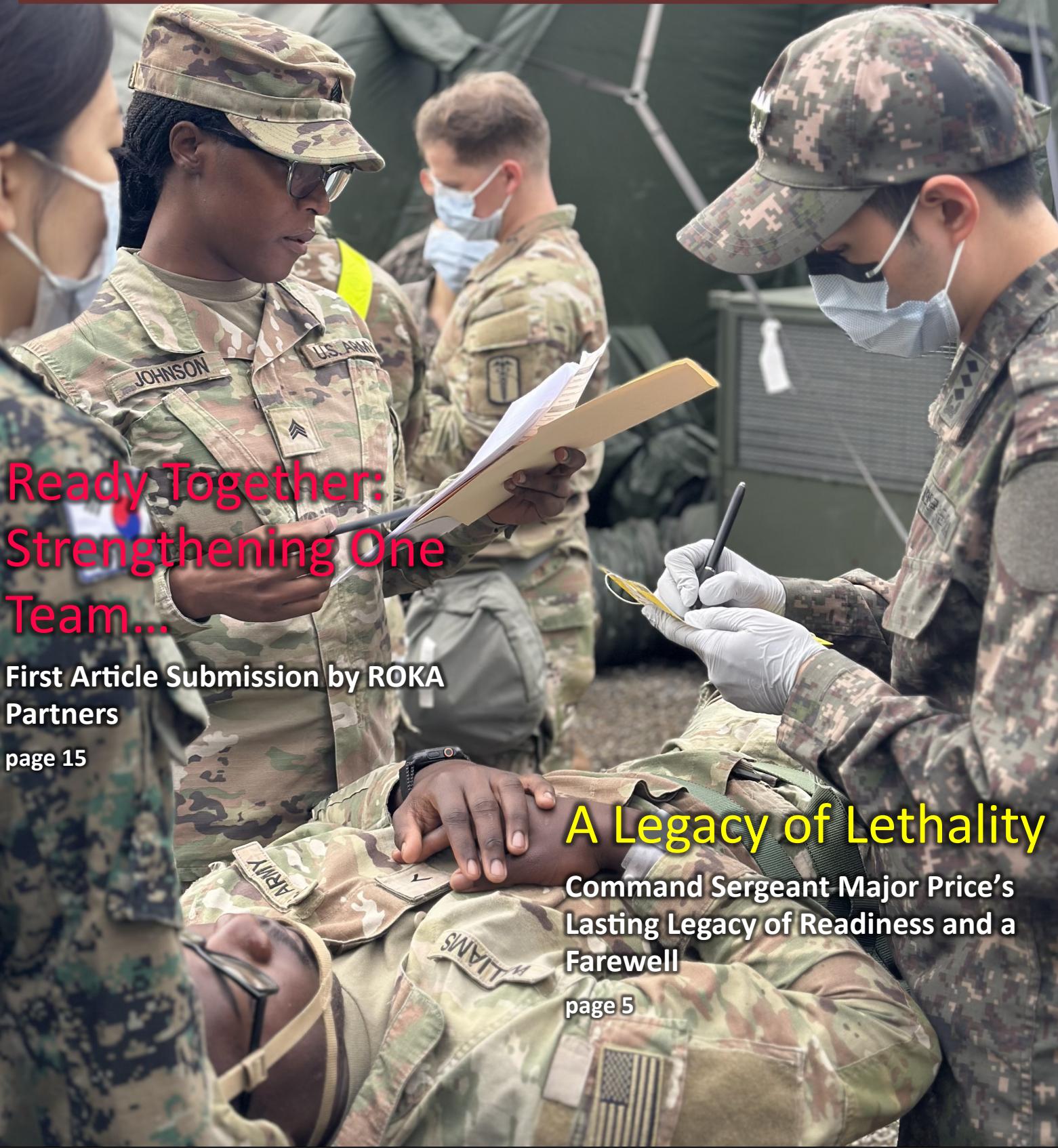


THE PACIFIC MEDIC

ISSUE 004

65TH MEDICAL BRIGADE

NOVEMBER 2025



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Strengthening One
Team...

First Article Submission by ROKA
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THE PACIFIC MEDIC

65th Medical Brigade

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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.



Edgar G. Arroyo

Commander



Erin L. Trudden

Command Sgt. Maj.

As the summer rotation concludes, we welcome a new wave of teammates who have already proven their mettle through two demanding exercises in back-to-back months. These events, conducted across the Korean Peninsula tested not only our technical proficiency but our ability to rapidly integrate new Soldiers into cohesive, mission-ready teams.

Our new teammates joined us during an intense operational tempo, immediately contributing to success during large-scale training events that showcased the Brigade's flexibility, precision and teamwork. Their professionalism and fresh perspectives have already strengthened our collective readiness for the challenges ahead.

This season also brings transition within our leadership ranks. We bid farewell to Command Sgt. Maj. Eric Price, whose steady leadership, mentorship and dedication to Soldiers have left a lasting mark on this Brigade. His presence has shaped the culture of excellence that defines the Pacific Medics, and we wish him and his family continued success as they embark on their next chapter.

At the same time, we proudly welcome Command Sgt. Maj. Erin Trudden to the team. She joins us with an outstanding record of leadership, experience and care for Soldiers that aligns perfectly with our mission and values. We are excited for the perspective and energy she brings as we continue to advance medical readiness across the theater.

To every Pacific Medic, thank you for your commitment, professionalism and tireless service. We continue to prove why this is the premier medical brigade.

I am deeply honored to join the 65th Medical Brigade and want to thank Col. Arroyo, the command group, and all our Soldiers, Civilians and Family members for such a warm welcome. I am especially grateful to Command Sgt. Maj. Eric Price for his deliberate and thoughtful transition, ensuring I was fully prepared to assume this role. His leadership has left an indelible mark on this formation, and I am proud to carry that legacy forward.

To the Pacific Medics, thank you for your professionalism, teamwork and dedication to mission success. Having read previous editions of The Pacific Medic, I have seen the pride and excellence reflected in every story. I look forward to witnessing, and helping write the next chapters of this Brigade's achievements.

Our formation continues to distinguish itself through innovation, integration and readiness. We are leading the way in modernizing Army Medicine, deepening partnerships with our Republic of Korea counterparts, and ensuring we remain ready to "Fight Tonight." I am excited to continue the drive and direction already set, working alongside each of you to strengthen our capabilities and enhance the health of the force.

To every Soldier, NCO, Civilian and Family member, thank you for what you do every day. I am proud to serve with you and to be part of the best medical brigade in the United States Army. Together, we will continue to set the standard across the Indo-Pacific.

A Legacy of Readiness and Partnership

Command Sergeant Major Eric N. Price's Impact on the 65th Medical Brigade

Headquarters and Headquarters Company, 65th Medical Brigade

By Maj. Chad Norman, Brigade S9



On November 14th, during the change of responsibility ceremony, the 65th Medical Brigade bid farewell to Command Sgt. Maj. Eric N. Price. During his change of responsibility, the formation reflected on the achievements and contributions that defined his tenure. Under his leadership, the brigade strengthened medical readiness, advanced interoperability with Republic of Korea (ROK) partners, and raised standards of battlefield medical care across the Korean Peninsula.

Price's tenure was defined by relentless focus on readiness and the professional development of Soldiers, ensuring that the brigade remained capable of fulfilling its "Fight Tonight" mission. His guidance and mentorship left a lasting mark on both U.S. and ROK medical forces.



Sept. 11, 2025 - Command Sgt. Maj. Price spoke words of wisdom and patriotism at the 65th Medical Brigade 9-11 remembrance ceremony.

