

IFDI

Ready at a moment's notice

Two of the Navy's frontline public health teams will take the watch

By Jennifer Goulart

Navy and Marine Corps Force Health Protection Command

Forward Deployable Preventive Medicine Units (FDPMUs) are essential components of the Navy's public health and medical readiness and Navy Medicine's only Public Health expeditionary platform.

Two teams are currently undergoing a crucial certification process known as the "Medical TYCOM (Type Command) Certification" and are expected to be fully certified by the end of summer, following the successful completion of an Operational Readiness Evaluation (ORE).

This certification is significant to Force Health Protection and the Navy requires two FDPMU teams be always on the watch, on each coast. Teams train rigorously for nine to 12 months before being evaluated through the ORE. The final certification is signed off by Commander, Naval Medical Forces Atlantic, Rear Adm. Kevin Brown.

The teams taking over the watch includes, FDPMU ONE, affiliated with Navy Environmental Preventive Medicine Unit TWO (NEPMU), which will replace FDPMU TWO. Additionally, FDPMU SIX, a combined team from NEPMUs FIVE and SIX, will relieve FDPMU FIVE.

FDPMUs can operate from both land and sea platforms and are structured to be highly adaptable. According to Navy and Marine Corps Force Health Protection Command Preventive Medicine Director, Cmdr. Lucas Johnson, standing the watch means teams must be fully prepared to deploy with just four to 10 days' notice, operating at a 100 percent readiness level.

"Unlike other Expeditionary Medical (EXMEDs) units that typically have a 90-day preparation period, FDPMUs must be ready to respond immediately," he said.

A base team consists of 13 members and can be augmented up to 16 members for specific missions. The teams are divided into various components, each specializing in different areas such as preventive medicine, chemical, disease vector, radiologic, and microbiological tasks. The 16-person teams include additional radiologic and biochemical experts.

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In a demonstration of cooperation between Defense Health Agency, East, medical facilities, Winn Army Community Hospital provided critical care support to Dwight D. Eisenhower Army Medical Center (DDEAMC) following the impact of Hurricane Helene throughout Augusta, Georgia. Above: Fort Stewart paramedics, Winn medical personnel, and 3rd CAB flight crew transfer a patient from the helicopter to a gunnery for movement to a waiting ambulance.

Winn ACH, 3rd CAB soar to DDEAMC's rescue after Hurricane Helene impacts patient care

By Gustave Rehnstrom Winn Army Community Hospital

FORT STEWART, Ga. - Six patients were safely transferred from Dwight D. Eisenhower Army Medical Center (DDEAMC) to Winn Army Community Hospital

(Winn ACH) following severe infra-

structure damage at Fort Eisenhower in need of immediate support to caused by Hurricane Helene.

The patients were flown via HH-60M Black Hawk helicopters from the 3rd Combat Aviation Brigade, 3rd Infantry Division, after power outages and facility disruptions at Eisenhower left the hospital

continue providing critical care.

Two nurses flew with the patients from DDEAMC. They joined staff at Winn to continue patient care.

Once at Winn ACH, medical

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• Frontline (Continued from front page)

assets, enhancing the capabilities of The Chemical component can analyze organic public health units rather than a wide range of substances and model replacing them. Their mission encompasses comprehensive Force Health Protection throughout the deployment spectrum—pre-deployment, during deployment, and post-deployment.

Pre-deployment involves ensuring health instructions align with CDC, the National Center for Medical Intelligence (NCMI), and Combatant Command (COCOM) recommendations. Postdeployment, FDPMUs conduct sampling missions to identify and quantify environmental and occupational health threats, with data recorded in the Defense Occupational and Environmental Health Readiness System (DOEHRS). This helps the Navy identify adverse conditions in any given geographical location.

FDPMUs perform a variety of critical functions. The Preventive Medicine component includes physicians and environmental health officers, conducting disease surveillance, outbreak inves-

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In theater, FDPMUs serve as vital tigations, and ensuring water quality. the impacts of chemical releases. The Radiologic component can detect and quantify radiological hazards.

> The Microbiological component, with its Biosafety Level 2 (BSL-2) laboratory, where work is done with moderaterisk agents present in the community and associated with humans, can perform real-time pathogen detection. The Disease Vector component manages pest surveillance and control.

> The capstone exercise for FDPMUs is the Occupational Environmental Health Site Survey (OEHSS), a comprehensive assessment required for any site where U.S. forces will be stationed for more than 30 days. This survey identifies health hazards and develops a sampling plan to quantify risks, ensuring data is entered into DOEHRS.

> "Once teams are certified they are still training and getting experience with specialized equipment," said Johnson. "We have seen a lot of success getting these teams meaningfully integrated into major Navy exercises and conducting additional overseas health surveys to keep their skills sharp and ensure they are gainfully employed and at the top of their capability.'

