepare personnel reports and daily updates," said Brown. "We track people leaving, people coming, anyone who gets sick. Our goal is know who is here and who is not so we have accurate accountability."

Preparation for GM began last year at the end of the last exercise. "We have been in contact with all units to get personnel reports for the whole time," said Brown, "We would reconcile their personnel needs and worked to fill them and it has worked out really well."

During the year, the 332nd Medical Brigade worked with every unit including U.S. Army Reserve Command, the Medical Readiness Training Command, and the Air Force to prepare for the exercise, by holding an initial planning conference, mid-planning conference, final planning conference, and staff exercise. "The conferences allowed us to meet and coordinate with counterparts from other units," said Sgt. Maj. Robert Ketchum, 332nd Medical Brigade operations NCOIC, "And the staff exercise provided us the opportunity to determine our weaknesses and address them accordingly."

"The exercise is very important," said Snyder, "If the Soldier doesn't know that, then we will fail, and every commander needs to know that failure is not an option."

This is PAO

Army Reserve Medical Command Public Affairs

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The Army Makes You Strong, We Make It Known!

What's Your Army Story?

Mitigating Risks to Ensure Safety

Field Training Needs Precautions at Global Medic - Everywhere!

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

FORT GORDON, Ga. - During Exercise Global Medic, which began June 6, safety officers have monitored a variety of operations and hazards that may affect operations. Though temperatures were above 90 degrees at times, these officers were able to mitigate risks to ensure Soldiers operate safely regardless of the circumstances.

"We check temperatures many times during the day at many locations," said Maj. Billy Wooten, safety officer for the 94th Combat Support Hospital (CSH), "We monitor Soldiers workload, make sure that when they are working it's safe and monitor and enforce water intake."

1st Lt.Tony Moody and Sgt. James McMurray check the wet bulb during training at Global Medic.

"Temperature affects the body significantly when you consider the humidity and the heat," said Wooten, "It puts stress on the body and what we do is make sure that controls are implemented and enforced to mitigate risks, which ultimately reduces stress and prevents heat casualties."

"Safety is stressed at all command levels," said Wooten, "We follow risk assessment procedures according to the U.S. Army Safety Center," said Wooten.

"It's not just temperature that we consider," said 1st Lt. Tony Moody, "We look at anything that could potentially be a safety hazard to operations and Soldier safety. For example, we look at vehicle operations, hospital operations, and ensure the training sites were set up with safety in mind," he added.

Some monitored hazards included the proper loading and unloading of vehicles, wearing seatbelts, following the speed limit, and avoiding rear-end collisions from following too closely. They ensure that patients are moved safely throughout the hospital, that rest cycles are followed, that severe weather is tracked and that commanders understand the evacuation plan in case of severe weather.

"We also remind Soldiers that personnel hygiene in a field environment is important," said Wooten, "Simple hand washing after using the restroom can prevent the spread of communicable diseases."

Though Global Medic has many Soldiers training in the field, commands at all levels are reminded to implement a safety program during any training to ensure the safety of our troops.

Contact Sgt. 1st Class Donta Brown in the AR-MEDCOM Safety Office for assistance, at 727-563-3817.

Soldier Receives Leadership Award

Story by 1st Lt. Michael Meyer, Army Reserve Medical Command Public Affairs Office.

SAN ANTONIO - Maj. Clifford Gehrke, of the Army Reserve Medical Command (AR-MEDCOM) in Pinellas Park, Fla., was selected for the 2008 "Karen Wagner Leadership Award."

In 2006, Maj. Gerhke was a primary team member in the revision of over 63 Army Medical Department career guides. In 2007, he was also named "Senior Officer of the Year" for the U.S Army Human Resource Command in St. Louis, Mo.

The Karen Wagner Leadership Award was established in 2004 to honor Lt. Col. Karen Wagner, a Medical Service Corps health services human resources officer who was killed on Sept. 11, 2001, while performing duties at the Pentagon. The award is presented annually to recognize outstanding medical service corps human resource officers who have demonstrated the characteristics of professionalism, integrity, competence and leadership.

