

MEDICAL NEWS

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**PATRIOT NORTH 2016
AUTHENTICATED EXERCISE
WITH AGONIZING-LOOKING ART**

By Tech. Sgt. Andria Allmond
111th Attack Wing

VOLK FIELD AIR NATIONAL GUARD BASE, Wis. — “Put more blood, more blood,” she instructs a Guardsman while smiling like a Cheshire cat. “By now, it’s clotting. And you’ll need bruising.” With scarlet-colored fluid dripping from the silicone sliver, the reflected glint from sunlight increases the grotesque appearance of the gooey gash.

Moulage – the art of applying mock injuries for training of emergency response teams, medical providers and military personnel—can be shocking. But this grisly procedure has proven indispensable in creating realistic medical scenarios for exercise PATRIOT North 2016, held at and around here, July 19-21.

In order to administer the ultra-realistic-looking prosthetics, the National Guard and Mile Bluff Medical Center, Mauston, Wisconsin, relied on moulage makeup artists with real-world experience – as emergency medical service (EMS) providers. So while a skilled eye and artistic hand help, familiarity with treating injuries, wounds and illnesses intensifies the genuineness for exercise participants.

“Being in EMS, we see a lot of things: gunshot wounds, hangings, amputations,” said Rebecca Minges, a Cincinnati, Ohio, paramedic and haunted house make-up artist. “This is what real-life injuries look like. There’s a difference between what we do and what Hollywood does. We’ve seen it in real life and it’s not pretty, it’s actually quite horrific.”

Minges said the objective is to re-create the most convincing wounds in order to produce the highest quality training. “When someone is confronted with a [mock] patient presenting a condition that looks real, it causes an adrenaline rush; and people seeing it will react more like they actually would in the field.” And that response is exactly what civilian and military exercise planners wanted to generate. The annual PATRIOT North exercise’s theme is for Guardsmen and their civilian counterparts to train as they would respond in a real-world domestic operation.

Dr. Timothy Bjelland, the Mile Bluff Medical Center emergency room director and chief medical officer assisting with the exercise, said that the most important element of any medical exercise is for it to be as real as possible. “Moulage really makes you have to go back and look at the various wounds - it helps make us think through all the steps...Often with trauma patients, the mechanism of injury is crucial. The amount of force and location is very important. And it helps us talk about

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(U.S. Air Force photo by Staff Sgt. Siuta B. Ika) Tyler Holman, a combat medic assigned to the 1st Battalion, 228th Aviation Regiment, poses for a photo in front of two UH-60 Black Hawks at Soto Cano Air Base, Honduras. While on leave in “Roat”, Honduras, Holman saved the life of a Honduran teen who was unresponsive on the beach.

JTF-Bravo medic saves Honduran youth in “Roat”

By Staff Sgt. Siuta Ika
Joint Task Force Bravo

SOTO CANO AIR BASE, Honduras — What started as a quiet afternoon spent enjoying off-duty time and celebrating the Fourth of July weekend in “Roat”, Honduras took a sudden turn for one member of Joint Task Force-Bravo on July 2.

U.S. Army Spc. Tyler Holman, a combat medic assigned to the 1st Battalion, 228th Aviation Regiment, was at a local scuba shop packing up his equipment

after returning from a dive when he heard yells for help.

“I didn’t know what was going on, but the individual was yelling for a doctor or anybody who knew CPR,” Holman said. “So I took off and about 50 to 60 meters down the beach four or five people were gathered around a young Honduran lady laying on the ground. She was probably around 13 years old. I kind

