

# JBSA LEGACY

WWW.JBSA.MIL

JOINT BASE SAN ANTONIO

FEBRUARY 14, 2020



PHOTO BY CHIEF Petty Officer BARRY RILEY

Col. Christopher Caldwell, Joint Task Force Civil Support operations director, briefs members of the Joint Operation Center Jan. 27 during Exercise Sudden Response 20, which took place in Killeen, Austin and Fort Hood, Jan. 24-29.

## Exercise Sudden Response 20 stresses support to civil authorities

Page 6



## Defense Language Institute beta tests new program

Page 11



## Total Force Integration team assesses JBSA-Randolph

Page 16

# Officials provide details on Space Force

By Charles Pope

SECRETARY OF THE AIR FORCE  
PUBLIC AFFAIRS

Senior officials from the Department of Defense and U.S. Space Force provided the most specific details to date Feb. 5 for how the newly born Space Force is constructed, its structure and the philosophy guiding decisions for bringing the first new military service since 1947 into full reality.

In broad terms, the Space Force must ensure the U.S. continues its superiority in space. Getting there, however, demands that the Space Force be “lean and agile” and mission-focused, said Lt. Gen. David Thompson, U.S. Space Force vice commander.

It must be both cost-effective and minimize bureaucracy while also infusing “innovation and improvements,” said Thompson, who was joined by Deputy Assistant Secretary of Defense for Space Policy Stephen Kitay, Assistant Secretary for Space Acquisition and Integration Shawn Barnes, and Maj. Gen. Clint Crosier, who leads the Space Force’s planning office.

The senior civilian and military leaders provided new details about Space Force during a 40-minute Pentagon news conference that included a status update on Space Force implementation efforts and insight into a 21-page report delivered to Congress Feb. 3. The report, which is required by Congress, outlines what has been achieved since the Space Force was launched Dec. 20 and what lies ahead.

Thompson offered a clear justification for why the Space Force is needed and why it must be a separate and independent branch of the military. More nations are active in space, he said, which means there is an “increasing challenge and threat to our use of that domain by potential adversaries.”

“They are fielding weapons systems. They have communicated the intent to take our use of space away from us in conflict. So part of the rationale for creating the space force was to elevate our focus on this domain and the capabilities we need to the same level we have with the other services,” Thompson said.

In comments after the briefing, Crosier said an additional and important effort is training future Space Force personnel. The U.S. Air Force Academy and the Space Force, for example, have entered into a cooperative agreement to establish a Space Force Detachment at the Academy in summer 2020. He also said that leaders are exploring a Space Training and Readiness Command option within existing resources that will focus on doctrine, space training and education as well as readiness.

A successful Space Force is a strategic imperative for U.S. national security, the officials said. It will bring greater focus and capability to space training, warfighting and overall readiness, at a time when space is more congested and contentious while also playing a central role in everyday commerce, communication and national security.

A team of senior officers and officials from the Space Force and the Department of the Air Force have been formulating policies and details for moving the Space Force from an idea to

a functioning reality that ensures the nation can “compete, deter and win in an era of great power competition.”

The officials noted that the Space Force is being constructed from a “clean sheet.”

They also insisted that the Space Force is necessary. As space becomes more crowded and contested, they suggested that the United States could lose its long-held advantage in space.

Yielding dominance in space, they said, would undermine the nation’s prosperity and erode the ability of the United States military to deter aggression, defend the homeland, and project power abroad.

The officials said the new service will rely on “centers” to develop doctrine and operational standards that are specific to space. The goal is to create systems and practices that ensure space superiority, robust command and control of space forces. They also said that the U.S. Air Force Academy will begin offering coursework directly related to the Space Force mission.

## How to avoid phishing emails exploiting coronavirus fears

From Joint Regional Intelligence Center-LA Cyber Lab

According to open-source reporting, nefarious actors are exploiting the public’s fears of the 2019 Novel Coronavirus in phishing email campaigns.

Malicious emails are appearing as official Centers for Disease Control and Prevention Health Alert Network messages and contain camouflaged links urging readers to view the latest number of novel coronavirus infections in their jurisdictions. These links, once opened, may be used to steal users’ Microsoft Outlook credentials.

Malicious emails may also include attachments containing

malware, including Emotet, often used by threat actors to deliver, Ryuk — a sophisticated ransomware.

Phishing e-mails are a common occurrence of military and personal network systems designed to steal your identity by asking for personal information.

Even though the links look legitimate, do not be fooled.

In a phishing email, the sender often delivers shocking and commonly frightening news in order to trick an unsuspecting user into action. However, remember that a legitimate company will never

ask you to download a program or enter personally identifiable information, or PII, in an email.

Follow these simple rules to avoid phishing campaigns:

▶ Stay alert — Know what is in your inbox, don’t open any old email. If you don’t know the sender be overly suspicious.

▶ Don’t let emails frighten you — In most cases an email will not be the source of legitimate good or bad news. Read the email carefully and don’t be easily duped.

▶ Don’t share information through email — A legitimate company should have the PII they need. Call the company help desk and ask for

clarification if necessary.

▶ Ensure you are secure — Look for “https” and the security symbol of a padlock in your browser. If you’re not secure, don’t enter information.

▶ Never click on links within emails — If an email requests verification or further information find the website yourself, ensure it is the correct site, and verify that it is secure.

▶ Never open mysterious attachments — Attachments can be laden with malware that can infect your computer.

▶ Use layered defense — Utilize up-to-date spam filters, anti-virus, anti-rootkit, anti-spyware and firewalls.

**JBSA LEGACY**

**Joint Base San Antonio  
Editorial Staff**

**502nd Air Base Wing  
and JBSA Command**

**BRIG. GEN.**

**LAURA L. LENDERMAN**

**502nd ABW/JBSA  
Public Affairs Director**

**MAJ. KIM BENDER**

**502nd ABW/JBSA  
Chief of Command  
Information**  
**JET FABARA**

**Editor**  
**STEVE ELLIOTT**

**Staff**

**2ND LT. CHRISTIAN EBERHARDT**

**MASTER SGT. TYRONA LAWSON**

**TECH. SGT. AVE YOUNG**

**AIRMAN 1ST CLASS SHELLEY PRUITT**

**DAVID DEKUNDER**

**ROBERT GOETZ**

**SABRINA FINE**

**ALLISON MILLER**

**LORI BULTMAN**

**JBSA LEGACY  
ADVERTISEMENT OFFICE**

**EN COMMUNITIES**

**P.O. BOX 2171**

**SAN ANTONIO, TEXAS 78297**

**210-250-2052**

This Department of Defense newspaper is an authorized publication for members of the DoD. Contents of the JBSA Legacy are not necessarily the official views of, or endorsed by the U.S. Government, the DoD, or the U.S. Air Force.

Published by EN Communities a private firm in no way connected with the U.S. Air Force under exclusive written contract with the 502nd Air Base Wing and Joint Base San Antonio. The editorial content of this publication is the responsibility of the 502nd Air Base Wing Public Affairs Office.

Everything advertised in this publication will be made available for purchase, use, or patronage without regard to race, color, religion, sex, national origin, age, marital status, physical handicap, political affiliation or any non-merit factor of the purchaser, user, or patron.



# Feedback Fridays

By Brig. Gen. Laura L. Lenderman  
502D AIR BASE WING COMMANDER

Feedback Fridays is a weekly forum that aims to connect the 502d Air Base Wing with members of the Joint Base San Antonio community. Questions are collected during commander's calls, town hall meetings and throughout the week.

If you have a question or concern, please send an email to [RandolphPublicAffairs@us.af.mil](mailto:RandolphPublicAffairs@us.af.mil) using the subject line "Feedback Fridays." Questions will be further researched and published as information becomes available.

## Personnel Issues

**Q.** What is the Air Force/Joint Base San Antonio policy on smoking and smokeless tobacco in the workplace for military and civilians?

