

The Pulse - Online Edition



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The Pulse Online Edition is a bi-monthly publication for the Soldiers, Families, civilians and medical professionals of the 807th MDSC.

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807th Initiates Pilot Program With General Electric



Maj. Gen. Chang and Mike Swinford, CEO of GE Healthcare and Global Services, shake hands after signing an agreement to train and potentially employ Army Reserve Soldiers in the 68A Military Occupation Specialty. (photo by Lt. Col. Brent Campbell, 807th MDSC Public Affairs)

GE, 807th MDSC to work together to train and employ Biomedical Equipment Specialists

by Lt. Col. Brent Campbell

WASHINGTON, D.C. - The 807th Medical Command and GE Healthcare signed a memorandum of agreement here on May 25, paving the way for biomedical equipment specialists from the command to participate in an externship with GE Healthcare.

The agreement was signed by Maj. Gen. L.P. Chang, Commander, 807th Medical Command, and Mike Swinford, President and CEO, Global Services, GE Healthcare at GE's Veteran's Network conference.

The agreement provides a means for both the Army Reserve and GE Healthcare to efficiently recruit and train personnel for the biomedical repair field and for both organizations to realize the benefit of workforce sharing. The pilot program is designed to meet the needs of both organizations in the biomedical

repair field.

"This is really a win-win for both the Army Reserve, as well as GE Healthcare," Chang said. "The Army Reserve benefits through our Soldiers learning through hands-on training with an industry leader in healthcare technology, while GE wins through the opportunity to hire a potential employee with proven leadership and management skills"

Currently, the 807th Medical Command has only enough qualified Soldiers to fill just over half of its authorized positions for enlisted Soldiers. The manning of biomedical equipment warrant officers is even worse, with only 31 percent of authorizations currently assigned. And, with new changes to the 807th's logistics structure, the number of required Soldiers is planned to go up. New

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807th Soldier Receives Purple Heart

Staff Sgt. Chalcea Helm receives the award three years after being injured in Iraq

by Staff Sgt. Adam Stone

WICHITA, Kan. -- Staff Sgt. Chalcea Helm of Wichita, Kan., received the Purple Heart medal in a ceremony at the 331st Medical Group, 807th Medical Command (Deployment Support) Headquarters here on July 9.

Helm, deployed as a medic with the 369th Medical Company (Ground Ambulance), sustained her injuries in 2008 when an improvised explosive device (IED) detonated near her vehicle door just two months before her unit was scheduled to return home.

She was lucky to be alive.

"We all had pretty bad concussions, but were able to continue rolling. That 5-inch ballistic glass is really quite amazing," said Helm.

After it happened, "I wanted to stay with my troops. I didn't feel right about coming home two months earlier than everyone

else. I didn't really know how bad the injury was at the time," continued Helm. "I didn't know it was going to be a three-year-later continuing battle to get me back to where I was before."

The day of the incident, the company commander of the 369th, Maj. Jeff Duncan, was at a commander's conference in Balad, Iraq.

"A sergeant walked into the room and walked up to me, stuck a yellow sticky on the desk and it said 'SSG Helm's convoy was hit by an IED, SSG Helm's vehicle was destroyed... I looked at it, went ghost white, picked it up, handed it to my first sergeant and took off out the door,'" said Duncan.

Duncan's immediate assumption was that he had lost Soldiers in the attack. Luckily, they were only injured.

"You know what they say about the rumor mill, and I never got an accurate story until I sat down with her," he said.

Helm is a 68W, Healthcare Specialist also known as a Combat Medic. Her primary role at Forward Operating Base (FOB) Q-West in Iraq was a convoy medic. Helm continued to perform her duties well, but her command wouldn't let her support any more convoys after her injury from the IED.

"She took control of a squad and the medical supplies and kept them busy," continued Duncan, "I went to see her operation and it was all laid out, all categorized, organized and accounted for, it was a commander's dream!"



Brig. Gen. David Smalley pins the Purple Heart medal on the chest of Staff Sgt. Chalcea Helm. Helm was injured in an IED attack in 2008 in Iraq while serving with the 369th Ground Ambulance Company. (photo by Staff Sgt. Adam Stone, 807th MDSC Public Affairs)



The Purple Heart award for Staff Sgt. Chalcea Helm is displayed before the ceremony in Wichita. (photo by Staff Sgt. Adam Stone, 807th MDSC Public Affairs)

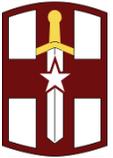
The presentation of the Purple Heart is three years after the incident. Brig. Gen. David Smalley, the Deputy Commanding General for Professional Services at the 807th Medical Command made the presentation to Helm in front of her family, friends and Army peers. Her father, Allen Helm, and her two grandfathers who served in World War II, attended the ceremony.