Pioneering the U.S.–ROK Medical Exchange Program

Among Price's crowning achievements was the launch and championing of the first U.S.–ROK medical exchange program for noncommissioned officers (NCOs). This groundbreaking initiative created new opportunities for ROK Army NCOs to train side by side with U.S. counterparts in casualty care, triage, and evacuation



Oct. 2, 2025 - Command Sgt. Maj. Price is congratulating one of the ROK NCOs at the NCO Exchange Program graduation.

procedures. The inaugural class graduated in April 2025 at Camp Humphreys, marking a milestone in the alliance's efforts to build a combined medical force capable of seamless cooperation in any contingency. The graduates wasted no time putting their skills into action—one NCO competed in the rigorous Expert Field Medical Badge (EFMB) test only weeks later, demonstrating the immediate value of the training. Being the First ROKA NCO to ever earn the EFMB.

"Command Sgt Maj. Price's vision transformed an idea into a program that strengthens our combined readiness and builds trust among our allied forces," said Col. Brian McDaniel, a U.S. Army medical officer involved in the exchange. "These NCOs are now living bridges between our formations."

Raising the Bar Through EFMB on the DMZ

Price's commitment to standards and professional excellence was equally evident in his leadership during the 2025 EFMB testing on the Demilitarized Zone (DMZ). Conducted from April 12–25, the event brought together nearly 200 candidates including U.S., ROK, and Korean Augmentee to the U.S. Army (Katusa) Soldiers.

With only 51 candidates earning the coveted badge, the

testing reaffirmed the rigor of the qualification and highlighted the shared dedication to combat medical excellence. The inclusion of ROK and KATUSA Soldiers reflected Price's vision for a truly interoperable allied medical force capable of operating shoulder to shoulder in combat environments.

"Command Sgt Maj. Price consistently emphasized that standards matter and that training under tough, realistic conditions is the best way to prepare our medics for the battlefield," said a senior EFMB cadre member. "His guidance ensured this EFMB event raised the bar for everyone involved."



May 22, 2025 - Command Sgt Maj. Price and the legacy he leaves behind (Brigade picture at the end of Pacific Medic Week.)

Enhancing Forward Surgical Readiness

Another notable milestone of Price's tenure was his unwavering support for the 135th Forward Resuscitative and Surgical Detachment (FRSD) as it trained at the Army Trauma Training Course (ATTC) at Miami's Ryder Trauma Center.

The ATTC, a 14-day clinical immersion, tested the FRSD's ability to provide damage control resuscitation and surgery under austere battlefield conditions. The detachment's success, providing care to dozens of trauma patients during the course underscored the brigade's capacity to save lives under the most demanding circumstances.

"Command Sgt Maj. Price's emphasis on tough, realistic training gave our team the confidence and cohesion

needed to deliver life-saving care anywhere and anytime," said a senior FRSD team member.

A Legacy of Readiness and Innovation

Price's leadership extended beyond individual events. He consistently championed innovation and process improvements, including the integration of digital systems to streamline EFMB candidate registration and records management. He also advocated for aligning EFMB cycles with the Pacific Medic Focus exercise series, ensuring that incoming personnel receive early, high-quality training that enhances readiness across the brigade.

His focus on developing leaders, empowering NCOs, and fostering trust with ROK medical partners has strengthened the brigade's foundation for future challenges.

"Command Sgt Maj. Price has been the driving force behind raising standards and improving combined readiness," said Col. Edgar Arroyo, commander of the 65th Medical Brigade. "His dedication has left our formation stronger, more capable, and better prepared for the demands of modern warfare."

Farewell and Best Wishes

As the brigade prepares to welcome new senior enlisted leadership, it does so with deep respect and gratitude for the legacy Command Sgt Maj. Price leaves behind. His tenure represents the best of what a senior enlisted leader brings to the force: vision, discipline, and an unwavering commitment to Soldiers and mission.

"Command Sgt Maj. Price inspired us to strive for excellence in everything we do whether training, caring for patients, or building the U.S.-ROK alliance," said a senior NCO within the brigade. "His impact will endure long after he departs."

The 65th Medical Brigade extends its heartfelt thanks to Command Sgt Maj. Price for his dedicated service and wishes him continued success as he moves on to his next assignment in the U.S. Army.

He will be missed, but his influence on the Pacific Medics will remain for years to come.

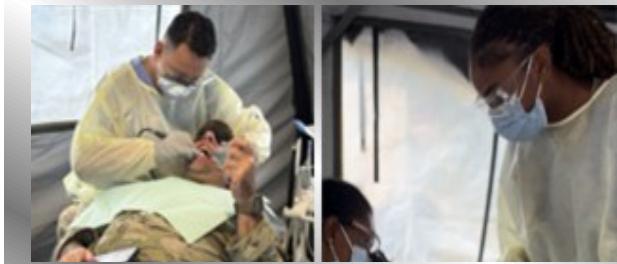
Advancing Readiness During Pacific Medic Focus 25-2

121st Field Hospital
By 1st Sgt. Jackson, Alan M.



"Fight Tonight" is Our Forte

From 31 August to 27 September 2025, the 121st Field Hospital (FH) demonstrated its operational excellence and medical readiness during Pacific Medic Focus (PMF) 25-2, a large-scale field training exercise designed to enhance expeditionary healthcare delivery and "Fight Tonight" capability across the Korean Peninsula.



Dental Readiness and cleanings provided by 618th Medical Company (Dental Area Support).

Cross Training Across the Peninsula

The exercise began with intensive Deployment Medical Systems (DEPMEDS) training at both U.S. Army Garrison Humphreys and U.S. Army Garrison Yongsan, ensuring Soldiers were proficient in assembling and operating modular medical facilities used in deployed environments. Following this, the 121st FH conducted Reception, Staging, Onward Movement, and Integration (RSOI) for 27 Mission Table of Organization and Equipment (MTOE)-Assigned Personnel (MAP), successfully integrating them into the Korean Theater of Operations.

Readiness is Our Business and Business is Good

Weapons proficiency remained a priority throughout the training cycle. The unit executed M4 and M17 qualification ranges, achieving a 91 percent qualification rate, and completed an internal Soldier Readiness Processing (SRP) event ensuring more than 90 percent of assigned personnel met medical readiness standards.

The Mission of Multi-Tasking

During PMF 25-2, 121st FH medics provided first responder coverage during field hospital setup and operations, ensuring both patient care and Soldier safety. Collaboration with the 549th Hospital Center (HC)



Capt. O'Brian, one of the 20 integrated Map personnel, briefing Maj. Gen. Cox, Commanding General, 18th Medical Command, on the capabilities of the Field Hospital.

and Brian D. Allgood Army Community Hospital (BDAACH) maximized training participation while sustaining healthcare delivery across the peninsula.

As part of Strengthening Our People, the unit conducted an Emergency Deployment Readiness Exercise (EDRE) on 12 September and hosted the 549th HC Promotion Board in the field, with one Soldier earning promotable status. The latter half of the reporting period marked the Crawl-Walk-Run progression through PMF 25-2. The 121st FH integrated 20 Republic of Korea (ROK) military medical personnel, fostering interoperability and alliance cohesion. The 618th Dental Company (Area Support) delivered dental services in the field, while the Army Hearing Program introduced the Wireless Automated Hearing Test System (WAHTS) for on-site hearing exams.

Mission Ready:

How the 135th FRSD Strengthens Combat Readiness and U.S.-ROK Medical Partnerships

135th FORWARD RESUSCITATIVE SURGICAL DETACHMENT

By Capt. Kelsey E. Lisitsyn, 135th FRSD Commander



Capt. Brown and Capt. Lisitsyn, alongside ROKA Trauma Surgeon Lt. Col. Lee and ICU Nurse Capt. Lee Outside 65th Medical Brigade

Abstract

The 135th Forward Resuscitative Surgical Detachment (FRSD) continues to enhance combat readiness and multinational interoperability through participation in the Army Trauma Training Course (ATTC) in Miami, Florida. This article highlights how the inclusion of Republic of Korea Army (ROKA) medical officers during the 2025 rotation advanced U.S.-ROK medical cooperation, clinical proficiency and joint operational readiness in support of large-scale combat operations.