People use smokeless tobacco in my workplace and it's revolting. Not only is it gross to watch them spitting in a water bottle but it's a serious health issues in their future. It appears to be condoned where I work throughout the building.

**A.** Thank you very much for your question! I am very sorry for your experience in your work center. According to Air Force policy, the use of smokeless products while in uniform and on duty — as with smoking — is only allowed in designated smoking/smokeless tobacco areas. We will work with commanders and supervisors to ensure our workforce is reminded of this policy.

## Installation & Facilities

**Q.** I would like to find out if something can be done concerning the traffic light at the JBSA-Randolph clinic gate on FM 78.

It used to stay green for traffic on FM78 after hours and on weekends, but now it turns red, as if there is traffic coming out of the base even when the gate is closed. This is probably making our Universal City (and other drivers) very irritated and leaves a bad impression about base personnel on our local neighbors.

Can you please coordinate with Universal City officials to have the light reflect actual traffic flows from the base?

**A.** Thank you for your question and we sincerely apologize for the unnecessary

delays at that gate during off-duty hours.

You are not alone in your frustration, and we recently raised this concern during our monthly meeting with the Texas Department of Transportation, or TXDOT, and asked them to adjust the traffic light timing.

Our team reported that as of Jan. 29, TXDOT adjusted the light sequence. Please let me know if some reason the light reverts back to the previous schedule. We appreciate your feedback!

## Miscellaneous

**Q.** With everything that is happening in the U.S., such as shootings on various military bases, are there any future plans for the Police/Security Forces at JBSA to conduct any type of active shooter type of training with the local Police (San Antonio Police Department, Bexar County Sheriffs Office, etc.)?

**A.** Thank you for your sharing your concerns and question as it relates to JBSA security and partnerships with our local law enforcement professionals.

The short answer is yes ... we regularly train and practice various response scenarios with local law enforcement agencies across JBSA.

Our Defenders always have and

continue to seek new and improved partnered-training programs across the entire spectrum of threats through their personal network of local law enforcement leaders.

Ongoing JBSA-wide community partnership programs, to include law enforcement training opportunities, are briefed quarterly at the Alamo Area Council of Governments, which is open to the public.

The safety of the JBSA community is my top priority, and we are extremely grateful for the opportunity to train with the proud professionals serving in the local law enforcement and emergency response communities.

**Q.** I would like to address a concern pertaining to bus transportation being provided for Commander's Calls.

I appreciate the fact that bus transportation is provided, but unfortunately there are many individuals who are unable to get on to the bus due to the height of the first step from ground level.

Would it be possible for to provide a step stool and put it on the ground to make that first step more accessible?

**A.** I am so grateful for your question. Thank you for bringing this issue to my attention.

After reviewing your concern, we

measured the distance from the first step to the ground on our buses. Due to the differences in bus types, age, and suspension wear, the distance from the ground to first step varied considerably, with all exceeding the typical height of home staircases.

As a result of this review, we are procuring step stools for all 31 of the 44-passenger buses assigned to JBSA. Thank you again for sharing your suggestion and for attending our commander's calls!

**Q.** In November 2019, Public Law 116-67, National POW/MIA Act, was signed by President Trump.

This law states that the POW/MIA flag be displayed below the US flag at federal sites (including military installations).

I have not seen it flown at JBSA-Randolph or JBSA-Lackland. When will we begin following this new laws?

**A.** Thank you very much for your question! We are tracking the implementation of this law closely and while we are awaiting additional guidance to be released, we are developing our plans to adhere to the law across our primary operating locations. Thank you again for bringing this law to my attention.



COURTESY GRAPHIC

# The next transition from ABUs to OCPs: what to expect

By Airman 1st Class Ireland Summers  
377TH AIR BASE WING PUBLIC AFFAIRS

The next transition before the final uniform change from the Airman Battle Uniform to the newly regulated Operation Camouflage Pattern combat uniform will be effective June 1, 2020, for all Airmen.

"We are coming up on a big milestone requirement this year, as far as OCP wear," said Tech. Sgt. Tyler A. Highfill, Air Force Global Strike Command Airman Leadership School instructor. "On June 1, Airmen will be required to wear only a coyote brown T-shirt with the OCP uniform. Additionally, all boots must be coyote brown. The spice brown U.S. flag patch will be the only authorized version of the U.S. Flag to wear and only DLA-issued green socks or coyote brown socks may be worn while in the OCP Uniform."

Highfill says that officers will be required to wear a spice brown rank insignia, with exception of first lieutenants and lieutenant colonels, who will use the black threading variant.

Currently, Airmen who had already begun wearing OCPs were authorized

**"For those of us that have been in longer than three years, we're looking at \$549.71 for clothing allowance, known as the standard allowance. For those with less than three years, you're looking at \$428.77 for clothing allowance, known as basic allowance."**

Tech. Sgt. Tyler A. Highfill, Air Force Global Strike Command Airman Leadership School instructor

to wear the desert sand T-shirt, green socks and subdued black and green cloth U.S. flag patches with the new uniform.

As the final date approaches, Airmen are encouraged to start buying their uniforms now, as it can be costly.

"Most Airman will have to purchase their own OCPs with the clothing allowance they are provided," said Master Sgt. Michael A. Sumner, 377th Medical Group first sergeant.

Sumner advised Airmen to make the most of the last of the allotted time to get their uniforms before the final date.

"Typical practice is to have four sets of uniforms available at all times," Highfill said. "Purchasing uniforms over time is, of course, the best option to meet stricter budgets. I'd recommend buying a set at a time,

saving over two or three months if necessary."

Airmen can also expect to see about a \$20 increase in their clothing allowance per uniform for the 2020 fiscal year, Highfill added.

"For those of us that have been in longer than three years, we're looking at \$549.71 for clothing allowance, known as the standard allowance," Highfill said. "For those with less than three years, you're looking at \$428.77 for clothing allowance, known as basic allowance."

Airmen have 15 months left to ensure they have all the required items for their uniform. To tackle the expenses of purchasing their uniform, a few options can be considered.

"There are online stores that sell the OCP uniform," Sumner said. "However,

I would encourage you to do research on the uniform they are selling."

Sumner says that although the uniform may be selling for less, it could be the incorrect uniform. Another option is to check the local Airmen's Attic.

"You will often find very good deals on uniform items," Highfill said. "Additionally the local base cleaners and alterations sometimes have clothing items for sale that have been forgotten or left behind."

The official date for the overall Air Force to fully retire ABUs is April 1, 2021. For more information on regulations and uniform guidance for the OCP uniform, check out AFI 36-2903 or visit <https://www.afpc.af.mil/Career-Management/Dress-and-Appearance/>.

## Secretary of Defense advises service members against using DTC genetic testing

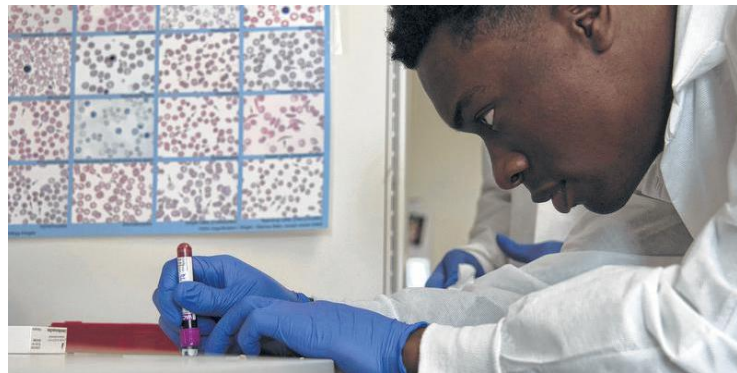
From Office of the Secretary of Defense

It has come to the attention of the Department of Defense that some direct-to-consumer, or DTC, genetic testing companies are encouraging DOD personnel to purchase genetic ancestry and health information through the offering of military discounts or other incentives.

These DTC genetic tests are largely unregulated and could expose personal and genetic information and potentially create unintended security

consequences and increased risk to the joint force and mission.

