



Multi-Domain Operations





Army Modernization Strategy

The *nature* of war doesn't change...
But the *character* of war does

General Carl von Clausewitz 1792-1831











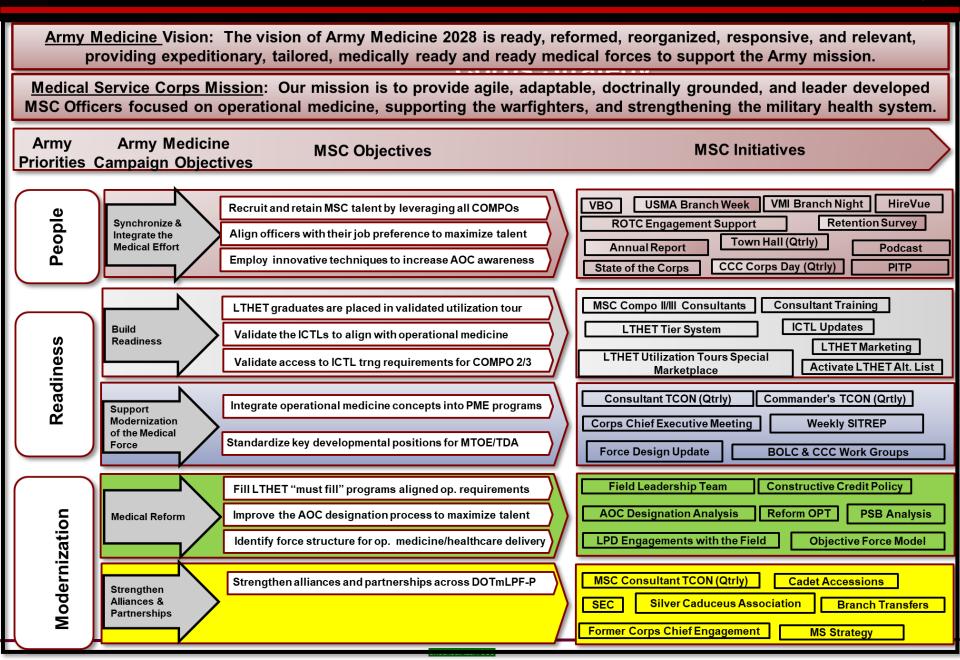




ARMY MEDICINE:

Army Medicine is Army Strong!

FY22 MSC Strategy



Knowledge, Skills, & Behaviors

INTELLIGENCES: Interpersonal, Linguistic, Logical-Mathematical

SKILLS: Medical Service Corps (MSC) officers are Leaders skilled in planning, preparing, and executing a wide diversity of health service support for Army units across the tactical, operational, and strategic levels to include joint-combined-interagency operations. This includes leadership excellence at the direct-operational-strategic levels as well as clinical, scientific, and preventive medicine expertise within credentialing standards and board certifications. Therefore, MSC officer must be Warrior-Scholars skilled in tactics, techniques, and procedures necessary to understand and support the Warfighter. This requires the ability to connect to others in a deep and direct way, to sense and stimulate reactions and desired interactions. MSC officers are adaptable to Large Scale Combat Operations and capable of supporting the complexities of Multi-Domain Operations (MDO) to include prolonged field care. Within this patient – HS / MS relationship, Medical Service Officers must be effective and compelling communicators. They develop their leadership and clinical skills through operational assignments, self-development, professional military education, and professional-clinical training.

KNOWLEDGE: The Medical Service branch delivers officers with academic, clinical, and scientific backgrounds from a wide variety of disciplines and majors. The domain-specific disciplines listed below provide officers with the expertise to set the conditions for expert patient care in any environment.

>RELEVANT EDUCATION: Behavioral Sciences; Biomedical Engineering; Biology; Chemistry; Computer Sciences; Counseling Psychology; Economics; Epidemiology; Entomology; Environmental Engineering; Forensics; Healthcare Administration; Kinesiology; Life Sciences; Nuclear Engineering; Operational Research; Pharmacology; Physics; Physical Education; Psychology; Pre-Medical; Preventive Medicine (not all inclusive).

>RELEVANT TRAINING / EXPERIENCE: Cadet Troop Leading Time / Leader Development Time (CTLT / CLDT) with Army medical units. Academic Enrichment Program with higher education / research agency in degree field of study (not all inclusive). Clinical, scientific, and research professional certifications granted by credentialing agencies.