Introduction

From Aug. 9 to 23, 2025, the 135th FRSD participated in the Army Trauma Training Course at the Ryder Trauma Center in Miami, Florida. ATTC challenges surgical teams to operate under the demanding conditions typical of combat environments while emphasizing teamwork, adaptability and precision. This iteration uniquely integrated a ROKA trauma surgeon and an intensive care unit nurse into the 135th's team, providing firsthand experience of the FRSD's mission. Their participation demonstrated the enduring commitment between the United States and the Republic of Korea to strengthen

the medical alliance and prepare for future combined operations.

Strengthening Interoperability Through Shared Training

Republic of Korea Army Lt. Col. Lee, a trauma surgeon, praised the training he received at the Army Trauma Training Center. He noted that while the Armed Forces Medical Center rarely encounters burn patients, the course provided invaluable exposure to such cases. Shortly after returning to Korea, Lee applied lessons learned and the clinical practice guidelines taught during ATTC to manage a real-world incident involving a gas explosion that affected more than 10 patients, each with more than 50% total body surface area burns. Through those lessons, he and his team successfully treated all patients involved.



Capt. Lee (ROKA ICU Nurse) documenting and observing patient during Blood donation, learning about Walking Blood Bank.



135th poses with 126th FRSD after Ryder Trauma Center Orientation

Advancing Battlefield Medical Readiness

The ATTC experience represents more than a training requirement; it validates clinical competency, operational teamwork and adaptability under realistic conditions. The course immerses surgical teams in complex trauma care that replicates the challenges of operating in resource-constrained, high-intensity environments.

During this iteration, the ROKA participants were fully embedded into the FRSD team during a situational training exercise validation. Rather than observing, they actively performed their professional roles alongside U.S. teammates. This joint training allowed the FRSD to function as a split team and demonstrated seamless integration of U.S. and ROK medical forces under simulated combat conditions. The collaborative environment deepened mutual understanding, enhanced combined capability and built confidence in bilateral medical readiness.

Clinical Experience: Day and Night Shifts

Training occurred at the Level I Ryder Trauma Center—one of the busiest trauma facilities in the United States, managing more than 4,000 cases annually, with about 20% involving penetrating injuries. This high-intensity environment closely mirrors battlefield conditions.

Day shifts (three total) treated 17 patients, including five blunt trauma cases, three penetrating injuries, three burns and one deceased. Procedures performed included chest tube insertions, arterial and central line placements, intubations and three operating room cases ad-

dressing sternal, spinal and femur fractures.

Night shifts (three total) treated 19 patients, including 12 blunt injuries, two penetrating injuries, four burns and one deceased. Procedures performed included chest tubes, intubations, arterial and central line placements and one thoracotomy (clam shell). Seven operating room cases included below-knee amputations, fracture external fixation and various orthopedic repairs.

In total, the FRSD supported 18 trauma surgeries—primarily orthopedic procedures such as fracture repairs, external fixator applications, debridements and amputations and provided care to 37 additional trauma patients who did not require immediate surgery. The team encountered several severe burn cases exceeding 70% total body surface area, reinforcing the importance of damage control resuscitation and critical care. Additionally, the training incorporated exposure to mortuary affairs—an often overlooked but essential component of large-scale combat operations medical readiness.



Capt. Lee and Lt. Col Lee learning about ATLS setup and Packout n preparation for the upcoming stimulation training exercise.

Building Versatility Across the Team:

Beyond trauma resuscitation and surgical interventions, the 135th FRSD emphasized versatility and cross-training to build adaptability and cohesion. Personnel were deliberately assigned to nontraditional and cross-functional roles, such as circulating within the operating room or performing outside their primary specialties. This cross-training expanded individual skill sets, enhanced team flexibility and strengthened overall unit performance under pressure.



135th Poses with ROKA partners on the Helipad of Ryder Trauma Center

Ready to Return, Ready to Fight Tonight:

Following the successful completion of the Army Trauma Training Course, the 135th FRSD returned to Korea validated in its readiness to provide damage control resuscitation and damage control surgery in austere environments. The lessons learned, skills reinforced and partnerships strengthened with ROKA counterparts have built a more resilient and capable team, ready to respond to combat contingencies and “fight tonight.”

The Evolution of Battlefield Medicine

The Vietnam War marked a turning point in battlefield medicine with the introduction of the “Golden Hour” concept. This principle emphasizes that a critically injured Soldier’s chance of survival increases dramatically if they receive definitive care within the first hour after injury. Helicopter evacuation became central to this strategy, allowing rapid transport from front lines to surgical units. Medics on the ground were trained to stabilize patients quickly, controlling bleeding and managing airway and shock before evacuation. The Golden Hour not only reduced mortality rates but also laid the foundation for modern emergency protocols used in both military and civilian settings. Understanding this concept highlights the critical importance of timely intervention and preparedness in every trauma situation.

MASH Units and Rapid Surgical Response

During the Vietnam War, Vietnam War battlefield surgery gained prominence with the introduction of MASH units (Mobile Army Surgical Hospitals). These mobile surgical teams were stationed close to combat zones, allowing critically injured Soldiers to receive lifesaving operations within the crucial “Golden Hour.” The presence of trained surgeons, anesthetists, and nurses in MASH units significantly reduced mortality from injuries that would have been fatal in earlier conflicts. Portable surgical equipment, blood transfusions, and advanced IV fluids enabled more complex procedures directly in the field. For modern military and civilian emergency medicine, the lessons from MASH highlight the importance of fast, well-equipped, and well-trained response teams. Proximity and speed of care continue to dramatically improve survival outcomes, making these historical innovations highly relevant for today’s emergency preparedness strategies.

Modern Portable Medical Kits: Essential Gear for Today’s Soldiers

Modern warfare has transformed battlefield medicine, highlighting the need for compact, durable, and easy to use medical gear that every Soldier can carry. The result is the Individual First Aid Kit (IFAK) a lightweight, personal trauma kit designed for rapid response in life-threatening situations.

Typical IFAKs include tourniquets, hemostatic dressings, trauma bandages, gloves, chest seals, and airway tools. Each item is selected for simplicity and speed, allowing Soldiers to treat severe bleeding and airway issues even under intense stress. Modern designs also emphasize ergonomic layouts, enabling fast one-handed use and minimizing confusion during combat. Training programs now teach every Soldier how to use these tools effectively, ensuring confidence under fire. This combination of smart design and practical skill has revolutionized immediate battlefield care. Quick access and efficient design mean life saving care can begin immediately after injury.

IFAK’S turn entire units into networks of first responders. similar kits are now used by law enforcement, paramedics, and disaster responders, proving that preparation and the right tools save lives.

Forged in training, Ready as one team

Pacific Medic Focus 25-2: Honoring the Past, Strengthening the Future

The Armed Forces Medical Command (ROK) & The 15th Infantry Division (ROK)
By Maj. Soyun-Nam, M.D. & Sgt 1st Class. Sua Kim



Pacific Medic Focus (PMF) 25-2 was more than a routine combined medical exercise; it served as a symbolic event where the present and future of the U.S.-ROK. medical alliance came together. During the exercise, ROK and U.S. medical personnel established a field hospital and treated casualties under a shared principle, a Tactical Combat Casualty Care (TCCC). Through demanding scenarios such as mass-casualty (MASCAL) incidents, participants learned that true interoperability depends not only on communication but is forged through shared experiences in the field.



1st Lt. Jeon, ROK nurse officer assigned to the ER, discusses a patient's condition.

Honoring the Past, Expanding the Alliance

Historically, Yongsan hosted U.S. Forces Korea and served as a symbolic hub of the U.S.-ROK. alliance. The PMF 25-2 exercise carried special meaning as the 121st Field Hospital deployed on that historic ground, invoking the spirit of medics who served side by side in Mobile Army Surgical Hospitals (MASH) during the Korean War.

PMF 25-2 marked in significant expansion in ROK participation compared with PMF 25-1. Earlier iterations featured small groups of ROK attendees observing through On-the-Job Training (OJT), but this time 17 ROK medical

personnel volunteered to participate in full. Those participants — composed of officers and NCOs — included TCCC instructors, emergency care provider NCOs, medical battalion nurse officers, military hospital surgeons, and MEDEVAC specialists. Rather than passive observers, they were active participants in the combined medical operation throughout the exercise.