Exposing sensitive genetic information to outside parties poses personal and operational risks to service members. DTC genetic tests that provide health information have varying levels of validity, and many are not reviewed by the Food and Drug Administration before they are offered, meaning they may be sold without independent analysis to verify the claims of



SENIOR AIRMAN KATHRYN R.C. REAVES

Airman 1st Class Chris Lawson, 20th Medical Support Squadron lab technician, places a drop of blood on a slide in the medical clinic at Shaw Air Force Base, S.C., Dec. 9, 2019.

the seller.

Possible inaccuracies pose more risks to DOD military personnel than the public due to service member requirements to disclose medical information that affects readiness (see DOD Instruction 6025.19, "Individual

Medical Readiness"). Testing outside the military health system is unlikely to include a clear description of this risk.

Moreover, there is increased concern in the scientific community that outside parties are exploiting the use of genetic data for questionable purpose,

including mass surveillance and the ability to track individuals without their authorization or awareness.

Until notified otherwise, DOD military personnel are advised to refrain from the purchase and/or use of DTC genetic services.

# JBSA 2020: the future of the customer experience

By Jeff D. Champagne

502ND AIR BASE WING ICE SITE ADMINISTRATOR  
AND PROGRAM MANAGER

Is your organization prepared to meet the needs of its customers? Do you know what your customers need and expect from your organization?

Customers are much more informed and vocal now and have more options. They are less likely to be locked into following traditional methods.

The Joint Base San Antonio Interactive Customer Evaluation, or ICE, program can assist by providing real-time customer feedback data about the services you provide.

## What JBSA customers expect in 2020

With the explosion of digital and social innovation, companies and like-minded organizations are now finding themselves personalizing the customer experience based on customer feedback.

Today's customer wants to interact on their terms, in a timely manner, and expects the organization to proactively address current and future needs. The ICE program can meet this demand by providing quick turnaround data on service quality.

The valued feedback we receive from our customers' then gives commanders and leaders the ability to make instantaneous process improvement decisions.



COURTESY GRAPHIC

The ICE program also provides access to historical data, trending data, and the ability to benchmark your services against other similar organizations throughout the Department of Defense.

Over the next few years, customer service will overtake price, promotion and product.

## Want to stay ahead? ICE is here to help

If you are not already a participant in the JBSA ICE program, now is a great time to join the team of more

than 650 ICE service providers across San Antonio military installations.

ICE managers promote and influence customer service leadership roles throughout any participating organization. The more customer service leaders you have in your organization the better.

Many participating organizations have multiple directorates or departments that participate in ICE. When you have the ability to gather information from different services combined, it allows for a more holistic approach and understanding of the customers experience in that respective organization. ICE managers hold a respective and vital role when it comes to recognizing trends and areas for process improvement.

Customer-focused organizations should recognize the shift in their customer's expectations through data in feedback. Trending data will surface what your organization is doing right and what you could improve on.

When ICE is used effectively, it leverages customer feedback to create a better overall customer experience.

Are you ready to join the team? If your organization is interested in becoming an ICE participant or to submit comments or questions about the JBSA ICE Program, contact the JBSA ICE administrator at 210-221-2543.



# FORT SAM HOUSTON

## Exercise Sudden Response 20 showcases task force support to civil authorities

By Lori A. Bultman

502ND AIR BASE WING  
PUBLIC AFFAIRS

Members of Joint Task Force Civil Support, or JTF-CS, at the direction of U.S. Army North and U.S. Northern Command, rehearsed force and equipment employment, life-saving operations and web-based command and control collaborative tools Jan. 23-29 in Killeen, Austin and Fort Hood to ensure capabilities for Defense Support of Civil Authorities.

The JTF-CS provides command and control of assigned defense chemical, biological, radiological and nuclear response force units at the request of civil authorities, providing federal emergency response efforts such as mass decontamination and search and rescue operations.

For Exercise Sudden Response 20, JTF-CS led the multi-echelon, command post exercise to replicate a no-notice deployment and employment of military forces. Approximately 1,000 service members, 50 City of Austin personnel and 10 Travis County staff members participated in the exercise.

"The overall goal of this

exercise is to practice getting better at Defense Support to Civil Authorities in the event that we are ever needed to respond to a catastrophic domestic CBRN disaster," said Maj. Gen. William "Bill" Hall, JTF-CS commanding general.

The response force did not start from scratch when determining how to run this exercise. The National Response Framework, or NRF, guidance directs responses to multiple potential disasters and describes how to coordinate resources between local, state, tribal and federal agencies, and within the private sector and other nongovernmental organizations.

The NRF also gives a blanket description of what constitutes a catastrophic incident; "any natural or man-made incident, including terrorism, that results in extraordinary levels of mass casualties, damage or disruption severely affecting the population, infrastructure, environment, economy, national morale or government functions."

These types of catastrophic events could result in significant nationwide impacts over a prolonged period. Such impacts could also significantly



PETTY OFFICER 1ST CLASS DAVID SMALLS III

*Service members assigned to 3rd Platoon, 68th Engineer Company urban rescue team prepare to conduct a simulated confined-space rescue Jan. 25 as part of Exercise Sudden Response 20.*

interrupt military and other governmental operations and emergency services to an extent that national security could be threatened, which is why holding this type exercise is essential to military and civilian readiness.

"The training here is extremely valuable," said U.S. Army Capt. Kareem McCombs, company commander, 181st CBRN Company, which participated in field training exercises throughout SR20.

"It's hard to replicate real-life training. For instance, we have real-world players that are processing through our decontamination line, giving my soldiers the actual repetition they need."

During Sudden Response 20, JTF-CS also hosted more than 30 military personnel and civilian distinguished visitors at the Killeen Special Events Center Jan. 28, where they received briefings on the command's mission,

collaborative tools and web applications.

The group also toured the command's Joint Operation Center, where they interacted with JTF-CS personnel to gain an understanding of day-to-day operations at the command during a CBRN response, then headed to the field training site at Fort Hood to see firsthand how CBRN reconnaissance and surveillance, urban search and rescue and mass decontamination are done.

# METC instructor lauded for his efforts in saving the life of a gunshot victim

By David DeKunder

502ND AIR BASE WING  
PUBLIC AFFAIRS

A medical instructor at Joint Base San Antonio-Fort Sam Houston is being lauded for his efforts in helping save the life of a gunshot victim last summer.

Clyde Foster, Medical Education and Training Campus Department of Combat Medic Training training instructor, has been nominated for a METC award by his supervisors based on the actions he took on the afternoon of July 29, 2019, when he came to an aid of a man who had been shot at an H-E-B in northeast San Antonio.

Foster described what it was like at the scene when he came upon the gunshot victim.

"I was shopping at H-E-B and made my purchase and was getting ready to walk out of the store and I hear, 'Oh, my God, he's been shot!'" Foster said.

He then found a young man, who was bleeding, lying just inside the door of the store. A bystander had come to the aid of the man and was trying to stop the bleeding using a newspaper. Apparently, the victim had been shot in the store's parking lot as a result of an altercation between him and three other men. After being shot, the victim managed to get inside the store.

"The victim was talking to me," Foster said. "He had several wounds to his back, one to his right pelvis. It was the pelvic wound that was doing the majority of the bleeding; very few of the wounds from the back were bleeding."

As the bystander was controlling the bleeding, Foster went to his vehicle in the parking lot to get his first aid



COURTESY PHOTO

*Clyde Foster, Medical Education and Training Campus Department of Combat Medic Training training instructor, has been nominated for a METC award by his supervisors.*

bag. Once he returned, Foster gave the man who was controlling the bleeding gauze and then made a couple of improvised chest seals out of plastic and tape to tend the wounds on the person's back.

While Foster was treating the patient, EMS arrived and took the shooting victim to the hospital. The man survived.

Foster, a retired Army nurse, said during the ordeal his focus was treating the victim, regardless of what was going on at the scene.