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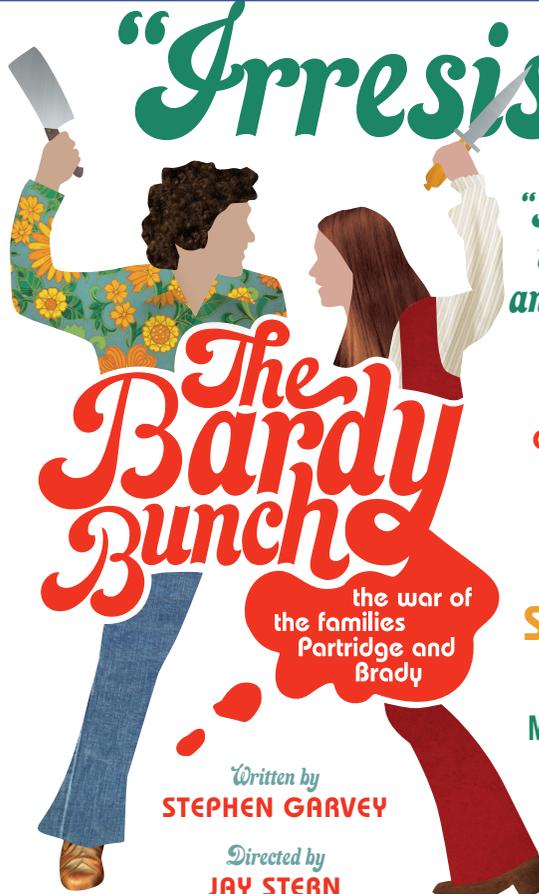
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• **MEDIC**
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of put two and two together when I saw her soaked, unresponsive, and looking like she was just pulled out of the water."

Immediately, Holman took control of the situation and positioned the girl to administer CPR. Two minutes later, the girl started breathing again and she was moved to a park ranger's truck to be transported to the hospital.

"She and I were in the backseat and she was breathing a little bit, but crashed on the way up there so I did CPR again," Holman said. "The hospital's on the other side of the island -- usually about a 25 minute drive, but the park rangers made it in 7 minutes. It was pretty difficult trying to keep her breathing and keep myself in the truck."

The moment the truck arrived at the hospital Holman carried the girl to a stretcher.

He then watched as the girl became responsive the moment the stretcher's front wheels hit the ER ramp. After talking to a couple doctors to let them know what happened, he was relieved to learn she would most likely make a full recovery.

"The whole ordeal took probably around 15 minutes, but time really didn't exist because my adrenaline was pumping and I was just focused on keeping her alive," Holman said.

Because he was so focused on keeping the girl alive, Holman didn't realize that he didn't have any shoes on, his shirt was partially buttoned, and his wallet was still with his scuba equipment.

Not seeking recognition, Holman only informed his leadership of what

transpired because he noticed some of the locals were taking pictures and videos of him and he wanted them to be aware in case he showed up on the local news.

"I'm glad Spc. Holman was in the right place at the right time to take swift action," said U.S. Army Capt. Michael Haynes, 1-228th AVN Headquarters and Headquarters Company commander. "He's one of our many great 'Phantoms' who apply instinct and training in times of need. In this situation particularly, he embodied not only the Army values but the vision of what the 1-228th AVN strives for every day. I'm honored to have him on the Phantom team."

Holman was awarded the Joint Service Commendation Medal from U.S. Navy Adm. Kurt Tidd, the commander of U.S. Southern Command, but he insists he only did what comes natural to him as a combat medic.

"I didn't do this for an award," Holman said. "As cliché as it sounds, my passion in life is helping people. Any medic in the Army worth their salt would do the exact same thing every time because that's just what we do."

Although Holman is reaching the end of an Army enlistment that's taken him to nine different countries in four years, he will be getting out to resume his pre-med studies and work in the emergency medical services field -- a field he worked in prior to joining the Army.

"Medics and soldiers have a lot in common," Holman said. "Sometimes people get confused about what a hero is. We're not heroes. We just care about people and that's what we want to do -- help."

Traumatic brain injury patients paint, sculpt way to recovery

By Shannon Collins

Defense Media Activity - DoD News Features

WASHINGTON — As the brushes touch the canvas, the service members pour their thoughts and emotions onto the page, expressing what they haven't been able to talk about through art.

Like the elements of a painting, doctors from each specialty at the National Intrepid Center of Excellence, a directorate of Walter Reed National Military Medical Center in Bethesda, Maryland, come together to help service members with traumatic brain injuries in an intensive four-week therapy program.

Specialties such as neurology use art to assist with sleep and migraines. Family care physicians can use it to assist with physical ailments. Psychiatrists and nutritionists can assist with medications and vitamins, and art therapists can provide emotional support.

The Masks

Melissa Walker, a registered art therapist and healing arts program coordinator at NICoE, said the patients begin their group art therapy session by making masks.