Field Medicine in Action: Decision, Discipline, and Trust

During the exercise, participants worked in the Emergency Department (ER), Operating Room (OR), Intensive Care Unit (ICU) and laboratory (Lab), gaining firsthand experience in U.S. medical procedures and patient flow.

When MASCAL scenarios were initiated, all ROK medical personnel moved to the triage area to train for responding to overwhelming situations. They practiced prioritizing patients, reallocating limited supplies and making rapid clinical decisions under pressure. Through these demanding drills, participants developed teamwork and mutual trust. They learned to cooperate instinctively despite language and medical system differences, forming a shared commitment to patient care.



ROK medical personnel gather in the triage area and participate in an After-Action Review (AAR).

Triage training went beyond simple categorization. It became an exercise in making critical decisions and maintaining focus under conditions of resource scarcity. Field hospitals often operate without knowing when the next resupply will arrive and the way limited supplies are managed can determine life or death.

In hospitals, physicians strive to save every patient, pursuing all possible treatment until the very end. In the field, however, courage takes a different form. It means making hard choices—knowing when limited resources must be directed to those most likely to survive. This discipline remains one of the defining principles of military medicine.

In the operating room, ROK and U.S. surgeons worked side by side, sharing surgical techniques and experiences. On the operating table, patient survival became their common language. Each nod, gesture and even in silence conveyed understanding and trust, forming an unspoken rhythm of cooperation.



ROK medical provide treatment and conduct patient triage following TCCC

mands of fast-tempo field operations revealed that determination and teamwork mattered more than perfect communication. Therefore, the communication itself became part of the training. One participant reflected on the experience:

“At first, speaking in English felt heavy, and I worried that miscommunication in urgent moments might harm patients. But as each day passed, we learned to recognize and adapt to each other’s differences, and that burden faded.”

During the exercise, ROK participants attached name and rank tapes written in English, while U.S. personnel responded by wearing name tapes in Korean. This simple but sincere gesture reflected mutual respect and the genuine spirit of the U.S-ROK. alliance.

Through these actions, both sides came to understand the deeper meaning of “Fight Tonight” — not just as a motto, but as a shared promise to stand together in both combat and care.



Capt. Li (U.S., left) and Capt. Kim (ROK, right) simulate an external fixation procedure using a ramen box as a mock patient’s leg.

Building Trust Through Challenges

Since 2020, the ROK Armed Forces have implemented TCCC training across the force, closing gaps in emergency care procedures. This shared standard has overcome both procedural and language barriers, allowing ROK and U.S. medics to work from the same playbook when providing casualty care.

Although language remained a concern at the beginning of the exercise, the pressures of high-stress and the de-

Shaping the Future of Our Medical Alliance

Future ROK-US combined medical exercises should build on the progress made during PMF 25-2. They need

to move beyond observer-based participation and engage with their counterparts through active training that deepens collaboration and interoperability.

Future exercises should also reflect Korea's distinct operating environment. Training in mountainous terrain and extreme weather would make scenarios more realistic and mission-focused for the Korean Theater of Operations (KTO).

Future steps could include deployments of Forward Resuscitative Surgical Detachment (FRSD) and combined aeromedical evacuation missions using ROK and U.S. MEDEVAC helicopters. These efforts would expand training to cover the full continuum of care.



Sgt. 1st Class. Rocks attached a name tape written in Korean on her uniform.

Conclusion: Carrying the Legacy Into the Future

The fact that PMF 25-2 took place on the same grounds once home to the U.S. Forces Korea is itself symbolic. The ROK and U.S. medics once again stood side by side, just as they did seventy years ago, defending freedom and saving lives on the Korean Peninsula. The legacy built by those before us now passes into our hands.

Through continued combined training and shared commitment, we will carry this legacy forward, stronger and more resilient. When it comes to saving lives, there are no borders that matter. We wear different uniforms, but we are one team and pursue the same value; saving lives.

Building a Modern Force: The Evolution of the ROK Army

Republic of Korea Army traces its roots to 1945, when Korea regained independence following Japan's surrender in World War II. U.S. forces administered the southern half of the peninsula and organized Korean constabulary units to maintain security. These early formations became the foundation of the modern ROK Army.

The Republic of Korea was established Aug. 15, 1948, and the Army stood up that same year as the nation's primary ground force. The Army expanded quickly with U.S. support, establishing training centers and infantry regiments as tensions with North Korea increased.

The Korean War began June 25, 1950, when North Korean forces crossed the 38th parallel. Despite being outnumbered and under-equipped, ROK Soldiers defended key positions alongside U.S. and United Nations forces. They played critical roles in the defense of the Pusan Perimeter, the recapture of Seoul, and operations along central mountain corridors. The 1953 armistice ended active combat but left the peninsula divided and highlighted the Army's central role in national defense.

After the war, the ROK Army focused on building defensive capabilities along the Demilitarized Zone. During the Cold War, the Army modernized its forces, strengthened artillery, armored units, and air defense, and improved combined-arms doctrine. U.S. assistance supported training, logistics, and readiness.

From 1964 to 1973, ROK forces deployed to Vietnam, gaining combat and expeditionary experience. South Korea's economic growth in the 1980s and 1990s accelerated Army modernization, including advanced armored vehicles, artillery systems, and training centers.

In 1994, South Korea assumed peacetime operational control of its forces. The Army has since participated in international peacekeeping missions and continues to maintain readiness alongside U.S. Forces Korea. Today, the ROK Army is a technologically advanced ground force focused on deterrence, defense, and combined operations, remaining a cornerstone of South Korea's security and the U.S.-ROK alliance.

A New Way to Command and Control

Utilizing 549HC to Maintain Command and Control Over a Task Force Across Both MTOE and TDA Units

Medical Readiness Company, Medical Department Activity—Korea (MRC, MEDDAC-K), and Headquarters and Headquarters Detachment, 549th Hospital Center (HHD, 549HC)

By Col. Chad Black, Maj. Ariel Castro, Capt. Jack Guerra



At the 65th Medical Brigade, our mandate is to prepare for changing operating environments, which we can only imagine. According to the National Library of Medicine, the projected casualty statistics of a force of 100,000 Soldiers are staggering: 30,000 injured, ill, or wounded, and 10,000 killed in action. This stresses the need for an efficient, innovative medical system to help mitigate and manage these potential losses. Throughout history, the cry that echoes across the battlefield is the same. They all call for aid or "MEDIC". The 549th Hospital Center (HC), 65th MED BDE, responds with a well-trained and ready medical task force, which is the decisive action needed in the Korean Theater of Operations (KTO). The medical task force is a semi-autonomous, integrated capability that supports Large-Scale Combat Operations (LSCO) and enables Multi-Domain Operations while supporting the Army of 2040. In South Korea, biannual exercises allow us to test new ideas and apply lessons learned from past and current conflicts. In our most recent exercise in September of 2025, we re-worked the Command and Control (C2) structure and task-organized medical assets under 65th MED BDE to enable geographically aligned C2 with a Taskforce Medical (TFMED) concept.

In prior exercises, 65th MED BDE maintained direct control over all subordinate medical assets to centralize medical decision-making processes across the peninsula. In 2025, 549th HC/MEDDAC-K integrated and dual-hatted our Logistics, Medical, Finance & Intel personnel to better coordinate both healthcare and operational requirements throughout the fast-paced summer-to-summer training cycle. The first opportunity to test the TFMED concept and the combined 549th HC/MEDDAC-K C2 node happened in September 2025 during Operation Pacific Medic Focus 25-2. 549th HC was tasked with moving and locating within USAG Yongsan, and main-

taining over preventative medicine, dental, veterinary, and ground ambulance units. At the same time, this element continued to oversee Brian D. Allgood Army Community Hospital day-to-day operations. The second goal of the exercise was to deploy to a field environment and use organic Army equipment to establish a Tactical Operations Center (TOC) and maintain C2 from that location. This was the first time that 549th HC's HQ element had been established in the field and displayed key lessons for future improvement and the benefits of exercising expeditionary C2. The headquarters and headquarters detachment (HHD) element realized limitations with organic equipment to house or provide life support. This quickly brought to the forefront the necessity of extensive testing field equipment and replacement of non-viable equipment with modernized, mobile, and adaptive equipment.

