

THE PACIFIC MEDIC

ISSUE 003

65TH MEDICAL BRIGADE

AUGUST 2025

Pacific Medic Week: Building Teams & Readiness

*Soldiers and KATUSAs,
competing and working together*

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The Present and Future of NEXT-Alliance

*Uniting U.S. and ROK Army Medical
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THE PACIFIC MEDIC

65th Medical Brigade

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38th Parallel Symposium
Nov. 3-6, 2025



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The Pacific Medic is a publication of the 65th Medical Brigade. The content of the magazine is provided by the Brigade's headquarters component along with its direct reporting units. The purpose of the magazine is to showcase the mission and vision of the Brigade as well as highlight the Soldiers, Civilians and Family members who work tirelessly to accomplish the mission.



Col. Edgar G. Arroyo
Commander

Earlier this year, Pacific Medic Week brought us together in a meaningful way—honoring our profession, strengthening camaraderie and reminding us of the vital role we play across the theater. Even while celebrating, our teams continued to provide uninterrupted medical support across the region, a testament to your professionalism and dedication.

As we celebrated the Brigade Ball, I reflected on a year of extraordinary accomplishments. I am truly proud of our team. Despite persistent challenges and resource constraints, the Pacific Medics have demonstrated strength, adaptability and an unshakable readiness to answer our nation's call.

Over the past year, our Brigade has made historic progress. This progress is only possible by the talented individuals of this Brigade. As the summer ends, we will see a significant change to our roster as we do each year during the permanent change of station (PCS) season. I know our new teammates will bring a fresh perspective to help this Brigade to succeed in our current challenges and those yet to come.

To every Soldier, leader and support staff member—thank you. Your commitment and excellence have not gone unnoticed. To those that have left, I wish you the best of luck in your career. You will always be a Pacific Medic. To those arriving, welcome to the best medical brigade in the U.S. Army!



Command Sgt. Maj.
Eric N. Price

As we navigate the summer transition season, I want to highlight the steady leadership of our Noncommissioned Officers—the true backbone of our formation. Their commitment ensures continuity, instills discipline and supports our new arrivals while honoring those who depart our ranks. In a time of change, their influence keeps our teams strong and focused.

Now more than ever, maintaining physical fitness must remain a priority. Our operational readiness depends on disciplined, well-conditioned Soldiers who are prepared to meet any mission. Physical readiness is a direct reflection of our professionalism and it starts with consistent standards at the squad and team level.

At the same time, we must continue investing in our partnership with the Republic of Korea Armed Forces. Through shared training, mutual support and daily collaboration, we are strengthening a bond that enhances our combined effectiveness and secures the region.

To every NCO, Soldier and leader—thank you for what you do every day. Your leadership and dedication sustain our momentum. Together, we remain ready, relevant and resilient.

Stronger Together

Building Cohesion Through Purposeful Training

Headquarters and Headquarters Company, 65th Medical Brigade
By 2nd Lt. Rochelle T. Ralph, Brigade Strength Manager



Introduction: People First, Mission Always

Eighth Army's motto, "Fight Tonight," reflects our readiness to answer the call at any time. But that readiness does not begin with gear or tactics—it begins with people. As we transition toward a more people-centered organization, Headquarters and Headquarters Company (HHC), 65th Medical Brigade has taken a deliberate approach to building unit cohesion and mission effectiveness through training focused on collaboration, cross-functionality and trust.

People-Centered Training in Busan and Seoul

Our unit conducted two offsite training events—one in Busan and another in Seoul at Lotte World—to foster team building and deliver Building Strong and Ready Teams (BSRT) training. These offsite environments allowed Soldiers to step away from their daily routines and reconnect with the bigger picture: building a team that knows, trusts and supports each other, both in garrison and on the battlefield.



Soldiers from HHC enjoying Lotte World after team-building activities.

Cross-Functional Teams: Training for Continuity

One of our key goals has been to ensure mission conti-

nunity, regardless of who is present. To achieve that, we've trained Soldiers across sections, breaking traditional silos between platoons and MOS-specific roles. This cross-training enables our team to step into new responsibilities when needed and ensures we do not lose momentum when personnel are absent.



BSRT training brought together personnel from different MOSs for some beach fun in Busan.

"It's not just about being technically competent; it's about being a trusted teammate—someone who shows up, lifts others and stays ready."

The Dual Mission: Combat Readiness and Medical Excellence

As a medical brigade, our unit carries a dual responsibility: to remain tactically proficient while delivering world-class healthcare in austere environments. Army healthcare providers and sustainers are the backbone of readiness. Without logistical support, our frontline medics and surgeons cannot operate. Without mental and physical readiness, our providers cannot care for others. Training together—not just within roles, but across them—helps every Soldier understand how their contri-

butions tie into the mission.

The Legacy of Army Medicine: Relationships Save Lives

Since the founding of the Army Medical Department in 1775, teamwork and relationships have been cornerstones of operational effectiveness. As Lt. Gen. R. Scott Dingle, the 45th surgeon general of the U.S. Army, once said: “It’s not just about being technically competent; it’s about being a trusted teammate—someone who shows up, lifts others and stays ready.”

1st Sgt. Misti Chan, HHC’s first sergeant, added: “We build readiness through relationships. When Soldiers know each other and trust one another, we move faster, train better and fight stronger. That’s what these events are all about.” Establishing trust before deployment enhances responsiveness in crisis. These training events were not just about technical development—they were about fortifying bonds so that when it’s time to fight tonight, the unit functions as one team with one purpose.



1st Sgt. Misti Chan stands tall in front of her formation during a recent ceremony.

These training efforts also reflect the brigade commander’s vision that the brigade sustains “Fight Tonight” readiness, strengthens the cognitive performance of its people, supports the optimization of armistice health services and experiments with new operating concepts and technologies to prepare for the Army of 2030. By focusing on team building, cross-functional collabora-

tion and deliberate training in both technical and human dimensions, HHC embodies this vision—demonstrating what future-ready medical readiness truly looks like.



Soldiers of HHC pose for a quick photo opportunity with the Brigade Command Team after listening to some motivational words.

“We build readiness through relationships. When Soldiers know each other and trust one another, we move faster, train better, and fight stronger. That’s what these events are all about.”

The Way Forward: Cohesion Is Our Competitive Edge

As we continue our training cycles and prepare for future missions, the connections we have built will serve as a force multiplier. We have planted the seeds of a culture where every Soldier, regardless of rank or role, feels valued, supported and mission ready.

Looking ahead, HHC will continue to build on this momentum with upcoming events such as weapons ranges, Tactical Combat Casualty Care (TCCC) training and a fun-filled organizational day—all designed to sustain both combat readiness and emotional connection across the formation.

Through intentional training, a renewed focus on emotional safety and a willingness to break down barriers between sections, we are becoming more than just a headquarters—we’re becoming a team that thrives together, fights together and wins together.

We may wear different badges and serve in different roles, but at the end of the day, our mission is the same:

to protect, sustain and heal. With that purpose and our unity, we are always ready. We are stronger together.

#PacificMedics #WarriorCare #FightTonight

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HHCs: The Nerve Center of Wartime Military Medicine

In every major U.S. conflict since World War II, medical Headquarters and Headquarters Companies, or HHCs, have quietly served as the command and logistical core of battlefield medicine. HHCs ensure the entire system runs effectively under the strain of combat.

An HHC serves as the administrative and operational headquarters of a medical battalion or brigade. These units coordinate evacuation routes, direct ambulance operations, manage medical supplies and personnel and track casualties in real time. The staff typically includes a battalion surgeon, operations officers, medical planners, logistics personnel, clerks and communications teams.

During World War II, HHCs were instrumental in managing medical operations during major campaigns such as the D-Day landings and the Battle of the Bulge. As Allied forces advanced through France and into Germany, HHCs directed the setup and relocation of collecting and clearing stations to keep pace with shifting front lines. They ensured that aid stations had the resources to stabilize patients and that wounded Soldiers were quickly transported back to field and general hospitals.

During the harsh winter of 1944-45 in the Ardennes, HHCs worked around the clock in freezing conditions to

maintain communication lines and supply routes. Their coordination prevented the medical system from breaking down under the pressure of high casualties and enemy counterattacks. Despite being non-combat elements, HHCs often operated under threat, with enemy fire and the need for rapid relocation being constant concerns.

In the Korean War, HHCs adapted to mountainous terrain and subzero temperatures. They managed evacuation operations over narrow, treacherous roads, often while under fire. As helicopters began playing a larger role in casualty evacuation, HHCs integrated aerial medical evacuation, marking a significant evolution in battlefield care.

Vietnam also introduced the "Golden Hour" concept — the critical window during which a wounded Soldier had the best chance of survival if treated. HHCs were central to making this possible, managing radio networks and coordinating rapid evacuations across dense jungle terrain. They also tracked outbreaks of disease, directed mobile surgical teams and oversaw the setup of temporary medical stations in remote areas.

While they did not often appear on newsreels or in headlines, HHC personnel were regularly placed in harm's way. Command posts were subject to attack, and convoys carrying HHC staff or supplies faced ambushes and improvised explosive devices. Yet their work was essential, ensuring that frontline medics and surgical units could do their jobs.

Today, medical HHCs continue to serve in this vital role, whether in combat zones, humanitarian missions or peacekeeping operations. Their mission remains the same: provide the planning, logistics and command needed to sustain life-saving medical operations under the most challenging conditions.

Though rarely in the spotlight, the contributions of medical Headquarters and Headquarters Companies have saved thousands of lives. They are the backbone of the military medical system — quiet professionals who keep the system running when every second counts.

KATUSA Vision Operation Campaign



215th Medical Detachment
By Capt. Jessica Lee

From June 24 to 27, the 215th Medical Detachment Optometry, part of the 168th Multifunctional Medical Battalion, deployed a team to multiple military installations across the Korean Peninsula to carry out KATUSA (Korean Augmentation to the United States Army) Vision Operations (VISOPs). This effort addressed a longstanding shortage of corrective lenses for the KATUSA population. For months, policy restrictions had prevented the production of eye protection (EyePro) and protective mask (ProMask) inserts for KATUSA Soldiers, who had voiced an urgent need for them.

