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KEESLER MOULAGE TEAM PAINTS EXERCISES WITH REALISM

By Steve Pivnick
81st Medical Group Public Affairs

KEESLER AIR FORCE BASE, Miss. — An explosion causes multiple injuries, some of them horrific. First responders arrive and begin caring for the victims.

While it resembles a scene from the evening news, this and similar events are scheduled training scenarios which include some incredibly realistic wounds. A unique team of Keesler moulage artists creates the “victims” necessary to test first responders’ capabilities.

Tech. Sgt. Caroline Bunce, 81st Dental Squadron, leads the seven-person team- two ‘official’ members, two augmentees and three volunteers who help the team when able.

The term “moulage” is used to describe the process.

Bunce, who has been involved with the “art” for more than a year, explained, “Moulage is French for casting or molding. It is the art of applying mock injuries to train emergency response teams and other medical and military personnel. Moulage may be as simple as applying pre-made rubber or latex ‘wounds’ to a healthy ‘patient’s’ limbs, chest, head, etc., or as complex as using intricate makeup and theatre techniques to provide elements of realism, such as blood, vomit, open fractures, etc., to the training simulation. The practice dates to at least the Renaissance, when wax figures were used for this purpose.”

Bunce said, although the moulage team works for the 81st Training Wing, they primarily support the 81st Medical Group’s exercise evaluation team during medical training exercise.

The medical group had sent Bunce to a three-day course in Washington, D.C., for training in moulage techniques.

“I learned the basics of casualty-coloring and how to use various moulage materials. The rest is self-taught through trial and error. It helps to have a very creative imagination. I am creating a ‘how-to’ binder for future moulage team leaders.”

Her desire to add realism to training led her to become a medical-moulage specialist, Bunce explained. “I became involved because, as an advanced cardiovascular life support instructor, I saw a need for first responders and our health-care professionals to have medical simulation that mimics real-life patient care. Medical moulage is the experience-based training tool for our emergency response teams and other medical and military personnel. It provides them a visual learning tool so they can respond in a training environment without the real lifesaving pressures.

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(U.S. Army photo by Sgt. Kimberly Hackbarth, 4th SBCT, 2nd ID Public Affairs Office)

Sgt. Caleb Olson, an infantryman with Headquarters and Headquarters Company, 4th Stryker Brigade Combat Team, 2nd Infantry Division, holds his girlfriend, Amanda Newport, during a welcome home ceremony July 18 at Soldiers Field House on Joint Base Lewis-McChord, Wash. Two flights returned from Afghanistan carrying a total of approximately 500 soldiers from 4th SBCT, 2nd ID.

Two flights bring home nearly 500 4th SBCT Soldiers from Afghanistan

Story by Sgt. Kimberly Hackbarth

JOINT BASE LEWIS-MCCHORD, Wash. — Amanda Newport stood among cheering military families as a group of soldiers marched into Soldiers Field House. Once she heard the word “released,” Newport navigated her way through the sea of reunions to find her boyfriend, Sgt. Caleb Olson.

Olson, an infantryman with Headquarters and Headquarters Company, 4th Stryker Brigade Combat Team, 2nd Infantry Division, was on one of two flights carrying a total of approximately 500 soldiers

of 4th SBCT that landed July 18 at Joint Base Lewis-McChord, Wash.

The soldiers deployed to southern Kandahar, Afghanistan, for nine months in support of Operation Enduring Freedom where they advised and assisted the Afghan National Security Forces.

Newport flew from California to be there for the couple’s first redeployment ceremony together, she said.

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Donating blood is a constant need

By Airman 1st Class Stephan Coleman
81st Training Wing Public Affairs

KEESLER AIR FORCE BASE, Miss. — Keesler is one of only three Air Force bases in the continental U. S. that offer a blood donation center on station. Keesler's donor center is part of the Armed Services Blood Program which shares the joint mission of collecting, processing and distributing thousands of blood products for military medical centers at home and in-theater overseas.

