

MEDICALNEWS

Naval Hospital Jax providers, clinic named as JOES best

By Julie Lucas

Naval Hospital Jacksonville

Defense Health Network (DHN) Atlantic released its results from the Joint Patient Experience Survey (JOES) for fiscal year 2024, 2nd Quarter, and several Naval Hospital (NH) Jacksonville assets were named "Best of the Best."

Providers from Family Medicine Physician Lt. Cmdr. Mitchell Selco, Dermatology Physician Assistant Elizabeth Anderson, and Naval Branch Health Clinic (NBHC) Albany Occupational Health Clinic earned top marks from patients who filled out the random surveys received in the mail following treatment.

"My team and I treat every patient as if they were one of our family members," says NBHC Albany Occupational Health Department Head Lt. j.g. Sean Hufford. Hufford currently serves as the sole primary care provider for 900 enrollees in the remote Military Treatment Facility (MTF) while monitoring the health of more than 1,400 employees who are potentially exposed to work-place hazards.

"I live by the quote, 'Nobody cares how much you know until they know how much you care'," Hufford states. Hufford has 22 years of active-duty service and holds a Master of Physician Assistant Studies degree from the University of Nebraska Medical Center.

For the last 10 years, Elizabeth Anderson has called NH Jacksonville home and was driven to work with military due to family connections.

"My father was in the Air Force and a government civilian, and my stepfather was in the Army," Anderson says. "I feel at home in the military culture and enjoy being able to provide the best care to our brave military members and their families."

Anderson holds a Master of Medical Science degree in Physician Assistant Studies from NOVA Southeastern University, and she believes being personable with patients is key to her success.

"I enjoy building a rapport with my patients,

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U.S. Army photo by 1st Lt. Katherine Sibilla

Spc. Joshua Ford, a combat medic (68W), poses for a photo during the Medical Readiness Exercise (MEDREX) in Luanda, Angola, on July 9.

Army combat medic, Angolan partners save life during medical readiness exercise

By 1st Lt. Katherine Sibilla U.S. Army Southern European Task Force, Africa

LUANDA, Angola — When an Angolan woman suddenly went into cardiac arrest in the Luanda military hospital, U.S. Army Spc. Joshua Ford knew exactly what

Amid the noise and urgency of the emergency room, Ford and his teammates from the 934th Forward Resuscitative Surgical Detachment (FRSD) saved her life.

As a U.S. Army Reserve combat medic, the life-saving skills he has developed proved instrumental during the U.S. Army Southern European Task Force, Africa's (SETAF-AF) medical readiness

exercise (MEDREX) in Angola.

"The Army is really good about building that muscle memory, so when an emergency presents itself, I automatically fall back on tactical combat casualty care," said Ford

Alongside Angolan military healthcare providers, Ford and his teammates from the 934th FRSD have been aiding countless Angolan citizens.

The cardiac arrest that Ford assisted with was not his first, but situations like this have driven him to serve both his country and his community.

"I've always wanted to help people and be the first one in," Ford explained. "That's what drew me to being a medic and a police officer. I want to help as much as I can."

The medical skills Ford developed in the Army directly impact his day-to-day life as a Salt Lake City police officer. While on duty, Ford is often the first on the scene, which frequently requires him to apply casualty care.

During SETAF-AF's MEDREX in Angola, Ford and his colleagues from the 934th FRSD have been helping save lives alongside their Angolan counterparts in both the operating and emergency rooms. The exercise enhances the readiness of both U.S. and Angolan

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I want them to put them at ease," says Anderson. "I look forward to coming in for their appointments and educating them about sun safety and skin cancer."

For Lt. Cmdr. Mitchell Selco, his military career has seen him don several different uniforms.

"I started my military career as a Marine 23 years ago, and I enjoyed the deployments and operational experience, which led me to attending medical school," Selco recalls. He holds a Doctor of Osteopathic Medicine degree from Touro University California, and he completed his Family Practice intern and residency training at Camp Pendleton, California. Selco saw an opportunity arise to give back in the same capacity.