The unique opportunity was the first time a TFMED concept took form, presenting lessons for future refinement of the units' tactics, techniques, policies, and procedures (T2P2).

An additional goal of the push for innovation was to utilize fixed facility personnel during the exercise and simultaneously accomplish both the operational and hospital priorities from a field environment. This was achieved with great success. 549th HC and MEDDAC-K were able to pull from both pools of people, while balancing access to care and medical treatment facility (MTF) manning, and maintaining communication with the clinical leaders in BDAACH, USAG Humphreys, while conducting field operations. This provided an opportunity to continue to integrate, cross-train, and create a shared understanding. Effectively, minimizing, with the end goal of eliminating, the "that's not my job" mentality that can happen with dual mission organizations.

These concepts require additional refinement, with the final proof of concept scheduled for August 2026 during PMF 26-2. However, once refined through rigorous testing, this innovation will provide decentralized C2, quicker response times to battlefield situations, the flexibility to apply all ten medical functions where they are needed, better shared understanding of the organizations overall mission, and greater integration with the warfighters that we support. Ultimately, the drive for innovation and the unique opportunities to test these concepts allows 549th HC and 65th MED BDE to be better prepared for the future of warfare, patient care, and large-scale combat operations.

549th HC History

The 549th Hospital was activated in 2019 when the 121st Combat Support Hospital was reflagged. The event coincided with the start of the Korean War in 1950. The reflagging was part of a U.S. Army restructuring effort to convert the Combat Support Hospital into a more flexible, expeditionary medical force with a 32-bed field hospital, four medical detachments, and a surgical team.

The 549th Hospital Center, also known as the Brian D. Allgood Army Community Hospital, is the main U.S. Army medical asset supporting U.S. forces in Korea. It continues the proud legacy of providing quality care to service members and their families. The unit regularly participates in combined training with Republic of Korea medical forces to strengthen interoperability.

BDAACH and 549th Hospital Center History of U.S. –ROK Medical Cooperation Through Coordinated Pandemic Operations and Vaccine Support.

When the global pandemic first emerged, U.S. Forces Korea (USFK) worked hand in hand with local agencies and organizations across the peninsula to form a united front against the virus. At the center of that effort stood the 549th Hospital Center and BDAACH, two of the largest medical assets in USFK.

From the earliest days of the outbreak, Soldiers, civilians and medical professionals at the 549th HC and BDAACH

provided critical care, coordinated testing and led vaccination efforts across installations.

USFK began receiving and distributing COVID-19 vaccines in the Republic of Korea, the 549th Hospital Center and BDAACH shared their experience with the Korea Disease Control and Prevention Agency (KDCA) and the Republic of Korea Army. Their goal was simple: to help ensure a successful nationwide vaccine rollout under the COVAX mission.

On Jan. 29, 2021, the 549th Hospital Center and BDAACH hosted a tour of USFK's key COVID-19 response facilities for the KDCA's International Affairs team. Throughout the day, BDAACH staff demonstrated testing procedures, patient management methods and vaccination protocols developed through months of frontline experience.

The partnership did not stop there. On Feb. 2, 2021, leaders from the 549th HC and BDAACH joined the ROK Army Surgeon General and the Armed Forces Medical Center in a virtual conference to share lessons learned and best practices for vaccine distribution and pandemic response.

Through collaboration and trust, the 549th HC and BDAACH helped reinforce one of the most important lessons of the pandemic: alliances built are tested and proven in times of crisis.

Early Days of Command and Control

In the early days of command and control, communication moved as fast as a runner, a rider or a crackling radio line. Field commanders relied on paper maps spread across makeshift tables, passing orders through messengers who braved darkness and enemy fire. Signals units strung miles of wire to keep units connected, knowing one break could isolate an entire formation. Despite the limitations, commanders adapted, using simple tools to coordinate complex movements. These early systems laid the foundation for today's digital networks, proving that clear communication no matter the technology remains the heart of effective military operations

Pacific Friendship 2025

Advancing Health, Partnership, and Trust in Quang Tri Province

618th Medical Company (Dental Area Support)

By Capt. Jangsu Kiyoshi



Overview of the Pacific Friendship 2025

From 9–20 September 2025, the 618th Medical Company (Dental Area Support) participated in Pacific Friendship 2025, a joint humanitarian assistance and disaster relief (HADR) engagement between the U.S. Army and Vietnam, led by U.S. Army Pacific (USARPAC). Held in Quang Tri Province, Vietnam, the exercise brought together U.S. and Vietnamese medical, dental, veterinary, engineering, and explosive ordnance disposal (EOD) teams to provide humanitarian aid to local communities while strengthening bilateral relationships and fostering cooperation and trust between partner nations.

The Dental Team and Its Impact



Dental team members, interpreters, and school staff at Gio Linh Township Primary school, Quang Tri Province, Vietnam.

The dental team- composed of nine personnel from USAG Humphreys, Fort Shafter, Schofield Barracks, Joint Base Lewis–McChord, and Fort Wainwright was assigned to Gio Linh Township Primary School, where services were provided to students in grades one through five. Over the course of the mission, 887 children re-

ceived care. Dental screenings, oral hygiene instruction, fluoride varnish applications, limited radiographs, and extractions were performed as needed. In total, the team completed 2,350 procedures, including 887 screenings, 884 oral hygiene instruction sessions, 505 fluoride varnish applications, 21 radiographs, and 53 extractions.



Lt. Col Jin, with assistance from Spc. Nguyen, performs a dental extraction on a fifth-grade student during Pacific Friendship 2025.

Operating in a non-traditional dental environment with limited resources presented unique challenges, but the 618th's field dental equipment such as the NOMAD Pro 2 Portable Dental X-ray and portable laptop proved invaluable in accurately diagnosing cases and determining whether to treat or refer patients to local dentists. Having interpreters with medical and dental backgrounds also greatly enhanced communication, ensuring that explanations were clearly understood by students and staff. The collaboration created valuable opportunities for professional exchange and mutual learning between U.S. and Vietnamese personnel. ensuring that

explanations were clearly understood by students and staff. The collaboration created valuable opportunities for professional exchange and mutual learning between U.S. and Vietnamese personnel.



Capt. Kiyoshi and Spc. Nguyen perform a dental X-ray on a student using the NOMAD Pro 2 portable X-ray system.

Oral Health Education and Prevention

The mission emphasized oral health education and prevention. Each class first received group instruction on brushing and daily hygiene habits, ensuring all students learned the fundamentals together. Afterwards, each child received personalized guidance from a dentist, followed by fluoride varnish application for cavity prevention. These lessons are expected to provide lasting benefits not only for the students but also for their families, extending the mission's impact well beyond the classroom. When necessary, extractions were performed to relieve pain and prevent further complications. The effort was warmly received by school staff and health officials, who recognized the long-term value of preventive care delivered directly within the school setting.

Mission Significance

Together, these efforts embodied the spirit of Pacific Friendship—advancing health, security, and enduring partnerships through cooperation and mutual respect. The mission demonstrated that readiness extends beyond preparing for conflict; it also means being ready to serve communities, build trust, and strengthen relationships that contribute to lasting peace. By combining clinical care, preventive education, and multinational cooperation, Pacific Friendship 2025 left an enduring mark on both the people of Quang Tri Province and the U.S.–Vietnam partnership.

618th Medical Company (Dental Area Support) History

The 618th Dental Company (Area Support) has a dual mission in South Korea: providing dental care during armistice and preparing for a transition to hostilities. Its history includes being a part of a larger medical clearing company during the Korean War, but its current role is solely focused on dental health support for the Eighth United States Army in Korea



Col. Lambert, with the support of an interpreter, teaches proper brushing and oral hygiene habits to students as part of dental outreach mission.

