



# THE DUSTOFF<sub>ER</sub>



DUSTOFF ASSOCIATION NEWSLETTER

FALL/WINTER 2000

## **DUSTOFF Unit's Participation in Bosnia Documented in *Aviation Week & Space Technology***



# President's Message

Greetings, fellow DUSTOFFERS and friends. It is that time of the year when we move into final planning for your annual reunion. Our Executive Council just finalized plans to make our twenty-second reunion one of the best ever. We are returning this year, by popular demand, to the Holiday Inn Riverwalk on the 16th to the 18th of February 2001. This year we have invited special guests from "Operation Ivory Soap," who flew airplane spare parts in R-4B helicopters from ship to shore in the Philippines in WWII. These pioneers additionally flew 62 wounded soldiers from the jungles, while under ground fire from the Japanese. Make your plans, mark your calendars, call your friends, book your rooms, and most importantly, send in your registration with check. You'll find your registration form on the back of this newsletter and on our homepage at [www.dustoff.org](http://www.dustoff.org). Please REGISTER EARLY, especially our San Antonio members who have a reputation for showing up late and unregistered. This would greatly assist in our planning and reduce the workload on our "highly paid" volunteer staff.

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Your Executive Council approved a motion to establish a DUSTOFF Hall of Fame in the AMEDD Museum with donated memorial funds for J. B. Hill and Mayo Ellingson. We have developed a business plan with procedures for nomination to membership, which will be presented at this year's business meeting. Thanks to all those who helped to get this project underway. (See Hall of Fame information on pages 15 and 16.)

We are also trying a new DUSTOFF marketing initiative developed by your secretary, Scott Burgess. Scott put together a very professional handout enclosed in the new member's welcome packet and found on our Web site. It captures DUSTOFF Association objectives and history, explains the DUSTOFF name, and includes a membership application. The intent is to provide information about our association to new graduates from flight school, the Flight Medic Course, the MEDEVAC Qualification Course (2CF7), and units in the field. Cultivating and nurturing new membership is the key to maintaining the DUSTOFF legacy. In this same vein, I would encourage our more seasoned members to seek out our junior members (they're the ones with flat bellies and no gray hair) and mentor/share war stories with them at this year's reunion. Many weren't born yet when you were back in the Nam and they might just have some pretty neat stories about what is happening in the new millennium DUSTOFF.

Speaking of sharing stories. We really need your support in submitting articles for publication to the DUSTOFFer Newsletter. I know many of you are busy, but I also know our soldiers are out there every day doing great things for our country. I'm equally sure that many seasoned members have stories to tell from the past that they may not have wanted to or taken the time to talk about before. We are looking for stories, personal interest pieces, updates on what DUSTOFF is doing around the world today, and digital pictures of interest. Thanks in advance for your help.

The other night, when I woke up at 0100 and couldn't go back to sleep, I started thinking about this year's reunion and what great members we have—not just all the recognized and unsung heroes, but more about the great human beings in our group of friends. When I just think of a few of my personal DUSTOFF mentors and role models, the list becomes endless. With the names of Snyder, Knisley, Romines, Novier, Bradshaw, Miles, Toennis, Rhodes, Scofield, Truscott, Meis, Coley, Gower, Conkright, Thompson, Proctor, Foust, Novosel, Thresher, Maschek, Pruet, Lutke, Hancock, Mayes, Smith, Meyers, Stanfield, Mankoff, Sue Moore, and Suzie Gower on a list, that goes on and on. Great people, great Americans, and every one a hero of mine. I am a very lucky guy, and this is one great organization.

Congratulations to the winners of our DUSTOFF Crewmember and Rescue of the Year. We had some truly awesome nominations, all of which epitomize the legacy of our great organization.

I look forward to seeing old friends at our 2001 Reunion at the Holiday Inn on the Riverwalk. Remember to make your reservations now and REGISTER EARLY. See you on the high ground.

*DUSTOFF!*  
Greg Griffin

# DUSTOFF Crewmember of the Year

In what was again a superb competition, the DUSTOFF Crewmember — 2000 was selected by the Association's Executive Council. The candidates were a mirror of the diversity that is AMEDD aviation. Four of the candidates were from active component units, and one was from the reserves. Three represented CONUS-based units, and two were from overseas areas. Three were flight medics, and two were crew chiefs.