The program is designed to recognize human resource officers from both the Active and Reserve Components. Selection is based upon the overall leadership and performance of the officer during the calendar year of consideration. Among the factors that are considered are: leadership performance, technical competence, commitment to Army values and customer service qualities demonstrated above and beyond expectations.

Each recipient receives a memorandum of commendation from the chief of the Medical Service Corps and a framed Phoenix Medallion in recognition of their excellence. Award recipients are formally recognized at the annual Association of the United States Army (AUSA) Medical Symposium.

Maj. Gehrke's most recent assignment was as the Headquarters Company Commandant of the AR-MEDCOM. He currently serves as the Secretary of the General Staff for the Commanding General for the AR-MEDCOM. Maj Gehrke currently resides in Florida with his wife and two children.

Hospital Wins ROA Award

AR-MEDCOM Unit Takes Hope Prestigious Award

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

Brig. Gen. Les J. Carroll, USARC Command Plans and Operations Officer, presents Col. Donna Dolan, 4224th's United States Army Hospital Commander, the Reserve Officers Association's Outstanding Large Unit Award.

ORLANDO, Fla. - The 4224th United States Army Hospital was awarded the Reserve Officers Association (ROA) Outstanding Large Unit Award.

The winner of the award was selected by the United States Army Reserve Command (USARC). They were presented their award by Brig. Gen. Les J. Carroll, USARC Command Plans and Operations Officer, at the ROA national convention.

The ROA is an advocacy group on behalf of the Reserve officers in the U.S. military. The 4224th was presented their prestigious award, along with other winners in different categories, at their annual conference.

Col. Donna Dolan, the 4224th's Commander, was present to receive the award.

According to Dolan, the unit earned the award, in part by their participation in the Pacific Warrior exercise at Fort Hunter-Liggett, where they provided real world medical support for the 5000 participants.

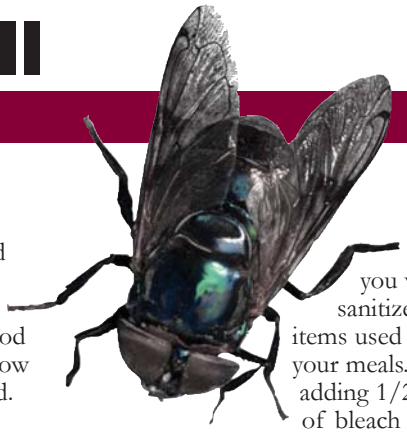
"I believe we won because of the unit's performance at Pacific Warrior," she said. "While there, the professionalism and capabilities of the unit's Soldiers stood out as we ran three different clinics supporting all of the Soldiers in the exercise."

The 4224th is headquartered in Des Moines, Iowa.

Food Borne-Illnesses Kill

Summer Fun Adds More Opportunity For Food Related Deaths

Story by Chief Warrant Officer Jose Molano, Army Reserve Medical Command Food Services.



PINELLAS PARK, Fla. - Ah yes, summer is here! With it comes fun, vacations, trips, BBQs, and picnics. All soar during the summer months. So do weddings, reunions, beach parties and other fun activities that create memories of a lifetime.

Of course let's not forget about the fun surge in food borne-illnesses and the fond memories caused by food prepared by "who knows who".

What? Ah, summer fun.

Soaring during the warm months are stomach aches, nausea, and probably the BIG D. The ultimate summer fun experience that enables you to emulate your favorite NASCAR driver as you seek the quickest gas station rest room facility off of the interstate.

Seriously though, have you heard of the iceberg theory?

It is not the hypothesis on how the Titanic sank; it is the one that says 80% of food borne illness cases goes unreported; a meager 20% are reported to healthcare professionals in American. Hence, we've only seen "the tip of the iceberg" this problem causes Americans.

According to the Centers for Disease Control (CDC) in Atlanta, 76 million people got sick from food in 2005. Of those, 300,000 were hospitalized and 5,000 Americans died. On average, 5,000 people die EACH YEAR from food-borne illnesses.

Preventing food-borne illness and death remains a major public health challenge.