There is no substitute for human blood and blood products cannot be stored indefinitely, so there is a constant need for donations.

"Donating takes different amounts of time depending on the type of donation," said Lisa Lynn, 81st Diagnostics and Therapeutics Squadron blood recruiter. "Volunteers can donate blood, plasma or platelets. We take whole blood at the blood center and process it. Plasma and platelets are taken at the hospital."

Multiple units of blood may be needed for a single trauma victim. Platelets may be required daily by leukemia patients who do not produce enough for themselves, said Lynn.

Red blood cells spread oxygen throughout the body, while platelets are used for clotting. Plasma is the liquid portion of blood that transports the rest of the blood's cells. Different donating options yield different amounts of each product.

"Donating whole blood gives one unit of red blood cells and one unit of plasma,



The Keesler blood donor center personnel work together Aug. 6, 2013, at Keesler Air Force Base, Miss., to process the units collecting from a blood drive that took place in Pensacola, Fl. on Aug. 5. Keesler is one of only three Air Force bases in the continental U. S. that offers a blood donation center on station.

U.S. Air Force photo by Kemberly Groue

but donating plasma by itself yields three units of plasma," said Rose Weatherly, 81st MDTs registered nurse apheresis supervisor. "In turn, donating platelets

gives about six times as many usable platelets as donating whole blood."

Blood types must be matched between the donor and the recipient to ensure a safe transfusion.

"There are four different blood groups: A, B, AB, and O," said Lynn. "A person's blood group is distinguished by tiny antigens which cover the blood cell surface. Group A blood has A antigens, group B has B, group AB blood has both, and group O blood has neither A nor B antigens."

In addition to A and B antigens, there is an Rh antigen which determines a person's blood type. Individuals who have this antigen are known as Rh positive and individuals without it are known as Rh negative.

The combination of an individual's blood group and the presence or absence of the Rh antigen determines an individual's blood type.

"Donors who have Type AB meet a greater need if they donate plasma -- their red cells cannot go to everyone, only their plasma can," said Weatherly. "And the O- blood donor's red cells are needed because those can be given to anyone."

Blood products have various expiration dates, so donations of all types are always needed at the hospital and the blood donor center.

"Red blood cells are good for 42 days after collection," said Weatherly. "Platelets have an even shorter shelf life--they must be used within five days of collection."

During platelet donation, the donor's

blood is processed through an apheresis machine that draws blood from one arm, extracts the platelets from the blood, and then returns all remaining blood components to the donor.

Whether a person donates whole blood, plasma or platelets, there are certain restrictions to keep donated blood healthy.

"To donate, you must be at least 17 years old, have been feeling well for at least three days, be well hydrated, and have eaten something prior to donating," said Lynn. "Tattoos, acupuncture, foreign travel and some immunizations can defer volunteers from donating for up to 12 months."

The best dates for donation are at the beginning of the week so there is time to process the blood, said Lynn.

For more information, call 228-376-6100 or 228-376-4414, or visit www.militaryblood.dod.mil.

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Polish officials visit Polish, Illinois Army National Guard Soldiers in Afghanistan

By Staff Sgt. Bryan Spreitzer,
Task Force White Eagle Public
Affairs Liaison

SPRINGFIELD, IL — Three top Polish officials visited Illinois Army National Guard and Polish Land Forces Soldiers of Task Force White Eagle in Ghazni, Afghanistan Aug. 1.

Tomasz Siemoniak, the Polish Minister of National Defense, Lt. Gen. Mieczyslaw Gocul, the Chief of General Staff for Polish Armed Forces and Maj. Gen. Marek Tomaszycski commander of Polish Operations Command, visited unit commanders and Soldiers while receiving updates on the status of operations and the progress of security development and retrograde planning in Ghazni.

(BEST) A11, in Springfield Ill., who serve as members of the Polish Military Contingency, Task Force White Eagle were there.

