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Building the multi-capable medic

New deployed medical training to expand medical skills

By **Shireen Bedi**
Air Force Medical Service

The Air Force Medical Service is expanding its MEDIC-X initiative across the Air Force to ensure all Airmen assigned to medical treatment facilities are adaptable and ready for a dynamic future battlefield.

Brig. Gen. Thomas Harrell, Air Force Medical Readiness Agency commander, signed a memo on April 3 outlining the rollout of MEDIC-X across the Air Force by July 1. MEDIC-X is the Air Force Surgeon General's initiative to ensure all medical personnel are equipped with the life-sustaining skills needed for a challenging and dynamic future battlefield where resources may be limited.

"We know the future fight will be different, and so will the idea of what it will take for us to sustain readiness," said Lt. Gen. Robert Miller, U.S. Air Force Surgeon General. "I believe we are taking the necessary steps to do just that."

The rollout of MEDIC-X is the Air Force Medical Service's response to the demand for multi-capable Airmen, aligning with the Air Force Chief of Staff's operational doctrine which requires equipping Airmen with skills that go beyond their duty title.

"Future conflict will never look like wars of the past, and that is why we have to get after building multi-capable, strategically-minded Airmen today, so they can compete, deter, and win tomorrow," Chief Master Sergeant of the Air Force JoAnne S. Bass said. "AFDN 1-21 presents, in doctrine, expeditionary and multi-capable Airmen capable of accomplishing tasks outside of their core Air Force specialty to provide combat support and combat service support to [Agile Combat Employment] force elements."

With MEDIC-X, every Air Force medic, including those not involved in patient care like administrators or lab technicians, will need to be proficient in 52 skills that will ensure the Air Force's medical force is ready for the next fight.

"These 52 skills are not normally within a majority of medical group training," said Lt.

See **MULTI-CAPABLE MEDIC**, Page 6



Photo by Spc. Mason Runyon
Spc. Dagan Johnston of 100th Bn 442nd Inf Rgt treats a simulated injured Soldier during combat under fire training at Plum Base, New Caledonia April 27. The 100th Bn is taking part in 2023 Croix du Sud, or "Southern Cross", which is a joint/multilateral field training exercise focused on disaster relief, crisis events, and enhancing partnership and interoperability between U.S., France, and militaries of Oceania countries.

Warriors share combat care techniques

By **Spc. Mason Runyon**
9th Mission Support Command

PLUM, New Caledonia – Service members of New Caledonia hosted a combat care event which included various injury treatment techniques and presenting scenarios in which Soldiers and Marines from their respective countries shared methods of treating injuries under hostile environments. U.S. Soldiers of the 100th Battalion,

442nd Infantry Regiment and the 2nd/1st Battalion Royal New Zealand Infantry Regiment participated in the event in Plume, April 27.

Sharing combat and survival training techniques is an integral part of the French-led joint and multilateral exercise Croix du Sud (Southern Cross) 2023, taking place April 27 – May 6. The exercise involves 19 nations conduct-

ing a post disaster Humanitarian Assistance and Disaster Relief operation.

Additionally, readiness is at the forefront of Theater Army's success to work alongside our multinational Allies and partners, effectively addressing our world's growing complexities through innovative and competitive force

See **TECHNIQUES**, Page 2

INDEX

- Medal of Honor recipient's legacy lives on through great-granddaughter..... Page 3
- Womack wins Medical Readiness Command, East Best Leader Competition Page 5
- Career opportunities Pages 6-8

Techniques

(Continued from front page)

capabilities.

Throughout the event, the participants learned that they share similar care-under-combat treatment methods as well as different methods that could help improve their own techniques.

"We have the resources, but we use it differently," French combat medic instructor Sgt. Kinsley Parent said.

"They think of things that we French don't see at all," said Parent who was impressed with how New Zealand combat medics treated an injured Soldier.

"It's actually a great eye opener to see what other countries are doing," said Spc. Dagan Johnston, a combat medic of 100th Battalion, 442nd Inf Regt. "It's great to see other perspectives of how we can tackle the same things, but maybe in a different way."