Selected as the DUSTOFF Crewmember of the Year was Sergeant Glenn E. Fryer, 236TH Medical Company (AA), Landstuhl, Germany, who was eloquently recommended by his commander, MAJ Jon Fristoe.

Sgt Fryer is a UH-60 helicopter repairman who takes the lead in the administration of emergency and routine treatment of patients in an international helicopter medical evacuation (medevac) unit. While his duties primarily involve superior maintenance and crew coordination as a crew chief, SGT Fryer has set himself apart from his peers with his vast medical knowledge and patient care during numerous deployments and missions. Among his superb efforts, he has:

- Deployed a total of twelve months to Bosnia-Herzegovina in 1995 with his FSMT as part of the initial implementation forces. During this deployment, he served as a member of nine crews and provided his valuable skills to each.
- Assisted with the training of over 1,600 implementation force (IFOR) soldiers in U.S. Army, medevac and external hoist operations.
- Ensured absolute safety, during the fifteen missions and over 220 hazardous flight hours executed by the various crews of which he was a member. He served as one of four enlisted soldiers, selected because of his knowledge, to augment the follow-on unit for continuity of the mission.
- Deployed again with the 236<sup>th</sup> Medical Company (AA) to Bosnia-Herzegovina, serving as the senior crew chief and flight platoon maintenance supervisor for eight aircraft positioned throughout the theater of operations. His superior maintenance and coordination abilities allowed the success of all high-priority urgent category missions during this deployment.
- Continued to serve as a crewmember and participated in over 180 hours of flight in the hostile fire zone. He was responsible for coordinating all in-flight activities for his battle-rostered crew and again assisted the flight medical aidman during the evacuation of ten patients. He personally rendered first aid, cardiopulmonary resuscitation (CPR) and in-flight patient management on different occasions.
- Deployed in support of the Kosovo peacekeeping forces as a part of Task Force Falcon, performing duties at both Camp Bondsteel and Camp Able Sentry. As part of the initial implementation forces, he initiated a maintenance program for two remotely located unit aircraft at Camp

Able Sentry, Macedonia. He was responsible for training fourteen other crewmembers and maintaining their proficiency in all flight-related tasks.

- Assisted with a total of fifteen urgent-category patient evacuations and performed 230 hours of incident-free flight time. He was instrumental in the safe and timely deployment and redeployment operations of all unit aircraft and personnel to and from the theater.
- Participated in a difficult hoist rescue operation under severe and extreme conditions. He and his crew attempted to rescue a Kosovo youth who had broken

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through and was lost in the water of an ice covered river. Although the medic suffered both physical and cold weather injuries from the crew's heroic endeavor. Sgt Fryer rendered immediate and exemplary medical care to all injuries to his fellow crew member.

- Serves as an enlisted standardization flight instructor and trains thirty-two nonrated crewmembers in flight procedures, hoist operations, night vision flying and sling load operations.
- Has evacuated over 100 urgent patients, performed over 630 flight hours in hostile fire zones and achieved over 950 flight hours.
- Donates his free time to mentoring and guiding military dependent youth as an assistant coach to a post soccer and baseball team. He freely volunteers to assist with activities outside his military responsibilities.
- Supports international events and set himself apart by being awarded the German Expert Field Medical Badge for his knowledge of medical treatment.

Following are brief synopses of the achievements and qualifications of the other superb young men considered for this year's honor:

**Staff Sergeant Patrick J. Caesar, 54th Medical Company (AA), Fort Lewis, Washington,** nominated by his commander, Major Joseph B. House. SSG Caesar has, within one year:

- Deployed to Kuwait as NCOIC for a three-month deployment, Idaho, three field exercises, and six one-week rotations to the Yakima Firing Center.
- Been selected for Sergeant First Class, in a 19% selection rate of 91B promotions selectees.
- Been selected to serve as the flight platoon sergeant and has been hand selected as a flight instructor.
- Recently received the Sikorsky Rescue Award.
- Is involved within the community, providing MEDEVAC procedures and rescue guideline instruction to area Washington search and rescue teams.
- Has been on several Army high school recruiting missions to the local Seattle, Washington area.
- Is progressing toward his Bachelor of Science in biology.