Food Protection and Public Health

Strengthening Readiness During Pacific Medic Focus 25-02

Task Force Med South, 106th Medical Detachment Veterinary Services Support

By Capt. Guisele Ballarini Food Protection Lab OIC- Camp Humphreys, Republic of Korea



Soldiers and Katusas at food processing facility. Strengthening bonds with commercial facilities.

Introduction

The 106th Medical Detachment, Veterinary Services Support (MDVSS), executed Task Force Med South (TFMS) from Sept. 19 to 26, 2025, in support of Pacific Medic Focus 25-02 (PMF 25-02). The mission focused on strengthening field laboratory proficiency, practicing food protection during Chemical, Biological, Radiological and Nuclear (CBRN) scenarios, and enhancing interoperability with preventive medicine teams.

The exercise demonstrated the detachment's capacity to sustain expeditionary veterinary and food protection operations across the Korean peninsula while maintaining Soldier readiness. It also reinforced the integration of U.S. Army Veterinary Services within broader public health efforts supporting combined U.S. and Republic of Korea (ROK) operations.

Field Food Safety and Industry Engagement

The exercise began with a site visit to a local chicken processing plant, where two Veterinary Services Support Teams (VSSTs) and the Food Protection Laboratory Team (FPLT) observed food production and safety procedures from the processing line to the consumer level.

"Learning how our ROK counterparts manage food safety allows us to synchronize standards and procedures essential for safe and secure food supplies."

Convoy Operations and Field Laboratory Establishment

Following the industry engagement, Soldiers and Katusa's (Korean Augmentation to the U.S. Army) convoyed across the Korean peninsula to establish an operational footprint at Camp Carroll. The FPLT set up a field food processing laboratory and initiated a series of food protection tasks designed to replicate deployed veterinary operations.

Soldiers and KATUSAs executed food truck delivery inspections, and food surveillance sampling for laboratory analysis. The Task Force also responded to real-world events, including food recall coordination and processing of surveillance samples for potential food pathogen contamination.

These activities demonstrated how veterinary teams bridge operational training and real-time food protection responsibilities. The integration of simulated and actual tasks strengthened readiness and



FPLT conducts in house lab testing of food samples.

adaptability while supporting mission-essential sustainment operations.

CBRN Food Protection Operations

CBRN conditions introduce unique challenges to food protection procedures, particularly in maintaining the wholesomeness and safety of food and water sources. During PMF 25-02, Veterinary Food Inspectors (VFI) rehearsed sample collection and decontamination procedures while wearing Mission Oriented Protective Posture (MOPP) gear.

Conducting operations in a simulated contaminated environment required Soldiers and KATUSAs to overcome limited visibility, communication barriers and reduced mobility. Despite these constraints, they successfully demonstrated the ability to assess and protect the food supply chain under potential CBRN threats. Our ability to maintain mission focus under these conditions reinforces the readiness of the veterinary services to respond during any contingency.



106th MDVSS briefing concept of operations

Collaboration With Preventive Medicine

A key objective of PMF 25-02 was enhancing interoperability between veterinary services and preventive medicine through overlapping surveillance and inspection responsibilities.

During the exercise, Task Force Med South conducted a joint dining facility inspection with the 195th Preventive Medicine Detachment. The collaboration provided an

opportunity to compare methodologies, discuss inspection criteria, and identify complementary capabilities between the two disciplines. Veterinary personnel focused on food wholesomeness and approved-source verification, while preventive medicine specialists emphasized environmental sanitation and vector control.



Spc. Moscosa (left), KSgt. Kim (right), collecting food samples for future field lab inspection

Integrating Soldier Skills and Warrior Tasks

In addition to technical operations, Task Force Med South incorporated Army Warrior Tasks throughout the exercise. Soldiers and KATUSAs practiced Tactical Combat Casualty Care (TCCC), executed convoy operations, and performed weapons maintenance and functions checks.

These activities reinforced Soldier fundamentals and emphasized the dual nature of Army veterinary personnel as both technical experts and combat-ready Soldiers. The inclusion of warrior tasks within a medical field exercise ensures proficiency in combat readiness while delivering specialized capabilities.

Force Health Protection Across the Peninsula

Through Task Force Med South, the 106th MDVSS demonstrated its ability to deliver expeditionary veterinary and food protection support while sustaining force health protection across the Korean peninsula. The exercise validated operational procedures, tested interagency collaboration and enhanced the integration

“Pacific Medic Focus allows us to test our systems, strengthen partnerships and validate readiness.”

of veterinary and preventive medicine functions.

The Soldiers and KATUSAs of the 106th MDVSS “Dragon Dogs” remain ready to support the warfighter and maintain public health in complex environments.

The U.S. Army Veterinary Corps continues to provide critical capabilities that sustain the health and readiness of forces worldwide. “Our Soldiers remain fully prepared to execute veterinary missions wherever they are needed,” said Lt. Col. Johnson, the 106th MDVSS Commander.

From ensuring the safety of the food supply to delivering animal medicine and zoonotic disease surveillance, veterinary personnel remain integral to the Army’s global health mission and the brigade commander’s “Fight Tonight” vision.



Spc. Moscosa conducting close pack inspection at Camp Carroll commissary

Military Mules: A Beast of Burden

Long before trucks or helicopters, mules carried vital supplies for armies, navigating terrain that machines could not. Historically, they hauled ammunition, food and gear across rugged landscapes, from World War II to conflicts in Asia.

The U.S. Army used pack mules extensively during World War II in mountain and jungle theaters. In Italy’s steep terrain and the jungles of Burma, mules delivered supplies to frontline troops where vehicles struggled to operate. Their sure-footedness, endurance and ability to carry heavy loads made them indispensable in environments where modern equipment failed.

Although mechanization has reduced reliance on animals, pack mules remain relevant in specific conditions. Light infantry and special operations units still train with mules, particularly for mountain warfare. The U.S. Marine Corps Mountain Warfare Training Center, for example, continues to teach mule-handling skills, ensuring troops understand how to move supplies in austere and high-altitude terrain.

Beyond their practical uses, mules represent a living connection to the history of military logistics. In humanitarian missions, disaster relief and remote training areas, they can move quietly, require minimal fuel and operate in regions inaccessible to motorized assets. In areas with environmental restrictions or fragile ecosystems, mules also offer a low-impact alternative to heavy vehicles.

For many units, working with pack animals builds problem-solving skills, patience and confidence in navigating difficult landscapes. In recent years, Army and Marine instructors have emphasized that mules are not simply relics of the past but tools that may prove crucial in future conflicts, especially in terrains like the Indo-Pacific, the Hindu Kush and other mountainous regions where traditional supply lines may be difficult to maintain.

In the modern age of drones and armored vehicles, these humble hybrids still serve as a tangible link to a long tradition of military logistics and a reminder that sometimes the oldest methods remain among the most reliable.



Fort Verde, Ariz., 1887: 1st Lt. M.F. Eggleston, & Pvt. Wm. Johnston mount military mules assigned to their unit

Photo Sourced from the Library of Congress

Battlefield Veterinary Readiness

106th MDVSS Powers Pacific Medic Focus 25-2 Across 65th MED BDE
Task Forces North, Central, and South

106th MDVSS 65th Medical Brigade
By Capt. Ashley Lindo and Maj. Mark Ryan



Introduction: People First, Mission Always

During Pacific Medic Focus 25-2, the 106th Medical Detachment (Veterinary Service Support) split into three mission tailored elements aligned with 65th Medical Brigade command and control elements designated Task Force North, Task Force Central, and Task Force South. The result: synchronized veterinary Role II/Role III healthcare delivery, coalition interoperability with the Republic of Korea (ROK) Army, and tangible gains in theater food and water protection. Additionally, it allowed the 106th to test integration with the 121st Field Hospital and use veterinary medical assets to assist treatment of human casualties in the event of large-scale combat operations (LSCO) and mass casualty scenarios.