"I was proud of her before, but I think it's great," says Allen Helm, Chalcea Helm's father. "I think Chalcea would tell you it represents more than just her sacrifice, but everyone's."

"You know if they would have handed it to me right after it happened, I probably wouldn't have thought anything of it. Waiting this long for it, having the ceremony with all my friends and family here really means a lot," said Helm.

Duncan glowed as he recalled his time serving with Helm.

"She's a great Soldier, a great human being, very intelligent, very motivated, very focused, just fun to be around... by that I mean she's fun to be around," said Duncan. "She can talk to you intelligently. If you give her a mission, you can walk away and know it's done. I consider it a privilege to have served with her."



Giving Hope & Care in Dominican Republic

By Maj. Wendy Rodgers

Most Americans think of the Dominican Republic as a vacation destination or the home of famous baseball players like David Ortiz or Sammy Sosa. In reality, the country is a poor island nation with severe needs for basic services for its citizens. While the Dominican residents of the eastern side of the island of Hispanola do not have problems quite as severe as their Haitian neighbors to the west, most can only dream of living in the resort towns along the coast or playing professional ball in the United States.

Daily temperatures on the island hover around 90 degrees Fahrenheit, and the humidity is close to 100% all the time. It was in this environment that the Soldiers of B Company, 228th Combat Support Hospital from San Antonio came for 15 days in May and June to provide medical assistance to more than 6,500 citizens of the Dominican Republic.

The Dominican people were recipients of support from the Army Reserve as part of Beyond the Horizons, a civic humanitarian assistance mission that provided a wide range of medical, dental, construction, and training services to remote areas of four countries: Dominican Republic, Haiti, El Salvador, and Colombia.

"We're here to support the local nationals in dental, vision and general health and hopefully everyone that we see will get the things that they need to be comfortable with whatever issues are going on with their body," said Capt. Eugene Gracia, Company Commander from San Antonio.

It did not take long for Gracia and the

others to notice the economical status of the country or the challenges the Dominicans face with health care. A majority of Dominicans cannot afford even basic health care, even when problems exist. Bacterial diarrhea, hepatitis A, typhoid fever, dengue fever, and malaria are all common illnesses in the country. Fourteen percent of the country does not have access to clean water, and 17 percent do not have improved sanitation facilities, although those figures are higher in the rural parts of the country, like Mao.

The 228th set up three separate medical stations inside small school buildings that lacked the comfort of air conditioning, indoor bathrooms, and in some cases reliable electricity. Communication with the Dominicans was at times difficult, since only six of the 228th Soldiers spoke Spanish, the official language of the Dominican people. However, the Soldiers of the 228th remained focused on the mission and always greeted the next patient with respect and honor.

Each of the three clinics opened everyday to a long line of men, women and children patiently waiting their turn to see an Army Reserve medical provider.

"All the patients have a great amount of dignity. They were very polite," said Lt. Col. Hunter Hammill, a medical provider from Houston. "And like the 85-year-old woman I just saw, she gave me a big hug and she blessed me. All I really had for her was some Motrin. She was very thankful to just come to the clinic."

One of the most memorable patients for Maj. Daniel Schwartz, a medical provider from San Antonio was a 24-day-old



Spc. Loretta Hardy, Army Reserve medic from the 228th Combat Support Hospital, San Antonio, takes the vital signs of a Dominican man during Beyond The Horizons in the Dominican Republic. The 228th provided medical services to hundreds of citizens of the Dominican Republic over a 15-day period. (photo by Maj. Wendy Rodgers, 807th MDSC Public Affairs)

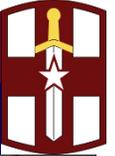
Dominican girl.

"The mother presented the child to triage and explained that the baby had trouble breathing. The baby did appear to be in some respiratory distress," said Schwartz. "The mother said the child had a fever at home. We have to be very concerned about a fever in a child a month old. My biggest concern was that she had pneumonia. So given that we didn't think we had any way to treat pneumonia in the clinic it was important that we get her to the hospital as soon as possible."