Optometry detachment teams in the U.S. Army are unique in their ability to pack, deploy and set up field optometry equipment, enabling them to deliver comprehensive vision care and fabricate lenses on the same day. Fully equipped by the Army, these teams can move their clinics to nearly any location, conduct full eye exams and offer limited care in areas without power. The 215th Medical Detachment Optometry is one of the few such teams that not only executes mobile vision operations but also provides daily eye care to service members stationed in Area IV. This mission demonstrates the advanced medical capabilities of the 168th Multifunc-

tional Medical Battalion and its commitment to expanding access to care across the Korean Peninsula. Through this effort, the unit also extended vital care to its Korean allies.



Capt. Lee refracting a Korean soldier at Camp Casey during KATUSA VISOP

In coordination with the Camp Carroll Optical Fabrication Lab, the 215th confirmed fabrication capabilities and began planning for the vision operation. The first stop was Osan Air Base, where most KATUSA Soldiers required full refractions to determine their prescription. Many were on duty without corrective lenses, highlighting the need to provide even basic vision care. At K-16 Air Base, most of the KATUSA personnel already had correct prescriptions and primarily needed the planned inserts. Camp Casey, home to a larger KATUSA population, had the highest number of Soldiers needing eye exams and inserts to meet medical readiness requirements.

Led by Capt. Jessica Lee, the 215th Medical Detachment Optometry team—including Sgt. 1st Class Bradley Coon, Staff Sgt. Sharmita Cuffie, Sgt. Brandon Stewart and Capt. Jay Kim—provided eye care for 206 KATUSA Soldiers during the operation. Updated prescription order forms were sent daily to the Camp Carroll lab, and lens fabrication is currently underway. The mission is sched-



Sgt. 1st Class Coon performing lensometry to determine a soldier's habitual prescription during KATUSA VISOPs



SGT Stewart determining a soldier's estimated prescription with autorefractometer machine at KATUSA VISOPs

uled to continue across Areas III and IV throughout August and September.

The 215th's motto, "Sight to Fight Tonight!" reflects their dedication to ensuring service members are visually prepared to meet the mission. The success of the KATUSA VISOPs stands as a clear example of that commitment.

KATUSAs Played Vital Role in Supporting U.S. Medical Units During Korean War

During the Korean War, Korean Augmentation to the United States Army (KATUSA) Soldiers served a crucial but often underrecognized role in supporting U.S. military medical operations, including Mobile Army Surgical Hospitals (MASH), evacuation hospitals and field aid stations.

Formed in 1950 as a joint U.S.-South Korean initiative, the KATUSA program integrated South Korean Soldiers directly into American units. While many served in infantry, signal and logistics roles, thousands were assigned to U.S. medical facilities, where their language skills, local knowledge and adaptability proved invaluable.

KATUSA personnel attached to MASH units performed a range of duties under high-pressure, combat-adjacent

conditions. They served as orderlies, ambulance drivers, litter bearers, translators and even surgical assistants when needed. In a war where communication between American forces and local Korean civilians or Republic of Korea (ROK) Army Soldiers was essential, KATUSAs often served as the bridge.

Their ability to interpret between English-speaking U.S. medical personnel and Korean patients or local support staff helped speed treatment, prevent confusion and improve the overall efficiency of care delivery. In many cases, KATUSAs helped medics identify wounded civilians or ROK Soldiers in need of urgent care who might otherwise have gone unnoticed.

Despite their contributions, many KATUSAs worked long hours under difficult and dangerous conditions, often without the full recognition given to their American counterparts. Still, their service was essential to the medical mission in Korea, especially given the high volume of casualties and the rapid pace of operations.

By the end of the war in 1953, more than 20,000 KATUSAs had served alongside U.S. forces. Their presence helped strengthen the medical support system and foster closer cooperation between American and South Korean militaries — a relationship that continues today.

KATUSAs assigned to medical units embodied the spirit of allied partnership, often providing the critical human connection needed to save lives in a foreign land torn by conflict. Their quiet work behind the scenes ensured that American and Korean wounded alike received timely and compassionate care under fire.

Their dedication and quiet service helped ensure the both American and Korean wounded received timely, life-saving care under some of the most challenging conditions of the 20th century.

75th Annual
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Maintaining the Pulse of Rotation

Medical Support for Korea Rotational Forces



568th Medical Company (Ground Ambulance)

By 1st Lt. Christina Sayaboun



Spc. Alaina Lee (Left) and Pfc. Trevor Ezaga (Center) treat a hand injury on an unidentified soldier (Right) from 1-4 Infantry at Pyeongtaek Port.

The 568th Medical Company (Ground Ambulance) – the Paladins – played a vital role in supporting Korea Rotational Forces by providing continuous medical coverage at Pyeongtaek Port, the primary logistical hub for the mission. As the 1st Brigade, 4th Infantry Division assumed its rotational duties in South Korea and the 1st Brigade, 2nd Infantry Division prepared to return home, the Paladins ensured the health and well-being of personnel involved in the massive transfer of equipment.

In June 2025, the unit maintained a 24-hour medical presence at the port, directly supporting the unloading of gear for the “Ivy” Brigade’s arrival and the preparation of equipment for the “Warrior” Brigade’s departure. The operation posed a significant logistical challenge, and the Paladins’ medics were integral to its success.

The team operated with a dedicated staff of seven medics, ready to respond to a wide range of potential medical situations. These included minor injuries sustained during equipment handling — such as cuts, abrasions and contusions — as well as more serious incidents requiring immediate stabilization and coordination with higher-level medical facilities at Camp Humphreys. To

enhance MEDEVAC readiness, the Paladins worked closely with drivers from the Korea Service Corps, who provided essential support in ensuring rapid transport capabilities were available when needed. Notably, no emergency medical evacuations were required, a testament to the team’s effective safety protocols and preventative measures.

Throughout the mission, the Paladins treated approximately 30 patients with minor illnesses and injuries at the port. The team also successfully mitigated the risk of heat injuries, with no emergent cases reported despite operating throughout June — a key achievement given the potential for heat-related illness during the Korean summer.



Pfc. Trevor Ezaga (Right) obtains a set of vital signs on an unidentified soldier (left) from 1-4 Infantry at Pyeongtaek Port.

Maintaining a constant state of readiness required thorough preparation and strong teamwork. The Paladins rotated through shifts to ensure continuous coverage and maintained proficiency in trauma care, preventative medicine and patient evacuation procedures.

“Some of the training we had were refreshers in preparation for this mission,” said Sgt. Rhee. “Since there are many rotations in our team, it was crucial to have training like patient loading and unloading, evacuation rehearsals and the Combat Life Saver class to get everyone ready for the KRF mission, while also being assigned to daily operations.”

Beyond direct patient care, the unit also played a key role in preventative medicine. The Paladins proactively addressed heat injury concerns, provided guidance on safe lifting techniques and ensured personnel were aware of potential hazards in the port environment.

“The common issue during the operation was the extreme heat, occasional rain and high tides,” said Sgt. Cedillo. “It caused low morale, fatigue and impatience for these units and delayed operations at times. But our team never had to treat anything serious, so it was a successful mission.”

The success of Korea Rotational Forces depends on the seamless integration of many support functions. The 568th Medical Company’s (Ground Ambulance) medical coverage at Pyeongtaek Port was a critical component of that success, demonstrating the unit’s commitment to the health and readiness of the force. The Paladins are proud to have supported both the incoming and

outgoing brigades and stand ready to support future operations — contributing to the continued strength of the U.S.-ROK alliance.

Ground Ambulance Evacuation Remains a Lifesaving Link on the Battlefield

While helicopters often symbolize battlefield medical evacuation, ground ambulances remain a critical component of military medicine, especially in environments where air support is limited or weather conditions prevent flight.

Ground ambulance crews are typically the first step in moving wounded personnel from point of injury to higher levels of care. During conflicts such as Iraq and Afghanistan, these crews operated armored ambulances under fire, navigating improvised explosive devices and hostile terrain to reach wounded Soldiers. Once on scene, medics provided initial lifesaving care, including hemorrhage control, airway management and pain relief, before transporting patients to battalion aid stations or forward surgical teams.

Unlike air evacuation, ground evacuation offers more consistent availability, particularly in urban combat or mountainous terrain. Ground medics also play a key role in triage during mass casualty events, prioritizing patients based on severity and survivability.

Modern military ambulances are equipped with advanced monitoring equipment, oxygen systems and secure communications, allowing medics to consult with higher-level providers en route.

Though often overshadowed by MEDEVAC helicopters, ground ambulance teams form the backbone of battlefield casualty care. Their speed, skill and adaptability save lives every day in combat and humanitarian missions alike.



Spc. Alaina Lee (Center) and Pfc. Trevor Ezaga (Right) obtains a set of vital signs on an unidentified soldier (Center) from 1-4 Infantry at Pyeongtaek Port.

Enhancing CBRN Patient Decontamination Capabilities

A Field Hospital Perspective

Headquarters and Headquarters Company, 502nd Field Hospital
By Capt. Jeffrey D. Prior, Company Commander



The exercise began with a critical alert: during a high-intensity conflict scenario on the Korean Peninsula, U.S. and Republic of Korea (ROK) forces were engaged in large-scale ground combat near the Demilitarized Zone (DMZ). Intelligence reports indicated that enemy forces had launched a rocket barrage toward Camp Humphreys, with initial assessments suggesting the potential use of blister or nerve agents targeting the flight line. As reports of casualties exhibiting severe respiratory distress, convulsions and chemical burns rapidly increased, the 502nd Field Hospital was placed on high alert.

Immediately, the Chemical, Biological, Radiological and Nuclear (CBRN) Mass Casualty (MASCAL) tent was deployed to manage the anticipated surge of contaminated patients arriving from and around the impact zone. Strategically positioned outside the main hospital structure, the tent facilitated rapid decontamination and triage of Soldiers arriving in Mission Oriented Protective Posture (MOPP) 4 gear, preventing the introduction of the chemical threat into the hospital. Medical teams worked continuously within the tent, processing both ambulatory and litter patients, providing initial stabilization before they were cleared for definitive care.



HHC 502FH completed the CBRN MASCAL Exercise at the Brian D. Allgood Army Community Hospital on 22 September 2025 in support of UFS 2024.



Staff Sgt. Debates, Sgt. Davis-Williams, Sfc. Garcia, Pfc. Clark discuss TTP procedures in the CBRN MASCAL tent on 21 September 2025.