BEHAVIORS: (In addition to foundational)

- > ADAPTABLE
- > ALERT
- > AUTHENTIC
- > CALM
- > COLLABORATIVE

- > COMMITTED
- CONCERNED FOR OTHERS
- CUSTOMER FOCUSED
- > DILIGENT
- > DIPLOMATIC

- EMPATHETIC
- > ETHICAL/MORAL
- > EXPERT
- > HUMILITY
- > INNOVATIVE

- > PRECISE
- > PROBLEM SOLVING
- > RATIONAL
- > STRESS TOLERANT
- > URGENT

TALENT PRIORITIES:

- 1. PROJECT MANAGER: Able to determine requirements, develop work processes, delegate responsibilities, and lead teams to desired outcomes.
- 2. INTERDISCIPLINARY: Synthesizes and applies knowledge from multiple disciplines into a coherent overarching perspective.
- 3. DETAIL FOCUSED: Thorough, perceptive, and precise in all matters. Possesses a keen eye notices everything.
- 4. COMMUNICATOR: Precise, efficient, and compelling in both written and spoken word.
- 5. INTERPERSONAL: Skilled in developing appropriate relationships. Able to connect with others to effect positive results.
- 6. PROBLEM SOLVER: Able to choose between best practices and unorthodox approaches to reach a solution. Accomplishes the task.



Cadet Accessions











MEDICAL SERVICE

CORPS

- MSC Overview Branch Resources
- · Links to FB, LinkedIn, Twitter
- Live Sessions with Corps Representative
- Company Grade Officer Testimonials

Medical Service Corps





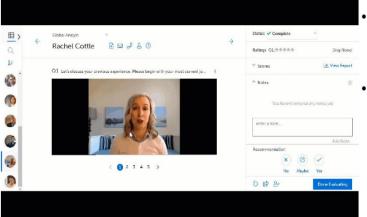












After each question, rate the Cadet on a scale of 1 to 5 stars based on response Use the evaluation rubric to

determine if question was answered completely

_	Question	Response	Thought Question	Weight
1	Why are you interested in branching Medical Service Corps?	Video	Did the Cadet demonstrate an understanding of the MS branch, understanding the time commitment, express a desire to serve? Did the Cadet relate the question mission/vision of the MS branch? Did the Cadet presert bearing?	20
2	What prior experience did you have as a cadet or in other areas of your life that makes you best suited for MS Branch?	Essay	branch? - Did the Cadet present - Was the writing - Structure? - Did the Cadet present - Did the Cade	25
3	Describe a difficult moment in your life and how you overcame it. What did you learn about yourself? What would have you done differently?	Video	- Was the writing structure? - Did the series of the serie	10
4	Give a specific example of your biggest stream weakness in your leadership? How do you that weakness?		- Was the writing structure? - Did the structure and the structure are sentence structure? - Did the structure are sentence with proper sentence with proper sentence with proper sentence are sentence with proper sentence are sentence are sentence with proper sentence are senten	25
5	What separates you from your peers?	¥/	Detail focus, planner, execute, able to work independently, problem solver	10
6	What did you do to prepare for this interview	Essay	- Did the Cadet research the branch prior to interview?	10

ARMY MEDICINE: Army Medicine is Army Strong!

Company Grade Professional Development





PME - AMEDD CCC, CLC3, AOC Courses, Advance Degree, Baylor

Skill Development - EFMB, Airborne, Air Assault, Pathfinder, Additional Schools (NBC, Motor Pool, Arms Room)

Operational Assignments- Company Command, BN/BDE Staff, Recruiter, OC, Instructor, Support Operations





Skill Development - EFMB, Airborne, Air Assault, Path Finder, AOC Courses, Additional Schools (NBC, Motor Pool, Arms Room)

Operational Assignments - Platoon Leader, Company XO, Brigade Medical Supply Officer (BMSO), Battalion Staff Support Operations

Professional Military Education (PME): BOLC



Skill Development: EFMB, Airborne, Air Assault, Pathfinder, AOC Courses, Additional Schools (NBC, Motor Pool, Arms Room)

Operational Assignments: Platoon Leader, BMSO, Battalion Staff Support Operations

DA PAM 600-4:

Operational



Institutional

Self Development

Continuous cycle of education, training, selection, experience, assessment, feedback, reinforcement, and evaluation.

