

FORT SAM HOUSTON News Leader



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JBSA HOTLINES

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808-SARC (7272)
JBSA Domestic Abuse Hotline
367-1213
JBSA Duty Chaplain
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A PUBLICATION OF THE 502nd AIR BASE WING – JOINT BASE SAN ANTONIO-FORT SAM HOUSTON



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2016 U.S. Army All-American Bowl



Members of the U.S. Army North Honor Guard present the colors prior to the start of the 2016 U.S. Army All-American Bowl at the Alamodome in San Antonio Saturday. For article and more photos, turn to Pages 10-11.

Photo by
Sgt. 1st Class
Wynn Hoke

BAMC earns The Joint Commission's Gold Seal of Approval

By Lori Newman
BAMC Public Affairs

Brooke Army Medical Center, which includes San Antonio Military Medical Center and its outlying clinics, has earned The Joint Commission's Gold Seal of Approval® for accreditation.

The Joint Commission accredited BAMC under two standards, the hospital standard and the behavioral health standard. The

three-year accreditation award recognizes BAMC's dedication to continuous compliance with The Joint Commission's standards for health care quality and safety.

"The Department of Defense requires all military treatment facilities to maintain a civilian accreditation," said Air Force Col. Kimberly Pietszak, SAMMC deputy to the commander for quality and safety.

See ACCREDITATION, P9



Logo courtesy of The Joint Commission Website

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Aftermath of a DUI: Who is really affected?

By Master Sgt. Robbin Robertson
1st Communications
Maintenance Squadron
Ramstein Air Base, Germany

I used to wonder if people would look at me different if they knew. Would they whisper about me? Would they tell others what happened? Does anyone actually have the guts to ask me what happened? Are they looking at me as the girl who's related to a child killer?

I'm sure they were. I'm sure they wanted to ask the questions; wanted to know the true story and all the juicy details. But the truth is I didn't know all the details. I only knew my brother killed a 7-year-old child.

It was May 18, 2001, when my first sergeant called me to his office and instructed me to bring my supervisor and flight chief.

I had never even been in trouble before. Actually, I didn't even know who my shirt was, or what he did. I just knew he wanted to see me and my leadership immediately.

He was waiting outside his office when I walked down the hall and had a look of concern on his face. Was this because I was in real trouble, or because he had bad news? I didn't know; I only knew my heart was racing, my hands were sweaty and the tears were coming.

After we entered his office, he instructed me to sit. He asked me if I had heard from any of my family members that day and when the last time I spoke to my brother was. I stated no to the family question and informed him that I had spoken to my brother the night before. He then handed me the telephone and instructed me to call my mother. I asked him what was going on and he said it would be best if I heard it from my mother. So I dialed ... but no answer. I called my brother ... but no answer. After three or four attempts, he told me to stop dialing. He told me that news cameras were at the main gate of the base asking about me.

At the time, I was sta-



Photo by Airman 1st Class Betty Chevalier

A car sits in the 75th Aircraft Maintenance Squadrons parking lot to represent a drunk driving accident at Davis-Monthan Air Force Base, Ariz., July 15, 2013.

tioned at Scott Air Force Base, Ill. It wasn't a high-visibility base, I wasn't popular and I didn't have ties to the community, so I had no idea what he was talking about.

He then took me in to the orderly room and turned on the television. There was a breaking news story being broadcasted about a drunken driver killing a child at the St. Louis Zoo.

My heart was still racing until I heard the reporter say my brother's name. My heart stopped.

I felt all the blood in my face rush to my chest. I couldn't hear the television anymore. I couldn't hear my heart beating anymore. I only saw people staring at me. What were they saying? What were they thinking?

Then I felt someone squeezing my arm.

It was my shirt; he was asking me to come back into his office. I sat in his office for about 15 minutes with everyone staring at me. No one spoke, they just stared. Finally, I asked if I could go home.

He said yes, but I had to talk to public affairs first before I could leave the base.

After signing several documents agreeing not to make any statements to reporters and not be seen on camera in my uniform, I was allowed to leave the base. But I still had to go to my duty section to get my things. More stares. More looks. No speaking. Just staring.

Eventually, I made contact with my mother

See DUI, P9

Services submit plans on integrating women into all military jobs

By Lisa Ferdinando
DOD News, Defense Media Activity

The Department of Defense has received plans from each of the services for implementing the services to integrate women into all positions in the military, Pentagon Press Secretary Peter Cook said Jan. 5.

The office of the acting undersecretary of defense for personnel and readi-

ness received the plans, Cook said at a news conference.

Defense Secretary Ash Carter announced in December his decision to open all positions in the military to women, with no exceptions. Army Gen. Joseph L. Votel, the commander of U.S. Special Operations Command, requested and was granted a short extension in providing his plan, Cook said.

That extension was to give U.S. Special Operations Command time to collaborate thoroughly with the services, because many of the actions critical to successfully integrating women into special operations specialties and units fall under service authority, Cook said.

Cook noted that Deputy Defense Secretary Bob Work and the vice chairman of the Joint Chiefs of

Staff, Air Force Gen. Paul J. Selva, are chairing a group on implementing the decision.

The group will work with the services to oversee the short-term implementation of the decision, Cook explained, to ensure there are no unintended consequences on the joint force. The group will periodically update Carter and the chairman of the Joint Chiefs of Staff,

Marine Corps Gen. Joseph F. Dunford Jr., on the progress, he said.

The first meeting of the implementation group will take place this week, the press secretary said.

"The services and Special Operations Command will begin to execute the implementation of their approved plans as soon as practicable, but no later than April 1," he added.



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News Briefs

'Storytellers' Event Touts Resiliency

There are more than 300,000 Airmen in the Air Force and every single one of them has a story. These stories are filled with adversity and hardship, as well as triumph and success and each and every one of them requires some form of resiliency. Developing resiliency in Airmen has never been more important. The mental, physical, spiritual and social pillars of Comprehensive Airmen Fitness help guide our Airmen through difficult times. An in-depth look at resilient Airmen will be featured at the first-ever Joint Base San Antonio "Storytellers" event from 1-3 p.m. Tuesday at Arnold Hall on JBSA-Lackland. During this event, Airman can hear six Airmen give their stories of adversity and how they relied on the pillars of CAF to battle through difficulties in their lives. Seating is limited to 350 individuals, so register on Eventbrite at <https://www.eventbrite.com/e/storytellers-tickets-19888945371>. For more information, call 346-6873.

AETC Commanders Call

A commander's call with Lt. Gen. Darryl Roberson, commander of Air Education and Training Command, is scheduled for 2 p.m. Wednesday at the Academic Support Building, 3216 Corporal Johnson Road, building 1467 on Joint Base San Antonio-Fort Sam Houston. At JBSA Lackland, it will be at 12:30 p.m. Thursday at the Bob Hop Theater and at JBSA-Randolph, the commanders call will be at 3 p.m. Jan. 22 at the Fleener Auditorium.

Public Hearing On FSHISD Texas Academic Performance Report

A public hearing on the Fort Sam Houston Independent School District's Texas Academic Performance Report (formerly known as the Academic Excellence Indicator System Report) is scheduled for 11 a.m. Jan. 26 at the FSHISD Professional Development Center at 4005 Winans Road.

Heroes at Home Financial Event Tours JBSA-Lackland

The Joint Base San Antonio-Lackland Military & Family Readiness Center is one of 10 military instal-

See NEWS BRIEFS, P6

Hospital leaders 'reverse cycle' to better connect with staff, patients

By Elaine Sanchez
Brooke Army Medical Center Public Affairs

Leaders at Brooke Army Medical Center on Fort Sam Houston are adjusting their schedules to ensure they're connecting with staff and patients from dusk till dawn.

The process, called "Reverse Cycle Leadership Rounding," entails visiting units throughout the hospital during night and weekend shifts.

"As leaders, we have a very real responsibility for knowing how medicine is practiced within our walls, for knowing if and how we are meeting the needs of our patients at all times of the day and night," said Army Col. Evan Renz, BAMC commander, who also serves as an active surgeon. "Active, engaged leadership at all levels is vital to continued success and medical readiness throughout BAMC."

The commander and his most senior leaders embarked on another reverse cycle rounding shift from 8 p.m. to nearly dawn Dec. 11, 2015. Friday nights make sense, Renz explained, noting that with a 24/7 trauma and specialty care mission, the weekends are oftentimes when the staff kicks into high gear.

For their reverse cycle schedule, "the goal was to visit the areas of the facility that operate 24/7, observe operations and speak with staff about patient care and support services," said Army Col. Mark Swofford, BAMC deputy commanding officer and deputy commander for administration.

"The hospital runs continuously and processes that work during normal weekday operations may not work as well at night or on the weekends," he added. "By doing the reverse-cycle and weekend rounding, we can get a better understanding of how our decisions

will impact the organization over the entire range of operations."

The teams visited nearly every floor of the hospital, speaking with staff in medical, neonatal, pediatric and surgical intensive care units throughout the facility.

Karen Rideout, a neonatal ICU staff nurse, said she was honored by the late night visit.

"I was able to share stories about our NICU family, which includes parents, grandparents and, of course, the babies," she said. "We create very close bonds with many of our NICU patient families; these bonds continue for years.

"We were not in need of any particular assistance at the time, but the offer to assist with our needs was welcomed, appreciated and helpful," she added.