Introduction

Maintaining force readiness in modern military medicine demands effective treatment of casualties, even in complex environments involving Chemical, Biological, Radiological and Nuclear (CBRN) contaminants. Patient decontamination is not simply an added step; it is crucial for protecting medical personnel, preventing secondary contamination and ensuring continued operational effectiveness. For the Headquarters and Headquarters Company (HHC), 502nd Field Hospital (FH), stationed at U.S. Army Garrison-Humphreys in Korea, this is paramount. The Korean Peninsula presents a unique CBRN threat landscape due to North Korea's documented development and potential use of chemical and biological weapons. Recognizing this, the hospital initiated a project to improve its decontamination capabilities, addressing underutilization of existing assets and gaps in personnel training. This article details our journey – identifying weaknesses, acquiring expertise, training leaders and testing protocols – ultimately enhancing our ability to treat CBRN casualties and support U.S. Forces Korea (USFK). Our preparedness contributes to the deterrence posture of USFK and reinforces our commit-

ment to maintaining peace and stability in the region.

Historical Context & Unveiling Untapped Potential

Military medicine has grappled with decontamination since the chemical warfare of World War I, initially relying on improvisational measures. World War II saw the introduction of specialized protective clothing and standardized procedures and the Korean War further emphasized CBRN preparedness. Refinements continued through the Gulf War and subsequent conflicts in Iraq and Afghanistan, though patient decontamination within a hospital setting remained particularly challenging due to the need to prevent secondary contamination within enclosed facilities.

The initiative began with a review of existing equipment. The team discovered a decontamination mass casualty kit available for their use and for training. We recognized its potential to significantly enhance our decontamination protocols given Korea's heightened CBRN threat and the need for rapid response.

To validate this potential, the unit participated in a proof-of-concept CBRN Mass Casualty (MASCAL) event during the USFK Annual Training Exercise, Ulchi Freedom Shield (UFS). The 549th Hospital Center's unique structure – with a Director also serving as commander of Brian D. Allgood Army Community Hospital – allowed us to leverage both Table of Distribution and Allowances (TDA) and Table of Organization and Equipment (TOE) capabilities, functioning as a key component of a broader defense posture and serving as a force multiplier. UFS provided a realistic environment to test and re-



HHC 502nd Field Hospital establishes the CBRN Decontamination Line at BDAACH on 22 September 2025 in preparation for the MASCAL exercise

fine our protocols.



Staff Sgt. Tiblow and USAG-H Fire Department provides water support to the CBRN DECON team on 22 September 2025 in preparation of the MASCAL.

Empowering Through Expertise & Leadership Development

Recognizing the complexity of CBRN decontamination, we sought expertise from the 4th Chemical Company. Their specialists provided invaluable training, translating theoretical knowledge into practical skills and offering recommendations to optimize our equipment, facilities and protocols.

We then prioritized leadership training, conducting a two-day "train the trainer" course for officers and Non-Commissioned Officers (NCOs). This hands-on course, led by CBRN experts, covered the theoretical and practical aspects of CBRN operations and MASCAL management, focusing on the operation of the system available to the team.

Training Objectives & Outcomes:

Technical Expertise: Leaders learned to set up, operate and maintain the CBRN MASCAL set efficiently.

Leadership Skills: Participants practiced managing personnel and patients during simulated CBRN MASCAL scenarios.

The training included briefings on CBRN threats prevalent on the Korean Peninsula – nerve agents like sarin, blister agents and choking agents – and their associated symptoms. Practical exercises focused on deploying the decontamination tent, operating water systems, managing waste and enforcing Personal Protective Equipment



HHC 502FH begins the initial establishment of the CBRN DECON location on 22 September 2025 in preparation for incoming patients.

(PPE) protocols. Scenario-based training involved triage, decontamination of ambulatory and litter patients and maintaining MOPP 4 (full protective gear) conditions.

By the end of the training, leaders demonstrated confidence in operating the CBRN MASCAL set and managing a contaminated environment. This transformed theoretical readiness into practical capability, equipping them to think and act decisively under pressure.

Validating Readiness: Ulchi Freedom Shield & Lessons Learned

The culmination of efforts came during the UFS exercise. The unit participated in a full-scale CBRN MASCAL simulation, responding to a scenario involving the deployment of sarin gas targeting U.S. and ROK troops. This scenario was based on historical data.

Our team rapidly deployed the CBRN MASCAL tent within 45 minutes, demonstrating the effectiveness of our training. We established a triage system (Immediate, Delayed, Minimal, Expectant) and coordinated with the 549th Hospital Center. Throughout the exercise, CBRN experts introduced realistic “injected scenarios” – equipment malfunctions, increased casualty numbers, and ambiguous information – forcing leaders to adapt and apply their training.

Key Lessons Learned:

Thorough Decontamination: An inject revealed the need for a change of protocol for contamination checks to prevent hospital contamination.

Equipment Optimization: Implementing seat belt

cutters from the CBRN unit reduced decontamination time by 15% and improved safety.

Personnel Welfare: Maintaining MOPP 4 for extended periods requires attention to personnel hydration and monitoring, necessitating cooling centers.

Continuous Training: Regular refamiliarization exercises are crucial for maintaining proficiency with the equipment.

The exercise highlighted the unit’s strengths and identified areas for improvement, informing future training and ensuring preparedness for a real-world CBRN incident. The unit is developing an annual refamiliarization exercise to ensure rotational Soldiers are consistently trained.



Lt. Gen Laneve awards the Eighth Army Coin of Excellence to Sgt. Ballard on 22 September 2025 for his hard work as the CBRN NCO of the Exercise.

Conclusion

The unit’s initiative to enhance patient decontamination capabilities demonstrates the power of leveraging existing resources and building internal expertise. By creatively utilizing the available systems, optimizing protocols and investing in leadership training, the unit significantly fortified its ability to respond to CBRN threats and support the warfighter. This success fostered a culture of proactive problem-solving and continuous improvement, strengthening the USFK medical network and reinforcing the unit’s commitment to regional stability. The unit is preparing to share these best practices with other units across the Korean Peninsula, fostering a collaborative environment that strengthens our collective

CBRN defense posture.

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Army Field Hospitals Faced Enemy Fire While Saving Lives in Wartime

Army field hospitals have long served as critical links in the chain of combat medical care, offering life-saving treatment near the front lines. But these hospitals have not always been safe zones. During major conflicts such as the Korean War, Vietnam and more recent operations in Iraq and Afghanistan, Army field hospitals often operated under the threat of direct and indirect enemy fire.

Though protected under the Geneva Conventions, medical facilities in war zones have frequently been targeted — either intentionally or as collateral damage. In practice, forward surgical teams and combat support hospitals (CSHs) have adapted to these dangers by hardening their structures, reinforcing security and training medical personnel to respond under fire.

In Vietnam, field hospitals sometimes came under mortar and rocket attacks, especially during major offensives. To reduce vulnerability, hospitals were often lo-

cated in rear areas or within larger base perimeters. Still, many operated in canvas tents or semi-permanent structures, offering limited protection. Medical personnel and patients would shelter in sandbagged bunkers or reinforced areas when sirens warned of incoming fire.

In Iraq and Afghanistan, indirect fire — particularly from rockets and mortars — posed constant threats to Army hospitals located on forward operating bases. Facilities such as the 86th Combat Support Hospital in Baghdad experienced multiple attacks during the height of the Iraq War. Hospitals employed blast walls, concrete barriers and hardened shelters to protect staff and patients. Medical tents were often retrofitted with Hesco barriers and overhead cover to reduce casualties during attacks.

Despite precautions, some hospitals sustained damage and casualties. In 2004, a suicide bomber attacked a dining tent near a medical facility at Forward Operating Base Marez in Mosul, killing 22 people, including Soldiers and civilian contractors. Medical teams stationed nearby immediately began treating the wounded, even as they faced the risk of secondary attacks.

Field hospitals also adapted tactically, becoming more mobile and modular. Forward Surgical Teams (FSTs), designed to be deployed closer to the front, are highly mobile units that can be packed up and relocated within hours. Their small footprint reduces the likelihood of being targeted and allows them to respond quickly to shifting battle lines or new threats.

Throughout all conflicts, Army medical personnel have demonstrated remarkable resilience. They continue treating patients even as incoming fire forces lockdowns, evacuations or temporary shutdowns of parts of the hospital. Their ability to deliver trauma care under fire saves countless lives, maintaining the U.S. military's commitment to never leave a wounded service member behind. Despite the risks, Army field hospitals remain one of the deliver care when and where it is needed most.

Esprit de Corps in Action

Pacific Medic Week: Forging Readiness Through Competition and Camaraderie



Headquarters and Headquarters Company, 65th Medical Brigade
By Master Sgt. John J. Pearson, Plans Noncommissioned Officer

From May 19 to 22, 2025, the 65th Medical Brigade transformed Camp Humphreys into a proving ground of physical grit, mental agility and unit pride during the inaugural Pacific Medic Week. Designed to strengthen the team by reinforcing cognitive resilience and esprit de corps, the four-day competition underscored the brigade's commitment to the Four Pillars of Readiness: physical, mental, social and spiritual. Each event sharpened the formation in its mission to compete, fight and win in the Korean Theater of Operations.



Col. Arroyo and Command Sgt. Maj. Price are leading the brigade; showcasing unit pride, physical readiness, and spirit de corps.

Opening Salvo: Tug-of-War and Brigade Run

Day One began at 0600 with opening remarks from Col. Arroyo and Command Sgt. Maj. Price, who challenged every Soldier to give their all. Their words lingered in the humid morning air as the first event—a no-holds-barred tug-of-war—kicked off. Each company and detachment dug into the dewy grass of Freedom Field, battling for the prized first position in the brigade run. The 168th Multifunctional Medical Battalion pulled through in the final round, seizing the lead and establishing early dominance.

Moments later, the formation surged through the bri-

gade footprint, guidons snapping in the breeze. The march order, determined by the tug-of-war results, created a vibrant, moving ribbon of color across Camp Humphreys, echoing cadence against the barracks walls. The run ended with high spirits and an eagerness to compete in the days ahead.