“It was an amazing honor to stand in formation with my Polish brothers on such a historical and important day,” said Maj. Darren Horton of Springfield, Ill., deputy engineering and retrograde operations officer with Task Force White Eagle. “It was even more awe inspiring to realize that we were meeting the equivalents of our Secretary of Defense, Chairman of the Joint Chiefs of Staff and the combined equivalent of our combatant commanders.”

The Illinois National Guard has co-deployed with Polish forces to Iraq and Afghanistan for the past decade.



Illinois National Guard Soldiers stand in formation with their Polish brothers in arms as Tomasz Siemoniak, Poland's Minister of National Defense addresses Soldiers of Task Force White Eagle during a ceremony on the Polish helipad on Forward Operating Base Ghazni Aug. 1.

His visit marked the 69th anniversary of the Warsaw Uprising, but there was something different in the formation; 16 Illinois National Guard Soldiers with the Bilateral Embedded Staff Team

“Illinois’ partnership is so strong with Poland that there has not been one day in the last 10 years, when Poland has been in combat that an Illinois National Guardsman has not been by their side,”



The Illinois Bilateral Embedded Staff Team (BEST) A11 stand with Poland's Minister of National Defense, Tomasz Siemoniak after Col. Christopher Lawson, BEST A11 Commander and Task Force White Eagle Deputy U.S. Commander, presented the minister with a gift to commemorate the 20 year anniversary of the State Partnership Program. Siemoniak visited Ghazni to receive updates on operations.



U.S. Army National Guard photos by Staff Sgt. Bryan Spreitzer

Tomasz Siemoniak, Poland's Minister of National Defense, Brig. Gen. Marek Sokolowski, Commander, Task Force White Eagle, and Sgt. Maj. Lester Edwards, Task Force White Eagle senior enlisted adviser, walk to the headquarters area from the Ghazni helicopter landing zone Aug. 1. The minister visited on the 69th anniversary of the Warsaw Uprising to congratulate the task force on a job well done and to receive briefs on current operations.

said Sgt. 1st Class Ellie Warren of Chicago, Ill., with BEST A11.

The Illinois National Guard entered the partnership in 1993 as a part of the National Guard Bureau and European Command State Partnership Program and it has been going strong ever since.

Polish Land Forces Brig. Gen. Marek Sokolowski, Commander of Task Force

White Eagle said, “These are my Illinois Soldiers and I have a great team. We have trained together for over a year and I am not sure what I will do without them at the end of the mission. They have become family.”

The team from Illinois was the first group of non-Polish servicemembers to be awarded the 25th Air Cavalry Brigade distinguished unit insignia and welcomed as true members of the unit.

“Poland is a key allied nation that can interlock those countries seeking independence with those that are tenured democracies in the 21st century,” said Illinois Army National Guard Col. Christopher Lawson of Springfield, Deputy U.S. Commander of Task Force White Eagle. “They (Poland) have fresh experiences, understand the challenges of forging a new democracy, and are approachable from countries with democratic interests.”

Lawson said it is their approachability that makes Poland unique; a former communist-oppressed country that achieved independence and economic prosperity in less than 20 years.

“Poland forged a democracy without a civil war and created the conditions for prosperity in less than two decades,” said Lawson. “Their insight and assistance in Afghanistan has been critical to our success in Ghazni Province.”

Veteran's Village of San Diego Stand Down 2013



Naval Medical Center San Diego and Navy Medicine West Command Master Chief Yenhung Duberek shares a laugh with Hospital Corpsman 2nd Class Lorenzo Lott, assigned to Naval Hospital Camp Pendleton (right), during the Veteran's Village of San Diego Stand Down 2013.



Retired Navy dentist Rear Adm. Ed Reidy, former chief of the Navy's Reserve Dental Corps, performs dental work on a patient during the Veteran's Village of San Diego Stand Down 2013.