The infant girl will also be remembered well by Chaplain Luis Cardoza, 35th Signal Battalion from Puerto Rico and Spc. Juan Rios, a chaplain's assistant from the 393rd Combat Service Support Battalion, Puerto Rico. A day after the girl was admitted to the hospital and diagnosed with pneumonia, the two Soldiers



A Dominican girl holds her sister outside the U.S. medical clinic near Mao, Dominican Republic on May 31. Their mother was one of nearly 6,500 people who received treatment from doctors from the 228th Combat Support Hospital from San Antonio. (photo by Maj. Wendy Rodgers, 807th MDSC Public Affairs)



919th Dental—Changing Lives in El Salvador

by Maj. Matt Lawrence

SAN VICENTE, El Salvador – The 919th Dental Company from Aurora, Colo., spent two weeks in late May here, treating over 1,000 patients for nearly every type of dental malady.

The dental mission was a part of a larger effort by the U.S. military called Beyond The Horizons, aimed at improving the overall quality of life here permanently through training, construction, and the provision of services.

“The people here are a little bit poorer than the rest of El Salvador,” said 2nd Lt. Gerardo Salazar of the 2nd Air Brigade, Salvadoran Air Force. He served the mission as an interpreter.

Nestled in the hills of El Salvador, San Vicente is a relatively poor town that relies on sugar and coffee farming as its main source of income. There is no other industry here. Most people cannot afford routine dental care, and have to rely on humanitarian missions such as this, and the patients are worried that they may miss the opportunity – even after they are admitted to the compound where the dentists are working.

“Everyone is trying to be first,” said Sgt. Rosa Vasquez of Alliance, Neb., a patient administrator and interpreter for



The 919th Dental Company's clinic at the Salvadoran Army 5th Brigade Headquarters in San Vicente, El Salvador. The 919th treated over 100 patients a day at the clinic. (photo by Maj. Matt Lawrence, 807th MDSC Public Affairs)

the mission. “We have to smooth things over and make sure they understand they will be seen.”

Sometimes they may be bumped to the next day, but the dentists work as long as it takes to treat every patient. Vasquez, who was born in Mexico City, is chiefly responsible for communicating with waiting patients and explaining what the delays are and reassuring them.

Although the overall level of dental care and education among the patients seems to be very good, there are still some habits that have caused problems among the people.

“We have seen a lot of bottle rot in children from mothers leaving the bottles in their children’s mouths too long,” said Maj. Donald Liberty, a dentist from Sacramento, Calif.

Adults had similar issues with holes in their front teeth. It is common to see people walk down the street with a drink box in their hands. The local custom is to drink it with the straw barely in their mouths, ensuring the sugary drinks pass through their teeth, inducing

faster decay. Many adults had cavities that left unsightly holes in their smiles.

“We have made a tremendous difference in people’s lives, especially with the cosmetic dentistry,” said Lt. Col. Wesley Parks, an Army dentist from Lincoln, Neb. “The most satisfying thing is seeing anterior decay, where they have black teeth, and you can turn it into really beautiful smiles. They’re really happy about that.”

Parks played a key role in getting the clinic up to speed. When the 919th arrived at the Salvadoran Army compound, it took several days to get everything set up and in place. Growing up on a farm in Nebraska, he had to learn to repair and operate all types of equipment.

“I had to make sure the generators and equipment worked and the wiring was set up,” said Parks. He also had to repair equipment that was not working properly when it arrived.

But the biggest challenge in making this mission a success may have had nothing to do with dentistry at all. Logistics problems could have stopped the



Lt. Col. Wesley Parks of the 919th Dental Company examines a patient at the U.S. clinic in San Vicente, El Salvador in May. Parks was instrumental in getting the clinic running quickly. (photo by Maj. Matt Lawrence, 807th MDSC Public Affairs)



Partnership

Continued from page 1

Soldiers are difficult to field in this specialty because the class is 41 weeks long and has a failure rate of 40% due to its technical requirements.

This means that the Army Reserve does not have the expertise on hand that it needs, and also places a greater burden on those Soldiers who are in that specialty, as they have to deploy more frequently to ensure full manning of deploying units.

While the externship will focus on duty in select cities across the country, Col. Ted White, the 807th's program architect, wants to ensure that Soldiers and leaders understand that any Soldier in the 68A career field is eligible for this program.