Day One Continues: Maintenance, CrossFit, Courts and Dodgeballs

The action moved to the motor pool, where recovery teams faced off in a timed vehicle recovery challenge. Soldiers from the 121st Field Hospital impressed evaluators by safely hooking up and towing a downed vehicle in record time. Meanwhile, functional fitness competitors tackled a grueling CrossFit Workout of the Day (WOD) that left even seasoned athletes gasping. The 168th MMB clenched another win, proving that grit, sweat—and perhaps a little pre-workout—can go a long way when bragging rights are at stake.

In the afternoon, sunlight poured through gym skylights during a double-elimination basketball tournament. The 168th MMB secured a hard-fought victory in a game that came down to the final seconds. The day closed with a high-octane dodgeball tournament, where the



Soldiers work together during the team maintenance event, focused on recovery and promoting technical skills and mission readiness.



Linked arms and taped legs, Soldiers work in synch at the University Challenge demonstrating from n a series of mystery challenges.

combined 106th Medical Detachment (Veterinary Service Support) and 135th Forward Resuscitative Surgical Detachment team claimed victory with quick reflexes and tactical defense, earning valuable points toward the overall standings.

Day Two: Bats, Mats, Nets and Brains

If Day One belonged to brawn, Day Two celebrated finesse and precision. Under sunny skies at Collier Sports Field, teams clashed in a spirited softball tournament full of sharp infield plays, outfield dives and energetic dugouts. After several close games, the combined HHC/618th Medical Company (Dental Area Support) team emerged as champions, showcasing teamwork, focus and fundamentals.



Sgt. Maj. White drives to the basket during a competitive match up in the basketball tournament at Zoeckler Gym.

Across the installation at Zoeckler Gym, a multi-station Tae Kwon Do competition combined shadow boxing, board breaking and form demonstrations. The 106th

MD(VSS) took top honors with the best overall performance as judged by guest referees.

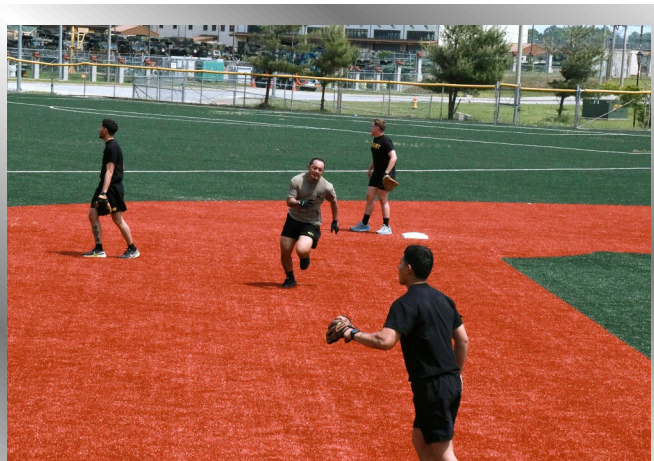
In the afternoon, the volleyball tournament at Collier Gym offered another test of teamwork. The 549th Hospital Center consolidated team dominated the court with powerful serves, tight rotations and impressive blocks that brought spectators to their feet. Simultaneously, the University Challenge tested Soldiers' communication, problem-solving and tactical thinking under pressure. The 121st FH emerged victorious, highlighting the role of mental agility and collaboration in mission readiness.

Moonlit Miles: The Norwegian Foot March

As evening fell, ruck straps tightened for the Norwegian Foot March, open to the entire Camp Humphreys community. More than 200 participants shouldered 11-kilogram packs and stepped into the night, completing a demanding 30-kilometer course. Every qualified finisher earned a certificate, the Marsjmerket badge and the kind of shared hardship that forges lasting bonds.

Day Three: Unit-Level Event Day

Wednesday shifted focus to internal cohesion. Companies across the brigade held their own organizational days, with events ranging from small-group resilience workshops to cornhole tournaments and water balloon relays. This decentralized day allowed command teams to reflect, celebrate small wins and begin shaping training plans for the next Pacific Medic Week.



Sgt. Anson charges towards third base during the softball tournament at Collier Sports Filed.



121st Commander, Lt. Col. Boenker, donned the championship belt at the Brigade Ball.

Day Four: Crowning the Champion and Capturing the Moment

The week's climax came Thursday morning in front of brigade headquarters as Col. Arroyo and Command Sgt. Maj. Price announced the final standings. The 121st Field Hospital edged out the 168th MMB and 106th MD (VSS) to claim the coveted "Pacific Medic Champions" belt by the narrowest of margins.

With adrenaline still high, the formation assembled for a panoramic brigade photo. Guidons stabbed the turf like markers on a shared journey, while camera shutters captured a hard-won unity for the history books—and for social media.



Soldiers, Family members and guest share a fun night of dancing after the formal portion of the Garden Gala ball.

Garden Gala: A Night to Remember

Later that evening, Soldiers, Family members and guests gathered at the Morning Calm Center for the Garden Gala brigade ball. Dressed in formal attire and service

uniforms, attendees enjoyed fine dining, formal toasts and a traditional Korean dance performance. Music filled the ballroom, and even the most exhausted competitors found their way to the dance floor.

The evening also featured the presentation of the Order of Military Medical Merit to multiple awardees, recognizing their significant contributions to Army Medicine. The celebration closed with an informal dance, ending Pacific Medic Week on a high note.

After Action Reflections

The belt is symbol of the bonds that all the Soldier found this week with their teammates.. As all the Pacific Medics are stationed throughout Korea, this type of event facilitated true kinship needed if ever the time comes their skills are need to save lives.

In just four days, Pacific Medic Week validated the brigade's holistic approach to readiness. Every tug-of-war pull, Tae Kwon Do stance and Norwegian Foot March stride reaffirmed the 65th Medical Brigade's readiness to "compete, fight and win" on the peninsula. As units return to routine training, they do so with stronger bonds, sharper minds and a renewed drive to etch their names on next year's championship belt.

Until then, the photo in front of brigade headquarters stands as lasting evidence of what it can achieve together.



The Pacific Medics take a team picture of in front of the Brigade Headquarters after completion of all competitive events.

(Pacific Medic Week: Image Gallery; page 36)

The Present and Future of NEXT-Alliance

KATUSA Healthcare Optimization: Celebrating 75 Years of Alliance with Innovation and Communication



121st Field Hospital
By KATUSA Sgt. Yoonsuk Lim

Two Languages, One Mission

In an era where collaboration defines the strength of military alliances, effective communication and technological innovation are critical assets. Recognizing the growing need to enhance interoperability between U.S. and Republic of Korea (ROK) forces, the Network for Empowering Exceptional Talent–Alliance (NEXT-A) was established.

Founded by KATUSA Sgt. Kim Siyoun and Lim Yoonsuk, with pivotal support from Maj. David A. Tobin, executive officer of the 121st Field Hospital, NEXT-A serves as a dynamic platform designed to harness the diverse talents of Soldiers from both nations—driving mutual growth, skill-sharing and cultural exchange.



Humphreys EMS personnel demonstrate patient transport by loading a Korean Nursing Cadet onto an ambulance.

The mission behind NEXT-A is clear: foster a tightly integrated, efficient and responsive alliance by enabling Soldiers at the grassroots level to contribute actively and innovatively. Through events focused on practical skills and advanced technological integration, NEXT-A aims to consistently enhance the collaborative capabilities of allied forces, ensuring readiness and effectiveness in joint operations.

This vision came to life June 10, 2025, during the landmark “KATUSA Healthcare Optimization Think Tank.” The pioneering event united medical personnel from United States Forces Korea (USFK), KATUSA soldiers and cadets from the Korean Armed Forces Nursing Academy (KAFNA) to commemorate the 75th anniversary of the KATUSA program. The initiative emphasized not only bridging linguistic divides but also strategically integrating advanced technologies into medical practice—highlighting the indispensable role KATUSA soldiers play in strengthening the ROK-U.S. alliance.

Code Switch: Training for Multilingual Care

The event began with a bilingual emergency medical services (EMS) vocabulary workshop, coordinated by Sgt. Kim of the 502nd Field Hospital. Led by U.S. Army Capt. Githinji and ROK Army Capt. Joo, participants immersed themselves in essential medical terminology related to cardiac arrest, blood tests, X-rays and intravenous (IV) insertions—training crucial for effective communication during high-stakes emergencies.

Interactive role-playing exercises further enriched the training with practical, realistic simulations. “Clear com-



Capt. Githinji (US Army) and Capt. Joo (ROK Army) teach foundational medical terminology to soldiers in both English and Korean.

munication and training enhance our collective readiness, enabling us to operate as one team,” said Sgt. Kim.

“Clear communication and training enhances our collective readiness, enabling us to operate as one team”.

Following the vocabulary workshop, paramedics from Camp Humphreys conducted an informative demonstration of ambulance operations and emergency response protocols, offering participants firsthand insights into real-world procedures.

The afternoon focused on technological innovation, with an insightful forum on the use of artificial intelligence in healthcare, presented by Sgt. Lim. Drawing on his background in AI and digital economics, Lim outlined the potential of AI to transform healthcare—improving diagnostic accuracy through advanced imaging, and enabling personalized treatments guided by genetic data.

Distinguished panelists from Johns Hopkins University and the University of Oxford contributed to the discussion, exploring how AI could revolutionize patient care. They examined how automation, continuous monitoring and predictive analytics could streamline healthcare delivery, enhance provider efficiency and improve patient outcomes.



KATUSA-Sgt. Lim leads a discussion during the AI in Healthcare Forum highlighting future improvements and current challenges in the use of AI.

Capt. Watson of the 135th Forward Resuscitative Surgical Detachment emphasized, “KATUSA soldiers uniquely bridge cultural and operational divides, and integrating AI enhances their ability to contribute effectively to our

joint healthcare mission.”

“AI will not replace doctors, but doctors who use AI will replace those who don’t.”



Forum attendees watch a presentation from panelists online of their current experience with AI use in the healthcare sphere.

Panelists also focused on AI’s application in military healthcare, including joint ventures in AI-powered telehealth services, disease prevention through predictive modeling and collaborative genomic research—efforts aimed at bolstering healthcare security within the alliance.

Concluding the event, Sgt. Lim emphasized the need for sustained joint research and regular forums dedicated to bilateral knowledge exchange. Citing AI expert Peter Lee, he said, “AI will not replace doctors, but doctors who use AI will replace those who don’t.”

