




Weather Forecast		Wednesday  High:62 Low:41
Thursday 	High:58 Low:36	Friday  High:59 Low:37

WEDNESDAY

Fort Riley Post



Artists win FORSCOM

Fort Riley recently honored the special artists who won at the FORSCOM level art competition. The winners of the contest are from a variety of different styles and traditions.

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Soldiers participating in a Trauma-AIMS course assess a patient following a mock vehicular accident. PFC Jacob Perez (left), Pvt. 2 Latoya Tom (center) and 2nd Lt. Trent Short (right) extracted Sgt. Lavor White from a vehicle during military occupational speciality skill qualification.

Medics train-up for new MOS

By *Christie Vanover*
Staff Writer

If a unit is under fire and the skills of an Army medic are needed, the medic's performance can mean the difference between life and death.

"A well-trained gunner hits his target on the first shot. A well-trained medic saves the life of a soldier on the first shot. There are no second chances," said Col. Arthur Wallace, commander, Irwin Army Community Hospital.

In order to ensure today's medics are up to that challenge, the Army has reclassified the military occupational specialties of combat medics, 91B, licensed practical nurses,

91C, and other 91CMF MOSs to health-care specialists, 91W. The 91W will be the second largest MOS in the Army.

"Now that those 91B and 91C have merged, the 91W MOS creates a better-trained medic," said SSgt. Darrell Foreman, 91W transition coordinator. "You now have a medic who can sustain life in the farthest reaches of the battlefield."

Unlike the earlier MOSs, a 91W soldier receives combined training in Emergency Medical Treatment and trauma management skills, all of which help them sustain an injured soldier in a forward area while awaiting evacuation to a healthcare facility. "Today, we're talking

about a highly lethal, agile, and asymmetrical battlefield which uses quick strike and quick extraction," said Wallace. "One of the future assumptions is that we're not always going to have medical evacuation available to take casualties out because we're going to be operating in environments that don't have a base or field hospital nearby."

Operation Enduring Freedom has brought that type of future scenario to the present.

"The need for the medic to operate independently and autonomously with confidence and skill to provide life-saving interventions and stabilization in the absence of a physician or physician's assistant is paramount," said

Wallace.

The U.S. has not set up hospitals in Afghanistan; therefore, medical care facilities are miles away on aircraft carriers or in bordering countries.

"They (91W soldiers) may be operating out of an armored vehicle, a helicopter, or a Humvee and making life-saving decisions," said Wallace. "Today, the 91W is expected to do a lot more to keep the soldier alive while awaiting medical evacuation to a higher level of care. That puts a lot of responsibility and burden on these young soldiers."

Fort Riley has nearly 500 soldiers with the 91W MOS

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and all junior enlisted soldiers are required to become nationally certified in EMT, Pre-Hospital Trauma Life Support and Trauma-AIMS.

In fiscal year 2001, 146 Fort Riley soldiers received EMT training, 58 received Trauma-AIMS training and 159 were trained in Pre-Hospital Trauma Life Support.

Unlike other military facilities in the country, Fort Riley is able to offer its students 15 college credits when they complete all three courses because they are taught through Barton Community College.

"The college credit piece is unbelievable," said Wallace. "This is a proud point for the 91W program at Fort Riley. There is a great partnership with Barton, the education office, the MEDDAC, the troop schools and the G-3 staff."

Sgt. Anthony Haney, MEDDAC, said the college credits are great because they will help him when he competes for promotion. "College credit is not always easy to get (when you're in a line unit) compared with people who have been in the hospital."

In addition to college credits, Fort Riley's program exceeds others with financial support, according to Wallace.

"Funding has been a show-stopper at other posts," he said. "In order to establish these train-

ing programs, you need to purchase the training equipment and it's not cheap. Because of the partnership here, it has been a very vibrant program."

Despite all of the perks, Wallace and Foreman note that there has been a challenge in filling the classes with soldiers.

"The challenge we have at Fort Riley is valid training distractors, red cycle brigade missions and gate control. We're very mindful and sensitive to the issue that brigades are juggling hundreds of balls, and one of the balls is getting their medics trained," said Wallace.

Sgt. Kelly Reid has been in the Army for 10 years and was previously a combat medic. He is currently serving in Headquarters and Headquarters Company, 1st Battalion, 41st Infantry and is undergoing his Trauma-AIMS certification.

Reid welcomed the 91W transition. "It means more opportunity for training. A more qualified medic means less chances of sending soldiers to the hospital for things we can take care of."

"My colonel (Lt. Col. David Boslego) has made it mandatory for all 91W soldiers to go through the training. This is the first unit I've been in with so much support."

"We're in a period of time in this country today where if a medic goes into an environment

where he or she needs to provide healthcare, we owe it to them that they get their training," said Wallace.

The non-continuous, seven-and-a-half-weeks of training is scenario based.

"We're giving them all the tools that they would need to use when they get to the battlefield because the type of injuries that they will see are the same type of injuries that we train them to take care of," said Foreman.

Dr. (Maj.) Marc Daymude, 91W program director and EMS director, has already seen the advantages of the transition.

Recently a soldier fell off of his tank and the trained medic was focused on the proper vital signs. "Previously it was easy to get focused on the blood and forget about other primary issues like checking their breathing," he said.

Although the 91W program is a six-year transformation, a large number of classes are scheduled for fiscal year 2002 because Wallace wants to get soldiers trained to a point where Fort Riley is ahead of the game.

"(The training) provides soldiers with college credits, it shows soldiers we're willing to invest in them and it creates a well-trained medic," he said. "It results in retention, improved morale, medic pride, and a person who makes a difference," said Wallace.