"I like how (the French Service members') equipment is small and compact because it's easy to carry," said Spc. Vanessa Talosa, a combat medic of 100th Bn, 442nd Inf Regt "With our

stuff, it's loose and hard to pack."

"Their nine line (an emergency medevac request) is the same (as ours), just in a different language," she added.

Pvt. Amanda Voice, a combat medic trainee of the 2nd/1st Battalion Royal New Zealand Inf Regt learned that American and New Zealand combat medics follow the same regulations when treating casualties on the battlefield.

"We both use the TCCC (Tactical Combat Casualty Care) guidelines," she said.

However, she did point out differences.

"The French use morphine injectors which is something we don't," she said.

"The French don't always have a medic with them, so it's the Soldiers who do the first aid," she added.

During the event, a squad from each nation performed care under fire in a simulated ambush. Each squad displayed how injured Soldiers were treated immediately following an ambush and how they extracted injured Soldiers to a safer location to receive further treatment.

The combat medic training event provided insight and perspective. They will prove invaluable as Soldiers from different nations work together.

"We have a lot of things to learn from one another. It's cool to see what you can do and what you have improved, so we can improve," Parent said.

"These are our brothers. When we deploy, we'll be working side by side with them and it's great to know that we have confidence in each other," Johnston said. "They got our backs, we got theirs."

Right: A French combat medic demonstrates to U.S. and New Zealand service members on how to apply first aid to a simulated injured soldier. Below right: Soldiers of 100th Bn 442nd Inf Rgt extract a simulated injured soldier from a mock ambush during combat care under fire training.

Photos by Spc. Mason Runyon



Photo by Spc. Mason Runyon

Private Amanda Voice of the 2nd/1st Royal New Zealand Infantry Regiment demonstrates the way her unit approaches casualty combat care at Plum Base, New Caledonia April 27. The 100th Bn is taking part in 2023 Croix du Sud, or "Southern Cross", which is a joint/multilateral field training exercise focused on disaster relief, crisis events, and enhancing partnership and interoperability between U.S, France, and militaries of Oceania countries.



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Medal of Honor recipient's legacy lives on through great-granddaughter as future U.S. Army doctor

By Sameria Zavala

Womack Army Medical Center

FORT BRAGG, N.C. — The heroic actions of Pfc. Jesse Funk, Medal of Honor recipient, are etched in the DNA of his lineage. His great granddaughter, 2nd Lt. Vera Funk, is a second-year medical student and is studying to become a U.S. Army doctor. She is currently completing her pediatric clerkship at Womack Army Medical Center.

Jesse's bravery and selflessness serve as an inspiration to Vera, as she embarks on her own military career.

The Funk family has had a family member serve in every major war, tracing back to Henry Funk, during the Revolution.

"Service is a value that is deeply embedded in who I am, and who my family is," said Vera. "I feel honored

to be able to contribute to my family's lineage, by joining the Army in pursuit of becoming an Army doctor; alongside my sister, Capt. Sarah Broderick, who is currently serving as a U.S. Army Military Intelligence officer."

When Vera was in the fifth grade, she was required to do a class presentation on who she considered to be her hero. Without hesitation, she chose her great grandfather.

"While most students chose a hero from a history book, I chose my great grandfather.

"To me, Jesse is the epitome of what it means to serve in the Medical Corps. It means putting the well-being and safety of others above oneself."

A fifth-grade assignment and her family's core values, sent Vera down the path to join the Army to become a physician. She has not decided what type



Photo by Sameria Zavala

2nd Lt. Vera Funk poses for a photo with her father, John Funk. The Funk family has had a family member serve in every major war, tracing back to Henry Funk, during the Revolution.



Photo by Sameria Zavala

Pfc. Jesse Funk served with Company L, 354th Infantry, 89th Division, and was stationed in France during World War I. In memory of his efforts in receiving the Medal of Honor, Jesse's photo and citation is mounted amongst the WAMC Medal of Honor Hall near the Radiology and Laboratory department, on the first floor. Jesse's son, Frank Funk-Argust (in photo, standing behind Jesse), grew up to become an officer in Merrill's Marauders, serving in the China-Burma-India theater during WWII.

of physician but is very interested in surgery.