**Staff Sergeant Robert A. Fudge, 68th Medical Company (AA), Wheeler Army Airfield, Hawaii,** nominated by his commander, Major William B. Grimes.

SSG Fudge has:

- Responded to thirteen MAST (Military Assistance to Safety and Traffic) missions, evacuating sixteen critical patients to nearby trauma facilities in support of the citizens of Hawaii and the city and county of Honolulu and eight MEDEVAC missions. On two missions he was awarded the Sikorsky Rescue Award for his valiant efforts. Both missions required using the high-performance rescue hoist for extraction.
- Was selected to deploy to Alaska to train with our sister unit the 68th Medical Company (Alaska).
- Deployed with four aircrews to Thailand for a period of

forty-five days, assuming duty every other day. One of the missions on which he flew resulted in another Sikorsky Rescue Award nomination.

**Master Sergeant Rodolfo Hernandez, 1042nd Medical Company (AA), Salem, Oregon,** nominated by his commander, Major Matthew J. Brady. Upon notification of the unit's deployment to support SFOR 7, SFC Hernandez spent numerous hours of his personal time assessing and planning a training program that would enable the unit to deploy with the maximum number of fully mission-capable crews. Upon deployment on 15 February 2000, he had accomplished that difficult task. Additionally, he:

- Established relationships with both the Distance Learning Center and the medical staff of the 115th Field Hospital (Task Force Med Eagle) to ensure that all the flight medics in his platoon attended and successfully completed EMT, BCLS, and ACLS training.
- MSG Hernandez is a caring husband and father of two sons. He participates in their lives as a coach of little league baseball, basketball, soccer and the school PTA.
- He regularly volunteers to read to younger students and volunteers as a chaperone for activities at school. With his family always in his heart, he is never without the mission at the forefront of his mind.

**Specialist Rafael Lopez, 498th Medical Company (AA), Fort Benning, Georgia,** recommended by his commander, Major Kyle D. Campbell. Among other superb efforts, he:

- Routinely volunteered for the toughest assignments and deployments executed by the unit in the past 12 months. He began the year by preparing four UH-60s for Operation Bright Star 99/00 in Egypt. As a Private First Class at the time, he capitalized on his experience from his prior deployment to Central America on operation Fuerte Apoyo, where the unit provided critical aeromedical evacuation coverage for the Hurricane Mitch relief efforts.
- Deployed on multiple temporary duty tours at Florida Ranger Camp at Eglin Air Force Base, Mountain Ranger Camp in Dahlonaga, Georgia, and Fort Stewart, Georgia.
- Deployed over 216 days this past year. On one particular mission at Fort Stewart, his crew saved the life of a civilian who was involved in a head-on collision with a semi-truck. The entire crew was awarded the Sikorsky Rescue Award for their professional execution of the mission.
- Volunteered for Operation Purple Dragon, a large joint airborne training exercise in Fort Bragg and Camp Lejeune, North Carolina.

—DUSTOFFer—

# DUSTOFF Rescue of the Year

In the always exciting, harrowing, almost debilitating world of DUSTOFF, each rescue is important. Some just have more complications than others—for a variety of reasons and environments. This year's winner is only a hair or so ahead of the rest of our brave comrades' exploits. The Rescue of the Year Award goes to the 571<sup>st</sup> Medical Company (AA), Fort Carson, Colorado, 25 March 2000. Crewmembers included: CPT Jeffery Mosso, CPT Edward Mandril, SGT Phillip Smith.

At approximately 1200 P.M. a call came in from the Lake County Search and Rescue Department requesting that the on duty crew provide assistance in extracting a lost and injured hiker from Mt. Elbert near Leadville, Colorado. This would be an extremely high-altitude rescue, and the possibility of conducting a hoist rescue at altitude was almost eminent. They departed Butts AAF to the north. The weather was overcast, and the ceilings were low through the high mountain passes. Time was of the essence, due to the patient's already deteriorating critical condition.