"One of the things we teach our students (at METC) is

always about safety," he said. "If the scene is not safe, stay out of it. Well, I ran out of the store not knowing what was going on outside, not the smartest thing to do.

"When people are injured, we focus on the ability of 'let me fix what's going on,' not what's going on in the environment," Foster added. "That's what I'm trained to do."

Foster's expertise is in critical care and emergency medicine. He has 30 years of experience as a registered nurse and emergency medical technician, treating patients

**"He went and did something on his own will to save a life. He took it upon himself to take that risk on the possible still continuous fire. He didn't know if it was safe or not. He went back outside to get equipment and perform certain emergency procedures to save a life, to stop the bleeding."**

Hector Castillo,  
Department of Combat Medic Training training supervisor  
and civilian in charge of EMT 3

with gunshot wounds in both tactical and civilian settings. He has been an instructor in the Department of Combat Medic Training for 18 years.

He said the incident at the H-E-B was the first time he has treated a gunshot victim while not on duty or on call as an EMT.

The day after the incident he told his METC co-workers about it. He also told his wife, who was out of town at that time, about it once she got back home.

Foster said he had put the incident behind him until December, when he learned that his supervisors at METC, Hector Castillo, Department of Combat Medic Training training supervisor, civilian in charge of EMT 3, and Capt. Rachel Sabatura, Department of Combat Medic Training, officer in charge of EMT 3, had nominated him for the award.

Castillo said Foster has been nominated for the award

because he went above and beyond the call of duty in helping to save a life.

"He went and did something on his own will to save a life," Castillo said. "He took it upon himself to take that risk on the possible still continuous fire. He didn't know if it was safe or not. He went back outside to get equipment and perform certain emergency procedures to save a life, to stop the bleeding."

Castillo said Foster is one of the top instructors in the Department of Combat Medic Training who is always willing to give a helping hand to students, instructors and employees within the department.

Foster said he did what any medic would do in the situation he faced.

"Literally, I hadn't given it any thought," he said. "I don't think I did anything that any medic would not have done under those circumstances."



## MEDCoE hosts Army Medicine Modernization 2028 Strategy SYNCH

From U.S. Army Medical Center of Excellence Public Affairs

Maj. Gen. Dennis P. LeMaster, commander, U.S. Army Medical Center of Excellence, and J.M. Harmon, deputy to the MEDCoE commanding general, provided welcome and opening remarks for the recent Army Medicine Modernization 2028 Strategy SYNCH, hosted by the MEDCoE at Joint Base San Antonio-Fort Sam Houston.

The SYNCH, initiated by MEDCoE and Army Medical Command, is set to be a recurring event to integrate and synchronize Army Medicine initiatives and efforts across the enterprise and was attended by approximately 75 senior leaders within MEDCoE, Army Futures Command, Medical Research Development Command, MEDCOM and the Office of the Surgeon General, to include Brig. Gen. Paula Lodi, Deputy Chief of Staff, G3/5/7, OTSG.

“We are still one Enterprise,” LeMaster told the group of local and virtual attendees. “We still have to



COURTESY PHOTO

*Maj. Gen. Dennis P. LeMaster, commander, U.S. Army Medical Center of Excellence, addresses senior leaders during the Army Medicine Modernization 2028 Strategy SYNCH Feb. 6.*

“speak with one voice to do what we do; conserve fighting strength.”

The theme for the SYNCH was “Readiness Focused for Cohesive & Complex Operations.”



SGT. ASHLEY DOTSON

*Maj. Gen. Daniel Walrath (right), U.S. Army South commander, greets Maj. Gen. Josias Pedrotti Da Rosa (left), Brazilian army attaché to the United States, and Maj. Gen. Marcos De Sá Affonso Da Costa (center), Brazilian army director of training, Feb. 4 at Joint Base San Antonio-Fort Sam Houston.*

## ARSOUTH welcomes Brazilian leaders

From 502nd Air Base Wing Public Affairs

In preparation for this year's PANAMAX multinational exercise and upcoming combined training, U.S. Army South hosted Brazilian army Maj. Gen. Marcos De Sá Affonso Da Costa, Brazilian director of training, and Maj. Gen. Josias Pedrotti Da Rosa, Brazilian army attaché to the United States, and their delegation at Army South headquarters, Joint Base San Antonio-Fort Sam Houston, Feb. 4.

PANAMAX will be held at the Joint Readiness Training Center at Fort Polk, Louisiana, and in Sao Paulo, Brazil.

PANAMAX is an annual U.S. Southern Command-sponsored training exercise series with the objective of demonstrating the capability of participating nations to conduct coalition operations and is focused on

ensuring the security of the Panama Canal and the surrounding region.

During this visit, the Brazilian director of training met with Maj. Gen. Daniel Walrath, U.S. Army South commander, and other command leadership to discuss the Brazilian army's role in the coming exercise.

Walrath thanked the team for their commitment to the exercise, which will improve interoperability and strengthen the partnership between the U.S. and Brazilian armies.

The leaders continued their discussions at JRTC Feb. 5 where they ensured alignment of U.S. and Brazilian army priorities for a combined training rotation there in 2021.

The U.S. and Brazilian Armed Forces enjoy a longstanding relationship which includes a wide range of defense cooperation activities to improve readiness and interoperability.



# BAMC takes critical-care training on the road

By Jeanine Mezei

MEDICAL DEPARTMENT ACTIVITY-FORT CARSON  
PUBLIC AFFAIRS OFFICE

Whether the military's mission takes doctors to the battlefield or stateside to care for troops and their families, military physicians are versatile.

Maintaining and exceeding proficiency in critical skills is an important priority for the medical team, which is why Evans Army Community Hospital, or EACH, recently hosted a critical-care mobile training team at Fort Carson, Colorado.

A team of four pulmonary/critical care physicians from Brooke Army Medical Center at Joint Base San Antonio-Fort Sam Houston provided a two-day training event Jan. 14-15 focused on skills within individual critical tasks lists, or ICTL, necessary to care for wounded service members while deployed overseas.

Known as the Army ICTL Education and Validation Course, the instruction is geared toward training subspecialty doctors in critical lifesaving tasks they normally don't practice day to day. This is the first time the BAMC team has taken the training on the road to reach more medical providers.

"The biggest challenge the military has right now is the internal medicine subspecialty group, your gastrointestinal doctors, your allergy immunologists, that don't do these war-time critical procedures," said Army Maj. Tyson Sjulín, BAMC pulmonary/critical care doctor. "We are focusing on procedures to save the warfighter from point of injury until we can provide medical evacuation."

With 18 students from Peterson Air Force Base, the U.S. Air Force Academy, 4th Infantry Division and EACH, the BAMC team was able to provide hands-on training for 12 of 20 individual critical tasks aimed at field and brigade surgeons. These tasks included central venous catheters, mechanical ventilation, paracentesis, thoracentesis, intubation, chest tube placement, massive transfusion and ultrasound.

"The full trauma scenarios in which we combined all procedural and ventilator management skills were the highlight of the training," said Army Capt. David Sorenson, battalion surgeon, 704th Brigade Support Battalion, 2nd Infantry Brigade Combat Team, 4th Inf. Div. "It gave me confidence that I could manage a critical patient downrange, if

need be."

While many of the physicians who attended the training specialized in family medicine or internal medicine, they were eager to take advantage of joint training with some of BAMC's most knowledgeable specialty physicians.

"We are privileged to have this training at Fort Carson by leaders in military critical care medicine," Sorenson said. "Not only that, but also to have the simulation center that can support this training benefits our physicians immensely."

EACH recently invested in an on-site simulation lab for medical personnel to locally train to help the team stay current on their individual critical tasks. The BAMC team was able to use the newly available technology during their training.

"I think it's extremely important we focus on the education component and not just the validation component — you have to feel comfortable doing this procedure to save a life," Sjulín said. "You can watch a YouTube video or read a book, but if you need hands-on experience, the best way to do that is with experts in the field that can teach you."

At some medical treatment facilities, physicians may not have the quantity and or acuity of patients they will encounter downrange.