You need to know where your food comes from as well as who made it, how they prepared it and how it was served.

Here are some summer (and year round) tips to keep you safe from food-borne illness.

First, always buy food from "approved" sources such as licensed supermarkets, delis, restaurants, and commissaries. Never purchase your food at a road side vendor that magically appears every now and then, UNLESS they are displaying the proper food licenses.

Secondly, store your food properly. Frozen foods must be stored at 0 Fahrenheit (F). Cold foods such as fresh meats, vegetables and seafood must be kept at 38 F. Dry foods, including cereal, rice and sugar must be kept in containers with tightly sealed lids. This helps preserve the product longer and keep pests out. Store dry goods at least six inches off the ground and away from the walls to ensure added protection from moisture.

Third, cook meats long enough so they reach the proper internal temperature. Poultry needs to reach an internal temperature of 165 F; pork 155 F; beef and fish 145 F. Purchase a thermometer to ensure these temperatures are met before consuming the meat.

Next, make sure you wash and sanitize all of the items used to prepare your meals. Do this by adding 1/2 tablespoon of bleach per gallon of water. Wash cutting boards, utensils and other food contact areas, such as meat slicers and blenders, before using them to prepare your foods. Also, remember to wash fresh fruits and vegetables in the water/chlorine solution, then rinse in clear, clean water, before using them in your recipes. Ensure you wash your hands often while handling food.

Finally, thaw frozen food properly, under refrigeration. Many people use my grandma's method of thawing: On the kitchen counter. DON'T DO THIS! This is not safe. Bacteria can collect on food almost as quickly as the dust falls within your house.

During this summer's festivities, you have the means to prevent yourself from becoming a victim to Salmonella poisoning, E. coli, or any other type of deadly food borne disease. Sickness or even death can be prevented by following some simple procedures. Five thousand people die each year from a very preventable disease; make sure you use the proper preventative measures!

Summer is here. Enjoy it healthily.

Members of the U.S. Army Reserve Command supply career counseling for Individual Ready Reserve (IRR) Soldiers at the IRR Muster held in Tampa, Fla.

IRR Muster Serves Soldiers, Army

Army Reserve Holds Initial IRR Muster in Tampa

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

TAMPA, Fla. - In the first of many to come, the United States Army Reserve Command held the initial Individual Ready Reserve (IRR) Muster here in May. The IRR Muster will be an annual event, held at various locations around the country, where Soldiers assigned to the IRR report to a central location in order to maintain accountability and update their files.

The James A. Haley Veterans Hospital hosted the initial event for local IRR Soldiers who have completed their initial active duty or reserve time. In order to fulfill their entire eight year contract, they are required to serve two to four years in the IRR. Soldiers in the IRR are subject to recall to active duty if their skills are needed again by the active component.

While the main purpose of the IRR Muster is to maintain contact and accountability of the IRR Soldiers, it is also an opportunity for the Soldiers to review their records and wrap up any outstanding issues from their previous service.

Some of the services offered were identification cards, health assessments and access to Veterans Administration services. The Tampa Muster was offered in conjunction with a job fair organized by the Haley Veterans Hospital with over 100 employers represented to aid Soldiers with finding civilian employment.

Soldiers choose to go into the IRR for various reasons.

Sgt. Michael Garrison chose to join the IRR instead of a Reserve Unit for the remainder of his initial obligation due to Family illness.

"It's not that I didn't want to join a Reserve unit, it's my Family," he said. "My dad is 68 years old and not in the best of health. Helping him keep going is the most important thing right now," he added.

In the IRR the Soldiers can continue to further their careers, as was the case with Garrison. He was promoted during the Tampa Muster from specialist to sergeant. Before leaving active duty, he had attended a promotion board, trying to get promoted before he separated - he was not successful. Once in the IRR however, he continued to acquire time-in-service and grade, and was eventually eligible for promotion.

Soldiers in the IRR have the same career opportunities that are available for other Soldiers. They can take advantage of an affiliation bonus of up to $10,000 for a three-year commitment to a Reserve unit with a 24 month non-deployment period.