Learning, experience, and feedback provide the basis for professional growth.

"Learning is a lifelong process."



Administrative Health and Preventive^{*} **Medicine Professional Training**





Army Baylor Program

Where: FT Sam Houston, TX Who: 70B transition to 70A Length: 12 months + Residency/Internship



Fellowships

American Red Cross, RAND Corporation, Congressional Liaison,

Where: Office of the Corps Chief,

Department of Veterans Affairs,

Who: 70 series AOCs Length: 12 months



Defense Comptroller Program

Where: Syracuse University, NY

Who: 70B/67J transitioning to 70C, 70C

Length: 24 months



Forensic Psychology **Fellowship**

Where: WRNMC

Who: 73B

Length: 24 months



PhD-Healthcare Economics

Where: Wharton School of Business or

School of Choice Who: Existing 70D Length: 36 months



Johns Hopkins Applied Physics Lab Internship

Where: Laurel, MD

Who: 72D

Length: 12 months



Training With Industry

Where: Methodist Health System-

San Antonio, TX

Who: 70D

Length: 12 months



MS in Public Health

Where: School of Choice

Who: 72C

Length: 24 months

Allied & Clinical Health Sciences Professional Training





MHA/MBA Executive Clinical **Leadership Program**

Where: FT Sam Houston, TX

Who: Clinical AOC's Length: 12 months





PhD Vision Science

Where: University of Alabama-Birmingham, Indiana University, SUNY College of Optometry, University of the Incarnate Word

Who: 67F

Length: 12 months





Training With Industry

Where: WHO, PATH, Bill and Melinda

Gates Foundation

Who: 71A, 71B, 71E, 71F and other

related AOCs

Length: 12 months



Clinical Laboratory Officers Course (CLOC)

Where: WRNMC

Who 71F

Length: 12 months + time to sit for

national cert board/exam

Critical Care Pharmacy Residency



Where: Massachusetts General Hospital-

Banner Health Boston, Banner University Medical Center Banner Health Boston Bost

Tucson, School of Choice

Length: 12 months



Program Management Acquisition Internship

Where: Fort Sam Houston, Fort Detrick

Who: All AOCs/Corps Length: 24 months

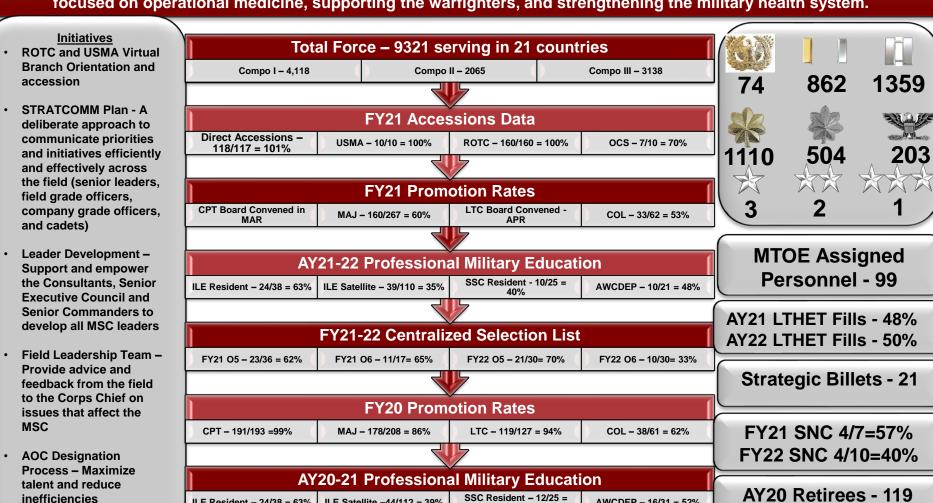
State of the Corps

AWCDEP - 16/31 = 52%



Army Medicine Vision - The vision of Army Medicine 2028 is ready, reformed, reorganized, responsive, and relevant, providing expeditionary, tailored, medically ready and ready medical forces to support the Army mission.