History and Lineage

The 106th Medical Detachment (Veterinary Service Support) traces its lineage to World War II. Activated on October 1, 1944 in New Guinea, the unit supported the Southwest Pacific campaign, including the Luzon Campaign (Oct 17, 1944 – Jul 4, 1945). Its early veterinary missions emphasized force health protection in austere conditions, including food safety and wholesomeness inspections, animal care, and zoonotic disease control. The actions of the veterinary detachment indirectly contributed to sustained combat power by reducing attrition caused by disease non-battle injury (DNBI).

The detachment returned to combat during the Korean War (Mar 21, 1951 – Jul 27, 1953) and later earned multiple unit distinctions. Today, as part of the 65th Medical Brigade in Korea, the 106th supports U.S. Forces Korea through military working dog (MWD) care, food and water protection, veterinary public health, and community veterinary services. In addition to deployable veterinary support, they operate installation Veteri-

nary Treatment Facilities at Camp Humphreys, Camp Walker, Camp Casey, and Osan Air Base, while routinely training alongside ROK partners to build coalition veterinary capabilities.



Capt. Kim treating an ROK MWD alongside its handler.

Task Force North—Veterinary Role II Care and Food Safety Assurance

Two Veterinary Service Support Teams (VSSTs), comprised of nine personnel, established a veterinary Role II node in Chuncheon, operating shoulder to shoulder with ROK Army partners. The team exchanged tactics in canine traumatic combat casualty care (cTCCC) and evacuation procedures, building shared techniques for assessment, stabilization, and movement of military working dogs (MWDs) under tactical conditions.

Beyond veterinary Role II clinical capability, the element also coordinated a visit to the local ROK Army preventive medicine detachment food laboratory.

Task Force Central—Veterinary Role 3 MWD Hospital and 121st Field Hospital Integration

One Veterinary Medical Surgical Team (VMST) and one VSST, totaling eight personnel, were tasked to establish

a functional veterinary Role 3 field hospital co-located with the 121st Field Hospital. Veterinary Role III care includes definitive surgical and dental care, diagnostic imaging, diagnostic clinical laboratory support, triage, and short-term hospitalization capability for MWDs. The team conducted live medical procedures on three military working dogs during PMF 25-2 with the assistance of the 503rd Military Police Detachment. These medical procedures, comprised of three dental cleanings and a cutaneous skin mass removal under anesthesia, validated veterinary Role 3 workflows from induction through recovery while exercising interunit coordination with human medical counterparts.

By co-locating with the human medical providers, the team also executed cross training with the 121st Field Hospital and the 5th Preventive Medicine detachment. This combined training exchanged human and veterinary medicine best practices and sharpened water sanitation and pathogen/vector identification skills that underpin force health protection. During the 121st Field Hospital mass casualty training scenario, the veterinary team conducted triage of human casualties arriving at the field hospital, freeing human medical providers to provide direct patient care. In a true LSCO or mass casualty scenario, the medical expertise of veterinary medical teams can assist human providers in the provision of life-saving medical care.



Spc. Oquendo performing a dental procedure on MWD "Lady"



Soldier's testing samples in the expeditionary food lab

Task Force South—Expeditionary Food Safety Lab

One Food Protection and Laboratory Team (FPLT) and two VSSTs, comprising twenty Soldiers, stood up a deployable field food laboratory and conducted training on proper sanitation, food sample submission workflows (including chain of custody and documentation), and related quality assurance practices. This expeditionary lab posture strengthens the theater's ability to detect and respond to food-borne hazards quickly, even when operating far from fixed facilities. Food-borne illness represents a significant risk to theater-wide combat strength, so the ability to detect food and water contamination in a field environment is vital to preserving operational effectiveness and combat power.

18 Veterinary Food Inspectors (68R) also executed a food safety inspection training visit to a local poultry processing plant where they received hands on training in meat processing practices specific to Korea. This training reinforced humane animal handling, process controls, and inspection checkpoints that keep the force's food supply safe.

Readiness Under Change & Real-World Impact

Despite greater than 90% officer turnover over the summer, the detachment sustained combat-ready deployability by compressing unit integration of new personnel into a series of high yield training events. An M4 qualification range brought over 80% of the formation current with their assigned weapon, a driver training pipeline qualified greater

training pipeline qualified greater than 90% of new arrivals to drive tactical vehicles and culminated in multiday convoys across the peninsula without mishaps; and live MWD procedures with the 503rd Military Police Detachment validated veterinary Role 3 surgery to recovery workflows and interunit coordination. Unit training was tested in real-world and validated mid exercise when a Camp Humphreys commissary complaint about spoiled eggs triggered a rapid facility inspection and supply traceback. Working with installation partners, the veterinary food-inspection team identified temperature control/shelf-life issues and removed thousands of compromised dairy products before sale, preventing illness within the military community and demonstrating how food inspection and laboratory tactics, techniques, and procedures (TTPs) protect the USFK community and the combat-ready force.



106th MDVSS rendering care in the field to a Military Working Dog

Conclusion

Pacific Medic Focus 25-2 confirmed that the 106th MDVSS can project veterinary capability at echelon while simultaneously strengthening coalition clinical integration and food protection depth. From tactical canine care to theaterwide food inspection and laboratory readiness, the “Dragon Dogs” delivered measurable effects that translate directly into a healthier, more resilient force that preserves joint combat strength across the Korean peninsula. Pacific Medic Focus 25-2 validated the 106th Medical Detachment Veterinary Service Support’s ability to project veterinary capability at echelon while synchronizing with Republic of Korea (ROK) counterparts and joint medical assets. From tactical ca-

nine care to expeditionary food safety and laboratory readiness, the “Dragon Dogs” delivered measurable effects that preserved joint combat power across the Korean peninsula. The exercise showcased how integrated veterinary medicine enhances operational resilience and coalition interoperability. By conducting Role II and Role III veterinary operations, supporting mass casualty scenarios, and partnering with the ROK Army in food protection and preventive medicine, the detachment demonstrated the critical role of veterinary assets in sustaining combat effectiveness during large-scale operations. These efforts not only safeguarded animal and human health but also reinforced trust and shared readiness within the combined medical community. Looking ahead, the 106th MDVSS will continue refining its veterinary and public health capabilities while deepening collaboration with human medical and logistics units. The unit remains committed to ensuring that veterinary support remains a vital element of health service support and a decisive enabler of mission success across the Indo-Pacific theater.

Artificial Intelligence Helping Animals Live Healthier Lives

Innovation was the main focus at the North American Veterinary Community Veterinary Meeting & Expo 2025, where veterinarians learned about new tools and treatments for pets. Nearly 30,000 people from 86 countries attended the event.

Artificial intelligence grabbed attention with programs that help vets spot illnesses in dogs and cats faster and more accurately. Some systems can even detect early signs of disease during routine checkups, allowing treatment before pets get seriously sick.

Highlights include new vaccines to protect pets from diseases like canine influenza and feline leukemia. Regenerative cell therapies were shown to help older pets recover tissue and move more easily.

Exhibitors displayed advanced medical devices and software that make care safer and more efficient. Experts said the event showed how technology is helping veterinarians give pets faster, smarter, and more effective treatment, improving their health and quality of life.

Sustainment for the Sustainers

An In-Depth Overview of Logistical Support Area Requirements for PMF 25-02 White Cell Operations.

502nd Field Hospital
2nd Lt. Ira Markley



Eighth Army units are expected to “Fight Tonight” and win. The complexities of the modern battlefield make this expectation challenging. The evolution of multi-domain operations requires units to be modular and expeditionary. Coupled with the expected increase in casualties during Large-Scale Combat Operations, this presents a complex challenge for Field Hospitals. That challenge is specifically seen in logistical requirements. Field Hospitals are not organically equipped to establish a Logistical Support Area, which complicates “Fight Tonight” rapid deployment and sustainment – particularly when logistical support is limited. This paper will cover the requirements, challenges, adaptations, and risks faced by the 502nd Field Hospital (FH) during Pacific Medic Focus (PMF) 25-2.