"These skills can perish," Sjulín said. "It's our job every year to come in and get these skills back up. That way, if we have to go to war tomorrow, they are ready to go downrange to take care of the most critically ill warfighter we have and save the individual's life."

Small nuances in technique are also important to performing critical tasks when it comes to stabilizing and treating the wounded. Sjulín and his team were open to sharing the micro skills of the procedures.

"You can read the book and the 15 steps to accomplish it, but we can give you three-four micro skills that will increase your success rate," Sjulín said.

Whether it was learning how to perform a bedside ultrasound or practicing intubation, the Soldiers and Airmen walked away with more comfort when it comes to providing critical care and gathering data within seconds to save a life.

"The training was extremely valuable, particularly as a refresher for skills that will be required of us in a deployed environment," Sorenson said.



JEANINE MEZEI

*Army Maj. Michal Sobieszczyk (center), Brooke Army Medical Center pulmonary/critical care doctor, demonstrates how to perform a cricothyrotomy Jan. 14 for doctors with 4th Infantry Division and the U.S. Air Force Academy at Evans Army Community Hospital's new medical simulation lab.*

# LACKLAND

## JBSA-Lackland receives repatriated Americans evacuating China

By Rachel Kersey

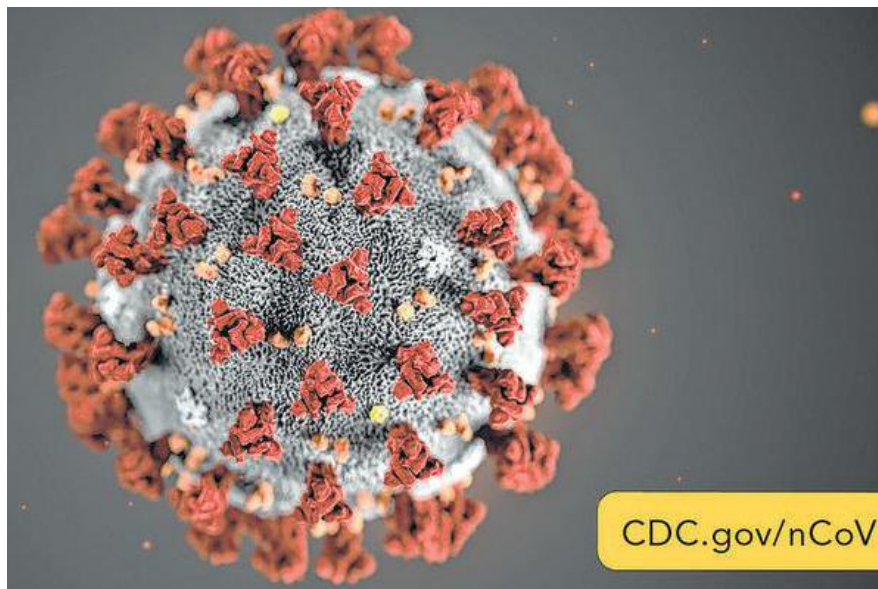
502ND AIR BASE WING  
PUBLIC AFFAIRS

Ninety one passengers traveling from China's Hubei province arrived at Joint Base San Antonio-Lackland Feb. 7. They evacuated China to avoid infection by the 2019 Novel Coronavirus, spreading from the city of Wuhan, the epicenter of the global epidemic.

A Federal Quarantine Order, issued Jan. 31 by the Centers for Disease Control and Prevention, or CDC, under the statutory authority of Alex Azar, Secretary of the U.S. Department of Health and Human Services, stipulates that the passengers will remain quarantined for a period of 14 days because it was judged to be in the best interest of the American citizens living in Wuhan to bring them home to the United States.

"This is in agreement with the CDC's mission to protect the health of Americans," said Capt. Jennifer McQuiston, Deputy Director of the Division of High Consequence Pathogens and Pathology at CDC headquarters in Atlanta, Ga.

It is important to highlight that passengers arriving from China have not exhibited any symptoms associated with the Novel Coronavirus, but in accordance with the federal order and in an abundance of caution, they will remain quarantined at the Gateway Villas for the duration of their stay.



COURTESY GRAPHIC

*One hundred forty-seven passengers traveling from China's Hubei province arrived at Joint Base San Antonio-Lackland Feb. 7. They evacuated China to avoid infection by the 2019 Novel Coronavirus, spreading from the city of Wuhan, the epicenter of the global epidemic.*

The perimeters will be fenced off and patrolled by U.S. Marshals. No JBSA-Lackland employees will be providing services, such as cleaning or food delivery. Instead, a civilian contractor with employees specially trained in the cleaning and servicing of biologically hazardous areas will attend to the passengers' needs.

The employees will be fitted in personal protective equipment, which could include respirators, gloves, masks and hospital gowns, among other things.

Understandably, the

JBSA-Lackland community, as well as the greater San Antonio community, has had some health and safety concerns about this effort and the risk for further contamination and spread of the virus.

"In the United States, there have not been any fatalities," McQuiston said. "The risk to Americans remains low."

In an effort to contain the virus and limit the number of cases, the passengers have undergone and will continue to undergo regular medical evaluations to check their temperatures and screen them

for other respiratory symptoms such as coughing, sneezing and shortness of breath.

Should any passengers present symptoms of the Novel Coronavirus, they will be dispatched to area hospitals for treatment and further observation.

After the quarantine period is complete, the passengers will return to their homes in-country, and the rooms and the premises of the Gateway Villas will be thoroughly cleaned by a contractor with the proper training.

"The best thing you can do is

**"The best thing you can do is get a flu shot. Practice normal hand hygiene, washing your hands frequently and covering your coughs and sneezes."**

**Capt. Jennifer McQuiston, Deputy Director of the Division of High Consequence Pathogens and Pathology at CDC headquarters in Atlanta, Ga**

get a flu shot," McQuiston stressed. "Practice normal hand hygiene, washing your hands frequently and covering your coughs and sneezes."

Coughs and sneezes should be blown into a tissue, preferably, or the upper sleeve of your shirt if no tissue is available, according to the CDC website at [https://www.cdc.gov/healthywater/hygiene/etiquette/coughing\\_sneezing.html](https://www.cdc.gov/healthywater/hygiene/etiquette/coughing_sneezing.html).





*Echo Company trainees learn in the classroom from Defense Language Institute English Language Center instructors throughout their time at Joint Base San Antonio -Lackland.*

COURTESY PHOTO

# Defense Language Institute beta tests new program

From 37th Training Wing  
Public Affairs

Nested in the corner of Joint Base San Antonio-Lackland lies the Defense Language Institute English Language Center. Identifiable by its kempt campus, DLIELC is home to more than 400 civilian and military employees whose mission is to teach English and immerse its international and domestic students into the American culture.

Although the foreign flags adorning the arms of international military students is commonplace, and expected, there is another large, prominent group that makes up a large number of the DLIELC student population: the United States Army Echo Company.

The recruits, or trainees, that come into Echo Company are permanent residents or U.S. citizens with backgrounds from a multitude of

countries.

Although currently living in the U.S., they usually come from niche communities of similar speaking people; therefore, their English proficiency is not to the level required for a career in the U.S. Army.

Echo Company provides a pathway for these recruits into the U.S. Army, by providing the English language education necessary to take and pass the English Comprehension Level Test, while preparing them for Basic Combat Training. Echo Company also provides the Army with diversity and critically needed linguists.

Echo Company trainees also have the unique experience of interacting with a multitude of individuals from varying countries around the world before officially joining the military. This could prove invaluable for the United States Security Cooperation mission as

they join the military and climb the ladder to higher ranking positions.

Command Sgt. Major Daniel Santiago-Alonso, sergeant major of the Blanchfield Army Community Hospital, was a graduate of DLIELC by way of Echo Company.

"I saw the Army as an opportunity to get a job, do something with my life, provide for my family and learn another language," he mentioned in an interview with the Main Street Clarksville newspaper. "My parent language was Spanish. They sent me to the Defense Language Institute in San Antonio for four months to learn English, all I did was take classes, and then I was able to go to basic training and AIT."