Glinda Rangel-Garcia, BAMC 5E antepartum unit nurse, said seeing the command team made her feel more connected to leadership.

"I was very impressed when the commander asked if our unit had any gynecology patients on the boards," she said. "Our unit is primarily an antepartum unit, and the fact that he knew we extend our services to serve gynecology patients made me feel he took an active part in knowing each unit he commands."

As he walked throughout the units, Swofford said he gained valuable feedback on staff challenges, "but one of the most important things that occurred was that we had a chance to speak with the staff in various areas and thank them for what they are doing for our patients."

The discussions were mutually beneficial, added Army Col. (Dr.) Douglas Soderdahl, deputy commander for surgical services.

"The command team was able to directly discuss issues



Photo by Robert T. Shields

Dr. Katherine Harrison (left), discusses emergency department operations with (from left) Sgt. Maj. Dwight Wafford, Col. Kelly Bramley, Col. Pedro Lucero and Col. Kimberly Pietszak during Reverse Cycle Leadership Rounding Dec. 11, 2015.

with staff, and employees had the opportunity to provide candid and direct feedback and suggestions to the leadership of the hospital," said Soderdahl, who also serves as an urologist.

The reverse cycle rounding program is an addition to leaders' already robust daytime rounding routine. Additionally, last year the hospital implemented the "Suits to Scrubs" program where nurse leaders trade their uniforms for scrubs to join their staff on the front lines.

It's all about keeping their finger on the pulse of this organization, Renz said, which includes the Defense Department's only Level I trauma

center, more than 8,500 staff, 425 inpatient beds and more than 2 million square feet of clinical facilities.

Renz said he looks forward to the future reverse cycle rounding schedule.

"The process of establishing a High Reliability Organization demands that those responsible for day to day operations have an accurate grasp of all activities that occur within a major military medical center," he said. "We have an enormous responsibility to optimize the valuable resources we have been given to ensure safe, high quality care.

"At the end of the day, our patients are at the center of everything we do."

Clinic offers advice on managing wintertime cold, flu symptoms

By Robert Goetz

Joint Base San Antonio-Randolph
Public Affairs

As flu season continues towards its seasonal peak, health care professionals are reporting a sharp increase in the number of patients complaining of colds and flu-like symptoms.

The good news is that most patients are suffering from colds, not influenza, said Capt. (Dr.) John Lax, 359th Medical Operations Squadron family physician at the Joint Base San Antonio-Randolph Family Care Clinic.

"In the week leading up to Thanksgiving, we started seeing more people with flu-like symptoms, but most of them had colds," he said. "We haven't seen a lot of flu cases so far. Last year there were a lot of flu cases, but the Centers for Disease Control and Prevention said there's been good coverage from this flu season's vaccine."

Lax said colds and influenza share some symptoms, but the flu is distinguished by body aches and a high-spiking fever – 102 degrees Fahrenheit or higher for adults 18 and older.

"Without a fever or

body aches, it is unlikely you have the flu," he said. "They are the most common symptoms and normally start first."

Other flu symptoms are a cough, runny nose, sinus pressure and headaches.

Lax said many people think they have the flu because of their symptoms, but colds typically start out differently than influenza.

"Colds start with a sore throat and a runny nose," he said.

Other cold symptoms include a low-grade fever, cough, fatigue, sinus pressure, headaches, post-nasal drip, and eye irritation and redness.

Lax said colds and the flu are caused by viruses, but again there is a difference.

"Colds can be caused by more than 100 different types of viruses, but the flu is caused by only two viruses, which is why a vaccine can be made for it," he said.

Patients who have flu-like symptoms should be evaluated if they have underlying heart or lung problems, have recently had an overnight stay in a hospital, have one-sided sinus pain, or their symptoms have



U.S. Army graphic

continued beyond 10 days, since viral infections typically run their course in seven to 10 days, Lax said.

"There is unfortunately nothing we can do to speed up that course other than recommend resting and allowing yourself to recover," he said. "Regardless if it's a cold or the flu, people will get better over time. Your body will fight infection."

Most people can treat their symptoms accord-

ingly at home, through rest and hydration; the use of decongestants, cough suppressants and pain relievers; and salt-water gargles and cool drinks for sore throat.

Lax said rest and hydration are especially important.

"Hydration thins out secretions and allows them to drain," he said. "Since antibiotics don't work for viruses, you need to allow your body to do the work of fighting the infection for you, and this

requires rest."

In some cases, a medication called Tamiflu can be used to treat people with the flu, especially those with medical problems such as heart, lung or kidney disease; the very young; and people 65 and older, Lax said.

"It will shorten your symptoms by about one and a half days, but you will recover from the flu if you take the medicine or not," he said.

Prevention is an important way to avoid

colds or the flu, Lax said.

Measures that can slow the spread of viruses include frequent thorough hand washing; keeping countertops, keyboards and other surfaces clean; using tissues when sneezing or coughing; and avoiding contact with people who have a cold or the flu.

For the flu, a yearly immunization is the best measure. According to the CDC, a flu vaccination can keep people from getting sick from the flu, help protect people who are at greater risk of getting seriously ill from the flu, make the illness milder if one becomes sick and reduce the risk of more serious flu outcomes.

Lax said the clinics on each JBSA location are still providing flu immunizations.

The JBSA clinics are also expediting the handling of cold and flu cases with a nurse-run section devoted to those cases, he said.

"We're making access available to people who may not have to be seen by a provider," Lax said. "We're able to triage patients and treat them according to the protocol."

New residential addiction program opens at San Antonio Military Medical Center

By Dewey Mitchell

Brooke Army Medical Center
Public Affairs

Overcoming addictions is the mission of the new program on San Antonio Military Medical Center's 7 West.

Called the Substance Use Disorder Residential Treatment Program, unit chief Army Maj. Sandra Shelmerdine explained that the RTP is a rigorous six-week program designed to help patients overcome their addictions to alcohol or illicit drugs.

The program will not only better serve our active duty patients, but will bring patient care back into the San Antonio Military Medical Center, which had often been referred out to local facilities.

The program is open to all active duty service members and activated National Guard and reservists who are eligible to receive military

medical services. Patients must have a primary diagnosis of a substance use disorder and be enrolled in the Army Substance Abuse Program or service branch equivalent.

Patients were going out to the network, Shelmerdine explained. "We felt, as a military program, we can better work with service members to reintegrate them back into their units."

"We have a program that utilizes evidence-based practices such as cognitive behavioral therapy and motivational enhancements," Shelmerdine said. "Occupational and recreational therapy adds a unique aspect to the program."

Patients do make daily trips off the ward to perform physical training, attend Alcoholics Anonymous meetings and participate in other community reintegration outings such as golf, bowling, horseback riding and

some chaplain-sponsored outdoor activities, such as a trip to Canyon Lake.

"We apply an integrated treatment model consisting of social work, occupational therapy, nursing, recreational therapy and psychiatric services," said Patricia Shaw, clinical program manager. More than 30 medical professional staff make up the entire team including psychiatric/psychological technicians.

"While substance use disorders is the primary focus of treatment, patients can also receive treatment for other co-occurring psychiatric disorders," Shaw said. "The treatment and skills provided along with the unique aspects of our program will enhance their recovery."

The vision of the RTP is to become military medicine's leader in supporting service members along their journey to recovery from alcohol and other drug addiction.



Photo by Robert Shields

Brooke Army Medical Center Commander Col. Evan Renz visits the new Substance Use Disorder Residential Treatment Program conference room during a visit to 7 West.

News Briefs

Continued from P3

lations selected to host the Heroes at Home financial event tour from 9-11 a.m. Jan. 26 at the JBSA-Lackland Gateway Club. The event is a free entertaining, engaging and educational event that encourages military families toward life changing financial freedom with top level financial advisors. Special guest speakers, financial experts and award-winning authors include Ellie Kay, with "Living Rich for Less," review ways to set up a workable budget, pay less for more, money talk with your family, and stretching dollars for vacation and entertainment; Gerri Detweiler, with "Smart Money: Five Ways to Improve Your Credit" discusses free ways to monitor your credit, pay down debt and improve your FICO score; and Ingrid Burns, with "Saving for the Future You Want", provides strategies to start saving early and ways to stay committed. Service members, families, retirees, Reservists and JBSA civilian employees are welcomed to attend. To reserve a seat, call the JBSA-Lackland Military & Family Readiness Center at 671-3722.

Programs help Soldiers get commission, become medical officers

The Inter-Service Physician Assistant Program and Army Medical Department Enlisted Commissioning Program exist to help Soldiers gain a commission and become medical officers. These opportunities will be briefed by program managers from Fort Knox, Ky., at 9 and 11 a.m. and 1 p.m. Feb. 1, at the Fort Sam Houston Military & Family Readiness Center, 3060 Stanley Road, building 2797, in Suite 95, the facility's auditorium. For more information, call (502) 626-0386 or (502) 626-0381.

Officer Candidate School Board Interview Panel

The 502nd Force Support Squadron's Military Personnel Branch conducts an Army Officer Candidate School structure interview panel board at 8 a.m. Feb. 4 at building 2263, 1706 Stanley Road, room 117B. All Soldiers must have a bachelor's degree and cannot be over the age of 33, without exceptions. Soldiers must be U.S. citizens, have a general

59th Training Group activates, joins 59th Medical Wing

By Shannon Carabajal
59th Medical Wing Public Affairs

The Air Force's largest medical wing just got larger with the addition of the 59th Training Group. The 59th Medical Wing took command of its seventh group during an activation ceremony held at Joint Base San Antonio-Fort Sam Houston Jan. 4.