"It's in this session that I have to explain to them that I'm giving them the means to express and symbolize whatever they would like to about their identities and things they've been through," she said. "I tell them not to worry about the product, but what they would like to express -- what story they want to tell -- and usually that resonates with them."

She said the patients usually dive in. Even if they were skeptical in the beginning, she added, at the end of the first session, many of them say, "That was really relaxing. I can't believe I was able to open up about that specific element of my personality."

Walker said the masks give the patients "a visual voice to their invisible pain or their invisible wounds." They create the masks in a two-hour group art therapy session and will see them again throughout the four weeks they are at NICoE.

For one sailor, Walker said, the mask project held a special meaning. He had flashbacks for seven years about a bloody face from when he had been injured in a bunker during a mortar attack.

He told Walker he had seen the face staring back at him and that it haunted him. He called it "BFIB" for short: bloody face in bunker.

Some patients leave their masks behind to inspire other patients, he said, and when he saw them on the wall, he immediately thought of making a BFIB mask.

"He made BFIB in that session, and instead of thinking of him as something psychologically inside of him, it

took on a form of an actual product," Walker said. "So when he thought about [BFIB], he thought of him sitting in the art therapy studios safe and contained, because he would leave him every day behind," Walker said. "Eventually, we placed it in a box and [thus] contained the mask, and he said after the entire process [that] he rarely saw the flashback, and it didn't make him feel anxious, because he knew he was here in this space, safe and contained."

Other Art Forms

Walker said the patients can use water colors, acrylics, Keva blocks and in some cases, oil. Marine Corps Staff Sgt. Tony Mannino, a former NICoE patient, preferred water colors.

"I chose to work with water colors because it makes it very hard to get the fine details perfect for someone who has struggled with perfectionism and has always been in control of any situation," the former administrator and machine gunner said. "It really helped me to release and relinquish the reins, to let the colors do what they were going to do on their own."

He said painting helped bring up different issues about what was going on in his mind, both recently and from his deployment to Iraq in 2007 and 2008.

"I spoke to the art therapist about things that I didn't even talk to my psychologist about, so it's really interesting what happens in the art room," Mannino said. He said the art therapy, as well as his treatment at NICoE, was "one of the best things I've done so far. They care a great deal, and they really want you to get better."

Evolution of Patients

Walker said she enjoys seeing the evolution of the progress of the patients as they become more and more comfortable. As their sleep and pain start to stabilize and as they're able to start to open up about some difficult things, they start doing the same in their artwork, she said.

One Marine was frustrated, Walker said. He wasn't initially able to depict anything because he used to love art, she explained.

"He said, 'I used to love art. I was very engaged in high school, and it's just not coming to me. I've got too much going through my mind.' By his second or third week, he entered the art room and said, 'I know what I want to do now,'" she said.

Walker said he recreated a moment he had been grappling with: a time he made a difficult decision in combat. He ended up spending every spare moment working on this project.

"He was really invested in this product, because he was able to take what was for him a traumatic moment and take control of it and begin to really understand it," Walker said. "At



(Department of Defense photo by Marvin Lynchard)

"Healing America" Heroes through the Power of the Arts, Æ Marine Staff Sgt. Anthony Mannino performs Art Therapy as part of his Traumatic Brain Injury (TBI) treatment and recovery. Art Therapy Interns, Adrienne Stamper (L) and Nancy Parfitt instruct and work with Staff Sgt. Mannino as he receives his art therapy. The therapy is conducted at the National Intrepid Center of Excellence, Walter Reed National Military Medical Center located in Bethesda, Maryland.

the end, he invited the entire treatment team into the art therapy space, and he shared that story with them, which was a huge step -- to be able to open up to the group that had been caring for him."

She said he went on to continue to take sculpture classes. Walker said seeing the evolution in patients like the Marine is why she continues performing her mission.

"It is so neat for us, the clinicians, to see the service members change from the first week to the fourth week," she said. "They walk in here a little uncertain and kind of skeptical initially. You can see that they're really starting to trust the others. They've perhaps been

isolated, because they've been dealing with these symptoms for so long, and then by that fourth week, it's amazing watching them walk through the door -- how much brighter they become and how much more comfortable they seem."

Walker said they seem to really engage with each other, socializing and laughing, and she sees the difference in the artwork as well.