> In addition to their medical expertise, FDPMU members are trained in tactical and operational warfighting skills, ensuring they can defend themselves and operate in forward-deployed environments. This comprehensive preparation helps reduce the lag in providing critical health information to commanders, thereby protecting the health of the warfighter, and preserving force

significantly impact combat effective-



Hospital Corpsmen 2nd Class Kaitlyn Boyle and Jacqueline Holman of Forward Deployable Preventive Medicine Unit (FDPMU) East, Navy Environmental Preventive Medicine Unit TWO, process water samples at ISB Mielec, Poland, a staging area for the 82nd Airborne Division. The FDPMU supports public health for deployed service members, ensuring medical readiness and Force Health Protection. FDPMUs are required to complete a rigorous nine-to-12-month training and an Operational Readiness Evaluation (ORE) before certification by Commander, Naval Medical Forces Atlantic. Once certified, they are always prepared for immediate action, with two teams on the watch always. The teams provide public health support to units like Task Force Dragon, conducting site assessments and water safety evaluations.

maintaining the readiness and resilience elon 5) provide the personnel. NEPMU of U.S. forces. Their work ensures that TWO man's Teams ONE, TWO, commanders can deploy the maximum THREE, and the reserve Team SEVEN, combat power needed to achieve mission objectives, emphasizing the importance of health protection in overall military strategy.

Navy and Marine Corps Force Health By addressing health risks that can Protection Command (NMCFHPC), an echelon four command, oversees the

ness, FDPMUs play a crucial role in FDPMUs, while the NEPMUs (ech-NEPMU 5 man's Teams FOUR and FIVE, and NEPMU SIX man's Team SIX. Occasionally, teams are blended between NEPMUs to meet specific requirements. Certification is finalized and approved by Navy Medical Forces Atlantic (NMFL).



U.S. Navy photo by Desmond Martin

The Forward Deployable Preventive Medicine Unit (FDPMU) is vital in protecting deployed service members' health. These Navy units ensure medical readiness and Force Health Protection. Before deployment, FDPMUs complete rigorous training and an Operational Readiness Evaluation (ORE) over a nine-to-12-month span, after which they are certified by Commander, Naval Medical Forces Command. Once certified, they are always prepared for immediate action, with two teams on the watch always. FDPMU members also receive specialized tactical and operational training for effective forward deployment and delivering crucial health information to commanders.

NMRC's Biological Defense Research Directorate publishes manuscript on brain injury indicators for infectious diseases



U.S. Navy photo by Darci Smith/Released

Linwood Johnson, with Naval Medical Research Command (NMRC)'s Biological Defense Research Directorate, evaluates the effectiveness of a blood test in detecting the presence of proteins that can indicate brain-damaging viruses and bacteria. NMRC is engaged in a broad spectrum of medical research, from basic science in the laboratory to field studies in austere and remote areas of the world to investigations in operational environments. In support of the Navy, Marine Corps and joint U.S. warfighters, NMRC researchers study infectious diseases, biological warfare detection and defense, combat casualty care, environmental health concerns, aerospace and undersea medicine, medical modeling, simulation, operational mission support, epidemiology and behavioral sciences.

By Sidney Hinds

Naval Medical Research Command

FREDERICK, Md. – The Journal of Infectious Diseases (JID) published recent findings from Naval Medical Research Command's (NMRC) Biological Defense Research Directorate (BDRD) on detecting brain injury indicators for infectious diseases on September 10, 2024.

The findings, detailed in a BDRD manuscript, provide evidence that an FDA-approved blood test for diagnosing mild traumatic brain injury (TBI) could aid in detecting brain injury resulting from a viral or bacterial infection.

"The ability to quickly detect brain injury caused by infectious diseases is very important because they are a serious health problem worldwide," explained Dr. Darci Smith, head of BDRD's Microbiology and Immunology Department. "Our military personnel are frequently stationed in areas where they may be at risk of exposure to viruses or bacteria that can affect the brain and nervous system, so this blood test could provide an important new tool to more quickly diagnose brain injury caused by infectious diseases."

BDRD explored the ability of the blood test to detect higher levels of certain proteins that could indicate the presence of brain-damaging viruses

and bacteria. High levels of proteins such as glial fibrillary acidic protein (GFAP) and ubiquitin carboxy-terminal hydrolase L1 (UCH-L1) have been found in patients during a retrospective study, and could be used to predict which patients might later develop cognitive problems. GFAP can signal injury to astrocytes which are messenger cells in the brain that protect nerve cells, and UCH-L1 can signal injury to neurons that send and receive information.

"Such a blood test could assist doctors in deciding if further brain imaging or spinal fluid analysis is needed, and help doctors in deciding to start appropriate treatment, if available," Smith said.