"I feel very fortunate attending medical school at Uniformed Services University. Their motto 'to care for those in harm's way,' aligns perfectly with the goals I set for myself in fifth grade.

"From a young age, I was inspired by what the Medical Corps represented, and I wanted to be a part of it as a doctor, a decision that was heavily influenced by Jesse's legacy and valor."

Jesse's son, Frank Funk-Argust, was an officer in Merrill's Marauders, serving in the China-Burma-India theater during WWII. Frank's son and Vera's father, John Funk, retired as an Armor & Cavalry first sergeant after twenty-one years; to include service during Operation Desert Storm. Both Vera's father and grandfather earned the Bronze Star.

According to the Defense Health Agency website, Jesse served with Company L, 354th Infantry, 89th Division, and was stationed in France during World War I. During a battle near Bois-de Bantheville, France, he accompanied Pfc. Charles Barger into a highly dangerous area known as "No Man's Land," and, as a combat medic, managed to rescue the lives of two wounded officers stranded in the open field. Jesse fearlessly made two trips to pull the offi-

cers back to safety.

In memory of his efforts, Jesse's photo and citation is mounted amongst the WAMC Medal of Honor Hall near the Radiology and Laboratory department, on the first floor.

Soon after Jesse earned the Medal of Honor, he humbly wrote a piece to the Denver Post newspaper. His family stores the original copy in their archives.

"I remember one fellow in our company who would just lie and quiver and shake when the firing started, but when the signal came for him to go over the top (of the trenches), he was right there.

"To my mind he was one of the bravest fellows in the company. When a man can realize that he's liable to be killed any minute and can force down his fear and make a good fight, he's a brave man, in my estimation. And every time I saw that fellow quivering and shaking, it used to give me new heart, because I knew that here was a good example to follow. If I could keep up with him, I'd be doing my part."

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Ultimate Caduceus 2023 tests Defense Health Agency readiness in emergencies

By Robbie Hammer
Defense Health Agency

For the first time, medical representatives from the Defense Health Agency participated in a combatant command movement exercise, the Ultimate Caduceus 2023 held in March. The objective was to test the Department of Defense's aeromedical evacuation and critical care transport capabilities.

The U.S. Transportation Command conducts the annual patient movement field training exercise designed to simulate transporting injured troops on a mass scale from one point to another. This exercise simulated movement from outside the continental U.S. to medical facilities in the U.S., and was held at several locations across the U.S.

"Ultimate Caduceus 2023 allowed all partners in the global patient movement enterprise to work together. It also allowed us to exercise our collective preparedness for any crisis throughout the spectrum of competition and conflict," said U.S. Air Force Brig. Gen. Norman West, the DHA director of staff.

More than 400 joint and total force military and civilian personnel participated in the exercise, including representatives from the U.S. Department of Veterans Affairs, the U.S. Department of Health and Human Services, the DHA, and several other local partners.

"The patient movement exercise was a great opportunity for the DHA to demonstrate more of the capability we provide to support our national defense," said West.

The exercise took place in several locations: Joint Base Lewis-McChord in Washington; Joint Base Elmendorf-Richardson in Alaska; Boise, Idaho; and Portland, Oregon.

"Ultimate Caduceus assessed the capabilities of and provided field training to aeromedical evacuation and critical care air transport teams, medical staging systems, as well as reception and onward movement functions for global patient movement," said Joseph Weston, medical emergency manager with DHA's Madigan Army Medical Center at Joint Base Lewis-McChord.

This exercise was important for the DHA because it was the first time it activated their operations center and the patient management coordination cell, according to Weston.

Movement Scenario and the Madigan Response

Weston was the lead planner for the hospital activities and coordinated with local and regional partners to help with the response, such as the Air Force Reserve's 446th Aeromedical Staging Squadron also based at JBLM.