The event’s success underscored NEXT-A’s vital role in advancing interoperability, fostering mutual understanding and driving the collaborative spirit essential to the future of allied military cooperation. As NEXT-A continues championing these initiatives, the ROK-U.S. alliance stands poised to achieve unprecedented levels of operational excellence—ensuring readiness and resilience in confronting future healthcare challenges together.

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(See page 39)

Reflections on Command

Capturing the moments leading Soldiers from Commanders who were in the field supporting 65th Medical Brigade's mission and vision across the Korean Theater of Operations (KTO).



168th Multifunctional Medical Battalion (MMB)
By Sgt. 1st Class Ian K. Inouye

Transition at the Ready

Over the past several months, the “Powerhouse” Battalion transitioned several key leaders out of command positions within the 65th Medical Brigade. Despite the change, momentum remained steady—due largely to the lessons learned and continuity established for incoming commanders and first sergeants.

Comprised of two Medical Company Area Support units (75th and 629th), two Medical Company Ground Ambulance units (560th and 568th), a Medical Logistics Company (563rd), two Medical Detachment Preventive Medicine units (5th and 154th), a Medical Detachment Blood Support (95th), a Medical Detachment Optometry (215th), an attached Combat and Operational Stress Control and Services element (327th), and a Headquarters and Headquarters Detachment (HHD), the composition and mission of these units are unique across most forward elements. We are the only multifunctional medical battalion (MMB) serving an armistice and theater healthcare delivery mission with a truly expeditionary focus. These roles are ever evolving and demand constant leadership oversight.



Lt. Col. Nicholas Nussdorfer and Col. Edward Arroyo during the Change of Command on June 18th, 2025.



Command teams from across Powerhouse attend a Battalion Planning Conference at Camp Walker on Sept. 16, 2024.

Here are a few reflections outgoing commanders shared as they completed their tours.

Healthcare in the KTO

Unlike most stateside or OCONUS commands that typically deliver healthcare through centralized nodes—such as Role III or IV facilities under the Defense Health Agency—providing care in the Korean Theater of Operations (KTO) requires creativity and adaptability.

Supporting joint warfighters in geographically dispersed areas with limited capacity was a balancing act for many leaders. Whether delivering optical fabrication to U.S. Marine Corps personnel or supporting brigade- and division-level exercises alongside organic elements, commanders faced constant challenges. However, the core mission of health service support and force health protection remained paramount in sustaining troop readiness.

Many found the Eighth Army's “Fight Tonight” concept central to their mission, ensuring that warfighters remained prepared to transition swiftly from competition to conflict if needed.



Maj. Walter Peeples and Lt. Col. Nicholas Nussdorfer recognize EFMB Support on April 24th, 2025.

The Future of Army Medicine

Commanders and senior enlisted leaders were often tasked with supporting their core healthcare missions while simultaneously leading and coordinating high-visibility, force-shaping events. These included overseeing the Best Medic competitions (brigade and Eighth Army levels), the Expert Field Medical Badge, the German Armed Forces Proficiency Badge and key joint U.S.-ROK Army exercises spanning multiple years.

Such events—outside their inherent command responsibilities—required special attention to ensure smooth execution without degrading healthcare delivery. At the same time, these challenges helped build a more capable force, equipped to perform its medical mission under pressure.

Leaders drew on their backgrounds and experience to balance daily operations, Soldier development and high-



Capt. Roy Villalobos runs along with Soldier during the GAFPB on June 17th, 2025.

er-level priorities—often from a distance. This ability to lead effectively across dispersed elements was a rare but essential skill required by the KTO's demanding environment.

Lasting Impressions

Although most commanders found it difficult to pinpoint a single highlight from their tenure, one theme was consistent: impacting lives. There was no shortage of doing more, or providing more, especially in moments of need.

Many leaders recognized the gravity of their roles, and it was often during these pivotal moments that their influence as leaders became most evident. Reinforcing that impact, Soldiers from across units regularly praised the dedication, passion and knowledge of their peers, reflecting the quality of leadership passed down.

These efforts left a lasting legacy, as many Soldiers went on to earn commissioning opportunities, attend advanced schools and assume leadership positions across the Army—largely inspired by the leadership teams under whom they served.

Mentions to Future Commanders and First Sergeants

Capturing every lesson learned during command is nearly impossible. However, outgoing leaders offered the following reflections for those who follow:

- Make time for small interactions; they leave meaningful impressions.
- Take time to learn your job—let learning be constant and deliberate.
- Be present, respectful and ready to adapt to situations, familiar or not.
- Keep a trusted voice close; it helps maintain focus and mindfulness.
- Pay attention to how you work; it will clarify your priorities when it matters most. (For example: To care for Soldiers, listen first, then act—not the other way around.)
- Treat everyone like part of a growing Family; this builds a strong unit dynamic.

—No leader leads alone. There is always a team behind you—both supporting and seeking direction. Let that guide your daily actions.

—When needed, own your faults. Failure is expected, and accountability is routine.

Give yourself time to feel stress. Carrying it is natural—but showing it constantly is not. Mindfulness goes a long way under the weight of command.

Although these key leaders have left command, their legacy continues to shape Powerhouse Soldiers. In turn, this has strengthened healthcare and sustainment across the 65th Medical Brigade, Eighth Army and beyond.

Penicillin Transformed Wartime Medicine and Saved Millions

When Allied troops stormed the beaches of Normandy in 1944, many carried more than rifles and rations — they carried a revolutionary drug that would reshape military medicine and save countless lives: penicillin.

Discovered in 1928 by Scottish scientist Alexander Fleming, penicillin did not reach mass production or battlefield relevance until the early 1940s. By the time the United States entered World War II, the race was on to turn this mold-derived compound into a weapon against the deadliest threats to wounded Soldiers: infection and sepsis.

Before penicillin, even minor battlefield injuries often proved fatal. Bullets and shrapnel carried dirt and bacteria deep into tissue, and wounds that might have been survivable became life-threatening due to gangrene, pneumonia, or bloodstream infections. Surgeons relied on antiseptics and radical measures like amputation to prevent infections from spreading. Antibiotics like sulfa drugs existed but were far less effective than what penicillin would soon offer.

In 1941, under pressure from U.S. and British governments, scientists and pharmaceutical companies launched a crash effort to produce penicillin on an industrial scale. Using new fermentation techniques and innovative methods involving corn steep liquor — a by-

product of corn processing — American firms such as Pfizer dramatically increased production.

By 1943, penicillin was being tested in North Africa and Italy. Its impact was immediate and dramatic. Soldiers with infected wounds, who previously might have faced amputations or death, recovered more quickly and with fewer complications. By D-Day in June 1944, Allied forces had enough penicillin stockpiled to treat every wounded Soldier in the invasion.

The drug proved especially effective against wound infections, pneumonia, syphilis and gonorrhea — diseases that had drained manpower in past wars. During World War I, for example, sexually transmitted infections were a major cause of non-combat casualties. With penicillin, treatment times dropped dramatically, returning troops to duty far more quickly. It also reduced the spread of disease among civilians and Soldiers alike, reinforcing its value beyond direct battlefield injuries.

Reports from European Theater field hospitals detailed how penicillin-treated wounds healed faster and with less surgical intervention. Amputation rates fell. Hospital stays shortened. Infections that had previously been considered a death sentence were now routinely survivable. The psychological impact was also significant — medics, doctors and wounded Soldiers alike had new hope that survival was possible, even in dire conditions.

Penicillin also changed how military medics approached trauma care. With an effective antibiotic in hand, they were more confident in delaying radical surgeries and transporting patients over greater distances. This flexibility made battlefield evacuation chains more efficient and safer, increasing survival rates.

Despite the risks of overuse, penicillin's wartime success remains one of the most significant advances in medical history. It not only changed outcomes for individual Soldiers but reshaped military medical practice, setting the stage for modern trauma care. The legacy of wartime penicillin endures — not only in its continued medical use but in how it demonstrated that scientific innovation, when prioritized and properly supported, can change the course of history.

Trilateral Junior Officer Exchange Program



168th Multifunctional Medical Battalion (MMB)
By 1st Lt. Kristen Guiney

Overview

Alliances are not built overnight—they are forged through shared experiences, training and trust. The Trilateral Junior Officer Exchange Program aims to strengthen trilateral defense relationships and enable experiential learning, mentorship and leadership coaching opportunities among Japan, the United States and the Republic of Korea (ROK). This engagement convened 18 junior officers—six from each nation—with the goal of enhancing interoperability, broadening multinational military perspectives and, above all, strengthening the enduring alliance.

At a time when the regional security environment is marked by persistent and evolving threats—specifically, the destabilizing posture of the Democratic People's Republic of Korea (DPRK) and the growing complexity of multi-domain operations—programs like this exchange are essential to building a unified, responsive and adaptable force. The Trilateral Junior Officer Exchange Program not only reinforces operational coordination but also fosters the personal and professional relationships that form the backbone of coalition success in both peacetime engagement and wartime execution.



KMA utilizes sensors in the weapon and ACH to analyze missed targets.

Building the Foundation: Strategic Dialogue and Shared Understanding

Through strategic briefings at ROK Army Headquarters in Gyeryong Dae and Eighth Army Headquarters, participating officers engaged directly with senior leaders, ROK Army G-3 Brig. Gen. Kim Young Kyun and 8th Army Acting Commander Brig. Gen. Dale S. Crockett. These sessions outlined key lines of effort within the Korean Theater of Operations (KTO) and emphasized the essential role junior leaders play in shaping the future operational environment.

The briefs provided valuable insights into current and future challenges facing the alliance, including threats from the DPRK, the increasing importance of multi-domain readiness and the strategic imperative to present a unified front. By aligning on shared objectives and recognizing each partner's unique capabilities, officers deepened their understanding of how the trilateral alliance functions as a collective deterrent and stabilizing force in the region.

Observing Operational Capabilities: Mechanized Training and Tactical Integration

A key component of the exchange was the tactical-level observation of the ROK Army's 32nd Tank Battalion conducting mechanized force training at Jipo-ri Training Area. This event gave participants firsthand insight into how ROK ground forces execute combined arms operations in terrain that mirrors potential battlefield conditions. Observing the integration of armor, maneuver and direct-fire assets reinforced the ROK's high level of operational readiness and validated its ability to respond rapidly in a "Fight Tonight" scenario.