Prospects like Command Sgt. Major Santiago-Alonso are a demographic that the United States Air Force has not yet had the opportunity to tap into. The Air

Force hopes to change that in 2020.

In early 2020 the 37th Training Wing, commanded by Col. Jason Janaros, will beta test a similar program to the Army's Echo Company to give an even more diverse group of future Airman the opportunity to serve their country. While learning the rudimentary steps to becoming a full-fledged Air Force recruit, these students will be given the opportunity to polish their English abilities and international knowledge before moving on to Basic Military Training.

This will be a collaboration between Air Force Recruiting Services, DLIELC, and BMT to find the recruits, refine their English skills, and guide them into becoming members of the USAF.

For updates on the program, visit <https://www.facebook.com/DLIELCLACKLAND/> and [facebook.com/37thTrainingWing/](https://www.facebook.com/37thTrainingWing/).

## ALTITUDE CHAMBER TAKES YOUR BREATH AWAY

*Senior Airman Deaja Ellis, 559th Aerospace Medicine Squadron aerospace and operational physiology technician, lectures students on oxygen equipment components Jan. 28 at Joint Base San Antonio-Randolph. The 359th Aerospace Medicine Squadron's aerospace and operational physiology unit at JBAS-Randolph trains potential aviators about human performance in the air.*



TECH. SGT. KATHERINE SPESSA

## Air Force Optometry History in 2020: 'The Year of Optometry'

From 59th Medical Wing Public Affairs

Air Force Optometry came into existence around the same time the Air Force Medical Service stood up July 1, 1949, and has been caring for the vision of aviators and warfighters ever since.

Prior to that, even during World War II, enlisted hospital corpsmen without any formal training were providing limited vision care using crude equipment. Between 1950 and 1960, the Air Force saw great improvements in both the type and quality of equipment available for optometry services and commissioned optometrists were added to the Medical Service Corps.

In 1965, Air Force Optometry became part of the newly established Biomedical Sciences Corps and, by the late 1960s, Air Force Optometry achieved its end strength of 170 fully trained active duty doctors of optometry providing for the visual welfare of more than 900,000 active duty Airmen.

Today, the Air Force Optometry Team, an optometrist supported by highly trained ophthalmic technicians, applies extensive knowledge of unique Air Force operating environments to prescribe precision optical devices specifically designed to enhance performance, survivability and lethality of Airmen. The 142 optometrists and 236 ophthalmic

NOW YOU'RE SEEING



The Year Of  
Air Force Optometry 

COURTESY GRAPHIC

technicians in the Air Force provide care for 2.6 million eligible active duty, dependent, and retiree beneficiaries around the globe.

From its humble beginnings, Air Force Optometry has blazed a trail that has led to incredible

contributions in vision research, treatment and protection. Thanks to the tireless dedication to the team of eye care specialists, both past and present, they have been and will continue to be at the forefront of vision readiness. For 70 years, the Air Force Optometry team has stood on the forefront of visual and medical innovations.

"As we begin calendar year 2020, 'The Year of Optometry,' we hope that you will make your eye health and vision care a priority and ensure that your vision is 20/20 (or better!) in 2020," said Lt. Col. Kerry Phelan, JSBA-Lackland Optometry Flight commander. "An eye exam is the simplest step you can take to protect your vision and to make sure that you are always 'Fit to Fight.'"

For active duty members who want to schedule a comprehensive eye exam with their military optometry clinic, call the care line at 210-916-9900. Dependents and retirees are eligible to be seen at the optometry clinic at JBAS-Lackland without a referral.

Additionally, dependents of active duty who are enrolled in TRICARE Prime can also contact their local civilian optometry clinic that accepts TRICARE to have a comprehensive exam each year. For retirees and their dependents, one comprehensive eye exam will be covered every two years at a civilian clinic.



# New AFIMSC tool streamlines support agreement program

By Shannon Carabajal

AIR FORCE INSTALLATION AND MISSION SUPPORT CENTER  
PUBLIC AFFAIRS

A new tool developed by the Air Force Installation and Mission Support Center Installation Support Directorate consolidates everything base-level support agreement managers need to do their jobs.

Air Force bases and communities rely on support agreements to provide, receive or share installation support services. The agreements benefit everyone, often delivering critical services not available anywhere else, according to Donna Johnson, AFIMSC support agreement manager.

The Support Agreements Management Tool, or SAM-T, gives base-level support agreement managers the ability to track, store and manage all support agreements, memorandum of agreements and memorandums of understanding in one place.

"It was developed to standardize the program, making it more effective and efficient," Johnson said.

Before the tool, base SAMs managed support agreements manually, from building new agreements from scratch and reviewing existing agreements to providing regular status updates to AFIMSC via a spreadsheet.

With more than 22 years of experience as a base-level support agreement manager herself, Johnson knew the challenges of juggling multiple



SHANNON CARABAJAL

*Donna Johnson, AFIMSC support agreement manager, reviews documents loaded into the Support Agreements Management Tool, or SAM-T.*

sets of information.

Starting in the spring of 2016, she set out to automate the program and better serve her customers at more than 80 wings across the Air Force.

"I knew what I envisioned the program to do, so I worked with the contractor who developed and created SAM-T," she said.

Launched to the field last fall, Johnson expects the tool will save SAMs significant man-hours from cradle to grave in generating a support agreement.

"Instead of manually filling out various reports, the overview is right there at a glance, including the total number manpower supported through support agreements, reimbursable amounts and total agreements enterprise wide," she said.

SAM-T also includes a single view of all the base's current agreements so managers easily can track those approaching annual/triennial review or expiration.

Kelly Duncan, 31st Space Wing support agreement manager at Peterson Air Force Base, Colo., was one of the first to begin using the tool.

"Once I began using the program, I was able to see the benefits and Air Force-wide potential," Duncan said.

The tool also provides a checklist of documents managers need to prepare a new agreement and ensure compliance with regulations. The standardized process is making things easier, especially for new managers, Duncan said.

AFIMSC already is planning future updates for the tool that will offer more features and functionality while incorporating initial feedback from the field.

For more information about SAM-T, call 210-395-8224.

## Weight loss: there is no 'magic pill'

From 59th Medical Wing  
Public Affairs

Fat loss solutions abound on social media, in the news, on your favorite celebrity's lifestyle website and sifting through the abundance of "tea-toxes" and supplement sales pitches can make it difficult to determine what will work best.

According to 1st Lt. Kathryn Welch, 59th Diagnostics and Therapeutics Squadron, at Joint Base San Antonio-Lackland, it's best to steer clear of almost all of them.

"Find a weight loss management program that works for the individual specifically tailored by a registered dietitian," she said. "Sustained weight loss is difficult; it is not as simple as picking the latest fad diet to

drop pounds quickly to pass a physical fitness test."

Welch also foot-stomped that weight loss shouldn't be all about passing a physical fitness test, it should be about overall health.

How obesity occurs is simple enough: the amount of calories consumed far exceed the calories expended in activity — eating more than exercising. The additional medical effects, or comorbidities, of obesity are substantial and anything but simple. These effects can include Type 2 diabetes, hypertension, stroke, reproductive problems and a multitude more.

"The scale isn't the only indication of loss; we have to look at what is happening inside," Welch said. "Sometimes, those

**"The scale isn't the only indication of loss, we have to look at what is happening inside. Sometimes, those comorbidities are the first sign of loss — the patient starts feeling better. A three to five percent weight loss will see substantial health improvements."**

1st Lt. Kathryn Welch, 59th Diagnostics and Therapeutics Squadron

comorbidities are the first sign of loss — the patient starts feeling better. A 3-5 percent weight loss will see substantial health improvements."

Maintaining a healthy and balanced nutrition plan while exercising for at least 150 to 300 minutes per week is key. Preventing obesity and weight gain is much easier than treating it, and the comorbidities associated with it, so military members should focus on sustaining a healthy lifestyle.