Air Force flight crews and medical personnel work together to care for simulated patients as they fly to military treatment facilities during Ultimate Caduceus at Joint Base Lewis-McChord, Washington, March 15, 2023. The UC23 exercise provides a valuable training opportunity for the various components of the Department of Defense and the Military Health System to work together alongside other government agencies and our civilian partners as we prepare to support our national defense and respond to any emergency.

Photo by John Wayne Liston

The scenario was this: An explosion occurred on the island of Guam and service members were injured. The hospital in Guam would triage and work with USTRANSCOM to expedite transporting them stateside.

"There would be a call to USTRANSCOM saying there were 30 service members that need to be evacuated," said Weston. "At which point, the DHA operations center worked with USTRANSCOM to identify what was required and stood up the coordination cell."

According to Weston, the DHA then identified which facility they wanted to handle the injured: Madigan was chosen.

"We got the call with the number we were receiving and then had to plan our response," said Weston. "We were asked what our capacity was and how many we could take. What we couldn't handle at Madigan, we looked to our local and regional partners to see what their capacity was."

The scenario demonstrated a key capability of DHA: it's ability to utilize the networks of care within the Military Health System and partners.

"The DHA market is a hub. It's also

a spoke. We get the call to take in patients, (and) we push them to wherever they need to go," said Weston.

Madigan received a time frame and had to ensure they had the capabilities and staff ready for when the injured hit the ground. "We had to be ready within three hours once we received the call that they were on the way," said Weston.

"We had a number of objectives that we felt went well," Weston said. "The first was to activate the emergency operation center and implement the National Incident Management System principles. This established command and control to maintain situational assessment and awareness and operational communications—this was a big piece."

According to Weston, "another objective was the coordination between TRICARE and the DHA with local partners, and to evaluate our processes for activating the Veteran Administration contingency plan, if needed, to push to them."

Receiving and admitting those injured was another a tactical objective, with the goal to admit aeromedical evacuation patients to the appropriate level of

care from the region within one hour of the aircraft arriving. "I think we did well overall," said Weston.

"The exercise gave our team of professionals at Madigan the chance to test their ability to receive an influx of patients from anywhere in the world, while continuing to provide daily health care to our deserving beneficiaries," West said.

Ultimate Caduceus 2023 exercise didn't just test the immediate response, but also what would happen or need to occur on day 30 and day 60.

"The questions we had to answer were how we could create immediate capacity for that initial event, and then how do we start developing sustainable capacity," said Weston.

The exercise emphasizes interoperability in bringing all elements of the global patient movement enterprise together to ensure combatant commands can move sick and injured patients to appropriate levels of medical care, according to Weston.

"These exercises are key to sustaining the force, while agility and scalability are the cornerstone of the Defense Health Agency's combat support," said West.

Womack team wins 2023 Medical Readiness Command, East Best Leader Competition

By Sameria Zavala

Womack Army Medical Center

FORT BRAGG, NC — Medical Readiness Command, East held the 2023 Best Leader Competition at Fort Bragg, N.C., April 23. The competition was designed to recognize and reward the best leaders within the command and featured a series of challenges that tested participants' leadership skills and abilities.

After a grueling four days of competition, the Womack Army Medical Center team emerged victorious. Team members included 1st Lt. Nikkolas Chandarlis, a registered dietitian and Production & Food Services deputy chief; Staff Sgt. Ethan Locklear, radiology specialist; Sgt. Dantoni Lebron Rodriguez, Sterile Processing Department NCOIC; Spc. Angel Olea, Four South licensed practical nurse; Spc. Lukas Steele, combat medic; and Pfc. Bryton Owen, pharmacy technician.

The best leader competition promotes esprit de corps throughout the Army, while recognizing Soldiers, non-commissioned officers and officers that demonstrate commitment to the Army values, embody the warrior ethos and prove they are ready responsive and relevant.

"We had a lot of support from Command Sgt. Maj. Kasandra Boulrier (the WAMC command sergeant major)," said Olea. "She allowed us to take time away from our daily jobs to completely train for the event. She even assigned us a coach, Sgt. 1st Class Angela Peterman (WAMC Operations non-commissioned officer), that made sure we were receiving quality training."