"We see improvement -- that they're symbolically showing this bright future, perhaps the contrast between how they felt before and how they're feeling moving forward," Walker said. "And I'd love to see that next canvas. I hope they continue to explore that."

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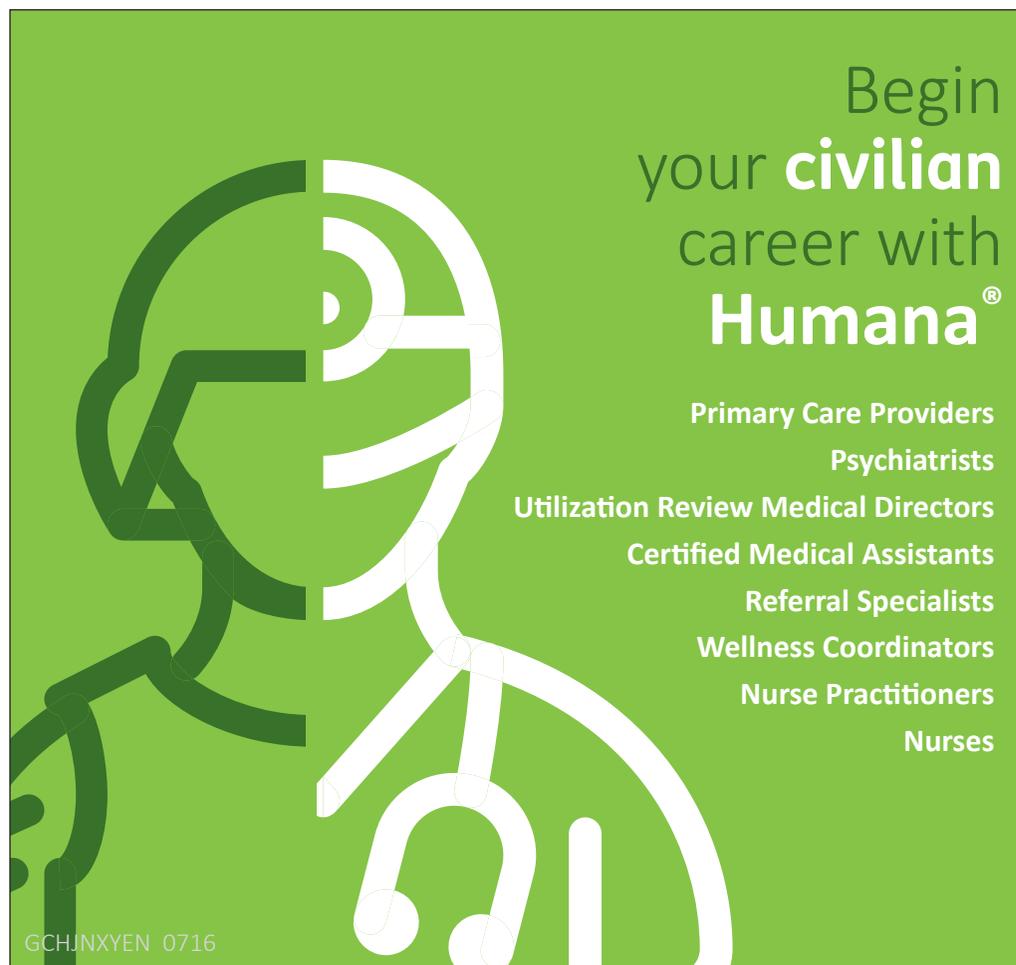


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• **PATRIOT**

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the correct way to evaluate a patient, the steps involved and ensure that the patient obtains appropriate resources.”

The doctor continued by saying that this is especially true when treating a large quantity of patients at one time, as was the case during the exercise. The civilian medical providers valued the gruesome artistry; and the military medical members concurred.

“A lot of these [Air National Guard] medics aren’t medics in their civilian jobs, so they don’t see these types of traumas regularly,” said Capt. Broc Nichelson, of the 110th Medical Group from the Michigan Air National Guard and the Health Response Team (HRT) nurse for PATRIOT North 2016. “The moulage takes you back a little bit when you see it. So to get a visual of it helps make our medics more resilient for when they may need to treat [these injuries] in the real world.”

That resiliency leads to increased focus of providers, which ultimately lends itself to more efficient and effective medical care.