For those who need some extra help, Wilford Hall Ambulatory Surgical Center and Brooke Army Medical Center have many programs

available to beneficiaries who can self-refer or be referred by their physicians.

The Nutritional Medicine and Bariatric Surgery Clinics and the Diabetes Center of Excellence offer nutrition briefings and classes to aid in healthy weight management. Since weight gain has such a tremendous effect on overall health, all clinics work together to ensure each patient is getting the education and support they need through physical therapy, cardio rehabilitation and more.

"Sustained weight loss is difficult, and there is no 'easy' button for losing excess weight and keeping it off," Welch said. "However, with the help of a

licensed dietitian, we can find sustainable lifestyle choices that will work for you for the rest of your life by adjusting the foods you already enjoy. Adherence to a diet is improved when the patient's food preferences are modified to fit their needs and do not eliminate foods unnecessarily."

In extreme cases that do not respond to diet and lifestyle changes, the Nutritional Medicine Clinic may prescribe medications or refer to the Bariatric Surgery Clinic at Brooke Army Medical Center at JBSA-Fort Sam Houston for further treatment.

For more information, call 210-292-7578, or 210-916-9029.

# Distracted Walking; Heads up, Phones Down

By Terry L. Todd

502ND AIR BASE WING  
OCCUPATIONAL SAFETY

Unforgiving lessons are learned from the deaths and pointless injuries that occur due to the failure of individuals to exercise sound personal risk management.

The Joint Base San Antonio Safety Office staff has many opportunities to observe people's behavior. One thing they have noticed is an increase of people — civilian, military and dependents alike — spending a large amount of time looking down.

No, they are not looking at their feet to see if their shoes are untied; they are looking at their cell phones. These individuals are participating in a very dangerous habit ... **TEXTING WHILE WALKING.**

Distracted walking, or texting while walking, injuries

are on the rise. It has become such a big problem that Injury Facts® 2015, the statistical report on unintentional deaths and injuries published by the National Safety Council, included statistics on cell phone distracted walking for the first time. You may be surprised by their findings.

Distracted walking incidents are on the rise, and everyone with a cell phone is at risk. We are losing focus on our surroundings and putting our safety at risk. The solution: Stop using phones while walking, and not just in crosswalks and intersections. Over half of distracted walking injuries occur in our own homes, proving that we need to stay aware of our surroundings whether indoors and out.

Unintentional injuries are the fourth leading cause of death in the U.S. Just take the time to look around your unit, the installation, even your

home, and almost every individual you see has some form of cellular communications device. That makes this issue even more serious.

Fifty-two percent of distracted walking incidents involving cell phones happen at home — not near roadways as many might believe, according to a study in the Journal of Safety Research. Fifty-four percent are people ages 40 or younger, while 21 percent of those injured were 71 and older.

Talking on the phone accounted for 62 percent of injuries. The most common of which were dislocations or fractures, sprains or strains and concussions. Nearly 80 percent of the injuries were due to a fall.

The increase in cell phone distracted walking injuries parallel the eight-fold increase in cell phone use in the last 15

years.

It is just as important to walk cell phone free, as it is to drive using hands-free devices. Pedestrians and drivers using cell phones are both “impaired and too mentally distracted” to focus on their surroundings, according to the National Safety Council.

For pedestrians, this distraction can cause them to trip, cross roads unsafely or walk into stationary objects such as street signs, doors, furniture, walls or even parked cars.

Here are a few tips from NHTSA and NSC for children and adults of all ages:

- ▶▶ Look left, right and left again before crossing the street; looking left a second time is necessary because a car can cover a lot of distance in a short amount of time
- ▶▶ Make eye contact with drivers of oncoming vehicles to make sure they see you

- ▶▶ Be aware of drivers even when you're in a crosswalk; vehicles have blind spots
- ▶▶ Don't wear headphones while walking

- ▶▶ Never use a cell phone or other electronic device while walking
- ▶▶ If your view is blocked, move to a place where you can see oncoming traffic

- ▶▶ Never rely on a car to stop
- ▶▶ Children younger than 10 should cross the street with an adult
- ▶▶ Only cross at designated crosswalks

- ▶▶ Wear bright and/or reflective clothing
- ▶▶ Walk in groups

To help keep you safe as you and your family walk across the Joint Base San Antonio commissary, Exchange, work center or roadway parking lots, remember distracted walking (texting while walking) is dangerous walking. Common sense says “Just Don't Do It.”



# RANDOLPH

## Total Force Integration team assesses, studies JBSA-Randolph successes, challenges

By Sabrina Fine

502ND AIR BASE WING  
PUBLIC AFFAIRS

Air Force active-duty, Reserve and Air National Guard members all wear the same uniform, salute the same flag and support the same mission. Improving this collaboration is the Total Force Integration team.

TFI officials visited Joint Base San Antonio-Randolph to learn from the successes and improve the challenges of JBSA-Randolph Airmen Feb. 4-6.

“We’re here at Randolph to understand the unique organization with training units, the Reserve and the active-duty flying training squadrons, and how they interact and produce combat-ready pilots for the Air Force in a TFI structure,” said Brig. Gen. Thomas Grabowski, special assistant to the director, Air National Guard for Total Force Integration.

The TFI directorate, under Headquarters Air Force, was congressionally mandated in 2014 to integrate active duty, Reserve and Air National Guard and assess association effectiveness, conduct analysis and better connect the Air Force.

“We want to improve total force integration through our lines of effort by driving the policy and resourcing changes necessary to really break those barriers to integration,” said Col. Robin Bowman, TFI director, in her opening statement to 12th Flying Training Wing.

Through focus groups, data collection and meetings with



SABRINA FINE

Col. Matthew Domsalla (center right), 12th Flying Training Wing vice commander, listens during a Total Force Integration briefing Feb. 4 at Joint Base San Antonio-Randolph.

leadership, TFI collects information on total force associations. Associations are agreements between two or more organizations that share resources and perform a common mission.

“We are truly here as facilitators, to explore and

gather the data that works and doesn’t work so that that information can be shared abroad,” said Brig. Gen. Scheid Hodges, special assistant to commander, Air Force Reserve Command for Total Force Integration.

Since JBSA-Randolph plays a

critical role in training and development of Airmen, which resonates through their whole career, assessing how Randolph functions as an association is valuable to TFI.

“Right now, JBSA-Randolph is trailblazing for what total force is going to look like in the

future,” Grabowski said. “We’re excited about being here for the next couple of days to learn from total force partners and figure out what we can do to bottle the magic that happens here at Randolph, and replicate that in other areas of the Air Force portfolio.”

# AETC, UTSA partner to refine pilot candidate selection

By Dan Hawkins

AIR EDUCATION AND TRAINING  
COMMAND PUBLIC AFFAIRS

More effectively targeting pilot candidates may help the Air Force solve its pilot manning shortage, and collaborating with the education sector to do so has proven beneficial for both partners.

In an effort to gain more insight into what attributes could best predict the success of pilot training candidates, Air Education and Training Command turned to the data analytics program at the University of Texas-San Antonio to help them refine and validate the Pilot Candidate Selection Method as part of an Educational Partnership Agreement.

"We use the PCSM right now to help us determine who gets an undergraduate pilot training slot," said Lt. Col. Steven Dillenburger, AETC's Studies and Analysis Squadron commander. "The intent in working with UTSA in this partnership was to help us gather the data to validate if the background data the PCSM tool indicates is a valid measuring stick to go by or perhaps needs

updating."

To get things started, AETC developed a problem statement and gathered raw data to provide to the UTSA team so they could begin building models that better predict a candidate's PSCM score, their graduation or attrition rate and class ranking indicators for excellent performing students, Dillenburger said.

"This is a problem where we have a pretty good data set to begin with," Dillenburger said. "We, with help from the Air Force Personnel Center, gathered a great deal of information on prospective pilot candidates before they were selected for undergraduate pilot training. We combined that pre-selection data with their performance data from their time in undergraduate pilot training to build the data sets."