(U.S. Navy photos by Mass Communication Specialist Seaman Pyoung K. Yi/Released) Rear Adm. C. Forrest Faison III, commander, Naval Medical Center San Diego and Navy Medicine West presents a command coin to Hospitalman Julian Gordon, assigned to Naval Hospital Camp Pendleton (NHCP) during the Veteran's Village of San Diego Stand Down 2013. Gordon received the command coin for coordinating more than 120 Navy volunteers from NHCP for the three-day event. Stand Down is an annual three-day event where an estimated one thousand of San Diego's homeless veterans can receive a variety of free services, including help finding employment, substance abuse counseling, health care, and legal assistance.



Rear Adm. C. Forrest Faison III, commander, Naval Medical Center San Diego and Navy Medicine West, speaks to Rosemarie M. Johnson, medical community liaison for the San Diego County Medical Society Foundation, during the Veteran's Village of San Diego Stand Down 2013.



Rear Adm. C. Forrest Faison III, commander, Naval Medical Center San Diego and Navy Medicine West, shakes hands with David Adams, Vietnam veteran and former Army specialist, during the Veteran's Village of San Diego Stand Down 2013.



Above: Jim Dostal, a Coe College football coach in Cedar Rapids Iowa which is in coalition with Navy Recruiting District (NRD) Minneapolis, learns about orthopedic surgical practices from Shawn Meertens, a training assistant at Naval Medical Center San Diego's (NMCSD) Bioskills Training Center. The purpose of the visit was to learn about career options available in the Navy and Navy Medicine.

Right: Navy Recruiting District (NRD) Ohio and Minneapolis education and Navy professionals learn about orthopedic surgical practices from Shawn Meertens, a training assistant at Naval Medical Center San Diego's (NMCSD) Bioskills Training Center.



(U.S. Navy photos by Mass Communication Specialist Sean P. Lenahan/Released)

★ Moulage

Continued from page 1

“Emergency situations and conditions are never the same and, with the immense training platform Kessler Medical Center has in educating our military health-care providers, I knew this was a perfect opportunity to get involved. Our first responders and health-care professionals all have had classroom and textbook training but, if our moulage team can let them hear, feel, see and smell an event like it's the real thing, we have done our job. Quick reaction time can make the difference between life and death; the mental connection between the injury simulation experience and a real-life encounter has been proven to be a pivotal component in accurate medical intervention.”

The team provides moulage patients for any exercise requiring injured victims, including those adversely affected by biological or chemical substances.

Describing the process, Bunce observed, “Depending on the exercise scenario and number of casualties needing moulage, preparation can take anywhere from a couple of days to three weeks. I complete the most time-consuming element, creating injury cards to match the scenario, readiness team being evaluated and, if we are doing training involving a chemical substance, the injuries, signs and symptoms associated with that substance.

“Once I create the cards, I make the needed prosthetic in advance. Prosthetics- making can take days because the materials used must be applied in layers and drying and setting time sometimes can take days. This allows us to moulage a large number of ‘victims’ in a relatively short amount of time.”

Commenting on the team's value during exercises, 81st Training Wing Exercise Chief Thane Halsey said, “The team's actions help enhance exercise situations by providing a realistic appearance for first responders.”

In addition to 81st TRW and Medical Group exercises, Keesler's moulage team has routinely supported the 85th Engineering Installation Squadron's Ability To Survive and Operate and Self-Aid Buddy Care training, the medical center's Advanced Trauma Life Support courses, civilian field-training exercise



(U.S. Air Force photo by Tech. Sgt. Ryan Labadens)

Aeromedical Staging Squadron, May 4, 2013, Keesler Air Force Base, Miss. Bunce volunteers as part of the 403rd Wing's moulage team, which applies mock injuries for the purpose of training wing members to respond to medical emergencies. Todd acted as a victim in a mass casualty exercise during the 403rd Wing May unit training assembly. The exercise was part of the wing's operational readiness exercise that took place May 3-4. The ORE tested the wing's ability to mobilize and operate in a deployed environment.