"I wanted to teach the future generation of family medicine residents in the program here in Jacksonville," Selco says. "Seeing these young interns become a dependable, board-certified physician is what fills my cup daily.'

Naval Hospital Jacksonville Family Medicine Provider Lt. Cmdr. Mitchell Selco, right, instructs new Intern Lt. Cameron Myers on proper patient charting in MHS Genesis. Selco was named Defense Health Agency FY24 2nd Quarter Joint Outpatient Experience Survey Military Treatment

as no surprise to their leadership.

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Facility Best of the Best.

Photo by Julie Lucas, Naval Hospital Jacksonville



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Photo by Julie Lucas, Naval Hospital Jacksonville

Naval Hospital Jacksonville Dermatology Physician Assistant Elizabeth Anderson inspects a patient with a Dermatoscope for skin cancer lesions during an appointment, July 1. Anderson was named Defense Health Agency FY24 2nd Quarter Joint Outpatient Experience Survey Military Treatment Facility Best



U.S. Navy photo by Deidre Smith

Lt. j.g. Sean Hufford, a physician assistant at Naval Branch Health Clinic Albany, listens to a patient's heart. Hufford serves as the sole occupational health provider in the Occupational Health Clinic that was named Best of the Best by the Joint Patient Experience Survey (JOES) for fiscal year 2024, 2nd Quarter.



Sgt. 1st Class David Shrewsbury and Staff Sgt. William White from LRMC were among a group of more than 20 military medics from several NATO countries

Landstuhl Regional Medical Center soldiers take part in Maritime Medical Combat Training in Greece



Above: Two soldiers from Landstuhl Regional Medical Center had the opportunity to take part in maritime medical combat training in Greece June 3-14. The week-long training event was held at the NATO Maritime Interdiction Operational Training Center in Souda Bay, Greece. Below: A military medic hoists a simulated combat casualty aboard a ship during recent NATO maritime training in Greece.



By Kirk Frady

Medical Readiness Command, Europe

SOUDA BAY, Greece — Two Soldiers from Landstuhl Regional Medical Center (LRMC) had the opportunity to take part in maritime medical combat training in Greece June 3-14. The week-long training event was held at the NATO Maritime Interdiction Operational Training Center (NMIOTC) in Souda Bay, Greece.

Sgt. 1st Class David Shrewsbury and Staff Sgt. William White from LRMC were among a group of more than 20 military medics from several NATO countries taking part in the training. Among the participants were medics from The Federal Republic of Germany, Slovenia, Latvia, Italy, Hungary, Greece, and the Netherlands.

"The primary goal of the training was on medical combat care in a maritime environment with a focus on prolonged field care," said Sgt. 1st Class David Shrewsbury, non-commissioned officer in charge of patient care services at LRMC. "With the Army shifting its focus to large scale combat operations, it is important to consider the impact of not having that "golden hour" regarding casualty evacuation will have on the survivability of critically injured

According to NMIOTC officials, the goal of the course is to integrate medical personnel skills and knowledge in performing the necessary pre-hospital emergency medical assistance on the site, starting from the point of injury in the mission/theatre until the final transfer of the injured personnel to the closest medical treatment facility, in support of the maritime operations.

"We need to be able to focus on doing the best we can with the supplies we have on-hand and enable our combat medics to practice critical thinking and make tough choices," added Shrewsbury. "Practicing this now will make us more effective if and when the need arises.'

According to senior military medical officials, conducting tactical combat casualty care and patient evacuation in a water-borne environment creates additional stresses and challenges for those individuals responsible for performing the task.

"The most challenging part of the training was the final field training exercise," Shrewsbury added. "The field exercise lasted seven-plus hours from start to finish in 100 plus degree weather. We had to carry heavy supplies while wearing body armor, move around in small spaces, and navigate a chaotic environment without knowing when it would be over. Managing all aspects of patient care and evacuation, to include triage, medications (some of which needed to be kept at specific temperatures), and other supplies while setting up and working ropes and pulleys to extract casualties was both mentally and physically taxing."

In addition to combat casualty care, the week-long course is also designed to refine individual tactical awareness, medical competencies, interoperability, and operational planning capabilities.