Medical Service Corps Mission - To provide agile, adaptable, doctrinally grounded, and leader developed MSC Officers focused on operational medicine, supporting the warfighters, and strengthening the military health system.



9/15/2021

ILE Satellite -44/112 = 39%

ILE Resident - 24/38 = 63%

AMERICA'S ARMY: Army Medicine is Army Strong!

Office of the Surgeon General



1LT Robert McCoy (70B), XO of the 250th FRST, currently deployed ISO Operation Inherent Resolve assisting in MEDEVAC operations



CPT Leyla Kosakowski (72D) deployed to Senegal, Ghana, and Morocco supporting 2d Security Force Assistance Brigade (2d SFAB) Teams during the Predeployment site surveys

MSC in Action



CPT Julio Rodriguez (70H), Commander, 602d MCAS, on the MCD line where non-ambulatory patients cross from the decon side to medical treatment.



CPT Fiorela Ruiz (73A) deployed to Chicago, IL as part of the 426th Brigade Support Battalion, 1st Brigade Combat Team, 101st Airborne Division (Air Assault) Vaccination Support Team (VST), in support of FEMA and COVID-19 vaccination efforts



MAJ Justin Pao (67F), Chief of Optometry, MEDDAC-Japan named Armed Forces Optometry Society (AFOS) as Army Junior Optometrist of the Year in 2020



MAJ Ken Nguyen and CPT Krystle Harm (71As) lead the laboratory team at BDAACH with their selfless service and commitment to Force Health Protection. They met with Honorable Mr. Austin during his tour of USFK

MSC in Action

Office of the Surgeon General



1LT Jeremy Lahn (70B), Detachment XO, 64th MED DET (VSS), 421st Medical Battalion (MF), 30th MED BDE. First ranger graduate in 30th MED BDE history



1LT Sara Febbo (70B), XO, Brigade Support Medical Company, 173rd BSB (A), 173rd IBCT (A) graduated from Ranger School



1LT Michael Walton Jr (70B), XO, 36th MCAS, 261st MMB, 44th MED DBE. He activated for Defense Support to Civil Authorities (DSCA) support and deployed to the Javits Center Hospital in New York City to support COVID-19 operations.





CPT Bryan Haines, 71A, was activated to the US Army Corps of Engineers (USACE) in March to support COVID-19 operations.





Operation Courageous Defense was a joint training exercise between LRMC, 557th Medical Company Area Support, 421st Multifunctional Medical Battalion, and the 67th Forward Resuscitative Surgical Team, 212th Combat Support Hospital.

Office of the Chief, Medical Service Corps





COL Michael ElliottDeputy Corps Chief, NCR



MG Dennis P. LeMaster Chief, Medical Service Corps



COL Monica Douglas CSBPO, JBSA



LTC Felicia Williams
Executive Officer, JBSA



CPT Lamanda Jackson Special Assistant, NCR



CPT Victoria Martin Special Assistant, JBSA



Medical Service Corps Homepage

https://medcoe.army.mil/amedd-medical-service-corps

Chief, Medical Service Corps Facebook Page

http://www.facebook.com/medical.service.corps.chief

Medical Service Corps Mailbox

usarmy.jbsa.medical-coe.mbx.medical-service-corps@mail.mil

MSC General Officers





LTG R. Scott Dingle
The Surgeon General
Commander U.S. Army Medical Command



MG Dennis P. LeMaster
Chief, Medical Service Corps
Commander U.S. Army Medical Center of Excellence



MG Tracy L. Smith Deputy Surgeon General for Mobilization, Readiness and Army Reserve Affairs



MG Jill Faris Director Office of the Joint Surgeon, NGB



MG Michael J. Talley
Deputy Commanding General
for Operations,
U.S. Army Medical Command



BG Joseph A. Marsiglia Commanding General Medical Readiness & Training Command



BG Jeffrey B. McCarter Assistant Surgeon General for Mobilization Readiness and Army Reserve Affairs



BG Wendy L. Harter Commanding General Regional Health Command Central



BG Peder L. Swanson
Deputy Commanding General
(Operations) 807th Medical Command



BG Paula C. Lodi
Commanding General
Regional Health Command-



BG Michael K. Pyle
Deputy Commanding General OCP
3rd Medical Command



BG Anthony McQueen
U.S. Army Medical Research
and Development Command

Questions?