“Operation Alliance” at the VA Gulf Coast Veterans Health Care System Biloxi campus and Keesler Family Advocacy Program domestic violence social experiments as well as the 403rd Wing's May operational readiness exercise.

Current team members include Bunce and Tech. Sgt. David Valencia, 81st DS. Augmentees are Staff Sgts. Brandon Otwell, 81st MDG; and Ashly Garcia,

81st DS. Three volunteers assist when able: Staff Sgt. Chique Castleberry and Regina Parker, 81st DS; and Dawn Hitchings, 81st MDG.

Bunce said the team can always use members. Anyone interested in joining may contact Halsey at 377-4050. However, members of the 81st MDG should contact Staff Sgt. Hana Webb in Medical Readiness, 376-3278.

Tricare cuts will hurt at-risk military children, lawmakers say

By Jennifer Hlad
Stars and Stripes

SAN DIEGO, Calif. — New rules for Tricare will limit the ability of thousands of military children with developmental disabilities to get the therapy and care they need, two U.S. senators and an advocacy group say.

“The apparent lack of understanding of the needs of children with developmental disability, including autism, when drafting the recent Tricare policy changes is astounding,” Sens. Kirsten Gillibrand and Patty Murray wrote in a recent letter to Dr. Jonathan Woodson, the assistant secretary of defense for health affairs and director of Tricare management activity.

The new rules, were set to take effect July 25, require standardized testing of autistic children every six months, and require the children to demonstrate progress to continue receiving a type of treatment called Applied Behavioral Analysis. The rules also require anyone who wants more than two years of the treatment to go through a waiver process and cut off care after 16 years old.

Autism Speaks, an autism science and advocacy organization, is “very concerned about the age cutoff and limits on the length

of time children can receive care, as well as the administrative hurdles, said Karen Driscoll, associate director for federal government affairs and military relations.

“Military families deserve better,” Driscoll said.

Gillibrand and Murray said the “measurable progress” requirement also is troublesome, since military children sometimes regress or have trouble making progress because of deployments, frequent moves or other life events common in military households.

“Last year, new policies cut off children with Down syndrome, cerebral palsy and other developmental disabilities from receiving the care they need,” Murray said. “This year, the (Department of Defense) had taken another step in the wrong direction.”

More than 23,000 Tricare beneficiaries are diagnosed with autism.

In their letter to Woodson, Murray and Gillibrand questioned whether Tricare had consulted with experts on developmental disabilities, whether any other chronic conditions require repeated testing for continued care and whether the tests outlined in the rules are being used appropriately.

★ Soldiers

Continued from page 1

“I just felt like it’s a very important moment to be there ... and I haven’t seen him in over a year,” Newport said.

In the nine months he was deployed to Afghanistan, Olson worked in the brigade’s tactical operations center (TOC) and performed a myriad of duties.

“I learned a lot more about my (military occupational specialty),” said Olson “I became more confident in myself and confident in my job.”

Though work days were long, Olson would make time to talk to Newport.

Olson said that while Newport understands that work has to come first, it is important to ensure she knows how much she means to him.

“Do I absolutely have to go to the gym, or do I take a night off just to make my girl feel special?” Olson explained.

In Olson’s absence, Newport said she tried to find things to

fill her time so she would not focus on the fact that he was gone.

“I joined CrossFit because it kept my mind off things,” she said. “I tried to have as little down time as possible because that’s where it gets you thinking.”

She said things that helped her through Olson’s deployment were having a supportive family near her and being able to video chat with Olson.

Newport was Olson’s support and did not add an extra stress to him while he was deployed, he said.

“I’ve found a good girl, one who stood by me through the deployment,” said Olson.

Now that he is back in the United States, Olson said he plans to try to get a slot at the Advanced Leader Course, continue to take college classes and spend time with his girlfriend.