The hiker had been lost on Mt. Elbert for two days and had been located with a personnel locator beacon. The hiker had extreme frostbite of the face, hands, and feet, and was literally freezing to death. The hiker was located approximately three-quarters of the way up the side of the 14,500-foot mountain. Once the MEDEVAC crew arrived at the location of the patient, they did an aerial evaluation of the pick-up site and conducted aircraft power checks to determine if they had the capability to conduct this rescue with their UH-60A Blackhawk. The power checks confirmed that they did have the power, but that the aircraft would be performing at or close to its maximum performance capabilities.

Due to the steep and uneven terrain, the crew determined that a safe landing could not be accomplished. It was then decided that the only way to extract the hiker successfully and save his life would be by way of high-performance hoist. Once in position over the pick-up site, SSG Dixon (crewchief) hoisted SGT Smith (flight medic) down approximately 75 feet to the hiker's location. The pilots had to maneuver continuously and adjust the aircraft to accommodate for the gusting wind and blowing snow. At the same time the pilots were keeping a close eye on the aircraft instruments and very carefully managing the aircraft's available power. Because of the extreme altitude, the crew knew that hypoxia would soon pose a problem. So they worked as quickly as they could. The ceilings were beginning to come down and were right on top of the mountain. The crew knew that if they did not get the patient out soon, this lifesaving VFR mission would soon become a life saving IFR mission.

When SGT Smith had the patient ready and secured to the jungle penetrator, SSG Dixon carefully hoisted him up to the aircraft. The dry, blowing snow caused increased difficulty, but the experienced crew pressed on with the patient extraction. The crew got the patient inside the aircraft, and SSG

Dixon lowered the hoist down again and extracted SGT Smith. SGT Smith was on the ground for only five to seven minutes, and was already starting to show signs of frostbite to his hands and face.

Once the crew had the patient safely on board the aircraft, they proceeded to the Lake County Airport in Leadville, Colorado, and then to Butts Army Airfield, Fort Carson. This was the highest hoist rescue mission the 571<sup>st</sup> Medical Company had performed this year and was the first hoist rescue mission for three of the four crewmembers. The entire crew received Aviation Achievement Certificates from the Leadville airport manager for landing at the highest airport facility in North America.

Among the other outstanding missions flown by DUSTOFF units and crews around the world were the following runners-up:

54<sup>th</sup> Medical Company (AA), Fort Lewis, Washington, 28 September 2000. Crewmembers: CW2 Toby Norris, CW3 Doug Gemmell, SGT Thomas Kunkle, SPC Robert Levine.

A routine hoist mission became anything but routine when it became apparent that the 5,000-foot mountain range on which the patient was located on was totally obscured with a thick layer of clouds. With no pass available to cross the ridgeline to reach the site, they decided to fly at treetop level to maintain the best ground reference through the light fog. They crossed the ridgeline slowly by flying from one group of trees to the next. VFR conditions on the other side, zeroed out the gps to find no signs of the ground rescue team. After thirty minutes of searching along the mountain range, the medic saw the ground ambulance lights through the fog. Using the lights as a reference, they landed on a small pullout on the logging road.

The ground rescue team briefed that a female had fallen approximately 100 feet and had a fractured ankle. The crew chief could see the patient. They flew toward the patient's location, 200 feet and a quarter mile from the landing zone. The aircraft commander lost all ground references on the right side of the aircraft. Using ambulance lights to the left through the fog as a reference, he flew the aircraft toward the rock wall until the rotor was about two disks from the rocks. Then he started a slow climb up the rock wall searching for the patient. He held the position about three feet from the rock wall for approximately ten minutes, as the patient was secured to the jungle penetrator. After the medic and patient were safely secured inside, the crew flew VFR on top to Madigan Army Medical Center, approximately sixty miles away. There, the patient left the aircraft with a smile and a thank-you for their efforts.

*(Continued)*

507<sup>th</sup> Medical Company (AA), Fort Hood, Texas, 6 August 2000. Crewmembers: CW2 Craig Dehls, CW2 John Burt, CPL Charisse Stinson, SGT David Clutter.