502nd Medical Maintenance Team prepares their container for movement to establish the White Cell LSA for PMF 25-02

Logistical Support Area (LSA) sustainment requirements can be broken down into three main categories: Shelter (CLVII), Fuel (CLVIII), and Sustenance (CLI). The Field Hospital, with over 350 personnel, requires a large amount of logistical support. Doctrine dictates that a fully operational Field Hospital consumes upwards of 3200 gallons of diesel per day, 4600 gallons of water per day, and enough food and beds to support patients.

Those numbers are specific to the Field Hospital operations and not the LSA requirements for support personnel. Unfortunately, Field Hospital doctrine and equipment does not meet nor address the logistical requirements to keep personnel sheltered, equipment fueled, or personnel fed. Organically, the Field Hospital has three military tank and pump units (TPUs) with a capacity of 1800 gallons fuel, one Hippo and three Water Buffalos with a max capacity of 3200 gallons water, and one Containerized Kitchen specifically for patient feeding. These capabilities are far short of the requirements necessary for basic Field Hospital operations. Though the 502nd Field Hospital’s experience during PMF 25-2 was limited to White Cell support, the requirements necessary for an LSA were still relevant and practical.



LTC Powers, 502nd Commander, addresses her Soldiers out at USAG Yongsan

The four-day operation required 2400 gallons of fuel, 1600 gallons of water, 1350 meals and billeting for 130 personnel. This was a perfect training opportunity for the 502nd FH to identify realistic requirements necessary to conduct an LSA for future operations. Though planning these figures were straightforward, execution proved far more difficult due to site conditions and limited infrastructure.

Establishment of the LSA faced significant logistical challenges, primarily tied to the location. USAG Yongsan ceased many of its operations back in 2019, resulting in limited capabilities and support. However, it was a perfect training location to replicate the modern battlefield. Specifically, when it came to using buildings of opportunity for the LSA. The hard-stand structures could reduce the additional tent requirements needed to billet



502nd FH Soldiers repair the tire on a 100K generator for the 549th Hospital Center.

the FH personnel. However, after a base camp assessment was completed, all hard stand structures were deemed unsafe for habitation due to the occupational health risks to Soldiers. This is a realistic challenge units will face in urban environments. Furthermore, the area lacked organic fuel and sustenance assets. Consequently, the 502nd had to provide logistical support for the LSA. During wartime, this would likely be unsustainable, as organic assets would be prioritized for FH support. However, the necessity to support the LSA with available resources fosters ingenuity and adaptation.

To mitigate the challenges of operating on USAG Yongsan, the 502nd implemented several solutions. Utilizing internal assets, the unit established sleep tents with eight 64-foot Airbeam tents and cooled them with eight Improved Environmental Control Units (IECU). This required operating three 100kW generators 24/7, consuming approximately 7.8 gallons of fuel per hour each. The 568th Medical Company Ground Ambulance (MCGA) augmented fuel supplies with a 2.5k gallon Heavy Expanded Mobility Tactical Truck (HEMTT) delivery. This arrangement eliminated the need for external fuel convoys through Seoul. For food, 502nd relied on

the 121st FH to procure the field feeding teams necessary to support all participants. Water requirements were met by convoying a 2000-gallon HIPPO and additional Water Buffalos. Through inter-unit cooperation, over 130 personnel were successfully sustained for four days, demonstrating adaptability and effective multi-unit coordination.

Although these adaptations enabled mission success, it is important to note the significant risks incurred. First, the shelters used for billeting were taken away from the Field Hospital infrastructure potentially compromising patient care. Second, accepting fuel from the 568th MCGA would risk their mission to conduct patient evacuation, resulting in the echelons of care not decompressing their treatment facilities. Third, using field feeding from other units not specifically tasked to support 502nd, takes their focus and resources from other units. Though each of these were calculated risks, it doesn't negate the fact that dedicated LSA support is a requirement.



502nd FH White Cell posing in front of the theatre at USAG Yongsan.

Pacific Medic Focus 25-02 provided valuable lessons on planning and executing life support operations in limited-resource environments. The exercise not only tested the 121st FH, but also the 502nd Field Hospital's sustainment capabilities. These lessons directly strengthened 65th Medical Brigade's ability to operate under challenging conditions. The constraints of USAG Yongsan forced units to innovate, cooperate, and remain self-sufficient—key qualities for any force expected to "Fight Tonight."

Honoring Our AMEDD Medal of Honor Heroes

Specialist Five Charles C. Hagemeister

Vietnam War: November 1, 1955 - April 30, 1975

In recognition of his extraordinary courage and selflessness, Spc. Charles C. Hagemeister actions will forever stand as a testament to the power of Army leadership and the enduring legacy of those who serve with valor.



In March 1968, during the height of the Vietnam War, U.S. forces were engaged in demanding operations across remote and often hostile terrain. The conflict was marked by small-unit engagements that tested Soldiers' courage and resolve. It was in this setting that Specialist Five Charles C. Hagemeister, a combat medic assigned to the 1st Battalion, 5th Cavalry Regiment, 1st Cavalry Division (Airmobile), distinguished himself through extraordinary heroism that would later earn him the Medal of Honor.

On March 20, 1968, Hagemeister's platoon was conducting a search-and-clear mission near the village of My An in Binh Dinh Province when it was suddenly pinned down by intense enemy machine-gun and mortar fire. Casualties mounted rapidly. Without hesitation, Hagemeister left his position of safety and sprinted across open to reach the wounded. Moving under constant fire, he administered lifesaving aid, including applying tourniquets and stopping severe bleeding, often while lying flat to shield himself and his patients.

In the chaos of the firefight, Hagemeister displayed not only medical skill but also extraordinary battlefield initiative. When enemy fire threatened to overrun his platoon's position, he picked up a rifle from a fallen com-

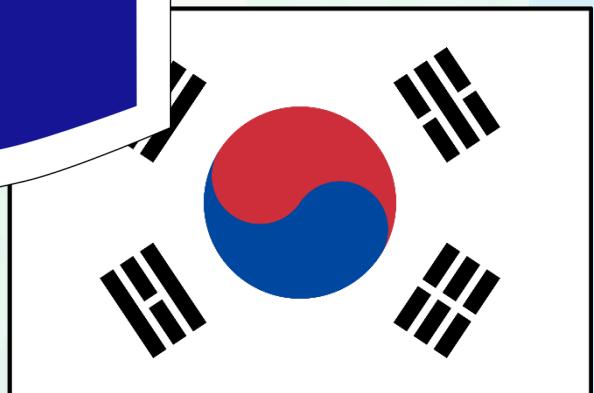
rade and delivered suppressive fire, allowing his fellow Soldiers to regroup and enabling continued evacuation of the wounded. Several times he crossed the kill zone to carry injured men to safety, demonstrating calm resolve despite the deadly threat around him. His actions directly saved multiple lives and kept his platoon in the fight during a critical phase of the engagement.

Born on Aug. 21, 1946, in Lincoln, Nebraska, Hagemeister grew up with a sense of duty and commitment to service. He enlisted in the U.S. Army in 1966 and was trained as a medic, embodying the Army's tradition of caring for Soldiers in the most difficult circumstances. His courage under fire in Binh Dinh Province exemplified the selfless service and unwavering dedication that define the Army's medical community.

For his valor "above and beyond the call of duty," Hagemeister was awarded the Medal of Honor on May 14, 1968. His citation commended his extraordinary heroism and his decisive actions that saved lives at the risk of his own. Hagemeister went on to dedicate his life to military service, rising through the ranks to retire as a lieutenant colonel. Throughout his career, he remained committed to Soldiers and their families, reflecting the same values that defined his actions in Vietnam.

Following his retirement, Hagemeister continued to be a source of inspiration, often remembered as a humble hero who credited his comrades for his survival and success. His story serves as a reminder that courage and compassion are often found in those whose mission is to save others rather than to fight.

Hagemeister died on May 19, 2021, at the age of 74. His name and example endure in Army history as a testament to the bravery, skill, and devotion of combat medics who have served in some of the most perilous battles in modern warfare.



PACIFIC MEDICS WARRIOR CARE!



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