"All Bio-Med Equipment Specialists (68As) as well as Health Services Techs (670As) that have returned from the AM-MED Center and School are eligible to apply for this program, regardless of their home of record," said White.

The program will financially accommodate Soldiers participating far from their home of record.

The program includes three phases, the first of which is approximately three months long and focuses on military medical equipment that culminates in several weeks of hands-on training at the medical equipment containment site in Ogden, Utah, and nearby Hill Air Force Base. The second phase is also three months long and gives an in-depth introduction to GE's complete line of medical equipment. The final phase is about six months long and puts Soldiers in the field with a GE biomedical repair crew. At the end of the externship, GE has the option to offer full time employment to the Soldier.

Chang said that this hands-on training will greatly enhance our Soldiers' skill sets and ability to work with rapidly evolving medical technology. This program, if successful, has the potential to grow beyond just the 807th.

"This will be vital to the development and retention of biomedical specialists as we increase the number of Soldiers needed in the Army in this highly technical specialty," said Chang. "It is also a building step, a pilot project with the intent of expanding to the entire Army Re-

serve and perhaps further after this trial period."

General Electric employs over 11,000 Soldiers in North America and offers benefits that include covering the salary gap when a Soldier gets deployed or goes on their annual military training, nullifying one of the major issues the Army Reserve has in retaining these specialists.

"GE is proud to count more than 11,000 military veterans among our employees, bringing a sense of honor and duty to our company that helps drive a culture of dedication and commitment," said Swinford. "In joining with the 807th Medical Command to launch an externship program for biomedical equipment specialists, we are pleased to not only provide important career development to our service men and women, but to also address a key need in the healthcare industry."

The first class in the pilot program is scheduled to start in June, and future classes will be initiated every three to six months. Soldiers interested in this program should talk with their unit's logistics representatives.

Use Your Unit's Dietician Correctly

For the first time since the 807th MDSC was activated in October, 2008, the command has filled the Dietetic Consultant position. The dietetic consultant serves as the Commanding General's consultant on all nutrition and medical food service matters. The dietetic consultant will work with command dietitians and staff in issuing nutrition policy, as well as developing education and health promotion programs to support patient care, soldier readiness and performance. A key initial role of the dietetic consultant will be to assist commanders in maximizing both their dietitian's and nutrition care specialist's (68M) skills in improving Soldier readiness and promoting healthy lifestyles. With over 11,000 Soldiers in the 807th MDSC and only 15 dietitians available to support the over 100 commanders, there is more than enough nutrition-related work to do!

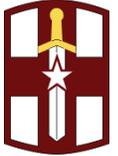
What commander would not like to reduce APFT failures, improve

APFT scores and reduce injuries? Nutrition education, which is defined as "learning situations designed to allow Soldiers to learn more about food choices and eating habits that optimize health and performance", is an appropriate role for the dietitian, as well as nutrition care specialists, who may teach under the supervision or guidance of a dietitian. Health promotion activities, such as implementing the "Go For Green" initiative in your dining facilities; serving as an instructor for the online nutrition education program for Soldiers on weight control; implementing Soldier Fueling Initiative recommendations; etc. are also appropriate roles for the dietitians in your command. Have you ever wanted your unit to win the Phillip A. Connelly Award for Excellence in Food Service? Dietitians are excellent resources to lead in this process. In addition to the above tasks, dietitians at brigade and command levels serve as advisors to dietitians and commanders in down-trace units and conduct assistance visits, as necessary, to

ensure that nutrition and food service policy is properly implemented.

Where are all of the dieticians in the 807th MDSC? As happens with many Soldiers, their role is not well understood by commanders, leaving them vulnerable to being assigned to duties that are not applicable to their MOS. There are currently 22 dietitians in the 807th MDSC in the 28 authorized positions, yet only 15 are serving in dietitian positions with their units at monthly battle assemblies or in deployed settings. In addition to the five dietitians serving wholly in other roles (commanders, S4, ROTC instructor) or who are in the AMEDD Professional Management Command, dietitians often spend a lot of their time serving their units outside the field of dietetics. Dietitians may be your unit's Unit Prevention Leader, president of the awards board, unit public affairs representative, movement officer, morale, welfare, and recreation officer, and so on. While dietitians are excellent lead-

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94th Combat Support Hospital Supports Haitians

Story and photos by Sgt. Aaron LeBlanc, 241st Public Affairs Detachment

GONAIVES, Haiti – Two surgeons from the 94th Combat Support Hospital in Seagoville, Texas, currently taking part in Task Force Bon Voizen, a New Horizons Haiti 2011 humanitarian engineer and medical training exercise, shared their skills with Haitian physicians at St. Nicolas Hospital, in St. Marc, Haiti, on May 19.