Observing these capabilities also allowed junior officers to evaluate and compare doctrinal similarities and differences between their respective militaries. These

insights are invaluable for future joint operations planning, as they help identify potential interoperability gaps while promoting synchronized efforts. More importantly, the experience reinforced a shared commitment to maintaining readiness and lethality under real-world threat conditions.

Strategic Awareness: The Reality of the North Korean Threat

The tour of the 2nd Tunnel and the Cheorwon Peace Observatory provided an unfiltered view into the proximity and reality of the North Korean threat. Participants stood face to face with active DPRK observation posts, physically witnessing the narrow buffer zone that separates peace from conflict on the peninsula. These tours reinforced the reality of Soldiers stationed in Korea and illustrated the tangible value of a credible deterrence posture. For many participants—especially those from outside Korea—the experience served not only as a reminder of the enduring armistice but also reaffirmed the importance of a unified and trained "Fight Tonight" posture.

Developing Future Leaders: Training the Next Generation at Korea Military Academy

Participants also visited the Korea Military Academy (KMA), where they engaged with cadets and faculty responsible for training the next generation of ROK Army leaders. The interaction between junior officers and cadets allowed for a meaningful exchange of ideas on leadership, professionalism and the evolving character of war. The visit showcased the academy's innovative curriculum and modernization efforts, which focus on leadership development, combat readiness and technological integration to meet the demands of future warfare.

Leaders bear the responsibility to shape, mentor and prepare subordinates—not only to meet the demands of today, but to lead in the conflicts of tomorrow. Building competence, confidence and warfighting readiness at the junior level is essential to sustaining a lethal and agile force. This charge extends beyond national lines; it includes fostering trust, interoperability and shared purpose among allies. This experience demonstrated how

allied nations invest in training and educating their future leaders, which, in turn, inspired participants to serve as leaders who pass on a stronger alliance—one grounded in mutual respect, operational unity and a collective commitment to winning the future fight.



Participants visit the Cheorwon Peace Observatory and viewed active DPRK observation posts.

Strength Through Unity: Professional Development and Lasting Relationships

Beyond tactical observations and strategic briefings, the program also prioritized relationship-building among participants. Through daily engagements, discussions and shared experiences, officers forged connections that transcend language and national boundaries. These personal relationships contribute to a deeper level of trust and cooperation—an intangible yet critical component of multinational operations.

By engaging at the junior officer level, the program ensures that the future field-grade and senior leaders of the ROK, Japan and the United States are firmly grounded in mutual respect and operational familiarity. As these officers progress in their careers, the foundation built during this exchange will enhance future coordination and reduce friction in combined operations.

A Stronger Alliance for the Future Fight

The 2025 Trilateral Junior Officer Exchange Program exemplifies the strategic value of multinational engagement at the junior leader level. By prioritizing shared understanding, tactical observation and relationship-building, the program delivers immediate benefits while laying the groundwork for enduring interoperability.

As the security environment in the Indo-Pacific grows more complex, the need for a unified, agile and lethal alliance has never been greater. The officers who participated in this exchange return to their formations not only more informed, but more committed to the defense of shared values and collective security.

Strengthening the alliance is not just a strategic objective—it is a mission imperative. Programs like this ensure that commitment is not only expressed at the highest levels of command but lived and reinforced by the officers who will one day lead it into the future.



Participants experience DPRK threat's physical proximity at the 2nd Tunnel.

Army Medical Officer and Noncommissioned Officer Exchange Programs Strengthen Global Partnerships and Readiness

The U.S. Army Medical Department (AMEDD) participates in Medical Officer Exchange Programs with allied and partner nations, fostering medical collaboration, enhancing interoperability and strengthening relationships across military medical communities worldwide.

These exchange programs provide a unique opportunity for U.S. Army medical officers to serve temporarily in foreign military medical units and for international officers to gain experience in U.S. Army medical environments. The goal is to share medical expertise, align practices and improve the ability of coalition forces to operate together in joint or multinational operations.

Medical exchanges typically last from a few weeks to

several months, depending on the nature of the program and the needs of the participating countries. During these assignments, medical officers may work in clinical settings, field hospitals, or in operational and training environments. They engage in everything from trauma care and surgical support to preventive medicine and logistical coordination.

The program is not only about clinical expertise but also about building strategic military alliances. In regions where the U.S. operates in coalition environments—such as in NATO missions or humanitarian responses—the ability to understand partner medical systems is vital. These exchanges help break down communication barriers and promote trust among allied forces.

Additionally, medical officer exchanges allow participants to observe innovative techniques and technologies used abroad. In some cases, exchange officers have returned to their home units with new protocols or equipment ideas that have improved care delivery or operational efficiency.

Army officials emphasize that these exchanges play a key role in preparing the military medical force for future conflicts and global health challenges. In an era of increasing joint operations and multinational missions, having medical officers who are culturally competent and operationally aligned with partner forces is considered a strategic advantage.

The U.S. Army Medical Department continues to expand its exchange efforts with nations in Europe, Asia and the Americas, reinforcing its commitment to global medical readiness and cooperation.

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Force Management: Shaping the Future Fight

Understanding how the Army identifies, develops and integrates new capabilities, exemplified by a hypothetical case study of a medical materiel solution.



Clinical Operations, 65th Medical Brigade
By Maj. Michael Yang, Chief Medical Officer

Understanding Force Management: Identifying the Need

Effective force management is the bedrock of military readiness, ensuring the U.S. Army is equipped to meet evolving threats and operational demands. It is a continuous, systematic process designed to identify capability gaps, develop comprehensive solutions, and integrate them seamlessly into the force. At its core, force management seeks to optimize how the Army organizes, trains, and equips its personnel to achieve strategic objectives. The U.S. Army Functional Concept for Sustainment highlights the need for medical support to enable the sustainment warfighting function, especially when operating outside the range of medical evacuation coverage, a sentiment echoed by the Army Health System of 2030.

A foundational step in force management is the rigorous identification of needs, often initiated through a Capabilities-Based Assessment (CBA). This analytical process uncovers existing or projected capability gaps within the force. For instance, the Army might identify a significant gap in its ability to provide prolonged field care (PFC) and advanced medical support in contested or austere environments during Large Scale Combat Operations (LSCO) – a critical concern when immediate casualty evacuation is not possible. The Army Multi-Domain Operations (MDO) Concept specifically highlights the need for resilient, forward-deployed medical support in contested environments.

Once a gap is identified and validated, a Functional Needs Analysis (FNA) meticulously details the specific requirements for a solution, outlining what new capabilities are needed. Following the FNA, the Functional Area Analysis (FAA) examines how the kit integrates with existing medical systems and warfighting functions. Final-

ly, the Functional Solution Analysis (FSA) evaluates potential solutions. From these analyses, various solutions are considered, including doctrine, organization, training, materiel, leadership and education, personnel, facilities, and policy (DOTMLPF-P). Often, a robust materiel solution is deemed essential.



Pacific Medics from the 121st Field Hospital conduct a ground casualty evacuation, showcasing the vital need for robust prolonged field care capabilities in challenging operational environments.

A Materiel Solution: A Prolonged Field Care Medical Kit

Consider, for example, the development of a materiel solution like a modular, self-contained Prolonged Field Care (PFC) Medical Kit. Such a kit would represent a tangible and scalable solution, providing forward-deployed medics and medical personnel with the necessary tools and resources to manage casualties effectively in prolonged field care scenarios. The kit would aim to stabilize casualties, manage life-threatening injuries, and prepare them for evacuation, ultimately enhancing a unit's ability to maintain combat effectiveness. This capability is critical for surgical intervention/resuscitation and critical care in austere environments where rapid evacuation is not possible. Commanders will deploy PFC Medical Kits with medics and medical professionals within

forward-deployed elements operating in contested or austere environments.

This hypothetical kit would be designed with critical capabilities in mind. For instance, it would require essential prolonged care supplies, blood products, and medications for pain management and infection control. To facilitate remote expert consultation and guidance in austere environments, the kit would also need secure telemedicine connectivity. Key Performance Parameters (KPPs) would define its operational requirements; for example, one parameter mandates the kit operate for a minimum of 72 hours on a single power source (solar, battery, or hybrid). Another parameter focuses on seamless Casualty Tracking Integration, requiring the kit to integrate with existing digital casualty tracking systems (e.g., eMEDS) to facilitate accurate reporting and evacuation coordination. It also needs to adhere to robust performance, security and ruggedization standards, recognizing that products not compatible with existing medical systems or vulnerable to cyberattacks could become a burden rather than a benefit. The PFC Medical Kit operates as a self-contained medical support system, providing functionality for advanced diagnostic testing, wound care, blood transfusions, telemedicine consultations and pain management.

Integrating the Solution: Training and Organization Imperatives

A new materiel solution, however, is never implemented in isolation. Effective force management dictates that concurrent changes in organization and training are vital for maximizing their impact across the DOTMLPF-P domains. For our hypothetical PFC Medical Kit, this would involve establishing specialized Prolonged Field Care Teams (PFCTs) within existing medical units, requiring additional personnel trained in the use of the new equipment and capable of providing prolonged field care. The secondary effect may require the creation of new MOS qualifications or an Additional Skill Identifier (ASI) and enhancements to existing medical training programs. Organizationally, the introduction of the kit will necessitate changes to medical unit structures, with units like Medical Company Area Support (MCAS), Medi-

cal Company Ground Ambulances (MCGA), and Battalion Aid Stations (BAS) potentially requiring adaptation.

Integrating such a solution requires careful planning and proper change management. Medical personnel would need to allocate time from the training schedules to learn and become proficient in using the kit. Clear explanations of its purpose, benefits and how it enhances their capabilities are crucial to foster buy-in and proficiency. The fielding of such a kit will pose initial challenges for unit readiness, as there will likely be psychological inertia from units already heavily tasked. Performing a thorough evaluation, testing, and selection can mitigate these risks. This significance can alleviate suspicions and facilitate a plan and roll out training sessions on using the PFC kits. The kit should also include disposable, single-use components wherever possible to minimize the risk of cross-contamination and infection, and its interface should be intuitive, requiring minimal additional training time.