The WAMC team demonstrated exceptional leadership skills throughout the competition, above 12 other teams consisting of 71 other competitors. They excelled in challenges that tested their ability to lead under pressure, communicate effectively, and work as a team.

"I have been taught a great amount from my fellow Soldiers on the BLC team, and their insight has grown my confidence as a Soldier," said Chandarlis. "I believe this competition proved to us that if you prepare with humility and compete with confidence, you will exceed your expectations."

A few competition events included, combat water survival, qualification range, oral board, a 9-mile foot march, a written test, night land navigation, and a mystery event.

"It feels great to win," said Steele. "It feels like a great weight has been taken off my shoulders, but it doesn't stop here. We have another level to focus on. We did our celebration and now we move on from it and continue to train hard. The most satisfying event had to be crossing the creek in the boat. The water just felt amazing."

The team's dedication and commitment to excellence were evident in every challenge they faced, and their performance was a testament to the high standards of leadership within the Medical Readiness



U.S. Army photo by Jennifer Beeman

Above: Medical Readiness Command, East held the 2023 Best Leader Competition at Fort Bragg, N.C., April 23. Womack Army Medical Center came out victorious, winning first place. The competition was designed to recognize and reward the best leaders within the command and featured a series of challenges that tested participants' leadership skills and abilities.

Command, East.

"This competition will expose the best of you," said Lebron Rodriguez. "You have to look deep within you to be positive and cheer each other on, to complete the mission."

Each team member was presented with an Army commendation medal, an extra-large wooden "Thor" war hammer, a commander's coin of excellence, a tandem jump with the Golden Knights Parachute Team, a Sergeant Audie Murphy Club coin, and a Trophy.

"WAMC is extremely proud of our six competitors," said Col. David Zinnante, WAMC commander. "None of this would have been possible without the support of Team Bragg. The teamwork across the installation and region to make the competition possible was simply remarkable."

As the winners of the MRC East Best Leader competition, the Womack Army Medical Center team will serve as ambassadors for the command, representing the best of the best in leadership, and advance to represent MRC-East in Germany at the 2023 Medical Command Best Leader Competition, next month.