Col. Paul Phillips III, an orthopedic surgeon from Fredericksburg, Texas, and Col. Eric Romanucci a, colorectal surgeon from Niskayuna, N.Y., shared their highly specialized skill sets with local resident doctors, spending time in the emergency room and the orthopedic ward.

“Compared to the civilian hospital that I visited in Afghanistan, this hospital is impressive,” Romanucci said upon the arrival of an ambulance to the door of the emergency room. “They have an ambulance, and the place is very clean. They’re really doing a lot with what is available.”

Both surgeons commented on the scarcity of medical specialists. According to one Haitian doctor on hand, there are a total of three neurosurgeons in the entire country, all of whom practice in Port-au-Prince. The challenges that result from this shortage are exacerbated by Haiti’s lack of enforced traffic laws.

According to one Haitian physician, severe car and motorcycle crashes occur

frequently, generating untold numbers of brain injuries that are often beyond a Haitian hospital’s ability to properly treat. Despite this, the medical professionals at St. Nicolas are doing what they can.

Pierre Woolley, a resident at the hospital, studied in the U.S. and France prior to returning to his native Haiti, and is acutely aware of the disparity between the resources available to Haitian doctors and those in the more developed world.

“It’s a different way of practicing medicine, but it’s still medicine. On the orthopedic ward, we are always in need of lots of plates, lots of screws. We must be very creative with what we have here,” Woolley said.

This pragmatic approach to medicine was not lost on the Army surgeons. Both Phillips and Romanucci have practiced medicine on the battlefield of Afghanistan, and are accustomed to working in austere conditions, with whatever is available.

“It isn’t always about meeting standards as they exist in the U.S. It’s about doing what you can with what you have,” said Phillips.

Col. Paul Phillips, an Army Reserve surgeon with Task Force Bon Voizen, discusses the prognosis of a traffic accident victim with a Haitian physician at St. Nicolas Hospital, St. Marc, Haiti, on May 19.



Task Force Bon Voizen, New Horizons Haiti 2011, is a U.S. Army South conducted joint foreign military interaction/humanitarian exercise. The mission deploys U.S. military engineers and medical professionals to Haiti for training and to provide humanitarian services. The task force will build a school, two medical clinics and a latrine facility, as well as staff three medical clinics and one dental clinic between April 28 and June 25 in the Artibonite Department.

Dietician

Continued from page 5

ers who should be given as many opportunities to grow and serve as possible, their mission of supporting commanders in their efforts to maximize Soldier readiness through nutrition should not be minimized.

What are the kinds of nutrition-related duties that commanders should expect their dietitians to be able to perform? The additional duty as a hospital food service officer is an appropriate utilization of the dietitian. Not only is this part of the Army dietitian’s job description, but dietitians are trained in food service systems management, food safety, menu creation and food science. Too often, however, dietitians are used incorrectly, such as serving as the unit’s Weight Control Officer. This is not an appropriate utilization of dietitian skills, because it is a company-level administrative role that can be filled by any officer. Instead, dietitians should support the Weight Control Officers of *many* units, because they are the only qualified personnel authorized to provide the nutrition and weight reduction counseling, as required by AR 600-9 for Soldiers on the Army Weight Control Program (AWCP).

How can you learn more about how to best utilize your nutrition assets, improve Soldier readiness through nutrition or provide nutrition education to your Soldiers? Contact the 807th MDSC Dietetic Consultant at marie.patti@mail.us.army.mil.



were very appreciative and I have a different feeling for the Dominican people now,” said Hammill.

Gracia wished more of his Soldiers could have experienced the mission.

“They missed a good opportunity to see another way of life and really appreciate all the things that we have that maybe we take for granted,” he said.

Salvador

Continued from page 4

company cold, had it not been for the 919th's proactive supply sergeant, Sgt. Jason Timms.