"The course served as a blatant reminder that we are all Soldiers first, and that while we may each specialize in a particular craft, our skill sets should be well rounded," said Staff Sgt. William White, non-commissioned officer in charge of the Landstuhl Regional Medical Center Dermatology Clinic. "This course was, by and large, the most impactful training event of my nine-year Army career. Having the chance to work and learn jointly with members of allied nations was an excellent opportunity."



AFMS Airmen enable AFDW's global impact

Air Force Medical Service

The Air Force District of Washington was originally established as Bolling Field Command in December 1946 by the Headquarters Army Air Forces to serve as the single manager for assets in and around the nation's capital. Since 1946, AFDW has experienced multiple organizational changes - most recently it was reactivated in July 2005. While the organization has evolved over time, Air Force Medical Service Airmen have played a continuous role offering critical medical capabilities in the National Capital Region and operational medicine worldwide.

AFDW's present-day medical assets include 13 members assigned to the direct reporting unit's command surgeon's office, or AFDW/SG; approximately 1,500 medics in the 316th Medical Group, Joint Base Andrews, Maryland; and, numerous medics deployed to the 320th Air Expeditionary Wing. The 316th MDG, established in 1958 as the United States Air Force Hospital Andrews, is one of a dozen Tier 1 medical facilities that over the decades has provided significant medical asset deployment for the Air Force. In 1962, the Air Force redesignated USAF Hospital Andrews as the Malcolm Grow Medical Center in honor of the first Air Force Surgeon General Maj. Gen. Malcolm Grow who is considered a hero in both world wars for identifying and developing protections for air crew such as body armor and wind blast protections. Like Grow, several commanders from the medical center have become Air Force Surgeon General, including most recently, Lt.



Malcolm Grow Medical Center celebrates 50 years of service, and key events are recognized in it's history, including the hospital's dedication ceremony November 7, 1958.

Gen. Robert I. Miller, who retired June als at Malcolm Grow Medical Center 14, 2024.

The 316th MDG Aeromedical Staging Facility, operational since 1966, has been instrumental in repatriating injured service members from major U.S. overseas operations. When the Vietnam War drew to a close in January 1973, 39 prisoners of war returned to the United States by way of Andrews Air Force Base where their families welcomed them home and medical professionprovided care. Through operations such as Desert Shield, Iraqi Freedom, and Enduring Freedom, the 316th MDG ASF has served as the East Coast's aeromedical evacuation hub, with medics caring for thousands of wounded, ill and injured service members. During Operation Allies Refuge and Operation Allies Welcome, the Air Force's largest ever non-combatant evacuation missions, AFDW medics provided care to 19 injured active duty service members and 586 Afghans - AFDW medics were credited for their life-saving actions and efforts in coordinating helicopter transportation to Walter Reed National Military Medical Center for a critically ill Afghan infant.

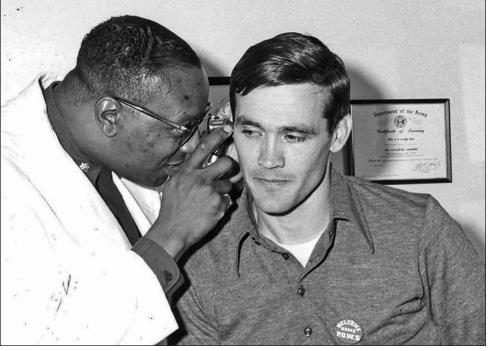
AFDW medics are vital in sustaining national security missions by providing a medically ready force, support-ing families and veterans, and ensuring medical readiness for all AFDW missions. A testament to their work includes the 316th MDG's contributions during the COVID-19 pandemic. In total, 316th MDG medics performed approximately 53,000 screening and surveillance tests in direct support of the Secretary of Defense, Joint Chiefs of Staff, Defense Intelligence Agency, White House Communications Agency, Office of Military Commissions, Joint Air Defense Operations Center, and 1,400 Presidential Support Program personnel. Providing 24/7 mission support, 316th MDG medics ensured hundreds of Air Force One missions for the president and thousands of Special to their major command or field com-Airlift Missions for vice president, mand.

first lady, cabinet members, and members of Congress with zero outbreaks. Additionally, the 320th AEW deployed groups of 30 Air Force medics to the White House Medical Unit for sixmonth intervals to support COVID screening, testing, vaccinations, and other Force Health Protection measures.