Strategic Implementation: Acquisition, Doctrine, and Readiness

Implementing a solution like the PFC Medical Kit requires a phased approach encompassing acquisition, resourcing and integration. The Army should implement the PFC Medical Kit acquisition through the Defense Acquisition System (DAS), specifically following a streamlined process to expedite delivery. The most feasible and cost-effective interim solution, while a new system is being developed, is often to find existing Commercial Off-The-Shelf (COTS) products. Whatever the challenges may be with COTS products—such as potential performance, security, and ruggedization limitations, or compatibility issues with existing medical systems—performing thorough evaluation, testing, and selection can mitigate these risks, making COTS the best interim solution.

Furthermore, new materiel solutions demand corresponding updates across various domains. Hardware and software designs for the PFC Medical Kit would require open and modular architectures, allowing for seamless integration with existing systems. Interoperability testing will be conducted to ensure this. Potential vulnerabilities to cyberattacks and communication sys-

tems are also possible; therefore, robust security measures are paramount. In the doctrine domain, the Army must update current doctrine to reflect the capabilities and limitations of the PFC Medical Kit. New tactics, techniques, and procedures (TTPs) may need to be developed to integrate the kit into medical operations. A final approach is to address the training domain; the United States Army Training and Doctrine Command (TRADOC) would implement advanced PFC training programs. The desired outcomes will ensure medical personnel are proficient in using the kit, enhancing sustainment in contested environments by reducing reliance on immediate evacuation.

Relevance to the 65th Medical Brigade and its Readiness

The imperative for robust force management resonates profoundly within the 65th Medical Brigade, the Army's only forward-stationed medical brigade operating under armistice conditions in the Republic of Korea. The brigade, with its two Medical Company Ground Ambulances (MCGAs) under a Multifunctional Medical Battalion (MMB) operating across dispersed locations in the Korean theater, constantly evaluates its capabilities against the potential for large-scale combat operations. In this unique environment, where immediate air evacuation might be severely challenged or impossible, ground casualty evacuation becomes critical. Concepts like the hypothetical PFC Medical Kit directly address these operational realities, enhancing the brigade's ability to provide sustained medical support to forward-deployed units and manage casualties effectively for extended periods.

The 65th Medical Brigade is actively engaged in "transforming in contact," a strategy addressing the challenges of sustaining "Fight Tonight" readiness while simultaneously providing healthcare delivery in the Korean Theater of Operations and preparing for an Army of 2030. For the brigade, the principles of continuous training, adapting unit structures, and ensuring a resilient supply chain for consumables are not theoretical exercises. They are essential components of maintaining the high level of medical readiness required to support its mission, ensuring continuity of care even as Army

medical personnel come and go. Bolstering overall unit readiness in a demanding operational environment enables units to respond effectively to a broader range of contingencies. The newfound assurance to treat in prolonged field care provides a feedback loop to increased operational readiness, enabling commanders to sustain combat power, reduce preventable deaths and rapidly return Soldiers to duty. After overcoming these challenges, the long-term impact on readiness will be significant.

Ultimately, force management initiatives, whether through new materiel, revised doctrine or enhanced training, aim to build a robust foundation that equips military personnel to become proficient in demanding scenarios. The proficiency gained from mastering new equipment and techniques, like those associated with prolonged field care, not only enhances combat readiness but can also positively impact retention, as advanced skillsets are highly attractive in both military and civilian sectors.

By continuously assessing needs, developing integrated solutions, and adapting organizational structures and training protocols, force management ensures the U.S. Army remains agile, effective, and prepared for the complexities of modern warfare. Materiel solutions, exemplified by our hypothetical Prolonged Field Care Medical Kit, are a critical component of this overarching strategy to secure the future fight.

Army Fact – Class VIII Supplies in the Korean War:

During the Korean War, Class VIII supplies—including medical kits, surgical instruments, and whole blood—were critical to frontline care. The rapid distribution of these medical essentials enabled mobile Army surgical hospitals (MASH units) to perform life-saving procedures, significantly improving survival rates for wounded soldiers in austere, combat-heavy environments.

The 168th MMB Good Neighbor Program

A Commitment to Community in Korea

Support Operations, 168th Multifunctional Medical Battalion (MMB)
By Staff Sgt. Arlene Richards, Noncommission Officer in Charge



The 168th Multifunctional Medical Battalion was recognized as the 2024 U.S. Forces Korea (USFK) battalion-level unit Ambassador for the Alliance Good Neighbor Award by USFK Commanding General Gen. Xavier T. Brunson and Command Sgt. Maj. Jack H. Love during the 2024 USFK Good Neighbor Program (GNP) Awards Ceremony on May 27, 2025.

The USFK GNP serves as a key initiative that fosters harmonious relationships, promoting interaction and goodwill between military personnel and local residents. Established in 2003, the program honors Koreans, Americans, units and organizations that strengthen the 75-year U.S.-ROK alliance through acts of service across the community.

The 168th MMB “Powerhouse” team cultivated a culture of community pride and integration with numerous local organizations. The unit played a pivotal role in bridging cultural gaps and strengthening ties through a range of outreach initiatives, particularly in educational settings. The relationship between USFK and local Korean communities remains significant and multifaceted—rooted in shared values, mutual respect and a commitment to collaboration.

The Good Neighbor Program embodies the essence of community engagement, underscoring the Army's commitment to being a positive presence in the lives of local Korean citizens. Service members actively participate in community activities, building cultural ties and fostering lasting friendships and understanding. The 168th MMB stands out as a leading unit in this outreach effort, notably through its support of the Daegu Seogu Youth Center, a hub for learning, community events and cultural exchange.



May, 27 2025 - the 168th Command team and unit ambassadors posed with the United States Forces Korea Good Neighbor Program Award.



May 27, 2025 the 168th Command team received the United States Forces Korea Good Neighbor Program unit award.

One of the unit's signature initiatives is its monthly volunteer program at the youth center. Service members and their Families strengthen bonds by teaching English to Korean students from elementary through high school. The program benefits both Soldiers and students: Volunteers bring unique perspectives and often incorporate aspects of American culture into their lessons. In turn, students gain not only language skills but also broader cultural understanding—helping break down barriers and misconceptions.

Over the past seven months, more than 30 Soldiers from the 168th MMB have volunteered their time and energy, collectively logging more than 3,000 hours.



Staff Sgt. Richards posed with two students at the Daegu Seogu Youth Center. This effort embodies the outreach effort of the Good Neighbor Program.

These Soldiers exemplify enthusiasm and dedication in cultivating a positive relationship with the community. Each hour of instruction contributes to academic development while also allowing Soldiers to immerse themselves in local culture, creating lasting connections.

The impact of the Good Neighbor Program extends beyond immediate educational outcomes. For students, English proficiency opens doors to future academic, professional and international opportunities. For Soldiers, volunteering offers a way to give back to the community that hosts them, instilling a sense of belonging and shared purpose. This reciprocal relationship uplifts both the volunteers and the youth they support.

In conclusion, the USFK Good Neighbor Program is more than a community outreach effort—it is a testament to the enduring U.S.-ROK partnership. Through monthly volunteer opportunities at the Daegu Seogu Youth Center, Soldiers build stronger educational foundations and deeper connections with Korean society. As the program continues to grow, so too will the bonds between the Army and the communities it serves—paving the way for a future grounded in cooperation, mutual respect and shared commitment.

#KachiKapshida

65th Medical Brigade Integrates with Eighth Army, USFK to Strengthen Medical Support in Korea

The 65th Medical Brigade plays a central role in delivering medical support to U.S. forces stationed on the Korean Peninsula through its integration with Eighth Army and United States Forces Korea (USFK).

As the primary medical command in the region, the brigade provides a full spectrum of health service support, including clinical care, medical logistics, preventive medicine, veterinary services, dental care, and operational health planning. Through its coordination with Eighth Army and USFK, the 65th Medical Brigade ensures medical readiness is synchronized with operational requirements and aligned with joint and combined force objectives.

The brigade supports U.S. military personnel and works in close collaboration with Republic of Korea (ROK) medical units. This partnership enhances interoperability and reinforces the combined force's ability to provide timely and effective medical care during routine operations, training exercises, and contingency missions.

Medical support includes sustainment of care across all echelons, from point-of-injury treatment and medical evacuation to Role 3 hospital-level care. The 65th Medical Brigade also contributes to theater-level planning, multinational drills, and medical readiness initiatives, ensuring medical forces are trained, equipped, and prepared for a diverse range of operational environments.

Additionally, the brigade oversees the management and distribution of Class VIII medical materiel throughout the Korean theater. This includes coordination of blood supplies, pharmaceuticals, field medical equipment, and medical maintenance. Effective logistics integration ensures uninterrupted support during both peacetime operations and large-scale exercises, such as Freedom Shield and Ulchi Freedom Shield.

By integrating across commands, responding to evolving threats, and strengthening relationships with host-nation counterparts, the 65th Medical Brigade helps maintain a medically ready force and supports the broader mission of deterrence, stability, and defense on the Korean Peninsula.

Full-Mouth Rehabilitation With Patented Technology

Innovative Solution for Full-Mouth Dental Implant Prosthesis Fabrication



618th Medical Company Dental Area Support
By Maj. Ken Kim



Dental implant supported prosthesis replacing all upper teeth.

Replacing All Teeth With Dental Implants

When service members experience extensive tooth loss, severe decay or advanced gum disease, their quality of life and dental readiness are significantly affected. Full-mouth rehabilitation using dental implants offers a long-term solution to restore both function and appearance. In these cases, multiple implants are strategically placed to support a one-piece, rigid prosthesis that replaces all missing teeth.

Dental implants—titanium screws embedded in the jawbone—require extremely precise recording of their positions to ensure successful prosthesis fabrication. Any inaccuracies can result in ill-fitting prostheses, which may lead to biological complications such as inflammation and bone loss, or mechanical issues like fractures and screw loosening.

Accurate capture of implant positions is essential to ensure long-term clinical success and to support the health, function and morale of service members.