Customs agents at the border between Honduras and El Salvador, where the unit's equipment traveled through, seemed suspicious and overbearing in their demands for information on the military cargo. There were several layers of customs to navigate, and the different layers didn't seem to share information or have the same requirements.

“[It [the equipment] got stuck at the Honduran border for a couple of days. That's where a lot of units got stuck with their equipment,” said Timms. “They just wanted to know more and more. They wanted to know the retail cost, the actual cost, the shipping weight, and the actual weight of the equipment. It was really frustrating.”

Previous rotations of dentists were unsuccessful at clearing their equipment, forcing them to use locally available equipment and tools, thereby significantly reducing their abilities and the number of patients they could treat. Timms worked tirelessly to ensure the correct information was delivered and that all the paperwork was kept organized so that when forms were requested multiple times, he had the information readily available.

“I'm just glad my stuff got here,” said Timms. “This unit is much more of a family than a unit. I knew if I got it here, they would do great things.”

Mission accomplished, Sergeant Timms.

Dominican

Continued from page 3

went to check on her. After talking with the attending nurse, they learned the infant's family was unable to pay for much needed lab services and medication.

“The child needs chest x-rays, but the mother cannot pay. She needs medicine to get well,” said Cardoza. Without any hesitation, Cardoza and Rios began making arrangements to ensure the infant had the resources she needed to improve her life threatening health condition. Without even knowing her name, the two Soldiers made selfless, personal contributions for the welfare of one very small patient.

For Spc. Janet Harrivel, a medical specialist from Pflugerville, Texas the training at Beyond The Horizons was just what she was looking for.

“This is my first time out of country. I've only been in the Army for two years now, so, I'm just trying to get as much experience as I can,” she said.

Harrivel was one of the first people the patients saw when entering the clinic. It was her responsibility to take the blood pressure and find out the reason they were there. She would record their symptoms and complaints then move them to the next line where they waited to see a doctor.

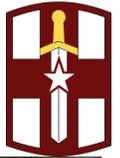
The 228th operated as a true team with everyone pitching in to help out in any area that needed an extra body. 1st Lt. Tarah Carnes is a critical care nurse from Los Angeles, but she found herself working the clinic's dental station.

Maj. Rupande Patel, a dentist assigned to the 965th Dental Company from Seagoville, Texas conducts a dental exam on a young woman in Jaibon, Dominican Republic, on May 31. Maj. Patel joined 30 other Soldiers from the 228th Combat Support Hospital of San Antonio during Beyond the Horizons. (photo by Maj. Wendy Rodgers, 807th MDSC Public Affairs)

Carnes orchestrated the traffic pattern, leading people into a small room where they waited to see a dentist. Before moving into the dentist's chair, she took their blood pressure and noted any previous history of cardiac concerns. She also helped the dentists by offering education to the Dominicans on proper teeth brushing, flossing, and post dental extraction instructions.

Staff Sgt. Minvera Wilson, a medical supply sergeant from Luling, Texas, left the supply room several times to lend a hand in the pharmacy. She frequently would assist the pharmacy with preparation of medications for the next day. She and Pfc. Erica Hall, preventative medicine specialist from San Antonio helped out by creating labels and pre-packaging the most commonly distributed medications such as Tylenol and Benadryl. Having the extra hands in the pharmacy allowed more people to get served faster, preventing a potential backlog of customers.

“I know everyone complained about which medicines to bring, what they liked and what they didn't like. We dealt with what we got and I think that the people



113th Combat Stress Control Prepares for Deployment

Story and photos by Maj. Matt Lawrence

JOINT BASE LEWIS-McCHORD, Wash. – The 44 Soldiers of the 113th Combat Stress Control Detachment from Garden Grove, Calif., are heavily engaged in their pre-deployment training here in preparation for their year-long mission in Afghanistan.

Although the Soldiers are mostly behavioral health care providers, their performance of tasks such as entry control point management, convoy procedures, and building searches is germane to their duties.

“It really kind of puts in perspective the kind of things these guys face day in and day out,” said Sgt. Paul McCullough from Lubbock, Texas, the combat medic for the 113th.

Understanding the stress that Soldiers face can be difficult, and to do their job well, behavioral health counselors must make their patients believe that they understand. This ability to gain trust and establish empathy has to be made here in pre-deployment training.

“We are like sports psychologists. We make sure people are functioning at their highest level,” said Col. David Rabb, Commander of the 113th who hails from Mountain View, Calif.