Through AFDW's worldwide mission, medics provide individual medical readiness and operational medicine support to the approximately 39,000 Total Force Airmen and Guardians worldwide, including providing vaccines, preventative health assessments, flight medicine support, and medical standards and boards. Due to consistent efforts to maintain a ready force, AFDW achieved the highest level of medic readiness in the Air Force, as measured by the Comprehensive Medical Readiness Program for June 2024. AFDW/SG also established a MAJCOM Functional Manager training orientation, focusing efforts on support to and development of medics in the worldwide mission.

Through ensuring medical readiness for global operations, maintaining a medically ready force, and cultivating future leaders, AFDW/SG remains committed to excellence in providing unwavering, world-class support to service members, veterans and national security.

Note: The Air Force Medical Service was established July 1, 1949. To celebrate AFMS's 75th Anniversary, this article was one in a series of articles highlighting the contributions of medics



Courtesy photo

Malcolm Grow Medical Center celebrates 50 years of service, and key events are recognized in it's history, including the flight physical received by Capt. Barry B. Bridges after his return home from a prisoner of war camp.

U.S. Army photo by 1st Lt. Katherine Sibilla

U.S. Army Capt. Christopher Bellm, an emergency medicine physician assistant (65DM2), left, and U.S. Army Spc. Joshua Ford, a combat medic (68W), right, insert a central line, providing the medical team with direct access to administer medication to the patient. Bellm and Ford, who are assigned to the 934th Forward Resuscitative Surgical Detachment, worked alongside Angolan military health professionals in the emergency room during the Medical Readiness Exercise in Luanda, Angola, July 9.

• Save life (Continued from front page)

medical health professionals and builds robust partnerships.

Reflecting on the exercise, Ford said, "I like that we're building a more unified relationship."

SETAF-AF holds MEDREXs throughout the African continent on a regular basis. This fiscal year, 8 medical readiness exercises were planned, 7 of which have already been executed.

These exercises join U.S. Army medical units with partner nation military medical providers for 2-week clinics in Africa. The interface provides U.S. Army medical professionals valuable knowledge of procedures and capabilities for care across Africa. The experience enhances the capabilities of Army medicine for contingencies in Africa and around the world. At the same time, the exchange provides partner militaries understanding and capability of U.S. military medical providers.

The program also provides the opportunity for U.S. and African militaries to strengthen partnerships and promote U.S. interests in Africa.

Ford hopes to apply what he learns from the Angolan healthcare providers to his job back home, particularly in situations where resources might be limited. By understanding their methods and resourcefulness, he believes he can improve his effectiveness both as a medic and a police officer.

"My goal is to learn from them, to see what resources they have and how they can improvise," said Ford.

About SETAF-AF

U.S. Army Southern European Task Force, Africa provides U.S. Africa Command and U.S. Army Europe & Africa a dedicated headquarters to synchronize Army activities in Africa and scalable crisis response options in Africa and Europe.

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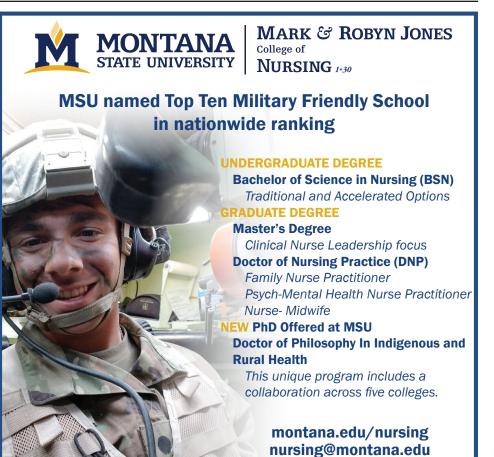








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