The new unit joins a consortium of U.S. Air Force health care professionals and educators dedicated to the training and medical readiness of warrior medics worldwide.

"Training is the bedrock that supports the USAF's medical capability and the 59th TRG has a long history of training the world's finest warrior medics. Consequently, the 59th Medical Wing is honored to add the proud and dedicated Airmen of the 59th Training Group to our team," said Maj. Gen. Bart Iddins, 59th MDW commander, who presided over the event.

Formerly the 937th TRG when part of the 37th Training Wing at JBSA-Lackland, the new 59th TRG continues to develop, deliver and evaluate medical training for 75 medical treatment facilities and deployment operations worldwide.

Located on JBSA-Fort Sam Houston, the group supports military medical service and medical readiness training at the Medical Education and Training Campus for 12,100 students

annually and at two operating locations, one detachment and 17 sites around the world. The staff also manages 125 acres at the Medical Readiness Training Center located on JBSA-Camp Bullis.

Its partnership with METC affords training for the five uniformed services and international students. The group awards 24 Air Force specialty codes and 93,037 Community College of the Air Force credit hours annually while maintaining 14 national accreditations.

"We're excited to join the 59th MDW and become a part of its great mission," said Col. Steven Caberto, 59th TRG commander. "Aligning under the 59th gives us the opportunity to consolidate Air Force medical education and training programs under one command.

"It makes perfect sense. We expect to achieve efficiencies, improve training and reduce redundancies by sharing information across the medical education and training enterprise," Caberto said.

Activating the 59th TRG grows the wing to 7,000 military, civilian and contract personnel and reinforces its status as the Air Force's premier health care, medical education and research, and readiness wing.

The 59th TRG is absorbing a mission that traces its roots to the infancy of aerospace medicine in 1917

outside Mineola, N.Y. The chief Surgeon of the Army's aviation section, under direction from the U.S. War Department, established a training lab for flight surgeons that officially became the School of Aviation Medicine in 1922. The school moved to Brooks Field, Texas, in 1926.

After the establishment of the U.S. Air Force as an independent service in September 1947, the service united many medical training courses at Gunter Air Force Base in Montgomery, Ala.

In 1966, the group's medical training and readiness mission moved to Sheppard Air Force Base, Texas, where it remained until moving to Fort Sam Houston in 2011.



Photo by Staff Sgt. Kevin Iinuma

Maj. Gen. Bart Iddins (left), 59th Medical Wing commander, gives command of the 59th Training Group to Col. Steven Caberto during an activation ceremony Jan. 4 at Joint Base San Antonio-Fort Sam Houston. The 59th TRG supports military medical service and medical readiness training at the Medical Education and Training Campus for 12,100 students annually and at two operating locations, one detachment and 17 sites around the world.



Photo by Staff Sgt. Michael Ellis

Air Force students carry a training mannequin during a Dec. 17, 2015, expeditionary medical support system exercise at Joint Base San Antonio-Camp Bullis. The exercise tests a student's ability to quickly respond to an emergency by providing care and evacuating casualties in a simulated deployed environment. Technical training students are assigned one of four squadrons in the 59th Training Group. The unit's partnership with the Medical Education and Training Campus on JBSA-Fort Sam Houston affords training for members of the five uniformed services and international students. The 59th TRG manages 125 acres at the Medical Readiness Training Center on JBSA-Camp Bullis.

ARMY SOUTH CG HOLDS TOWN HALL



Photo by Sgt. Mahlet Tesfaye

Maj. Gen. K.K. Chinn (left), U.S. Army South commanding general, held a town hall Jan. 6 where he presented awards and recognized a number of civilians and Soldiers, provided remarks and then addressed questions near the end of the two-hour event. "I'm very interested in having engagement with the 31 different countries that we work with," he told the audience. "I'm interested in strengthening and building relationships." Other topics included taking care of people, training replacements, counseling, professional development and adapting to a complex and changing environment.

Joint Trauma System presented the first Military Health System Battlefield Innovation Award

By Steven Galvan
USAISR Public Affairs

The Joint Trauma System at the U.S. Army Institute of Surgical Research at Fort Sam Houston was presented the inaugural Military Health System Battlefield Innovation Award by Dr. Jonathan Woodson, Assistant Secretary of Defense for Health Affairs, at the 2015 Association of Military Surgeons of the United States Annual Continuing Education Meeting held in San Antonio Dec. 3, 2015.

“The title of ‘MHS Chief of Innovation’ is a new role that is arguably ambiguous and prone to misinterpretation. Have no doubt that central to everything I intend to do in this position is to advocate for the combat medic and remember our core mission in the military health system,” Dr. Steve Steffensen, MHS chief of innovation, said in an email to the JTS leadership.

“It is therefore with the greatest respect that I have chosen to recognize the Joint Trauma System for the first-ever MHS Battlefield Innovation Award.”

Accepting the award was JTS director Navy Capt. (Dr.) Zsolt Stockinger and several former JTS directors, as well as several JTS leaders.

“Five of seven JTS directors were present to accept the award with me,” Stockinger said. “The award proves that this is a team sport and no single individual built the organization. I told the JTS staff that the award is like the moon rock at the National Air and Space Museum in Washington, D.C. – it doesn’t look like much, but think of what it represents.”

The JTS was created in 2006 at the direction of the Assistant Secretary of Defense for Health Affairs and the service surgeon general to improve trauma care for combat wounded.

Since its inception, the JTS has collected data from more than 130,000 combat casualty care records from Iraq and Afghanistan and created 39 clinical practice guidelines providing evidence-based best-practice recommendations for trauma care.

In 2013, the JTS was designated as the Department of Defense Center of Excellence for Trauma by the Office of the Assistant Secretary of Defense.

Steffensen added that the JTS was founded on the basic principles of four simple tenets – right patient, right place, right time and right care – with the guiding vision that every Soldier, Sailor, Airman and Marine injured on the battlefield will have the optimal chance of survival and functional recovery.

“It is through the JTS and its history of leadership and passionate commitment to combat care that we have seen the case fatality rates for combat injury in



Photo by Steven Galvan

Present and former staff members of the Joint Trauma System at the U.S. Army Institute of Surgical Research were presented with the first Military Health System Battlefield Innovation Award by Dr. Jonathan Woodson, Assistant Secretary of Defense for Health Affairs during the Association of Military Surgeons of the United States Annual Continuing Education Meeting Dec. 3. From left are Col. (Dr.) Jeffrey Bailey, Dr. Mary Ann Spott, Col. (Dr.) Stacy Shackelford, Col. (Dr.) Kirby Gross, Dr. Jonathan Woodson, Dr. Frank Butler, Capt. (Dr.) Zsolt Stockinger and Dr. Brian Eastridge.

Afghanistan and Iraq drop to less than half that of Vietnam and one-third that of World War II,” Steffensen said. “There is no finer example that embodies the mission of the Military Health System or better

contributes to saving lives on the battlefield than the Joint Trauma System and those who support it.”

AMSUS, the Society of Federal Health Professionals, was organized in 1891 and chartered by Congress

in 1903 for military, federal and Veterans Administration health-care professionals and is dedicated to all aspects of Federal medicine – professional, scientific, educational and administrative.

Former USAISR commander, director receives AMSUS Lifetime Achievement Award

By Steven Galvan
USAISR Public Affairs

A former commander and director of the U.S. Army Institute of Surgical Research at Fort Sam Houston was presented with the 2015 Association of Military Surgeons of the United States Lifetime Achievement Award Dec. 4, 2015, during the society’s annual continuing education meeting in San Antonio.

Dr. Basil Pruitt, a retired Army colonel, accepted the award for his specialty in burn care, spanning more than five decades,

from AMSUS executive director Dr. Michael Cowan.

Pruitt spent all but three of his 35 years as an Army surgeon at the USAISR and commanded the Institute for 27 years before retiring from military service.

During the award ceremony, Pruitt pointed out that when he reported to the USAISR Burn Center in 1959, a young adult with a 43 percent burn had a 50/50 chance of surviving. Today, a young adult with an 82 percent burn has a 50/50 chance of surviving.

Cowan noted “a lot of

that improvement has to do with the research and clinical care Pruitt provided.”

Cowan also read a statement prepared for Pruitt from Dr. Jonathan Woodson, assistant secretary of defense for health affairs.

“He has been a leader in his field for over 50 years. He lives at the cutting edge of his surgical specialty and is an internationally renowned burn surgeon,” Cowan noted. “He has dedicated his life to public service and the care of those who have borne the harshest scars of battle. He conducted and led research that

dramatically improved the treatment of burns, not just for service members, but for every man, woman and child on the planet.”

“I share this award with all the physicians, other scientists and nurses with whom I have worked at the USAISR and the University of Texas Health Science Center in San Antonio,” Pruitt said.

AMSUS is a society chartered by Congress in 1903 for military, federal and Veteran Affairs healthcare professionals to advance the knowledge and increase effectiveness of its members.



Photo by Steven Galvan

Dr. Basil Pruitt (left), former director and commander of the U.S. Army Institute of Surgical Research, is presented with the AMSUS Lifetime Achievement Award by AMSUS Executive Director Dr. Michael Cowan Dec. 4, 2015, during the 2015 Association of Military Surgeons of the United States Lifetime Achievement Award annual continuing education meeting in San Antonio.