Rabb likened the mind of a Soldier to a weapon that must be maintained and occasionally cleared if there is a malfunction. Soldiers need their minds cleared of the baggage of war so that they can go on with their jobs.

The hard-charging, “can-do” culture among the Soldiers who see the most action keeps some of them from seeking help. In addition, there is often resistance from commanders to work with the behavioral health teams, and a sense among Soldiers that seeking help means they are “weak.”

“The toughest part of the job is getting commanders and leaders to understand that we are not there to take people out of the game, but to keep them in the game,” said Rabb.

Soldiers who neglect their mental

health in the stressful environment of war not only risk their own mental health, but the safety of their fellow Soldiers.

“They [Soldiers] need to step up and get the help they need,” said Rabb. It takes some courage to do that. If they don’t they can make the situation even worse, because the stress builds if it’s not released.”

The 113th will also be equipped with a therapy dog named Zeke, which will be handled by Sgt. McCullough, the unit’s primary dog handler. Soldiers seeking behavioral health can request to have the dog present during sessions to help ease the stress they may feel in opening up to a psychologist.

“Everyone has a tendency to be a little more relaxed around an animal,” said McCullough. “If it breaks the ice and helps the ‘Joes’ out on the line talk to the behavioral health people, then that’s fantastic.”

About 25 percent of the 113th Soldiers had deployed previously, giving them a wealth of experience as to what they will face in Afghanistan. However, the Soldiers that had not deployed before looked forward to the challenges that await them.

“I’m excited because I want to do this job,” said Spc. Susana Murillo from Riverside, Calif. “This isn’t something that was just thrown at me and I have to take this job. No, I chose this, and, you know, there’s a lot of people that mentally just can’t be strong enough.”

The trainers took notice of the cohesion among the Soldiers and gave the 113th praise for a medical unit in this type of training. The motivation of the unit was the primary reason for their success, and was evident through



Soldiers of the 113th Combat Stress Control Detachment search the outside of a house during training at Joint Base Lewis McChord, Wash.

the training as they communicated well, and reacted quickly and forcefully to the situations presented to them.

The 113th departed for Kandahar, Afghanistan in July.



Soldiers of the 113th Combat Stress Control Detachment prepare to roll a casualty on a stretcher during entry control point training at Joint Base Lewis McChord, Wash.



New Unit Public Affairs Rep Program

The Unit Public Affairs Representative (UPAR) program is designed to augment the effectiveness of the Public Affairs section of any command, which is often small and not able to effectively cover all the events a major command does. This is definitely the case with the 807th MDSC. With dozens of overseas (ODT) missions, numerous pre-deployment training opportunities, and major exercises such as Global Medic, JRTC and such, we have a lot going on.

The Problem: The UPAR program for the command was instituted in 2010, aiming to get two UPARs per battalion and brigade. The response for the training was adequate, but the results were less than promising. Of the 32 Soldiers that were trained, many neglected to perform UPAR duties after the training was complete. In addition, the ones who did take the training to heart were not normally on the battalion's major missions.

When it came time to plan for ODT or a major mission, the UPAR was never a consideration, therefore there was no planned coverage. Furthermore, when the public affairs shop would contact OICs specifically about missions and give specific instructions as to what photos we are interested in, the results were less than adequate. On one mission to a tropical location this year, there were only five photos out of over 200 taken from the medical clinic. The remaining looked like the Soldiers on the mission had some good sightseeing trips and an excellent barbecue—not exactly something we can or should promote.

The Solution: The duties of the UPAR will be scaled back, but assigned in the OPORD of every mission for training year '12. The performance of the UPAR duties will therefore be the responsibility of the officer in charge of every mission.

UPARs will be trained to take photographs, but will not be trained to write stories. They will have to gather information for stories during the mission, but that information will be sent to the public affairs office for story generation. "Interviews" will be planned in advance and written on paper by the Soldiers on the mission in their downtime. Finally, each UPAR will be given a digital camera

prior to the start of the mission by the public affairs office.

This entire process is designed not to be a full-time duty for the UPAR, and is designed to reduce the waste in the process. Upon return of the information and photos to the PAO, the PAO will write the stories, process the pictures, ask follow-up questions, and market the stories. The hopeful result of which will be increased coverage of Army Reserve missions in the hometowns of your Soldiers.