‘Same Day No Way’ and ‘Keep What You’ve Earned’ campaign



(U.S. Navy photos by Mass Communication Specialist Seaman Pyoung K. Yi/Released)

Above: Hospital Corpsman 2nd Class Franklin N. Ihama (left), assigned to Naval Medical Center San Diego’s (NMCS) patient administration department, hands Hospital Corpsman 3rd Class Marco De Santiago (right), assigned to NMCS’s optometry department, a flyer about the Navy’s “Same Day, No Way” and “Keep What You’ve Earned” campaign in the courtyard. The purpose of the campaign is to encourage responsible drinking among Sailors by celebrating their achievements in the Navy, and urging them to be accountable for their actions and their future.

Below: Aviation Boatswain’s Mate 2nd Class Samuel R. Pappaterra (right), assigned to Naval Medical Center San Diego’s (NMCS) Drug and Alcohol Programs Advisor department, hands Hospitalman Sarah Lee (left), assigned to NMCS’s main operating room, a flyer about the Navy’s “Same Day, No Way” and “Keep What You’ve Earned” campaign in the courtyard.



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\$824,000. 734-646-4053, 734-878-7081,
ptrkmb@chartermi.net

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Miscellaneous

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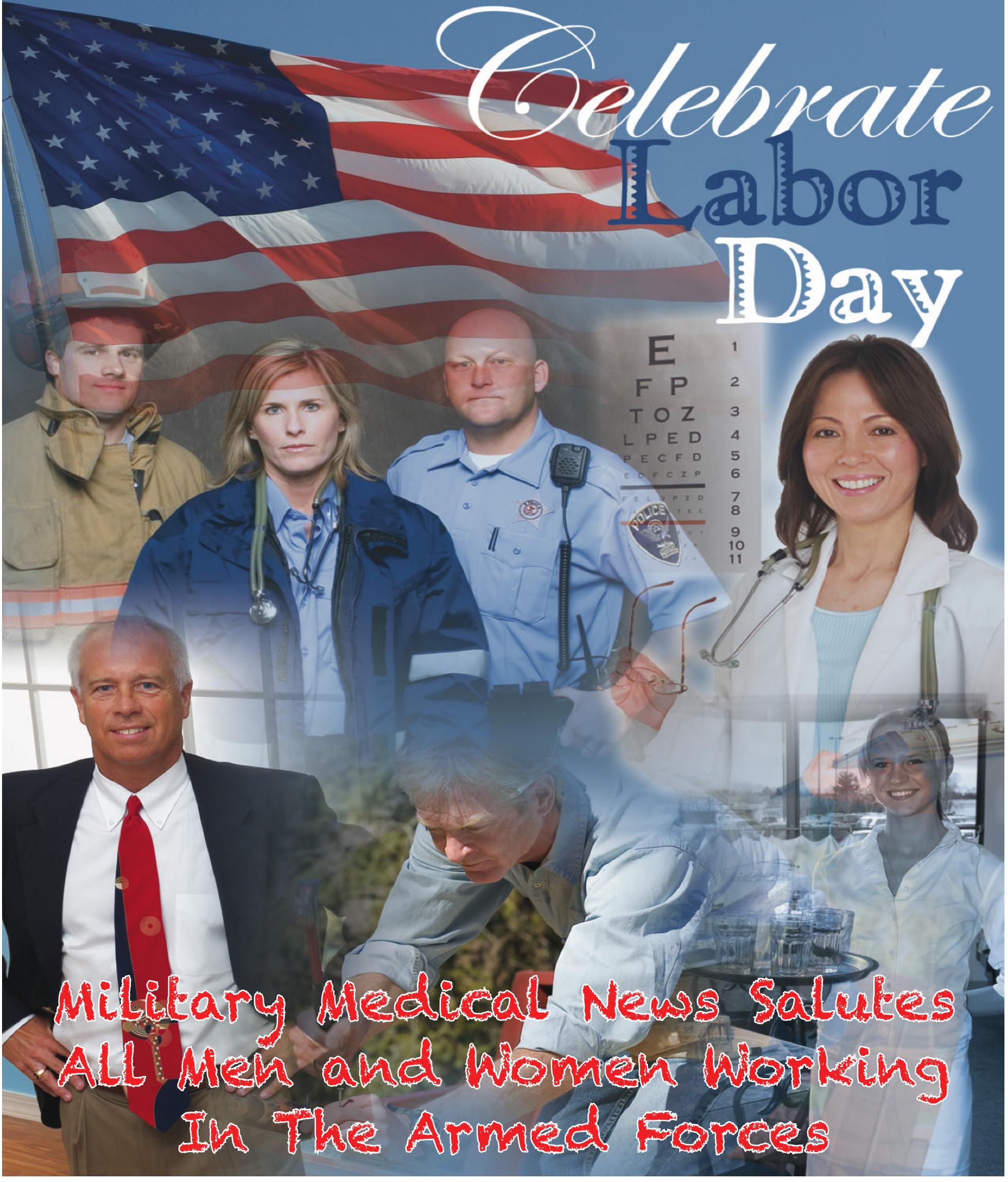
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Above: Marine Cpl. Jorge Salazar, assigned to Naval Medical Center San Diego's (NMCS) Wounded Warrior Battalion-West detachment, walks toward an MH-60S Sea Hawk helicopter, assigned to the Blackjacks of Helicopter Sea Combat Squadron (HSC) 21, at NMCS.