ACCREDITATION from P1

“Not all civilian hospitals are accredited, so it sets a standard for the Department of Defense that we are transparent and we care about the quality and safety of the care we provide enough that we actually pay for and ask consultants to come into this organization and tell us how we are doing,” Pietszak said.

BAMC facilities underwent the rigorous unannounced on-site survey in September 2015. A team of Joint Commission expert surveyors evaluated SAMMC and the outlying clinics for compliance with standards of care specific to the needs of patients, including infection prevention and control, leadership and medication management.

“We did exceptionally well,” Pietszak said. “We earned a three-year accreditation and had very few findings. Most of the findings were not related to patient care, they were more facilities based.”

The Joint Commission’s hospital standards address important functions relating to the care of patients and the management of hospitals. The standards are developed in consultation with health care experts, providers, measurement experts and patients.

Pietszak credited the entire staff for their caring and dedication.

“The entire staff worked very hard to put programs into place, to sustain those programs and to ensure that not only did they meet The Joint Commission standards, they exceeded them,” she said.

“The survey team was unanimous and profuse in their compliments on the teamwork, skill, compassion, professionalism and passion to learn exhibited by all of our staff members,” said Army Col. Evan Renz, BAMC commander.

“I am very proud of what we as an integrated team have accomplished over the past months to prepare for this survey and the results are outstanding.”

Founded in 1951, The Joint Commission seeks to continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value.

The Joint Commission is the nation’s oldest and largest standards-setting and accrediting body in health care. For more on The Joint Commission, visit <http://www.jointcommission.org>.

DUI from P2

and was instructed to go to a nearby hospital. Once I arrived, police took my necessary information and informed me that my brother was speeding through the St. Louis Zoo and ran into a crowd of children on a school field trip, killing one child on impact. His blood alcohol level was 0.26.

I asked if I could see my brother and the cop said, “Ma’am, I’ll be honest with you, we aren’t supposed to let anyone see him, but I will give you five minutes because this is the last time you are going to see him for a while.”

He was correct. It would be seven months before I would lay eyes on my brother again. His trial started Nov. 27, 2001, and on Jan., 31, 2002, one month after his 20th birthday, he was sentenced to 20 years in prison for involuntary manslaughter.

The child was 7 years old. It was his first field trip to the St. Louis Zoo. His mother bought him new shoes the night before to wear for his special trip and he spent the entire night breaking them in for his big day. Neither he nor his mother knew that this field trip, his first one to the zoo, would also be his last. My brother was going 64

mph in a 20 mph zone. He swerved too far to the right and ran into the crowd of children heading back to their bus after their exciting trip. The child was killed instantly. Another child suffered a crush injury to the foot and a teacher suffered from a broken pelvis.

My brother ended up with a broken femur and other minor injuries.

Was that enough? Did he deserve more? I can’t answer that; never have and never will I try to answer that question. I’ve had several people tell me that my brother should have died during the accident.

I had a woman tell me he should receive the death penalty for taking the life of a child. Do I share her same sentiment? No, but that’s from the love of a sister. If I was that child’s mother, would my answer be different? Maybe. I can’t say for sure. What I do know is that my brother’s accident has followed me, haunted me and affected me since May 18, 2001.

Part of my brother’s sentence/plea deal was to pay restitution to the family. That responsibility falls on me. I pay \$500 a month to the family and \$3,000 every time my brother meets the parole board, which is every four years.

• \$500 per month x 20

years + interest = more than \$184,000

• Parole at \$3,000 x every four years + interest = more than \$10,000
- Total payment over 20-year sentence = more than \$200,000

Is anyone’s child, wife, husband, mother or father worth this amount of money? We all know the answer. Drunken drivers know the answer. They know the answer before the first drink. But the answer becomes irrelevant once the keys are in the ignition.

I have volunteered for Airmen Against Drunk Driving several times throughout my career.

Every time I do it, I wonder how AADD would have affected my brother that day in 2001. If he was military, would he have called AADD? Would he use this free resource that would have saved the life of that little boy? Probably not. Some Airmen, like my brother, are no stranger to drinking and driving; the fact is they haven’t gotten caught.

The harsh reality of a DUI is clear; you, the drunken driver, isn’t the only one affected. I don’t know if Airmen understand that. I wonder if they know that getting a DUI is more than losing a stripe, performing extra duty and forfeiture of pay.

I wonder if Airmen know they can and will kill someone if they drink and drive. I wonder if their families have the means to pay their restitution. Will their families see their story on the news and get stared at by total strangers? Is their family ready for the hateful comments that will be spewed at them? Are their families ready to see them in prison on Saturdays from 9 a.m. to 2 p.m. for the next 20 years? No. From personal experience, one is never ready for that.

Like most Airmen, I look forward to the weekend, however, my excitement is for different reasons. I’m excited to see how many Airmen call AADD for assistance. I get excited to see how many cars are heading out the gate to pick up Airmen in need.

I’m happy to see all the volunteer vehicles out of their spaces, because that lets me know that Airmen are making smart decisions. However, as a first sergeant, it saddens me when I have to pick someone up for a DUI and tell them my story. It makes me angry to know that they have the resources to prevent it at their fingertips, but choose not to use it. Let’s face it, drinking and driving is a choice; a choice that affects everyone in your path.

West dominates East, 37-9, in 2016 U.S. Army All-American Bowl

By Sgt. Aaron Ellerman
204th Public Affairs Detachment

Tens of thousands of people made their way to the Alamodome to watch the 2016 U.S. Army All-American Bowl Jan. 9 in San Antonio.

This year, the West team took an early lead and won the game 37-9, but all of these players have already established themselves as winners through their commitment and dedication to the sport.

"This was a once-in-a-lifetime opportunity and I'm truly blessed to get the chance to be here," said Mark Jackson, West team defensive end from Steele High School and Cibolo, Texas native.

For 16 years, the U.S. Army

All-American Bowl has been the nation's premier high school football game, bringing together the top high school players of the nation, which many have gone on to have successful college and professional careers.

The bowl also highlights the top high school band members as well.

"The fact that the Army hosts this event is what really sets it apart because it's not just business," said John Lambourne, West team defensive line coach.

These All-American Bowl players and Army Soldiers share key attributes like adaptability and versatility, which enables them to prevail in challenging situations.

"There is a correlation be-

tween the Army and football, you're counting on the man beside you for your own success and ask him to trust you whole-heartedly to accomplish the common goal of winning," said Shannon Sharpe, captain of the East team and NFL Hall of Fame member, who played for the Denver Broncos and Baltimore Ravens.

The players and musicians have earned the opportunity to wear the Army colors by demonstrating their dedication to team, community and excellence.

"When I heard that Feleipe was going to the bowl game I was all for it because this is something that he will be able to reflect on and enjoy the rest of his life," said Master Sgt. Don

Franks, an Army Reservist with the 290th Military Police Brigade and father of East Team quarterback Feleipe Franks.

Franks said this event is important because it lets the kids realize the importance of the Army values.

The U.S. Army All-American Bowl provides the Army a platform to engage local communities, which supports the development of America's future leaders and allows Americans the opportunity to better understand how the Army tackles some of the toughest challenges that face our Nation.

The players arrived a week early to practice with their new teammates and engage in local community outreach programs.

"My favorite part of this experience was getting to meet new players, coaches and people and build lasting relationships during the past week," Jackson said.

"I believe it was really great that we had the opportunity to participate in the community engagements throughout the week. I hope it inspired the kids to do more community service on their own and give back a little," Lambourne said.



Photo by Sgt. 1st Class Wynn Hoke

The West Team readies to snap the ball during the 2016 U.S. Army All-American Bowl at the Alamodome in San Antonio Saturday. West won the game, 37-9.



Photo by Sgt. Aaron Ellerman

Spc. Jared Tansley (left), Soldier of the Year for Europe, gives an East squad player a pep talk during pre-game warm-ups of the 2016 U.S. Army All-American Bowl at the Alamodome in San Antonio Saturday.



Photo by Sgt. Mahlet Tesfaye

Lt. Gen. Perry Wiggins, commander of U.S. Army North (Fifth Army) and Senior Commander of Fort Sam Houston and Camp Bullis, peeks inside an U.S. Army South back pack to check out the command's awareness items being handed out at the All-American Bowl Saturday at the Army Zone at Sunset Station.



Maj. Gen. K.K. Chinn, U.S. Army South's commanding general, and Sgt. Maj. Russell Riemers, ARSOUTH G5 sergeant major, attended the U.S. Army All-American Bowl and visited the Army Zone, taking time out to pose with visitors to Sunset Station Saturday.

Photo by Sgt. Mahlet Tesfaye

Team East defensive back Trayvon Mullen (right) of Coconut Creek High School in Coconut Creek, Fla., and Sgt. 1st Class Andrew Fink, the 2016 Army Noncommissioned Officer of the Year, try to stump students during a math game at Boysville in San Antonio Jan. 5 during a community outreach event for the U.S. Army All-American Bowl.

Photo by Sgt. Brandon Hubbard



Sgt. 1st Class Keith Sanderson (far right), two-time U.S. Olympic rapid fire pistol shooter, answers questions from the Goettsch brothers (from left to right) Carson, Mason and Tyson, of New Braunfels, Texas, at the U.S. Army Installation Management Command display booth at the Go Army Experience at Sunset Station in San Antonio Saturday.