The IRR Muster program was initiated in 2009 to help ensure all Soldiers within its' ranks are as ready as possible for return to active duty should they be needed again.

Master Sgt. Anthony Martinez administers the NCO Oath to Sgt. Michael Garrison with Brig. Gen. William Faff in attendance, at the IRR Muster held in Tampa Florida. Garrison was promoted during the event.

The Muster or "gathering" is a new program initiated by the Human Resource Command, St. Louis, Mo.

AR-MEDCOM Family Programs Office

Help is Available for Families Regardless of Their Location

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

TAMPA, Fla. - Thanks to the dedicated professionals of the Family Program Office (FPO), deploying Army Reserve Soldiers and their Families get additional resources for information and assistance, regardless of where they call home.

Reserve Soldiers, who are mobilized for deployment, come from many existing programs, but most are part of the deploying unit. When units need Soldiers transferred in, to fill their required mobilization strength, they can augment their personnel roster with programs such as the Individual Ready Reserve (IRR), Individual Mobilization Augmentee (IMA), and the Individual Augmentee (IA). This augmentation helps fulfill their mission requirements by getting them the needed, qualified Soldiers.

With Soldiers coming from multiple locations however, challenges persist with how to form a coherent Family support network.

The home unit is tasked with building and maintaining a Family Readiness Group (FRG) to support the deployed Soldier's Families. The FPO, located at the general officer command level, was created to support each of these groups, especially those that are spread out over a wide geographic location.

The FPO provides unit commanders and their FRGs assistance in training to assure that they are properly established, equipped, and enhanced to support the Soldiers and Families.

At a recent IRR Muster event, the Family Program Office was able to deliver their message to Families personally, and answer questions regarding the program.

IRR Musters, or gatherings, are a new type of event hosted by the Human Resource Command. They are held at various locations around the country, where Soldiers assigned to the IRR report to a central location in order to maintain accountability and update their files.

"It (the Family Programs Office) has a variety of programs, projects and services linked together to provide information and services to Soldiers and Family members. It is there to help with issues arising from a Soldier's deployment." said Leslie Bouwman, Family programs assistant with the Army Reserve Medical Command,

"The FPO can assist with issues such as financial, family or social," she added. "The Muster in Tampa was an excellent opportunity for us to get in front of IRR Soldiers and let them know how the FPO can help them if they are called to deploy with a unit outside of their home area."

Like IRR Soldiers, IMA and IA Soldiers face different situations that arise because their homes and Families are not generally located in the same geographic area as the deploying units. They are permitted to utilize the deploying unit's FRG, but distance and unfamiliarity makes this challanging. This is where the FPO steps in to help and fill the gap.

Contact the AR-MEDCOM Family Programs Office at: (727) 563-3649 or www.arfp.org.

The FPO has a team in place to help these geographically challenged Soldiers and Families. Once they are aware of the mobilization, a packet is sent to the Soldier's home with information on benefits, entitlements, staff contacts and other information to aid the Families left behind. During the Soldiers mobilization, contact is maintained with the Families to ensure their needs are being met. The FPO acts as a personal liaison with those Family members who do not have a local FRG representative to deal with, making certain their questions are being answered.

With the Army Reserve part of today's operational Army, it will continue to need the expertise of Soldiers in the IRR, IMA and IA. When those Soldiers or Family members need a place to turn, to get answers and help, the Family Programs Office stands ready to aid them. They are a good source for assistance information and opportunities.

If a Reserve Soldier's deployment is affecting you or someone you know the FPO can be contacted either online or by phone. (727)-563-3649 or www.arfp.org.

Maj. Janie Ware, with U.S. Army Reserve Warrior and Family Assistance Center, discusses assistance programs available for Army Reserve Soldiers with Brig. Gen. William Waff, deputy commanding general, U.S. Army Human Resources Command.

Army Reserve Joins Medical Center in Employer Partnership

Story and photo from Lt. Col. Cheryl Phillips, U.S. Army Reserve Public Affairs Office.