Marines assigned to Naval Medical Center San Diego's (NMCS) Wounded Warrior Battalion-West detachment, enter an MH-60S Sea Hawk helicopter, assigned to the Blackjacks of Helicopter Sea Combat Squadron (HSC) 21, at NMCS. HSC-21 is based at Naval Air Station North Island and provided eight wounded, ill and injured service members and four Marine staff members the opportunity to ride along as a morale booster before conducting search and rescue training.



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Psychiatrists



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Physicians



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Feel free to contact ED medical director
 Dr. Jim Johnson: 828-230-7695
 or: james.johnson77adb@va.gov

Physicians

PROVIDENCE, RI: Busy community health center seeks INTERNIST (or Family MD for adult practice) and PEDIATRICIAN with start date immediately or anytime before July 2014. Light call. ~ 50 physicians. Lovely city; good lifestyle. Fluency in Spanish helpful. Salary \$140-150K depending on experience & up to \$16,500 incentives. EOE. J-1 WAIVER OR SCHOOL LOAN REPAYMENT POSSIBLE. Send CV to Sblockmd@providencechc.org; Fax: 401-780-2565. Phone: 401-780-2516.



A Dignity Health Member

Family Medicine Faculty Position

St. Joseph's Hospital and Medical Center
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The Department of Family Medicine, St. Joseph's Hospital and Medical Center (SJHMC), seeks three energetic and innovative Family Medicine MD/DO physicians to augment our educational team. Candidates should embrace outpatient and inpatient (OB optional) teaching and patient care.

We are offering a competitive salary and generous benefits package that includes a relocation allowance. Because SJHMC is located in a medically underserved area, it is designated as a Health Professional Shortage Area (HPSA) and candidates are eligible to apply for assistance with student loans. If you are interested, please send a letter along with your CV to:

Kara Balliet, Sr. Physician Recruiter
 E-mail: Kara.Balliet@DignityHealth.org



Physicians



UNC Physicians Network (UNCPN) is a not-for-profit physician-led regional network entity of the University of North Carolina Health Care System that provides healthcare to communities throughout NC. We are currently recruiting **family medicine, internal medicine and pediatrics** for several of the community practices. These are employed positions with competitive salary and benefits. Please send your CV or call Annette Towne:

annette.towne@carphyrec.com
 or 919-866-1592



The Staff physician at Abilene State Supported Living Center is responsible for the effective delivery of high quality medical services to individuals with intellectual disabilities served. Work involves direct delivery of clinical practices and monitoring of medical services, participating in treatment team process, advocate for the medical need of persons served, and working with the resident's families, Family Nurse Practitioners, and with consultants and community medical providers in other medical specialty areas. This position reports directly to the Medical Director of the State Supported Living Center and works under limited supervision with considerable latitude for the use of initiative and independent judgment. Professional insurance is not required as a Physician of the State of Texas. Other benefits include monthly sick leave, paid time for vacation and great retirement program.