And while military and civilian medical personnel are highly trained to deal with the wide array of injuries that can afflict patients; the same can be said for the artists on site.

Jennifer Prejean, has a history in the New Orleans, Louisiana, area as an emergency medical technician, was also

layering latex, silicone, paint and gels to recreate what she’s seen as an EMT for exercise PATRIOT North 2016.

“We know the difference between what a 50-caliber gunshot wound and a 20-caliber gunshot wound look like,” she said while methodically daubing a fusion of paints to create bruises on a role player. “But sometimes it’s just a little shading, dabbing here and there. Depending on the injury, you don’t always want a big effect because that’s not what the condition actually looks like.”

It’s in the nuances that moulage magic happens.

“If someone is going into anaphylactic shock, there isn’t an irrefutable outward appearance,” she said. “So in that case, we’d just work with a little color and it’s up to the role-player to give the provider the symptoms.”

The moulage artists said they had fun working with the civilian military agencies, but they were also successful in providing a valuable, and impressive, addition to the annual exercise.

“This is unique,” said Nichelson, a nurse anesthetist in his civilian job. “We actually were able to see a gentleman who had an actual amputated arm, but the moulage team made it appear to be a fresh amputation with blood actually squirting out. It was one of the best works I’ve seen so far.”



(U.S. Air National Guard photos by Tech. Sgt. Andria Allmond)

Donna Bibber, an exercise PATRIOT North 2016 role player from Wilton, Wis., sits while receiving moulage by Jennifer Prejean, a New Orleans, Louisiana, emergency medical technician and moulage artist, for the National Guard and civilian sector domestic operations exercise at Mile Bluff Medical Center in Mauston, Wis., July 20, 2016. Bibber’s mock injury was an amputated ear with a cerebrospinal fluid leak caused by massive head trauma.

Multinational medical training at Eastern Accord 2016

Though they are not part of the training audience, the U.S., Dutch and Ugandan medical team supporting exercise Eastern Accord 2016 held their own multinational exercise on July 15, 2016, at the Tanzanian Peacekeeping Training Centre, in Dar es Salaam, Tanzania.

The three medical teams provide real world care to the EA16 training audience during their stay in Tanzania. Bringing their own supplies, the medical staff took the opportunity to learn about each other’s practices.

“It is a good experience being here for two weeks, practicing with each other, getting to know each other and how we operate with our materials. It is very good training,” said Dutch Sgt. Maj. Moniek Van Vlijmen, trauma nurse.

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• **C&A Psychiatrist** (outpatient)
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Email: fobrown@lhs.org
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Vicki Owen
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Email: vowen@lhs.org
Specialty: Pediatric specialties,
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dan.juve@uvse.org
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Miscellaneous

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Washington State Dept. of Corrections (DOC) is seeking highly motivated & qualified individuals for the position of Physician, PAs & NPs to work in our unique environment as part of a multidisciplinary, collaborative team! DOC is a State agency that offers a competitive benefits pkg. 40 hr. work week, M-F w/12 pd Holidays. PAs take first call for all off-shift medical concerns. To apply or for a complete list of open positions visit us at www.doc.wa.gov or send resume to: wendy.vandel@doc.wa.gov
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Physicians



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Washington State
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Transforming lives

Nurses

PATRIOT North 2016 bonds Guard with local medical facility in exercise

Mauston, Wis. – In a critical component of exercise PATRIOT North 2016, members of the National Guard provided medical backing to the staff at Mile Bluff Medical Center here July 19.

Playing a supportive role to their civilian counterparts, an Air National Guard Health Response Team (HRT) set up a medical tent outside the center to help tackle patient overflow, while the Army National Guard supplied aeromedical airlift.

“We are here to help out the medical center with any patient that is what we call ‘walking wounded’ -- bumps, bruises, scrapes,” said Tech. Sgt. Kelly Goodman, a health care administrator with the 124th Medical Group of the Idaho Air National Guard. “Any burden that we can take off of the personnel and resources of Mile Bluff [Medical Center] will help them so that they can take care of the more serious injuries.”

During the three-day long exercise, the HRT is postured to follow a routine. First, a patient arrives at the medical center by either vehicular transport or airlift. When the mock patient arrives on site, they are escorted into the emergency room to undergo triage.



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