Photo by Jessica Ryan
Sgt. 1st Class Keith



Photo by Sgt. Brandon Hubbard

The U.S. Army Golden Knights' parachute team canopy into downtown San Antonio Jan. 7 as part of the festivities surrounding the U.S. Army All-American Bowl.

Just like the football players, high school band members were selected from across the country to perform at the Alamodome in San Antonio during the U.S. Army All-American Bowl.

Photo by Sgt. Aaron Ellerman



Photo by Tim Hips

Retired Master Sgt. Renwick Jones (left) of Kansas City, Kansas, admires the Olympic silver medal of U.S. Army World Class Athlete Program bobsled coach Sgt. Shauna Rohbock, who won the medal as a competitor at the 2006 Olympic Winter Games, at the U.S. Army Installation Management Command display booth Jan. 8 at the Go Army Experience at Sunset Station in San Antonio, alongside two-time Olympic sport pistol shooter WCAP Sgt. 1st Class Keith Sanderson.



Jackson Carlisle, an 8-year-old from Alabama, exults after acing a bean-bag toss on the Army Sports boards Jan. 8 at the U.S. Army Installation Management Command's display booth at the Go Army Experience at Sunset Station in San Antonio, one part of the festivities surrounding the 2016 U.S. Army All-American Bowl Saturday.

Photo by Tim Hips



Air Force officials announce civilian reduction in force

In a continuing effort to meet Department of Defense funding targets and rebalance the civilian workforce, some Air Force installations will implement civilian reduction in force authorities effective through April 4.

Following a major command needs assessment in early August, more than 1,000 civilian overages were identified across 48 Air Force installations going into fiscal year 2016. Having the RIF authorities will assist in the placement of employees not assigned against funded positions and allow greater flexibilities for employees to be placed at their installations while retaining their grade or pay.

“Voluntary efforts to balance the civilian workforce since fiscal year 2014 have moved us significantly closer to our target manning levels,” said Lt. Gen. Gina Grosso, the deputy chief of staff for manpower, personnel and services. “We have reduced the number of affected employees through several rounds of voluntary separation and retirement programs as well as reassignments to vacant positions.”

Overage positions have been reduced through pre-RIF placements, hiring controls and several rounds of Voluntary Early Retirement Authority and Voluntary Separation Incentive Pay in fiscal years 2014 and 2015.

The Air Force no longer has the ability to carry overages when the position is not funded and will use RIF authorities to help place most of the remaining civilians on funded positions.

The RIF authority

allows each location to use additional placement options such as: change to lower grade, retain pay/retain grade protections, and waiver of qualifications to place additional affected employees. The remaining employees will be offered registration in the DOD Priority Placement Program and receive consideration for future vacancies according to their registration.

“Although we have made great strides, we still have a number of affected employees to place into funded vacancies, and RIF authorities will enable us to achieve that goal,” said Debra Warner, the director of civilian force management policy. “The Air Force recognizes and strives to balance the invaluable contributions of our civilian workforce with the fiscal realities under which the DOD and the government as a whole are operating.”

The processes available use RIF procedures to determine employee placement rights into vacancies as well as provide the flexibility to waive qualifications to create more placement options.

“We will take care of our civilian Airmen by using every possible measure to minimize personal financial hardship for our civilian workforce and their families,” Grosso said. “We are committed to assisting each individual through this transition.”

The fiscal 2016 civilian RIF implementation is separate from sequestration actions.

For information about civilian employment, RIF and other personnel issues, visit the Air Force Personnel Center website at <https://mypers.af.mil/>.

New Fort Sam Houston Museum location receives final artifacts to complete collection

By Sgt. 1st Class Wynn Hoke
U.S. Army North Public Affairs

The Fort Sam Houston Museum and its vintage vehicles are together again.

The museum reopened at its new location inside the Quadrangle last summer without its World War II staff car, halftrack

command car and two large howitzers, which remained at the old museum site.

That situation was rectified Dec. 15, 2015, when Army transporters moved the museum pieces to their new home in a covered vehicle park on North New Braunfels Road next to

the Quadrangle.

“These final additions help us complete the museum, which is here to help educate the military and public,” said Museum Curator Bill Manchester. “Now they are under cover to protect them from the elements, so visitors will be able to enjoy them

for decades to come.”

Although the pieces were originally built to withstand the rigors of combat, they are now 70-year-old antiques, so the museum called upon the experts at the 217th Transportation Company to move them with tender loving care.

“Being a part of a team that gets to move these vehicles and cannons to the new museum is a great honor,” said mission commander 1st Lt. Tyler Niemiller. “Together with the artifacts inside the museum, people can come and see all of this history in one place. It is a great collection of historical pieces. I get to be a part of history today and do my part to help preserve some history as well.”

Due to its delicate nature, the move took more than five hours to complete, despite covering less than one mile. The 217th



The World War II staff car sits at the new location behind the Fort Sam Houston Museum, located at the Quadrangle.



Photos by Sgt. 1st Class Wynn Hoke

Two members of the 217th Transportation Company guide the World War II staff car onto the flatbed for transport to the new Fort Sam Houston Museum located at the Quadrangle December 15. The staff car was one of four macro artifacts that completed the museum move.

Transportation Company has moved thousands of tons of equipment over the years throughout Texas and during two deployments to Iraq, but this was a unique mission that provided a unique opportunity.

“Training is a big thing, and when you get a chance to move pieces of history that require a delicate touch, a training opportunity arises for our lower enlisted Soldiers,” said Truckmaster Sgt. 1st Class Alexander Stout.

“I definitely appreciate the value of training,”

said Manchester, a retired Army command sergeant major. “This was a win-win for everybody.”

The Fort Sam Houston Museum depicts the history of Fort Sam Houston and the Army in south Texas, dating back to the mid-18th Century. This includes the development of the installation, the activities of tenant units and organizations, key historical events, and the service of Soldiers stationed here. The museum’s collection features more than 9,000 artifacts and is open to the public.

Army Human Resources Command CG briefs Fort Sam Houston Soldiers

By Luis A. Deya
U.S. Army North Public Affairs

Maj. Gen. Thomas C. Seamands, commanding general of U.S. Army Human Resources Command, briefed Fort Sam Houston officers and NCOs about upcoming impact and changes in force structure, reductions forecast, professional development programs and officer evaluation report changes at the Evans Theater Jan. 7.

“The brief cleared many of my doubts in reference to the new evaluation process and

concerns of drawdown,” said Maj. Vic Esparza, U.S. Army North Engagement Cell information operations officer. “The briefing was detailed and gave a clear vision on what to expect in the near future.”

Seamands discussed a number of topics that captured the interest of attendees and answered questions to ensure clarity. Most of the questions were referenced to officer professional development opportunities and requirements, promotions and downsizing.

The general also talked

about the importance of quality versus quantity and how promotion board processes have changed.

“The most fundamental change is that now we are going to assess officers, based on leader attributes and competency to recognize is how important the investment we make,” Seamands said. “We are assessing our officers consistent with our Army doctrine, identifying our very best performers and identifying those officers with the greatest potential.”

See HRC, P16



Photo by Luis A. Deya

Maj. Gen. Thomas C. Seamands, commanding general of the U.S. Army Human Resources Command, answers questions during an HRC brief at the Evans Theater on Fort Sam Houston Jan. 7. Seamands spoke to officers during this event covering key topics such as downsizing expectations, the Non-Commissioned Officer Evaluation Report and Officer Evaluation Report, as well as development opportunities.

Program offers enlisted Soldiers the opportunity to become doctors

By Elizabeth M. Collins
Soldiers, Defense Media Activity

For years, they had dreamed of becoming a doctor, a physician or a surgeon, but life had different plans. For a variety of reasons, they wound up enlisting in the military, some as medics, some in non-medical fields, some even made it to special operations. Their careers progressed and they received promotions and awards. That first dream became something to be pursued someday, in another life, after the military.

In the Army, doctors and senior noncommissioned officers also spent years losing their most talented Soldiers to that dream, wishing they could offer them more opportunities while on active duty. The other services agreed, and officials went back and forth, discussing a program that would keep enlisted service members in the military and get them into medical school.

"This is something that I've wanted to see happen since I've been on active duty," said retired Command Sgt. Maj. Althea Green-Dixon, director of recruitment and outreach for the F. Edward Hébert School of Medicine at the Uniformed Services University of the Health Sciences, or USUHS, and director of the new Enlisted to Medical Degree Preparatory, or EMDP2, Program. She also happens to be the former command sergeant major of the Army Medical Department.

"There are so many smart, talented enlisted people out there who I knew could be great physicians, but the pathway for them to get to the point of being a com-

petitive medical school applicant is just so very challenging to accomplish," Green-Dixon said.

That's because the courses required to get into medical school - hard science courses with labs - typically aren't offered on the weekends or evenings. Or if they are, they're not conducive to Soldiers' lifestyles. If they have to go out in the field for a month or even a week, they'll fall seriously behind. Making it work, Green-Dixon said, is "nearly impossible."

In the new EMDP2 program, which the USUHS runs with George Mason University, qualified service members have the opportunity to devote two years to classroom study and preparing for the Medical College Admission Test, or MCAT.