Contact Linda Hinshaw,
 Abilene State Supported Living Center,
 P.O. Box 451, Abilene, TX 79604.
 Phone: 325-795-3284. Fax: 325-795-3854

Pacific Northwest

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 Phone: 503-415-5982
 Email: mgonzale@lhs.org
 Specialty: Adult Inpatient Medicine specialties, Adult IM/FM practice opportunities

Vicki Owen
 Phone: 503-415-5403
 Email: vowen@lhs.org
 Specialty: Pediatric specialties, Adult specialties practice opportunities, OB/GYN

Mandie Thorson
 Phone: 503-415-5454
 Email: mthorson@lhs.org
 Specialty: Outpatient - Internal Medicine, Family Medicine

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Physicians

EMERGENCY PHYSICIANS

PHOENIX, AZ - Seeking FT/PT, BC/BE emergency physicians. Immed oppty. Shareholder oppty. Stroke & chest pain ctr. Outstanding backup all specialties. Michael Suarez, MD, St. Joseph Hospital & Medical Ctr: 602-803-6393, or jmsuarez1@cox.net

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Physicians



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Physicians



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- **ER Physician at Fort Campbell**
- **Internist at Keesler AFB**
- **Interventional Radiologist at VA in Columbia, SC**
- **Pharmacist at Fort Richardson**

For more information, please contact:

Gary Blackwell, PHR
 Director of Healthcare Recruiter
Caduceus Healthcare
 225 Peachtree St., Suite 585
 Atlanta, Georgia 30303
 770-357-2400, Office • 770-357-0003, Fax
gblackwell@caduceushealthcare.com
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Physicians

Baker County (FL) Health Department seeks:

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Dr. must be BC and current FL license. Primary care experience preferred. Benefit pkg. available within 90 days. M-F 8:00-5:00. Part-time optional. Salary depending on experience. 30 miles west of Jacksonville.

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Our Faculty consists of more than 50 in core disciplines of family medicine, internal medicine, pediatrics, OB/GYN, psychiatry; also sports medicine, surgery, community and rural medicine. The Tuscaloosa Family Medicine Residency is an unopposed program (15/15/15) with 4 fellowships, a record of 400 plus graduates over 40 years; 1 in 8 family physicians in AL trained here.

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UK HealthCare

45th Annual Family Medicine Review (FMR)

Sunday, Nov. 3 - Friday, Nov. 8, 2013
Griffin Gate Marriott Resort & Spa
Lexington, KY

Clinicians providing primary care encounter a wide range of medical conditions in their day-to-day practice. It can seem overwhelming to stay current on the evaluation and treatment of such a wide variety of conditions. The University of Kentucky Department of Family and Community Medicine serves the needs of primary care professionals across the country by recognizing the need for high quality life-long learning for inter-professional healthcare providers through continuing education. This Family Medicine Review course is one of the longest running courses in the nation and has gained national recognition. Participants can earn AMA Category 1 Credits™ and AAFP prescribed credit (determination pending) in one setting.

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Navy Recruiting

Above: Hospital Corpsman 2nd Class Devin Funk, Naval Medical Center San Diego's (NMCS) Bioskills Training Center leading petty officer, explains surgical practices to 20 education and Navy professionals from Navy Recruiting District (NRD) Houston and Portland. The purpose of the visit was to learn about career options available in Navy Medicine.

Right: Hospital Corpsman 2nd Class Devin Funk, Naval Medical Center San Diego's (NMCS) Bioskills Training Center leading petty officer, explains surgical practices to 20 education and Navy professionals from Navy Recruiting District (NRD) Houston and Portland.