Who Will my UPAR be? On any mission, there are a few Soldiers that do not necessarily have a job that will occupy every moment of theirs during the mission. For instance, during a dental mission to Central America, the supply sergeant would have been able to handle UPAR duties for an hour a day and take pictures at several opportunities. And by the end of the day, the patient administration people don't have as much to do as they did before lunch.

The UPAR should need to do their UPAR duties for about 30-60 minutes a day on a mission. They can be anyone, but should be a Soldier who does not have a critical production role in the mission. I wouldn't make the lead dentist on a dental mission the UPAR.

The Training: The public affairs office will spend several months traveling to the brigades to provide the training to the UPARs. The class will only be one day long, and should be done no more than 60 days prior to the mission, although exceptions can be made.

Limitations: Since the training is limited, commanders' expectations for their UPARs should also be. While the initial program was never intended to train UPARs for media interaction, some brigade commanders had that expectation. There should be very little expectations of the UPARs beyond the missions they are assigned. While public affairs training is always available to enhance a UPAR's capabilities beyond the duties mentioned here, it is not expected.

Any questions concerning this program should be sent to the PAO at (801)656-3667 or matthew.lawrence@us.army.mil.

**-Maj. Matt Lawrence
Public Affairs Officer**

Did the September 11th attacks affect you and your service? Did you have a loved one who died in the attacks? What changed in your life?

The 807th MDSC Public Affairs Office would like to hear your story.

Please submit your story to matthew.lawrence@us.army.mil along with a photo of yourself in uniform.

Never forget!

The 807th MDSC has reached 500 Fans on Facebook! Join us on the way to 1,000!



www.facebook.com/807thMDSC



Looking For Something Special This Summer?

You know how the summer goes – here today, gone tomorrow, and you’re left with a gaping hole when people ask, “What did YOU do this summer?”

Well, we can help you give a GREAT answer to that question! Tell them you went to an 807th Strong Bonds retreat. We have events upcoming in two great locations. If you live in the 88th RSC region (Northwestern states) we have **Single Soldier and Married Soldier retreats in beautiful St. Louis, Missouri, August 12-14.** For those living in the 63rd RSC region (Southwestern states), we have **Single and Married Soldier retreats in exciting San Antonio, Texas, August 26-28.**

These events are designed to give you the skills to have great life experiences – whether you are single or married. There is no cost to you or your spouse, and you will be on orders, so you will be paid for attending these unique life-changing programs.

If you would like to attend one of these great events, go to www.StrongBonds.org for event information and registration.

So, what did YOU do this summer?

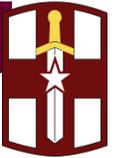
**- Chaplain (LTC) Robert Brady
Assistant Command Chaplain**

Photos of the Month



Left: Army Reserve Soldiers serving aboard the USS Cleveland on Pacific Promise 2011 stand in formation off the coast of Pohnpei, Federated States of Micronesia. (photo by Air Force Tech. Sgt. Troy Tolley)

Above: The USS Cleveland sails into the Pacific Ocean under golden afternoon skies. Pacific Partnership will serve the nations of Timor-Leste, Tonga, Federated States of Micronesia, Papua New Guinea, and Vanuatu. (U.S. Navy photo)



Top: Staff Sgt. David Brugger of the 801st Combat Support Hospital, Fort Sheridan, Ill., directs Tongans where to go to receive medical treatment from providers serving in Pacific Partnership 2011. The international humanitarian mission was staged from the USS Cleveland and served several South Pacific nations. (photo by Air Force Tech. Sgt. Tony Tolley)

Top Right: Col. David Rabb gets "miked up" for an interview with a Portland State University documentary crew. Rabb's unit, the 113th Combat Stress Control Detachment, will be one of the subjects of a documentary on PTSD treatment. (photo by Maj. Matt Lawrence, 807th MDSC Public Affairs)

Bottom Right: Soldiers of the 113th Combat Stress Control Detachment receive IED training at Joint Base Lewis-McChord, Wash. (photo by Maj. Matt Lawrence, 807th MDSC Public Affairs)

Below: Spc. Kristina Bryant and Sgt. Jeremy Snellings of the 629th Forward Surgical Team practice intubation of a child during pediatric simulation training at Nationwide Children's Hospital in Columbus, Ohio, on July 9. (photo by Lt. Col. Brent Campbell, 807th MDSC Public Affairs)