Starting in June 2019 and using approximately 10,000 sets of individual raw data, including both background data like students' Air Force Officer Qualifying Test or college GPA, and their previous pilot experience, such as flying hours or instrument ratings, the data analytics team from UTSA input the data into an artificial

neural network and analyzed the variations.

"UTSA really helped us to cleanse that raw data and make it work in their algorithm," Dillenburger said. "What the study found was in line with what we value already from the PCSM, in that the AFOQT scores, number of previous flight hours and any potential previous aeronautical ratings most positively relate to a successful student."

With studies like those on anthropometrics (height standards) and others, the Air Force continues to look at every aspect of the pilot candidate selection process.

"This study was really valuable because we are looking hard right now at rated diversity and the PCSM really values flight hours, which can be difficult to obtain for potential candidates depending on their socio-economic background," Dillenburger said. "We want to make sure we aren't eliminating potential candidates based on (an inconsequential) piece of data."

Another interesting takeaway from the UTSA study was the finding that a student's GPA in college didn't have a positive correlation to whether a student

graduated from pilot training or not, Dillenburger said, while noting many factors can affect that particular finding.

The results from the study, which was completed in late October 2019, will be briefed to representatives from the rated diversity initiative working group who are looking to identify and mitigate barriers to entry into rated careers. The data will help determine actions items moving forward, Dillenburger said.

The partnership with UTSA was beneficial, not just in terms of the data that was collected, but in growing the Air Force's ability to excel in the data science field.

"UTSA really has grown a world-class, state-of-the-art, data analytics program, and we're thankful for their help," Dillenburger said. "Getting the chance to see what software and processes they are using has been extremely helpful to our Air Force data analytics specialists as we continue to grow and evolve our own organic capability."

For UTSA, centered in the heart of "Military City, U.S.A." and surrounded by the military, the chance to help find solutions that could affect the

Air Force's ability to execute their role in the National Defense Strategy was one way to build bonds.

"UTSA strongly values the relationship between the Air Force and the university, and this project is one of the ways that we can strengthen that relationship," said Dr. Max Kilger from the UTSA data analytics program. "Developing a collaborative approach to solving issues that relate to our national security benefits our country and at the same time provides an opportunity for faculty and students to work collaboratively with the Air Force."

Additionally, the opportunity to work with the Air Force was helpful in terms of the educational experience it provided to UTSA students.

"Real-world problems are an important part of the training for our graduate students," said Dr. Paul Rad, UTSA data analytics professor and one of the leads for the project. "They get exposure to real-world data, which is often challenging and complex, and under faculty supervision apply what they have learned to solve interesting and important challenges."

## 12TH FLYING TRAINING WING NCO CHOSEN AS 'HIDDEN HERO'

Tech. Sgt. Derius Jackson (center), 12th Training Squadron flight chief, was recognized as the "Hidden Hero" for January by the Schertz, Cibola, Selma, Chamber of Commerce Military Affairs Committee Jan. 21 at the Schertz monthly Chamber luncheon. Jackson has volunteered his time with the Habitat for Humanity and the San Antonio Food Bank helping provide more than 2,000 meals for children in the community. In addition to his volunteering Jackson also served as the president of the Randolph 5/6 organization.



COURTESY PHOTO



# Strong foundation early in life contributes to heart disease prevention

By Robert Goetz  
502ND AIR BASE WING  
PUBLIC AFFAIRS

Heart disease is most often associated with older adults, but younger people are not immune from its devastating effects.

High rates of obesity and high blood pressure are placing people ages 35-64 at risk for heart disease earlier in life, according to the Centers for Disease Control and Prevention.

"We found that young men returning from the Vietnam War had a significant amount of plaque in their arteries," said Dr. (Maj.) Wyatt Palmer, an Army physician who is the acting chief of clinical medicine at the Joint Base San Antonio-Randolph Family Health Clinic. "It's an ongoing process that goes on throughout your life, so it's important for people to build a strong foundation when they're young."

Palmer's advice about building a strong foundation in young age resonates as one of the messages for American Heart Month, in February, an observance that focuses on the risk factors for heart disease — especially high blood pressure, high cholesterol and smoking — and how to mitigate those risks.

Palmer singled out smoking as the No. 1 behavioral risk factor for heart disease.

"Smoking is bad, but it's also the greatest modifiable factor in heart disease prevention," he said. "There are a lot of resources available in the military to help people break the habit."

Smoking cessation pathways include medication to eliminate physical dependency and behavioral health counseling to resist the smoking habit, Palmer said.

Smoking is harmful because the chemicals in tobacco smoke harm blood cells and damage

February 2020 is National

## HEART HEALTH MONTH

Cardiovascular disease accounted for 840,678 deaths in the U.S. in 2016. That's approximately 1 in every 3 deaths. Make heart healthy choices this year.

[hhlbi.nih.gov](http://hhlbi.nih.gov)



COURTESY GRAPHIC

the function of the heart and the structure and function of blood vessels, increasing a person's risk of atherosclerosis, according to the National Heart, Lung and Blood Institute.

Atherosclerosis is a disease in which plaque builds up in the arteries, narrowing them over time and limiting the flow of oxygen-rich blood to organs and other parts of the body.

"Heart disease is essentially a disease of inflammation," Palmer said. "Smoking is very inflammatory; it will compound any damage you're doing."

Smoking is just one of several risk factors for high blood pressure, which is also known as hypertension. Other factors are high salt intake or sensitivity, obesity, physical inactivity, too much alcohol consumption, stress, age and genetics.

Blood pressure, the force of blood against the walls of arteries, is measured in millimeters of mercury. The first number in a blood pressure

reading is the systolic pressure, the pressure in the arteries when the heart beats, while the second number is the diastolic pressure, the pressure in the arteries between beats.

"A normal blood pressure is 120/70," Palmer said. "The blood pressure reading 130/90, which used to be called prehypertension, is now called stage-1 hypertension to increase the focus on prevention. Medication is typically started when the systolic pressure is at 140."

High cholesterol is another significant risk factor for heart disease because of the part it plays in atherosclerosis.

Cholesterol is a waxy substance in the body that builds healthy cells, but high levels of it can lead to fatty deposits in the arteries, restricting blood flow. If those deposits break, they can form a clot that causes a heart attack and possibly death.

Causes of high cholesterol include diets high in saturated

fats, lack of exercise and physical activity, stress, certain medications, genetics, obesity, smoking and other medical conditions such as diabetes and high blood pressure.

Although genetics can play a role in plaque formation, it can also have the opposite effect, Palmer said.

"Some people are more genetically prone to plaque formation, while some people are blessed," he said. "They don't develop these blockages because they're not genetically prone."

The good news is that there are a number of ways people can improve their heart health, Palmer said.

A variety of medications can restore blood pressure and cholesterol to normal levels, but diet and exercise are lifestyle changes that can make a big difference, part of the foundation that should start early in life.

"The role of diet is huge," Palmer said. "Eat more fruits

**"The role of diet is huge. Eat more fruits and vegetables, increase your fiber intake and eat more foods that contain omega fatty acids, such as fish. Avoid fried foods and foods that are high in trans-fats and saturated fat. You should also eat smaller portions. Large portions are a common American problem; our excess allows us to indulge."**

Dr. (Maj.) Wyatt Palmer, Army physician and acting chief of clinical medicine at the Joint Base San Antonio-Randolph Family Health Clinic

and vegetables, increase your fiber intake and eat more foods that contain omega fatty acids, such as fish. Avoid fried foods and foods that are high in trans-fats and saturated fat.

"You should also eat smaller portions," he added. "Large portions are a common American problem; our excess allows us to indulge."

Exercise is another tool in combating heart disease.

"It's important to get 30 minutes of cardiovascular exercise three to five days a week," Palmer said. "The heart is a muscle; the more you train it, the better it responds. We need to strengthen the heart like we strengthen other muscles."