PITTSBURGH - The U.S. Army Reserve and the University of Pittsburgh Medical Center (UPMC) have joined together in an effort designed to strengthen the community, support Army Reserve Soldiers and their Families, and maintain a strong economy. This effort is part of the Army Reserve's groundbreaking Employer Partnership Initiative (EPI).

From this public-private employment partnership, both organizations will be able to recruit, train and employ talented Army Reserve Soldiers looking to serve both their nation and their community.

Lt. Gen. Jack C. Stultz, Chief, Army Reserve, poses with G. Nicholas Beckwith, III, Chairman of the Board, University of Pittsburgh Medical Center (UPMC), after the University signed and Employer Partnership Initiative (EPI) with the Army Reserve

"I am pleased to have UPMC become a valued member of our Employer Partnership Initiative a year after launching this ground-breaking enterprise," said Lt. Gen. Jack C. Stultz, Chief, Army Reserve. "Our alliance with UPMC is natural since health care is one of our core capabilities. I look forward to working closely with an industry leader like UPMC to develop our greatest shared asset, our people.

Through the EPI, the Army Reserve is partnering with business leaders such as UPMC to develop staffing solutions to meet America's industry demands, tackle the issue of workforce preparedness, and reinvigorate America's human talent to remain competitive in the global economy.

"We are honored to be a part of this historic partnership," said G. Nicholas Beckwith, III, Chairman of the Board, UPMC. "The Army Reserve employs some of the most dedicated and talented professionals in the country, and we are eager to utilize their unique knowledge and skills."

The EPI establishes a process whereby employers and the Army Reserve secure and share the talents of trained professionals. Partner employers will benefit from the employment of men and women with Army values, experience and proven leadership skills.

Since its inception in April 2008, more than 260 public and private employers have joined the initiative, including Fortune 500 corporations, hospitals, industry associations, state agencies and local police departments.

The Army Reserve provides nearly 60 percent of the Army's medical capabilities. These Soldiers bring their valuable training and experience from the Army Reserve into the civilian workforce.

Correspondingly, they bring their valuable civilian training and skills to battlefield and other Army missions.

About The University Of Pittsburgh Medical Center:

UPMC is an integrated global health enterprise headquartered in Pittsburgh, Penn., and one of the leading nonprofit health systems in the United States.

As western Pennsylvania's largest employer, with 50,000 employees and $7 billion in revenue, UPMC is transforming the economy of the region into one based on medicine, research and technology. By integrating 20 hospitals, 400 doctors' offices and outpatient sites, long-term care facilities and a major health insurance services division, and in collaboration with its academic partner, the University of Pittsburgh Schools of the Health Sciences, UPMC has advanced the quality and efficiency of health care and developed internationally renowned programs in transplantation, cancer, neurosurgery, psychiatry, orthopedics and sports medicine, among others.

UPMC is commercializing its medical and technological expertise by nurturing new companies, developing strategic business relationships with some of the world's leading multinational corporations and expanding into international markets, including Italy, Ireland, the United Kingdom, Cyprus and Qatar. For more information about UPMC, visit www.upmc.com.

COMMENTARY: More Benefits than Meet the Eye

Army Reserve Soldiers May Qualify For Laser Surgery

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

SAN ANTONIO - In the 22 years that I have been associated with the Army Reserve, I've been offered, and eligible, for many benefits. This past spring I stumbled upon one more, and as a result of a little paperwork and a little luck, the Army repaired my eyes.

They did so using a procedure call Refractive Eye Surgery or PRK (short for Photorefractive Keratectomy). It is similar to LASIK and actually preceded it in the scheme of procedures approved by the FDA.

I stumbled upon this epiphany during my yearly eye exam. I asked my Air Force optometrist if they had the facilities at MacDill Airforce Base to do any kind of laser eye surgery.

As a wearer of corrective lenses since the seventh grade, and a veteran of OIF 1, I have long dealt with the annoyances associated with glasses and contacts.

While the doctor's answer was no, they were able to direct me to the Warfighter Refractive Eye Surgery Program (WRESP) website.