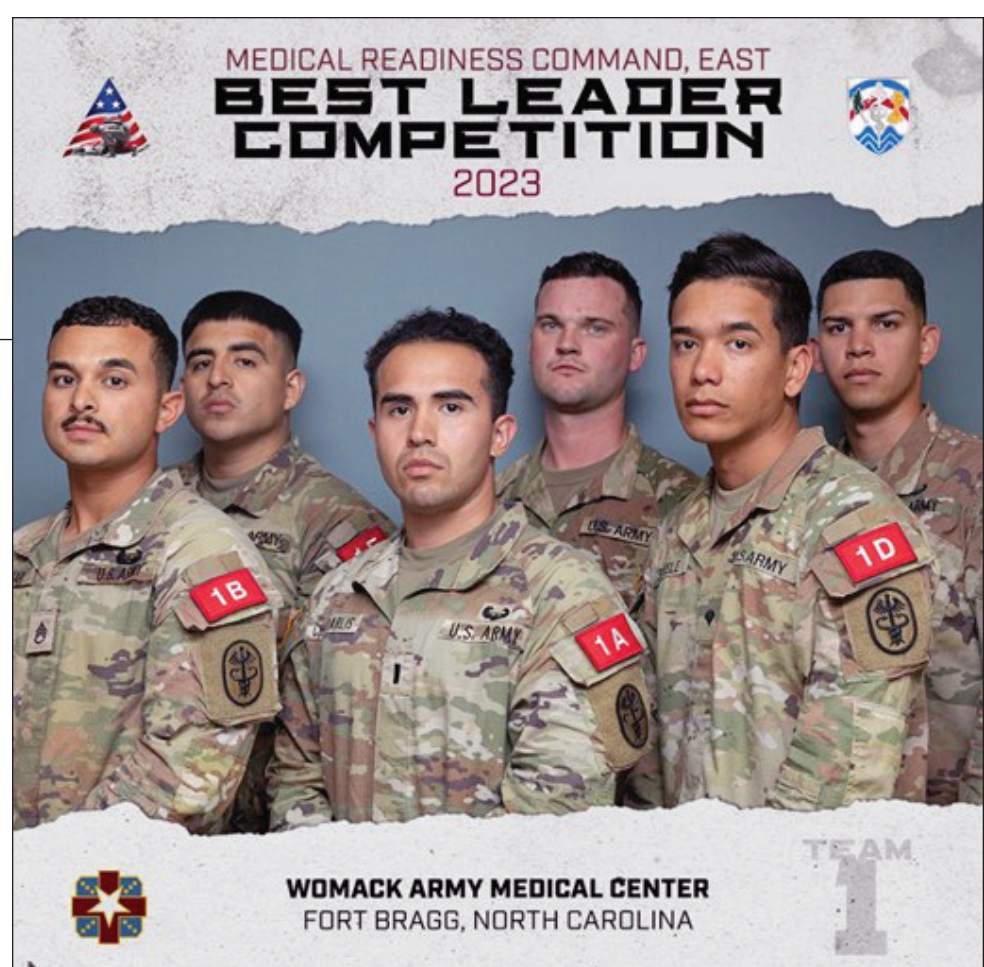


Photo by Sameria Zavala

After a grueling four days of competition, the Womack Army Medical Center team emerged victorious. Team members included: 1st Lt. Nikkolas Chandarlis, a registered dietitian and Production & Food Services deputy chief; Staff Sgt. Ethan Locklear, radiology specialist; Sgt. Dantoni Lebron Rodriguez, Sterile Processing Department NCOIC; Spc. Angel Olea, Four South licensed practical nurse; Spc. Lukas Steele, combat medic; and Pfc. Bryton Owen, pharmacy technician.

• *Multi-capable medic* (Continued from front page)

Col. Samantha Kelpis, the Air Force Medical Service's MEDIC-X team lead. "An administrator doesn't normally do any hands-on patient care. MEDIC-X trains them on skills they will need in a challenging deployed environment where the priority is not going to be completing administrative tasks, it is going to be saving lives. When they are deployed and resources are limited, they need to know how to perform some level of patient care."

MEDIC-X's 52 skills encompass base-level patient care that is easily teachable through hands-on, in-person training to any medical personnel, whether they treat patients regularly or not. The training includes such skills as assessing pain levels, infection control, taking a patient's vital signs, assisting with spinal immobilization, patient movement, and respiratory care.

According to Kelpis, every medical Airman must participate in the formal training or demonstrate competency in those skills in a formal evaluation. She also explained that most physicians, nurses and medical technicians can be granted credit for most of the skills, especially the ones they use in their day-to-day jobs.

"Even though the MEDIC-X training is primarily focused on those individuals who do not engage in direct patient care on a regular basis, there could be skills a traditional clinician may need a refresher on," said Kelpis. "For instance, if you are a critical care medical technician who works with an aeromedical evacuation unit, you would be familiar with most of the MEDIC-X skills already compared to a family medicine medical technician that works in a clinic. Those clinical-focused individuals may not have the working knowledge of a ventilator or offloading a patient from a fixed wing aircraft depending on their prior work or deployment experience. With that said, those individuals would need to go through the training of those skills they are unfamiliar with."



U.S. Air Force photo by Airman 1st Class Zachary Heimbuch. *U.S. Air Force Airman 1st Class Caleb Strout, 17th Operational Medical Readiness Squadron flight medicine admin technician, supplies oxygen into a training mannequin during a Medic Rodeo scenario at Melrose Air Force Range, N.M. Aug. 16, 2022. The Medic Rodeo is designed to test the skills of Air Force medics in a simulated deployed environment and a stateside military base.*

Mental Health



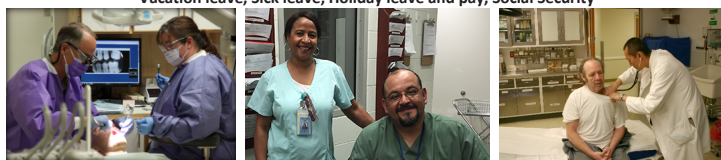
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U.S. Air Force graphic. *Medic-X will equip all Air Force medics in non-patient care career fields with the skills needed to provide tactical clinical support in mass casualty and other emergencies.*



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In the Army Recovery Care Program, you have one job

By **MaryTherese Griffin**
Army Recovery Care Program

In the Army Recovery Care Program, Soldiers have one job...to get better.