The BDRD manuscript was published by JID earlier this month through the journal's website.

NMRC is engaged in a broad spectrum of activities, from basic science in the laboratory to field studies in austere and remote areas of the world to investigations in operational environments. In support of the Navy, Marine Corps, and joint U.S. warfighters, researchers study infectious diseases, biological warfare detection and defense, combat casualty care, environmental health concerns, aerospace and undersea medicine, medical modeling, simulation, operational mission support, epidemiology and behavioral sciences.

MACH soldiers win MRC-East Best Medic Competition

By Jessie Hudson

Martin Army Community Hospital

Two Martin Army Community Hospital Soldiers, Staff Sgt. Noe Contreras and Staff Sgt. Ricardo Tevalan Gomez have proven their skills and resilience by winning the prestigious MRC-East Best Medic Competition. Contreras, a radiology specialist, and Tevalan Gomez, an operating room specialist, teamed up to tackle one of the most grueling competitions for Army medical personnel.

The Best Medic Competition is an actual test of endurance, skill, and medical knowledge. Designed to simulate the intense conditions of battlefield medicine, competitors are pushed to their limits in various physically demanding and mentally challenging tasks. These include tactical combat casualty care, where participants must apply life-saving medical interventions under fire, obstacle courses that challenge their agility and strength, and timed land navigation, weapons handling, and other warrior tasks. Every aspect of the competition mirrors the real- world pressures medics face on the battlefield.

Winning the MRC-East competition is a significant achievement that highlights their medical expertise, leadership, and teamwork skills. Contreras and Tevalan

Gomez worked closely to overcome each event, demonstrating the synergy needed to excel in high-stress, high-stakes situations

"We trained hard for this, but when you're out there, it's all about trusting your instincts and your partner," said Contreras. "Every scenario reminds us why we do what we do to save lives in combat."

Tevalan Gomez echoed that sentiment. "This competition pushes you to your limit but also brings out the best in you. Competing alongside the best medics in the Army is an honor, and I couldn't ask for a better teammate," he said.

Having earned the top spot at MRC-East, the duo advances to the All-Army Best Medic Competition in February. This highly anticipated event will bring together the top medics from the entire Army, each vying for the title of Best Medic. Contreras and Tevalan Gomez will represent MACH and the broader MRC-East region nationally.

Their accomplishment reflects the dedication of the entire medical community at MACH, where training and preparation is a constant focus. The pair's journey to the All-Army competition will continue to inspire their peers and set the standard for excellence in military medical care.



Photo by Jessie Hudson

U.S. Army Staff Sgt. Noe Contreras and Staff Sgt. Ricardo Tevalan Gomez pose for a picture October 3, 2024, at Fort Moore. Contreras and Tevalan Gomez won the MRC-East Best Medic Competition.



168th Wing Medical Group delivers medical and dental care to Northern Mariana Islands

By Senior Master Sgt. Julie Avey 168th Wing

A medical team from the 168th Wing provided healthcare services to the Northern Mariana Islands from June 10- June 28, 2024, embarking on a mission to provide essential medical, dental, optometry, and veterinary care to the residents of Saipan, Rota, and Tinian. This initiative, known as Operation Wellness 2024, was part of the larger Innovative Readiness Training Program, aiming to support the Northern Mariana Islands by delivering medical services to rural populations while enhancing the training and readiness of service members.

Lt. Col. Russell Pierce, 168th Medical Group physician, had the chance to go to Tinian and set up a medical clinic that included dental, ophthalmology, and medical services.

"I connected with the Army, and we set up a clinic and took care of the Tinian people," said Pierce. "A lot of hypertension and diabetes training. We connected with the local clinic for the continued care."

Pierce specializes in nutrition and helps educate outside of being a

He explained some of what was accomplished,"They did not have an ophthalmologist on the island, so we made 80 pairs of glasses. They have a dentist who only visits the island once a month, so a lot of dental care took place. There are a lot of stray dogs on the islands. The veterinarians spayed and neutered cats and dogs for training and to help with the stray population. He said they say the numbers will

dwindle if you continue this after three

Operation Wellness 2024 not only addressed the healthcare needs of the local communities but also contributed to the professional development of the participating service members. By offering hands-on training experiences, the mission not only improved the medical skills of the personnel involved but also strengthened their readiness to respond to various scenarios and challenges. The initiative alleviated the burden of accessing healthcare for the Saipan, Rota, and Tinian residents, fostered goodwill, and strengthened the bond between the military and the local population.

"I enjoyed meeting new people and supporting the medical mission in my career field as a medical admin," said Staff Sgt. Yao Cai, 168th Medical Group health services management.

In addition, Cai was also able to provide translation skills as she is fluent in Mandarin. Her translating skills allowed for better communication, which in turn provided beneficial medical care.