It's a program started by the Department of Defense to increase combat readiness.

Since military personnel often perform their duties in a variety of environments poorly suited to wearing standard spectacle glasses or contact lenses, fixing eyes is a welcomed option to aid troops.

Soldiers are often operating complicated sighting systems, wearing protective masks or night vision goggles, working in rain, mud, and sand, among other challenges - all which are made more complicated by eye glasses.

Under the WRESP, eligible active duty service members receive laser refractive eye surgery at no cost to them. The goal is to minimize or eliminate the individual's need for corrective eyewear.

After researching the WRESP, I discovered that I too was eligible and so may many others in the Army Reserve.

The WRESP is open to all active duty military personnel. This can include Reserve Soldiers preparing or returning from deployments and certainly AGR (Active Guard and Reserve) Soldiers.

But, there are currently only four centers and surgeons are limited, so the WRESP sets criteria for who can receive laser surgery.

There are three priorities - Deploying or combat arms Soldiers; Soldiers attached to combat arms unit, and space available; in that order.

I, as a Public Affairs Officer, fell into the last priority - space available.

Despite being in that last priority however, my time from application to surgery was only four months.

I do not know how that determination was made, or the WRESP selection criteria. But, I do know I completed the application, and all of its requirements, and I was accepted.

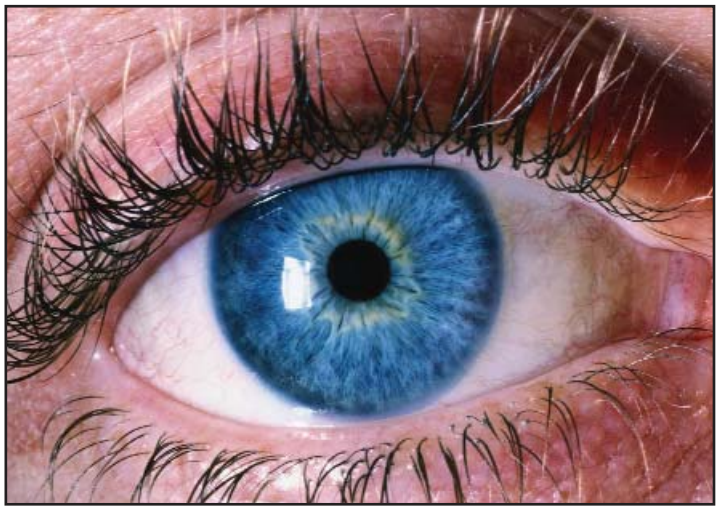


Photo royalty-free clip art collection.

Those requirements included getting a "commander's authorization letter," verifying your priority status and approving the seven days of convalescent leave you will need after the surgery. You must also complete a "patient history questionnaire" and a "managed care agreement." This agreement is signed by a civilian optometrist agreeing to provide follow-up eye care to you once you leave the surgery center.

Like all good offers, there is a catch however. And in this free surgery scenario, there are actually four catches.

First, there are no guarantees that you will walk away with perfect vision. As a matter of a fact, you signed several disclaimers to that extent.

Second, you must commit to two more years in the service. If you are approaching your ETS date, you will have to reenlist if you want this surgery.

Third, you must pay to get to the surgery center. Currently the four surgery centers are located at Fort Hood, Texas; Fort Riley, Kan.; Lackland Air Force Base in San Antonio, Texas and The Air Force Academy in Colorado Springs, Colo. Any and all travel expenses required to get you to one of those locations, food and lodging will be out of your pocket. You do have the option to stay on base at reduced rates however, but you do not get to pick your surgery site, it is assigned to you.

Finally, it is surgery. All surgical procedures involve risks, and if something goes wrong it may require you to change MOS or in extreme circumstances, leave the military. It should therefore be understood that this program is completely voluntary. No one may be coerced into having surgery due to the "needs of the service" or to fill a quota. It is your choice.

All in all though, the procedure was well worth it. I paid approximately $500.00 out of my pocket to cover a $5,000 procedure. Money aside though, being able to get out of bed at night and not need glasses to dodge my children's toys on the way to the bathroom, is priceless - with all due respect to MasterCard.