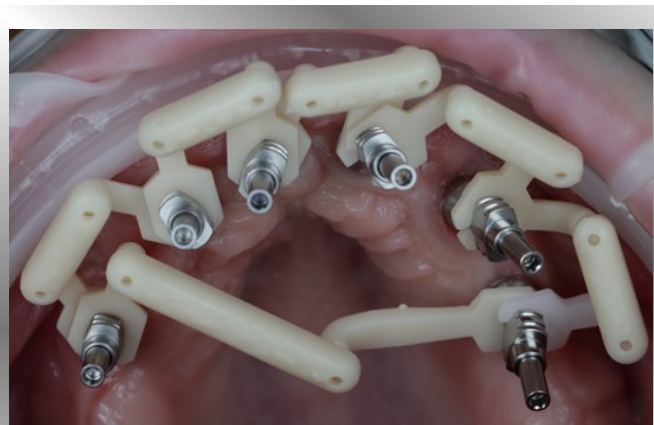
A Patented Technology

Traditional methods of recording implant locations can

be tedious, time-consuming and prone to error. To overcome these challenges, U.S. Army prosthodontist Maj. Ken Kim developed an innovative device that streamlines and improves the accuracy of implant location recording.

After numerous design iterations, the technology was digitally modeled and 3D printed for testing. The final system uses interlocking components—similar to a popular brand of building blocks—to form a rigid, customizable framework that accurately captures implant positions for prosthesis fabrication.

In October 2024, an international Patent Cooperation Treaty application was filed for the device with support from the U.S. Army Medical Research and Development Command.



Patented technology with interlocking components that accurately record dental implant locations.

Rehabilitating Warfighters Abroad

A significant portion of the military population suffers from partial edentulism—the loss of one or more teeth—which can be effectively treated with dental implants. Thanks to this patented innovation and Maj. Kim's expertise, advanced implant procedures, including



First service member ever to receive dental implant full-mouth rehabilitation treatment in South Korea with patented technology.

full-mouth rehabilitation, are now available at Carius Dental Clinic at Camp Humphreys, South Korea. This marks a major advancement in delivering high-level prosthodontic care to service members stationed overseas.

Recognition at the Pacific Victors Innovation Competition

In June 2025, Maj. Ken Kim presented his invention at the Pacific Victors Innovation Competition, hosted by Eighth Army. The event invites Soldiers stationed in South Korea to propose solutions that improve military operations and quality of life. Kim's patented device earned second place, highlighting its potential to transform dental care across the armed forces.



Top four contenders being recognized at the Pacific Victors Innovation (PVI) Competition.

Looking Ahead

Maj. Kim is currently working with the U.S. Army MRDC Technology Transfer Office to commercialize the invention. Several dental implant companies are reviewing the device for potential licensing, paving the way for

broader adoption in both military and civilian sectors.

This innovation not only improves the precision and efficiency of full-mouth dental rehabilitation but also exemplifies how military ingenuity can advance healthcare delivery and readiness across the force.

Army Dentistry Played Critical Role in Korean War Readiness

During the Korean War, Army dentistry proved essential to maintaining the health and combat effectiveness of deployed U.S. troops. Dental officers provided urgent and preventive care under austere and often mobile conditions, ensuring soldiers remained fit for duty in a combat environment with limited resources.

Field dental clinics were established near the front-line, allowing for quick treatment of dental emergencies such as broken teeth, and jaw injuries. Army dentists also conducted exams and cleanings when possible.

The introduction of mobile dental units and portable equipment allowed Army dental teams to move with combat support hospitals and other medical elements. These capabilities helped reduce the number of evacuations for dental reasons and increased the self-sufficiency of deployed forces.

In coordination with the Army Medical Department, dental personnel also supported maxillofacial surgical care for wounded troops. Their work contributed significantly to troop morale, operational continuity, and long-term dental health during a challenging and high-tempo conflict.

Farewell to Maj. Sonya Vargo

The 135th Forward Resuscitative Surgical Detachment Says Goodbye to its Leader

135th Forward Resuscitative Surgical Detachment
By 1st Lt. Joshua A. Price



The 135th Forward Resuscitative Surgical Detachment (FRSD) recently said farewell to its esteemed Commander, Maj. Vargo, after two years of transformational leadership and tireless service. Throughout her command, Maj. Vargo exemplified what it means to lead from the front—balancing professionalism, compassion and operational excellence.

Under her leadership, the 135th FRSD successfully executed a demanding and diverse training calendar. Highlights include multiple Pacific Medic Focus exercises, four Advanced Tactical Trauma Courses (ATTC), six interoperability presentations with the Armed Forces Medical Command (AFMC) and Korean Armed Forces Nursing Academy (KAFNA), two Gyeryong Ground Forces Expositions, and a Global Health Engagement mission to Papua New Guinea. These accomplishments not only strengthened the detachment's readiness but also deepened bilateral ties between the U.S. and the Republic of Korea.

One of Maj. Vargo's most lasting impacts was her coordination of the first-ever participation of ROK soldiers in ATTC training, setting a historic precedent. Her vision paved the way for future combined training with the 135th FRSD at ATTC in Miami, Florida—an initiative that will enhance interoperability and trust for years to come.

In one of her final projects, Maj. Vargo planned and executed the creation of a 135th FRSD demonstration video. Partnering with the 568th Medical Company (Ground Ambulance), the team conducted a full-scale FRSD setup to simulate a deployed surgical environment. This professional video now serves as a dynamic training and marketing tool—allowing new Soldiers, joint partners, and higher commands to visually under-

stand the FRSD's capabilities and mission-essential functions. It will be used in future briefs, public affairs displays, and recruitment efforts, preserving her legacy through education and outreach.

While we are saddened to see Maj. Vargo move on, we are proud to welcome Cpt. Lisitsyn as the new Commander of the 135th FRSD. Having served as an Emergency Room Nurse within the unit for the past two years, Cpt. Lisitsyn brings continuity, expertise and an unwavering commitment to mission success. She has consistently demonstrated the drive, leadership and operational insight instilled by Maj. Vargo, and is poised to guide the detachment into its next chapter.

The 135th FRSD thanks Maj. Vargo for her leadership and dedication and looks forward with confidence under the command of Cpt. Lisitsyn.



Jul 1, 2025—Maj. Vargo relinquishes the unit guidon to Col. Arroyo for Capt. Lisitsyn to assume command at the 135th FRSD change of command ceremony.

Honoring Our AMEDD Medal of Honor Heroes

Sergeant David B. Bleak



Korean War: June 25, 1950 - July 27, 1953

In recognition of his extraordinary courage and selflessness, Sgt. David B. Bleak's actions will forever stand as a testament to the power of Army leadership and the enduring legacy of those who serve with valor.



In June 1952, during the height of the Korean War, United Nations forces were engaged in fierce combat operations across the rugged terrain of the Korean Peninsula. The war had settled into a series of deadly clashes over strategic hilltops and defensive lines. It was during this

intense period that Sergeant David D. Bleak, a combat medic assigned to the 223rd Infantry Regiment, 40th Infantry Division, performed an act of extraordinary heroism that would later earn him the Medal of Honor.

On the morning of June 14, 1952, Sgt. Bleak volunteered to accompany a 20-man reconnaissance patrol tasked with advancing deep into enemy territory near Minari-gol. The mission aimed to gather intelligence on enemy positions and troop strength. The patrol's route led them up Hill 499, a position heavily defended by North Korean forces. As the patrol advanced, they were ambushed and came under heavy enemy fire. Although his primary role was to provide medical aid, Sgt. Bleak took immediate and aggressive action to defend his fellow Soldiers.

During the engagement, he charged into an enemy trench and engaged in brutal hand-to-hand combat. He killed one enemy soldier with a knife and crushed the skulls of two others with his bare hands. Even after being wounded by grenade shrapnel, Sgt. Bleak continued to move forward, treating wounded comrades and carrying one severely injured Soldier to safety. At one point, he shielded another injured man with his own

body while under intense fire, demonstrating both bravery and selflessness.

Born on February 27, 1932, in Idaho Falls, Idaho, David D. Bleak grew up in a rural community where he developed a strong work ethic and a sense of duty. He enlisted in the U.S. Army in 1950 and trained as a medical aidman. Despite his non-combat role, Bleak's actions on Hill 499 went far beyond what was expected. His heroism directly contributed to the patrol's success and ensured the survival of multiple Soldiers.

For his extraordinary valor, Sgt. Bleak was awarded the Medal of Honor on October 27, 1953. His citation described his actions as "above and beyond the call of duty," and he became one of only a handful of medics to receive the nation's highest military honor during the Korean War. His conduct in the face of overwhelming danger remains a defining example of courage and dedication.

After leaving the Army, Sgt. Bleak returned to Idaho, where he worked at the Idaho National Laboratory. He lived a quiet life and rarely spoke about his wartime experiences. Though he performed extraordinary deeds, he remained humble, considering himself simply a Soldier doing his job.

Sgt. Bleak passed away on March 23, 2006, and was laid to rest at Fielding Memorial Park in Idaho Falls. His legacy continues to live on in Army history and serves as an enduring example of selfless service. Sgt. David D. Bleak's name stands among those who demonstrated the highest levels of valor and sacrifice, and his story continues to inspire generations of Soldiers and civilians alike.

Pacific Medic Week

Image Gallery







**75TH ANNUAL
38TH PARALLEL
HEALTHCARE
TRAINING
SYMPOSIUM**

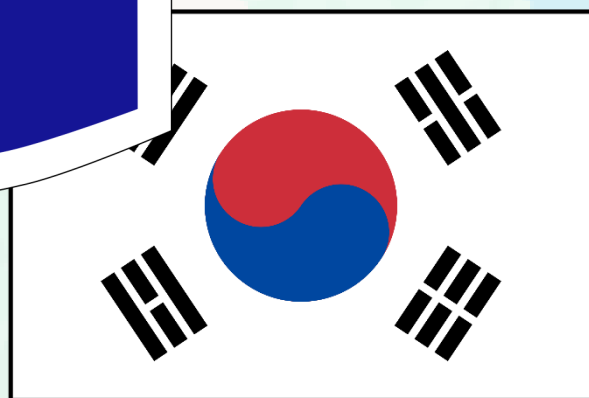
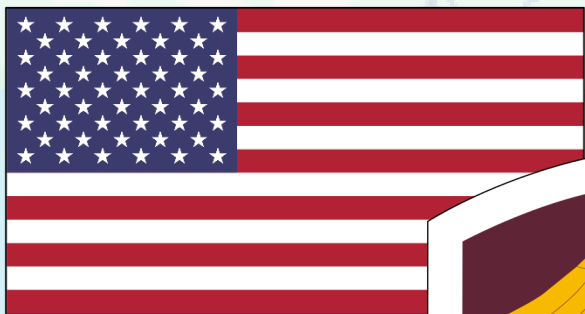
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