Capt. Veronica Jones worried about having enough leave to be able to enter a Soldier Recovery Unit (SRU) and take the time to recover from injuries from deployments and an underlying illness. She soon discovered that her job was to get better. And, she continued to receive her pay while completing her recovery.

"While I was demobilizing last year, I was referred for two surgeries. I needed disc surgery for my neck and pelvic floor surgery. I didn't have that kind of leave saved up and I couldn't afford to not be paid," said the Lakota Helicopter Pilot in the National Guard.

"I had no idea what an SRU was," said Jones who found herself at a waiting place for a while at Fort Bliss having just come off a deployment at the border. She says she almost declined care because she wanted to get home and take care of her family. Her father was newly diagnosed with aggressive cancer and her five-year-old son needed mental health therapy. When she got to Fort Riley which was the closest SRU to where she lived, she was glad she accepted what they had to offer.

"Something I'm grateful for is that the SRU treats the whole Soldier. I've received support for my family and Nurse Case Managers have spent hours helping me with my dad and his doctors." Advice from the pros on what she should do for her dad was a gift to Jones. "I even received spiritual support that I needed with all that was happening with me and my fam-

ily. I thank the Lord for these people. I needed to be reminded God is in control."

Since June of 2022, Jones let go, and let God and the Fort Riley SRU guide her to recovery. After two surgeries and therapy, she doesn't yet know if she will return to duty but the discovery of adapting in life has become her focus.

"When I learned about adaptive sports, I was very interested in attending the Army Adaptive Sports Camp at Fort Bragg," said the now avid adaptive kayaker. It started when Jones learned how to adaptive-kayak, something she could do with her injuries. "Getting out on the water pedaling on the kayak was awesome. My husband and I thought, this is something we can do as a family. We all get to do something new together and we get to keep moving."

Jones competed in multiple events from air rifle to wheelchair basketball and archery at the Army Adaptive Sports Camp and is hopeful to make Team Army to compete in Coronado, CA at the Warrior Games Challenge in June.

"Whether I make it to the games or not, I will be supporting all these Soldier Athletes. It's been an amazing two weeks of discovering what we CAN do. That is our job too. Figuring out what we can do."

Captain Jones did make the team! She will compete with 39 Soldier athletes on Team Army at the 2023 Warrior Games Challenge in Coronado California June 2-12.



Photo courtesy Capt. Veronica Jones

Capt. Veronica Jones Pilots her Lakota Helicopter in the National Guard.

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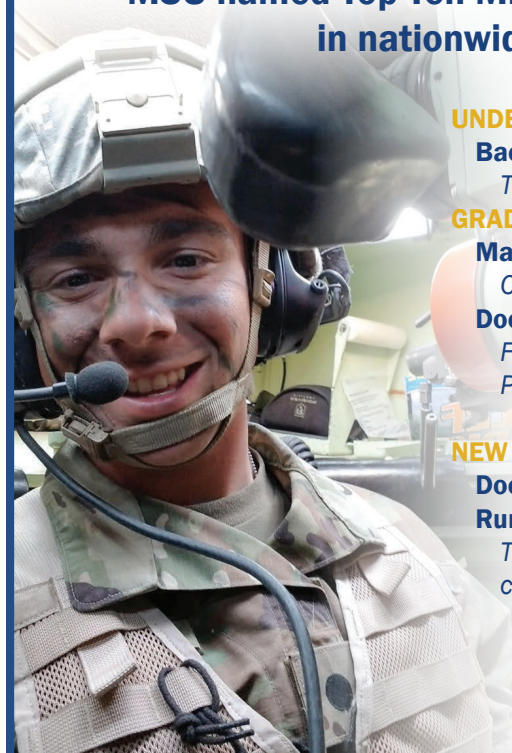
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