Through successfully executing Operation Wellness 2024, the 168th Medical Group provided humanitarian efforts and received readiness training.

"As medics, we did intake of patients, vitals, and took their history before they saw the doctors," said Airman 1st Class Hannah Wolverton, 168th Medical Group. "While the doctors may have seen 50-60 patients, we saw everybody, every single person. High blood pressure was the concern we saw throughout the entire trip. We



Maj. Debra Triplehorn, 168th Medical Group physician, takes a selfie of the 168th Medical team while traveling to Saipan via military aircraft to provide medical care in the Northern Mariana Islands, June 2024. Operation Wellness 2024, was part of the larger IRT Program, aiming to support the Northern Mariana Islands by delivering medical services to rural populations while enhancing the training and readiness of service members.



Tech Sgt. Charity Sisco, 168th Wing dental assistant, front left, poses for a photo with her Innovative Readiness Training dental team during the IRT in Saipan, June 2024. Operation Wellness 2024, was part of the larger IRT Program, aiming to support the Northern Mariana Islands by delivering medical services to rural populations while enhancing the training and readiness of service members.

your diet and activity levels, and tools and resources.'

Wolverton also described her experience with the locals off duty, "When we got off work, it was nice to see everyone. Everyone was so nice and considerate. We were at one of the beaches, and one of the locals had a bunch of mangoes. He would cut them and give them to us. Those mangoes were the most delicious ever. I came back and did not want to eat the mangoes.'

The hope is that this mission's impact will reverberate far beyond the time spent there, leaving a lasting impression on the communities served.

"My favorite part of being in Saipan was being able to provide medical care and bonding with people," said Airman 1st Class Sierra Long, 168th Medical Group Aerospace Medical Technician. "You could tell on their faces when they walked in that they were so excited to be there and get the care. Many came in not just to get the care but to talk to people about what life is about there and their experiences and just bond with people.

In total, the IRT team saw 5,627 patients and provided 43,895 proce-

"On average, in dental care, we saw about 70 patients per day for dental ing people."

provided education, how to change care cleanings, extractions, fillings, and dental hygiene," said Tech Sgt. Charity Sisco of the 168th Medical Group. "Amazingly, we transformed a high school into a working clinic."

Sisco said the patients were lining up, and the schedule was packed during the first hour of the day. They had to close the schedule after booking the 10-12 hours they worked.

"Everyone was so grateful," said Sisco. "The community had a dinner for us, and it was really nice."

Approximately 300 service members participated in Operation Wellness 2024, a joint-service Innovative Readiness Training program serving the Commonwealth of the Northern Mariana Islands by providing no-cost medical services to rural populations and hands-on training experiences to promote service members' mission

"It was a great experience to go as a PERSCO team and be a part of the mission as Force Support Squadron," said Staff Sgt. Amberylynn Crisostomo, 168th Force Support Squadron. "It was good because we could work with our medical team and see more of our wing members and meet more people DOD-wide. It was nice to see the success of what everyone did at the end - all the training while there and meet-

• **Rescue** (Continued from front page)

teams from both hospitals worked a way to honor their military service, care last night via HH-60M Black Hawks around the clock to ensure the patients received uninterrupted care. Soldiers and nurses collaborated to maintain vital treatments and support services, despite the challenges presented by the hur-

Flying the patients to Winn was crucial to 2nd Lt. Natalee Holt, a medical surgery nurse at DDEAMC. It was not only a continuation of their care but also

she said.

"The mission matters because these are our Veterans who served for us, and now we're serving for them," Holt said.

Col. Margaret Berryman, commander of Winn ACH, praised the operation, highlighting the collaborative effort between both facilities.

"The successful transfer of six patients from DDEAMC to our 'Winning' team's

is a testament to the exceptional capabilities and dedication of our healthcare teams at both facilities," Berryman said. "This collaborative effort underscores the importance of teamwork and mutual support within the military healthcare system, even in the face of ongoing challenges like the aftermath of Hurricane Helene."

Berryman emphasized the strength of the military healthcare system and the importance of cooperation during times of crisis. "We are confident that DDEAMC would be there for us if the tables were turned, and this transfer serves as a powerful reminder of our unwavering commitment to providing compassionate, high-quality patient care."

Despite the storm's aftermath, both medical teams ensured that patient care was never compromised, showcasing the resilience and dedication of military healthcare professionals in challenging conditions.

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Photo by Kevin Larson

Fort Stewart paramedics wheel a patient toward the waiting ambulances for the short drive to Winn.



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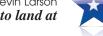


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A 3rd Combat Aviation Brigade CAB HH-60M Black Hawk prepares to land at Fort Stewart's Donovan Field just across from Winn.

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