During that time, they don't have to worry about deploying or training. Their sole duty is to be students at Mason's Manassas, Va., campus, studying subjects like cell structure, chemistry, physics, calculus and genetics.

And that's just the beginning. The first year of the program is filled with those standard pre-med classes and at year's end, students receive a pre-med certificate.

The second year is actually a graduate year, packed with 13 credits one semester and 11 the second. Topics include human anatomy, medical biostatistics, human histology and biochemistry. Full-time graduate study is considered nine credits, so it's a busy year, but at the end, students will only be about six credits shy of a master's degree in biology.

"The whole purpose of that second year is to make sure that they're really ready for that first

year of med school," said Donna Fox, associate dean in Mason's College of Sciences and the director of the EMDP2 program at Mason. "We want them to be the class leaders. I think that can be accomplished. The blessing of a private cohort is that they're all in the same boat. They're kind of just getting back into school. They're not afraid to ask questions. I've been at Mason 22 years and they're probably the most inquisitive students I've ever had. It's wonderfully on-target questions, and just some of them, very deep questions about the material."

The program just celebrated its first anniversary and is welcoming its second class of students. The first class has only 10 students - five from the Army and five from the Air Force - although subsequent cohorts will consist of 25 students from all four services. Soldiers apply for the program through their commands, and must already have a bachelor's degree. The subjects of those degrees don't matter, but their GPAs must be a minimum of 3.2, Fox said.

The main thing, said Col. Jeffrey Hutchinson, USUHS medical school associate dean of clinical affairs and chief diversity officer, is that Soldiers show "excellence in their job. Their command will only recommend them if they are showing excellence so they need to continue doing that."

A practicing physician in adolescent medicine at Walter Reed National Military Medical Center in Bethesda, Md., Hutchinson sat on the applicant review board and serves as a mentor to the Soldiers in the program.

"I have a pretty good



Courtesy Photo

Sgt. 1st Class Joshua Richter takes notes during one of his Enlisted to Medical Degree Preparatory Program classes at George Mason University in Manassas, Va.

idea of who would make a good physician. The characteristics we look for are responsibility, of course," he said. "Almost every applicant had shown that. Throughout their careers, they had taken on more and more responsibility and they had proven themselves. It takes a combination of intellect and communication and the desire to help other people."

He and the other members of the selection committee also looked for a genuine interest in medicine. All of the applicants wrote about a longtime desire to become doctors in their personal statements, but he wants more than that. They don't have to be medics - about half of the members of the first class aren't - but it helps if they've at least volunteered at hospitals, anything to show "that they have some idea what medicine is."

Sgt. 1st Class Joshua Richter, for example, had 15 years of experience in special operations, but he got to know his unit physicians well - they actually told him about the program - and cross-trained to serve as a medic when necessary and as an emergency medical technician.

"It was just kind of an interest of mine that had been cultivated over many years," he explained. "To be able to pursue it while on active duty is a really great opportunity."

"I kind of sat there in awe, like, 'Wow, I can't believe this is happening,'" agreed Staff Sgt. Claude "Alex" Blereau, a special operations flight medic. "I may have teared up. I'm not going to admit to that, but it may have happened. It was awesome. It's the best thing that's happened to my Family for sure."

He started the program as a brand-new father, so his days and nights have been long, but he wouldn't change any of it. "It was all worth it. If you need me to stay up late at night and study to get good grades, I'll do that rather than be away from my Family for weeks at a time. It took awhile, but it all worked out fine."

That was the hardest part, the Soldiers agreed: It's been years since any of them have been in school full time and it took some getting used to. It took some time to work out a rhythm, to remember how to study and study well, to get used to not wearing a uniform every day - well, that part wasn't so hard. Students

typically only wear their uniforms once a week.

"The initial month or so I think we were all in shock a little bit, trying to figure out the expectations of the instructors, our expectations of the program," Richter said. "Getting all of those to meet up was a little overwhelming at first. After the first month or so, we knew what we needed to do to succeed and things got much easier and much clearer."

That doesn't mean the coursework has been easy. It hasn't. A typical, 16-week organic chemistry class was squeezed into a five-week summer session, with extended classes and labs.

"It was pretty intense," Richter admitted, adding he was relieved that they didn't have to take anything else while going through it.

Meanwhile, Sgt. Steven Capen was stymied by physics and Blereau turned to a tutor to help him get through calculus, joking that "anything over my fingers and toes is difficult."

Still, it all started to come together, they said. "You start out with all of this pretty divergent coursework, physics, chemistry, but you start to realize that's all connected and interrelated, and when you start to see that happen, I think it's pretty awesome," Richter said.

"We've gotten to grow and think more scientifically," added Capen, a medic who actually has a bachelor's degree in biochemistry already. "That's something I think will really help us move forward into medical school."

Another part of the program is an intensive

Brooke Army Medical Center welcomes first baby of New Year

By Elaine Sanchez
BAMC Public Affairs

She was due after the holidays, but decided to come early to the party.

A few hours after the ball dropped in Times Square, Evelyn Rose Prochaska made an appearance at 6:24 a.m. on New Year's Day, marking San Antonio Military Medical Center's first delivery of 2016 at Fort Sam Houston.

"I was in the middle of pushing when the nurse told me that I was having the hospital's first born of the year," said Air Force Capt. Tiffany Prochaska, SAMMC Emergency Department assistant team lead. "I was, of course, a little distracted at the moment."

Prochaska's due date wasn't until Jan. 10, but she and her husband, Richard, an Air Force

veteran, decided to have a quiet New Year's Eve at home.

"We got invited to a bunch of parties, but I had a feeling it wouldn't be a good idea to go out," she said. "It was too close to the due date and I wasn't feeling well."

Prochaska's gut feeling paid off when contractions kicked in around 8 p.m. By 10 p.m., the contractions were closer and stronger and Richard insisted they head to the hospital.

A little over eight hours later, Evelyn Rose was born at 9 pounds, 2 ounces and 22 inches.

Col. Evan Renz, BAMC commander, stopped by for a quick visit and to present the family with a "first baby of the year" gift basket, packed with newborn necessities, donated by



Photo by 1st Lt. Kati Spearing

San Antonio Military Medical Center's first baby of the New Year was born at 6:24 a.m. Jan. 1 to Air Force Capt. Tiffany Prochaska, a SAMMC clinical nurse, and Richard Prochaska III. Baby Evelyn weighed 9 lbs. 2 oz. Pictured from left are BAMC Commander Col. Evan Renz, the Prochaskas, BAMC Auxiliary President Anne Feldman and Diane Renz.

the BAMC Auxiliary.

"I was shocked when I saw the basket," Prochaska said. "It was huge and

filled with helpful gifts. It was a really nice thing to do for us."

The new mom said

she was impressed with the care. "Everyone was great," she said. "I knew a lot of the people taking

care of me which took a lot of the anxiety away. I'm thrilled to work and receive care here."

Changes affecting TRICARE prescription refills coming

TRICARE beneficiaries are now required to get select brand-name maintenance drugs through a military pharmacy or TRICARE Pharmacy Home Delivery.

The new law took effect Oct. 1, 2015, requiring all TRICARE beneficiaries, except active duty service members, to get select brand name maintenance drugs through either TRICARE Pharmacy Home Delivery or from a military pharmacy.

Maintenance drugs are drugs taken regularly for a long period, such as to control blood pressure or cholesterol. The law does not apply to drugs people take for a short time, like antibiotics, or generic drugs.

Beneficiaries who keep

using a retail pharmacy for these drugs will have to pay the full cost. This will not affect people who live overseas, or have other prescription drug coverage.

The TRICARE pharmacy contractor, Express Scripts, sent a letter to affected beneficiaries in September 2015 explaining their options. Beneficiaries can contact Express Scripts at 877-363-1303 if they have any questions.

Beneficiaries who fill an affected drug at a retail pharmacy will get another letter from Express Scripts. After that, beneficiaries have one final "courtesy" fill at a retail pharmacy. If they fill at a retail pharmacy again, they have to pay

100 percent of the cost of their medication.

Military Pharmacies and TRICARE Pharmacy Home Delivery will remain the lowest cost pharmacy option for TRICARE.

However, Feb. 1 most copays for prescription drugs at home delivery and retail network pharmacies will increase slightly.

Copays for brand name drugs through home delivery will increase from \$16 to \$20, for up to a 90-day supply. At retail pharmacies, generic drug copays go from \$8 to \$10, and brand name drug copays go from \$20 to \$24 dollars, for up to a 30-day supply. Copays for non-formulary drugs and for drugs at non-network pharmacies will also change.

Beneficiaries can save up to \$208, in 2016, for each brand name prescription drug they switch from a retail pharmacy to home delivery. Home delivery offers safe and convenient delivery of your prescription drugs right to your mailbox. For more information on Home Delivery, visit <http://www.tricare.mil/pharmacy>.

Medications at military pharmacies are still provided at no cost to beneficiaries.

"Switching your prescriptions to Joint Base San Antonio-Fort Sam Houston pharmacies is easy," said Army Col. Kevin Roberts, chief of Pharmacy Service, Brooke Army Medical Center. "You can contact

the pharmacy directly at 916-6036 or 295-9370 or have your provider send us the prescriptions electronically.

"Just give your provider the following names of our electronic prescribing sites: DOD Fort Sam Houston Community ePhcy (Pharmacy NCPDP 591 1880/Pharmacy NPI 1831502590) or DOD Fort Sam Houston ePhcy (Pharmacy NCPDP 591 19/Pharmacy NPI 1649683400)," Roberts said.