To find out more information, visit: http://www.gprmc.amedd.army.mil/CO/rs_home.htm

Guarding Network Security

Government Issued Information Systems

Story by Ms. Carmen Perez-Pagan, Army Reserve Medical Command G-6 Automation.

PINELLAS PARK, Fla. - Use of Government Information Systems and access to government networks is a revocable privilege, not a right.

General user actions affect information and information systems and have become a prevalent concern within the Department of Defense. Carelessness and lack of user awareness have caused many virus infections on Portable Electronic Devices (PED) used during tele-working activities.

Due to the speculations that the PEDs issued by the government are safe, users exercise little care to the possibility of virus infections. In actuality, any information system is susceptible to virus infections or malicious attacks anywhere, at any time. AR-MEDCOM has taken the lead in enforcing implemented DoD policies and exercised many precautionary measures to prevent such attacks or infections; through education, user awareness programs and network focused training.

Government issued portable devices are constantly targeted by the enemy. The enemy understands how we fight, how we operate within our network infrastructure and will use any means available to attain our Personally Identifiable Information (PII). Lack of awareness of precautionary security measures is the most common vulnerability.

Army Reserve Soldiers are not exempt from enemy infiltration of our information and information systems. All Soldiers should report any loss, theft or suspicious activity as soon as possible to their unit Information Assurance Officer, Information Management Officer and Security Officer.

The use of external hardware devices not issued by DOD is also strictly prohibited. General users are also reminded that allowing Family members to use government issued PEDs are in violation of policy.

Information systems determined to contain malicious logic code or virus infection are wiped clean through re-imaging. The user down-time to fix these issues can range from seven to ten days and causes disruption of Soldier services at the unit.

The safest practice is the conscious effort of understating the importance of the duties of the government workforce. Government information systems are an extension of the services the DoD provides in order to accomplish assigned duties. The DoD workforce has the inherent responsibility of protecting information and information systems.

For more information concerning authorized use of information systems read your USAR Form 75R, Acceptable Use Policy or visit http://iase.disa.mil

Enhancing User Protection

Awareness is Key

Story by Ms. Carmen Perez-Pagan, Army Reserve Medical Command G-6 Automation.

PINELLAS PARK, Fla. - The AR-MEDCOM Information Management Office strives to be the leader in Information Assurance initiatives throughout the U.S. Army Reserve (USAR). This year more than ever, the Department of Defense has implemented an aggressive approach to the protection of information and information systems. The main objective is to enhance user level awareness, and provide assurances that Soldier information and information systems used to process Personal Identifiable Information (PII) is free from malicious attempts of disclosure or hacking attacks.

Vulnerabilities for information exposure exist and are often unavoidable. Soldiers, civilians and government contractors, must ensure that how we process, disseminate and utilize government information systems is in keeping with the highest standards of information security.

The USAR must change how they perceive information and utilization of information systems during their official government duties and must make every effort to maintain the confidentiality, integrity and enforce systems security policies.

With the increased demand for technological advances and the need-to-have concepts in the field, security risks have increased. Information Awareness (IA) at the user level will alleviate associated vulnerabilities and ensure a safe and affective computing environment.

Computer security incidents are caused by policy or procedural violations often due to user inexperience. Information Assurance Officers (IAOs) have been identified and designated throughout the AR-MEDCOM to facilitate user level awareness and ensure the workforce is compliant with mandatory network focused training. The role of the unit IAOs has changed to meet the demands of a network centric environment and their duties become increasingly difficult if there is no clear understanding of their mission. In an effort to help explain their roles the following information is provided:

Contractors or system administrators may not be assigned unit IAO duties as they are managers of information systems and are already considered part of the IA support workforce. An IAO may be of any rank or specialty and a trusted individual. He/she must meet criteria for appointment IAW AR 25-2, Information Assurance regulation. An IAO must be assigned directly to the command they support and may be responsible for certain units within their command structure. They are not system administrators and do not require privileged-level user accounts. They are not authorized to alter, re-configure or install software, hardware or administer network accounts etc. IAOs are responsible for assisting senior leaders with the implementation, education and awareness programs serve as incident reporting liaisons with the AR-MEDCOM senior IAO.