Prescriptions can be filled at the main pharmacy at San Antonio Military Medical Center or the Fort Sam Houston Community Pharmacy on the main post, which is now open Saturdays from 8 a.m. to noon for

prescription pick up.

In addition, JBSA-Fort Sam Houston pharmacies have developed an easy and accessible option to securely dispose of unwanted or unused medications.

"We've added a blue drop-off box near the pharmacies in the SAMMC Medical Mall and in the Capt. Jennifer M. Moreno Primary Care Clinic," Roberts said. "These boxes look like a mailbox, but are labeled 'MEDSAFE.'"

"Now our patients have a year round option to dispose of unwanted medications that could lead to medication safety concerns," he said.

(Source: BAMC Public Affairs)



Holiday Closures

The JBSA-Fort Sam Houston Military & Family Readiness Center, building 2797, is closed Monday for Martin Luther King Jr. Day. Call 221-2418 or 221-2705.

Closed for Training

The Military & Family Readiness Center, building 2797, is closed every first and third Thursday from 1-4:15 p.m. for in-service training. Call 221-2418 or 221-2705.

Employment Readiness Orientation

Mondays, 9-10 a.m. Military & Family Readiness Center, building 2797. Learn about employment resources and review services offered. Call 221-2380.

Air Force Pre-Separation

Tuesday, 9 a.m. to Noon, Military & Family Readiness Center, building 2797. Airmen planning to separate from the federal service must attend a mandatory counseling. Begin the process 18 months prior to your separation date. Register at 221-2380.

Helping Us Grow

Securely playgroup

Tuesdays, 10 a.m. to noon, Middle School Teen Center, building 2515. An interactive playgroup for infants and toddlers; open to parents and their children, ages 5 and under. Registration not required. Call 221-2418.

FRG Leadership Academy

Tuesday, 8:30 a.m. to 4:30 p.m., Military & Family Readiness Center, building 2797. This training covers key positions, roles and responsibilities. Establish a network, resources and communications. Call 221-2418.

Instructor Trainer Course

Tuesday-Wednesday, 8:30 a.m. to 3:30 p.m., Military & Family Readiness Center, building 2797. A professional development course designed to improve instructional skills. ITC modules include platform skills, the adult learner, charac-

teristics of effective instructors, managing the learning environment, and the preparation process. Call 221-2380.

Air Force Pre-Separation

Tuesday, 9 a.m. to noon, Military & Family Readiness Center, building 2797. Airmen planning to separate from the federal service must attend a mandatory counseling. Begin the process 18-months prior to your separation date. Call 221-2380.

OPM Federal Application Process

Tuesday, 1-4 p.m., Soldier for Life, building 2263. Review the Federal employment process and careers offered within the Federal government. Learn about resources that support the Veterans Employment Program, skill translators, resume builders and more. Call 221-1213.

Post-Deployment

Wednesdays, 1-3 p.m., Military & Family Readiness Center, building 2797. Service members scheduled to deploy, go on temporary duty for longer than 30 days or go on a remote assignment are required to attend this briefing. Call 221-2418.

Coffee Talk

EFMP Support Group

Wednesday, 11:30 a.m. to 1 p.m., Military & Family Readiness Center, building 2797. This EFMP support group meets monthly for a casual dialogue to share helpful resources and ways to overcome challenges. Call 221-2705.

VOYA Nomination Process

Wednesday, 9-11 a.m., Military & Family Readiness Center, building 2797. Review the new nomination form and learn how to submit a package for 2016. This workshop will review helpful tips in writing a winning nomination. Nominations submitted on forms from previous years will not be accepted as they are obsolete. In order for your volunteer to be considered for the 2016 VOYA, nominations must be submitted no later than Feb. 29. Call 221-2380.

Interviews, Dress For Success

Wednesday, 9-11 a.m., Military & Family Readiness Center, building 2797. Take pride in your appearance and follow expected guidelines

of what to wear and be prepared for your interview. Discover ways to make a connection. Call 221-2380.

Sponsorship Application training

Wednesday, 2-3 p.m., Military & Family Readiness Center, building 2797. Mandatory training for military sponsors. Review roles and responsibilities of a sponsor. The Electronic Sponsorship Application & Training website at <http://apps.militaryonesource.mil/ESAT> provides registration, training certificates, sponsorship duty checklist, newcomer needs assessment, welcome packet and links to important Department of Defense and service relocation websites. Call 221-2705.

Career Technical Training

Wednesday-Thursday, 8 a.m. to 5 p.m., Military & Family Readiness Center, building 2797. Service members will receive guidance and help in selecting technical training schools and technical fields. Review accredited institute applications, scheduling a session with a counselor or a career technical training expert, and VA vocational education counselors. Call 221-1213.

Pre-Deployment

Thursday, 9-11 a.m., Military & Family Readiness Center, building 2797. Service members scheduled to deploy, going on temporary duty for longer than 30 days, or go on a remote assignment are required to attend this briefing. Call 221-2418.

Safety Seat Clinic

Thursday, 1:30-3:30 p.m., fire station, building 3830. Make sure your child is safe while traveling on the road by ensuring restraints are properly installed and fit the child appropriately. Child and vehicle must be present; parents will be seen by appointment only. Prerequisite course is Car Seat 101. Call 221-2418.

Caregivers New Year Social

Jan. 22, 6-10 p.m., Military & Family Readiness Center, building 2797. Caregivers and their warriors from all branches of service are invited to join us at the Joint Base San Antonio-Fort Sam Houston Military & Family Readiness Center for an evening in honor of the caregiver for a dinner buffet, live music, DJ, dancing, a photographer and

door prizes. To reserve a seat, call 501-606-1990. Business casual attire.

Trails & Tales Guided Tour

Jan. 22, 8 a.m. to 1 p.m., Military & Family Readiness Center, building 2797. A guided tour of Joint Base San Antonio- Fort Sam Houston; learn about old and new structures that share a rich history dating back more than 150 years. Patrons must be ready for departure at the JBSA-Fort Sam Houston Military & Family Readiness Center by 8 a.m. Due to limited seating, registration is required. Call 221-2705.

Accessing Higher Education

Jan. 25-27, 7:30 a.m. to 5 p.m., Education Center, building 2408. A three-day track for those pursuing higher education. Review education requirements and resources that may support personal goals. Call 221-1213.

Army FAP Unit Training

Jan. 26, 9-11 a.m. /1-3 p.m., Military & Family Readiness Center, building 2797. Mandated Unit Family Advocacy Training in accordance with Army Regulation 608-18 regarding domestic and child abuse identification, reporting, and prevention. Other topics covered include the Lautenberg amendment, restricted/unrestricted reporting and transitional compensation program. Seating is limited; call to reserve seats for your unit. Reservations will be accepted up to a week in advance. Call 221-2418.

Citizenship, Immigration Assistance, Ceremony

Jan. 26, 9 a.m. to noon, ceremony 2 p.m., Military & Family Readiness Center, building 2797. Review American customs and cultures, or meet with a U.S. Citizenship & Immigration Service officer for assistance with applications. Eligible patrons will take the oath of allegiance at a naturalization ceremony at 2 p.m. Registration not required. Call 221-2705.

Boots To Business Entrepreneurial Track

Jan. 26-27, 8 a.m. to 4 p.m., Soldier for Life, building 2263. A two-day entrepreneurial education workshop hosted by the Small Business Administration.



Van Autreve Sergeants Major Association

The Sgt. Maj. Of the Army Leon L. Van Autreve Sergeants Major Association meets at 5 p.m. on the

Discuss the opportunities and challenges of business ownership, review steps for evaluating business concepts, foundational knowledge required to develop a business plan, and information on SBA resources available to help access start-up capital and additional technical assistance. Call 221-1213.

Bringing baby home

Jan. 27, 9 a.m. to 1 p.m., Military & Family Readiness Center, building 2797. This two-part series must be attended in order. Knowing what to expect will help ease the overwhelming feeling of preparing for your newborn baby's homecoming. Both parents are encouraged to attend. Call 221-2418.

Salary Negotiation, Social Media

Jan. 27, 9-11 a.m., Military & Family Readiness Center, building 2797. Learn the skill of salary negotiation and tap into the power of social media to find jobs and market yourself. Call 221-2380.

Volunteer Management Information System

Jan. 27, 9-10 a.m., Military &

HRC from P13

Seamands reiterated that Soldiers are people too, with plans and aspirations and they need to be informed on current changes so they can prepare for the future.

"We are trying to do this right," Seamands said. "So when an NCO or an officer is told that they have to leave early they are set up for success after the Army."

third Thursday of each month at the Longhorn Café, 1003 Rittiman Road. All active duty, Reserve, National Guard and retired sergeants major are invited. Call 539-1178.

Enlisted Association

Chapter 80 of the Enlisted Association meets at 1 p.m. on the fourth Wednesday of each month at the JBSA-Lackland Gateway Club. Call 658-2344.

Family Readiness Center, building 2797. Volunteers will receive hands-on training with the Volunteer Management Information System. Open to all registered volunteers. Call 221-2380.

Volunteer Orientation

Jan. 27, 10-11 a.m., Military & Family Readiness Center, building 2797. Volunteers newly assigned to the M&FRC will in-process and receive training on their responsibilities. Call 221-2380.

FRG Key Caller

Jan. 27, 1-4 p.m., Military & Family Readiness Center, building 2797. This training defines the family readiness group key caller's role and responsibilities, address issues key callers may face and identifies resources. Call 221-2418.

Children in the Middle

Jan. 28, noon to 4 p.m., Military & Family Readiness Center, building 2797. A two-part series, must be attended in order. This free workshop meets the Texas court-ordered requirements for divorcing parents. Call 221-2418.

"The drawdown affects Soldiers and their families, their dreams, aspirations and goals. It's important for us to never lose sight of the fact that there are Soldiers and families involved in the process," he added.

New changes now show officers and NCOs the required career course before attaining their next promotion or expand their knowledge and help them understand the bigger picture.

DOCTORS from P14

MCAT preparation course, and instructors and mentors are there to help the students with their medical school applications and personal statements. Some students took the MCAT this summer. "It was pretty challenging. I won't pull any punches there, but I can say that the preparation was very effective. I feel confident that we did well," said Richter, who was one of the first to take the test, although Capen took a different version of the MCAT several years ago; psychology and sociology have since been added. Students have already started applying to medical schools and going on interviews in the fall.

They're required to apply to the USUHS medical school, which is where

most of them want to go anyway because it's free and will train them to not only be doctors, but military doctors. They've also been encouraged to apply to civilian medical schools and the Health Professions Scholarship Program, however.

Some of the schools in the running for Soldiers are Wake Forest, the University of Chicago, the University of Rochester and Eastern Tennessee.

Service members will automatically receive commissions upon acceptance to medical school, although they will need to find the time to attend an officer basic course at Fort Sam Houston, according to Green-Dixon.

If they attend USUHS, the students will incur an additional seven-year service obligation and

when you add that to the two-year preparatory program (which itself has a three-year payback) and nine-plus years of medical school and residencies, they'll be retiring from the Army.

The service members shouldn't have any problems getting into medical school, program officials agreed: They are laser-focused and driven – their collective GPA is a 3.82. Capen, who has a bachelor's in biochemistry, helps tutor many of his classmates, has a 4.0.

"When you have a lifetime of doing so many different tasks and now you can be focused on just one thing and have that maturity of life experience, you get outstanding students and that's what we have," Hutchinson said. "Civilian medical schools

want them probably even more than we do. They see these five young men as people who would add so much to their school, both as far as outside life experience, maturity and proven ability. With what they did just this first year at George Mason, every school would look at them and say they absolutely have the potential to be great physicians."

Actually, he went on, they have the potential to be excellent military physicians because they've stood in their patients' shoes, or rather, boots. They know what it is to be an enlisted Soldier and go into combat and they will understand better than most what their patients are going through. "That's exactly what we need in military medicine."

On the off chance that

someone doesn't make into medical school, however, he or she will still have options, Green-Dixon said.

Service members can go back to their old jobs, better educated and with an additional three-year commitment to the Army. They would have five years to finish out that master's degree in biology. They could also apply for other commissioning programs. They'd be well qualified for the physician's assistant program, for example.

The program is designed to help service members succeed. According to Hutchinson, that's partly because the diversity of the enlisted ranks is unmatched anywhere else in the country, and the services want their officer and medical ranks to re-

flect that diversity. But it's also about retention and about rewarding some exceptional Soldiers.

"I think one outstanding thing about this program from the day I submitted my packet is that everyone is encouraging and they are motivated to see you succeed," Richter said. "Should you need any help, whether it's academically or administratively, there is someone willing to help you out ... I commonly tell my colleagues that if you can't succeed in this situation, you might need to find a different path."

For more information about the EMDP2 program, visit the USUHS website (<https://www.usuhs.mil/enlisted-to-medical-degree-faqs>) and watch interviews with the inaugural class.

News Briefs

Continued from P6

technical score of 110 or higher, a security clearance and cannot have more than six years active federal service. Soldiers are required to have a Department of the Army photo or photo in Army Combat Uniform. Do not apply if you are on assignment or scheduled to deploy. Visit <https://www.hrcapps.army.mil/site/protect/branches/officer/Operations/Accessions/OCS/index.htm> for a listing of OCS requirements and forms. All OCS applicants must see their S1/G1 prior to submitting their OCS packets. All OCS packets must be turned by Jan. 22. For more information, call 221-0885.

Annual Youth Basketball Clinic

The African American Heritage Committee and Joint Base San Antonio-Lackland Youth Programs present the 7th Annual Youth Basketball Clinic Feb. 5 at the JBSA-Lackland Youth Center, building 8420. The session for ages 5-9 is from 4:30-6 p.m. and for ages 10-15 from 6-7:30 p.m. The clinic will focus on dribbling, shooting, conditioning drills and offensive/

defensive footwork. Cost is one canned food donation for the San Antonio Food Bank. Registration continues through Feb. 5 and all participants must bring their own basketball. Call 977-3921 for more information.

Weingarten rights: having union representation during investigatory interviews

The Labor Relations Statute entitles a bargaining unit employee to representation by the union during an examination, by an agency representative, in connection with a matter under official investigation if that employee reasonably believes disciplinary action will result. If the employee requests union representation, no further questioning will take place until a representative is present. For those stationed at Joint Base San Antonio-Fort Sam Houston, call Charles Brady at 808-0205; at JBSA-Randolph, call Todd Dallas at 652-4658 and at JBSA-Lackland, call Patricia Chaplin at 671-4528.

Check Your Military, CAC, Dependent ID Expiration Dates Now

All Defense Enrollment Eligibility Reporting system, Command Access

Card and military ID card locations throughout Joint Base San Antonio are by 100 percent appointment only and wait time for an appointment can be up to 30 days. Civilian and military members need to remember then their CACs and military IDs expire and schedule renewal appointments appropriately. Plan ahead for your family members for when their ID cards or and DEERS updates need to be made. Appointments can be made online at <https://rapids-appointments.dmdc.od.mil>.

IMCOM Voluntary Placement Program

The U.S. Army Installation Management Command's Voluntary Placement Program is a career-broadening opportunity for permanent, appropriated fund (GS-9 and above and wage grade equivalent) employees. The program gives first consideration to internal employees wishing to move overseas or return to the continental United States from an overseas position. Available job opportunities are posted on the Army Knowledge Online Portal every Tuesday. Interested employees are required to submit one resume per week. If selected for a position, the employees will receive an official offer through the Civilian Personnel Advisory Center.

CONUS employees can check out OCOUNS vacancies at <http://www.us.army.mil/suite/page/697591>. For more information, contact the IVPP team at usarmy.jbsa.imcom-hq.mbx.voluntary-placement-program@mail.mil.

VIA Metropolitan Transit Bus Schedule Now Includes Sundays

VIA Metropolitan Transit recently expanded their weekend express service from Joint Base San Antonio-Lackland and JBSA-Fort Sam Houston to the downtown USO to Saturdays and Sundays. Express Route 65 serves JBSA-Lackland and operates Saturday, every 30 minutes from 8:15 a.m. until 7:30 p.m. then hourly until 10:30 p.m.; Sunday, hourly from 9:15 a.m. until 7 p.m. Express Route 16 serves JBSA-Fort Sam Houston and operates Saturday, every 30 minutes from 8:45 a.m. until 7:30 p.m., then hourly until 10:30 p.m.; Sunday, hourly from 9:45 a.m. until 7 p.m. It costs \$2.50 each way or a day pass can be purchased with exact change at the bus. The VIA bus service to other routes are available with stops just outside the gates. For more information, go to <http://www.viainfo.net>. **Fort Sam Houston**

Museum Open

Take a step into history at the Fort Sam Houston Museum in the Quadrangle, building 16, the oldest structure on the installation. The museum chronicles the history of the Army in San Antonio from its arrival in 1845 to the present. Learn about the vital role Fort Sam Houston played in the development of the Army and connect with the Soldiers who served on this historic post. The museum offers numerous services for military members and their families to include professional development, neighborhood histories and special history searches for the kids. Admission to the museum is free to all active duty service members, retirees, civilians and family members. The hours are 10 a.m. to 4 p.m. Tuesday-Friday, noon to 4 p.m. Saturday and closed Sunday, Monday and federal holidays. For more information, call 221-1886.

North New Braunfels, Harry Wurzbach West Access Control Points Open 6-9 a.m. Mornings

The North New Braunfels Access Control Point, located by the Quadrangle, and the Harry Wurzbach West ACP, also known as the Pershing Gate, are open for

incoming and outgoing traffic from 6-9 a.m. Mondays through Fridays, except on federal holidays, according to the 502nd Security Forces Squadron.

Stray Animals Notice For JBSA-Fort Sam Houston Residents

Many stray or roaming animal sightings are near residences. The stray or roaming animals are seeking food, water and shelter. Although this is not necessarily a housing problem, housing officials ask that residents refrain from feeding any animal that does not belong to them or that is running wild on Joint Base San Antonio-Fort Sam Houston. If stray or roaming dogs in housing areas or entering the installation are seen, please call the 502nd Civil Engineering Squadron service call desk at 671-5555 to establish a work order and report the stray as soon as possible. Civil engineers will set traps for the strays and remove once the strays have been caught. If a wild animal is seen, keep away and make sure that no one is leaving food or water near housing areas. In addition, call Lincoln Military Housing at 221-0948 to have pest control service place a trap around the residence.

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