The transition to a network centric environment led to changes to many DoD Regulations and extensive updates to policies and directives. Senior Leaders are encouraged to become familiar with these changes and should seek their respective IAOs for further guidance.

Hasbargen's Hit List

To all Commander, CSMs, FTUS, First Line Leaders...

We must do a better job taking care of our "Warrior Medics!"

G-1 Personnel

FOSTER A CLIMATE OF TAKING CARE OF SOLDIERS.
THIS INCLUDES....

- Timely evaluations. This is a rater/senior rater responsibility.
- Every Soldier is a recruiter. Use ARAP.
- Timely submission of deserved awards.
- All Soldiers should attempt to recover non participant soldiers.
- Review non-participants monthly. If unrecoverable, process out.
- Ensuring Line of Duties are completed for soldiers.
- Answer Congressionals in a timely and accurate/factual manor.

G-4 Logistics

- Commanders need to schedule monthly equipment inventories on the training schedule.
- Serviceability of Equipment - While conducting inventory check if the piece of equipment can perform the mission.
- Army Food Management Information System - Input your units requirements 90 days in advance, close the transactions monthly.
- Lodging In Kind - Talk to the soldier. This is a moral booster.
- Logistic Planning - Start planning your needs ahead of the event.
- Government Purchase Cards - You can be held liable for illegal procurements.
- Kentucky Logistics Operations Center - Is a clothing program that supports the Soldiers. Abuse it and we will loose it.

G-7 Training

- Be creative! Challenge the Soldiers.
- Mentor Junior Officers and Enlisted Soldiers.
- Maximize training during Battle Training Assemblies.
- MOS/ASI schools are #1 priority.

G-8 Finance

- Timely submission of orders for pay for AR Soldiers. If the orders are not submitted and certified for pay by the UA, then no other orders can be paid. This means that one Soldier can hold up pay for 50 other Soldiers.
- Timely submission of travel vouchers in DTS. Soldiers need to submit their voucher NLT 7 days from end of duty. Not doing this leads to delinquencies in the government travel card.

Safety Office

- Complete mandatory online safety training and composite risk management classes.

Staff Judge Advocate (SJA)

- Investigate allegations of misconduct early.
- Prepare notifications of administrative separations expeditiously. Notify the Soldier and process the action through the chain of command for disposition.
- Report high profile incidents of misconduct through the chain of command to the AR-MEDCOM SJA Office immediately.

Surgeon's Office

- All Soldiers are required to have a Periodic Health Assessment (PHA) annually.
- Improve Dental Readiness. The Command's at only 65%.
- Improve Post Deployment Health Re-Assessment (PDHRA). This helps ensure the health of returning Soldiers.

Deputy Commander Readiness (DCR)

- Commanders and leaders must develop an Individual Training Plan (ITP) on every Soldier who is not DMOSQ. The ITP provides the roadmap for each Soldier to fit into the structure for mobilization readiness.
- Commanders and leaders must become directly involved in effective recruiting to build their "Go-to-War" team. Know recruiting leaders within your 50 mile radius and engage them for your readiness needs.
- Readiness metrics are important indicators for leaders. Identify your high priority readiness measures and hold subordinate leaders to the same standard. This is called "power-down." Accountability is the key to improving readiness.

Inspector General (IG)

- The solution to your problem starts with your Chain of Command.
- Take care of your family issues before you deploy.

Public Affairs Office (PAO)

- Help promote Command Information - Keep you Soldiers informed as to what is going on in the Army Reserve that effects them.
- Help promote Community Relations - Get your Soldiers and units involved with community events. It promotes understanding and support amongst the community.
- Help promote Media Relations - Get your Soldiers and units coverage in the local media. Get your story out there! Tell the public about the great things your Soldiers are doing.

These are all essential for retention and morale. It's all about talking care of our Soldiers and Readiness. Get it done!

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

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