The unit was alerted to deploy two aircraft and crews in support of the National Interagency Fire Center (NIFC) wildland fire-fighting mission in Burgdorf, Idaho. The two 507<sup>th</sup> crews provided support for over 500 soldiers and over 600 nife fire fighters. Many of the rescue hoist operations were conducted at 200 feet above ground level (AGL) in the midst of the extreme turbulence created by the unrelenting and extremely hazardous wildfires. On Sunday, August 6, 2000, at 1530 hours, DUSTOFF 19 (CW2 Craig R. Dehls (pilot in command), CW2 John S. Burt (pilot), SGT David O. Clutter (crewchief), CPL Charisse N. Stinson (medic), received another call from Burgdorf communications for a mission requiring the high-performance hoist for a patient with a back injury in a remote part of the Payette National Forest, where the terrain was extremely rugged and steep.

With a half mile visibility through the thick, obscuring smoke, the crew performed two reconnaissance patterns (one at eye level and one at low level) over the extraction site to assess terrain, slope, tree height, and estimate the wind direction in the canyon. CW2 Burt finessed the helicopter through the perilous maze of treetops to a 200-foot AGL hover over the pickup zone, with the rotor blades missing the tree limbs by a mere ten feet. SGT Clutter tenuously lowered CPL Stinson down to the patient through the precarious web of tree limbs. The patient was stranded on a precipitous slope no further than twenty feet from the blazing brush.

When CPL Stinson finished packaging the patient and was ready to evacuate him, she radioed on her PRC-90 survival radio for the helicopter. CW2 Burt repositioned the aircraft over the pick-up zone. SGT Clutter wove the hoist cable through the myriad of branches and began hoisting the patient to the helicopter. As SGT Clutter extricated the patient, two brush fires ignited out the left side of the aircraft because of the rotorwash. Through it all, CW2 Burt held the helicopter steady and minimized the pendulum effect of the patient suspended on the hoist. Only through masterful and innovative maneuvering was the crew able to extract and secure the patient out of the noxious smoke and away from the intense heat of the flames.

571<sup>st</sup> Medical Company (AA), Fort Carson, Colorado, 5 July 2000. Crewmembers: CW3 Steve Jeffords, CW4 Dennis Fletcher, SSG Carlos Sernas, SPC Ambrosia Hanes.

Medevac operations received a call for assistance from the Archuleta County medical officials for a high-performance rescue, hoist-capable aircraft to extract a hiker who had fallen into a ravine approximately sixty feet while trying to scale a rock cliff face. The patient was incapacitated with unknown injuries and needed assistance immediately. This would be a difficult mission, due to the high altitude environment, and as it was starting to get late, so available light would soon become an issue. The aircraft commander knew this mission might turn in to a night-vision goggle operation, so he made sure his crew had Anvis-6 night-vision goggles on-board the aircraft.

The crew departed Butts Army Airfield outbound to the site located approximately 140 miles southeast. When the crew arrived in the vicinity of the patient's location, they quickly conducted an aerial reconnaissance to determine the best approach into the area. They could see the hiker, who appeared to be in a stable area but was showing no signs of movement. The pilots maneuvered the aircraft into position over the patient while the flight medic and crewchief prepared for their part in this hoist rescue operation. When the flight medic, SSG Sernas, had secured himself safely to the jungle penetrator, the crewchief, SPC Haines, boomed him outside of the aircraft and proceeded to lower him and his medical equipment to the ground. On the ground, he determined that the patient had a broken pelvis and leg, and signaled for the aircraft to return to his location. SPC Haines carefully but precisely hoisted the patient from the cliff and into the aircraft. The crew refueled at the airfield and began the journey back to Fort Carson.

571<sup>st</sup> Medical Company (AA), Fort Carson, Colorado, 2 July 2000. Crewmembers: CW3 Dwight Greenlund, 2LT Phillip Lucero, SGT Alfonso Maloco, SPC Ambrosia Hanes.

On 2 July 2000, the 571<sup>st</sup> Medical Company received a call from El Paso County emergency rescue personnel, explaining that a male in his mid-twenties had been rock climbing near Manitou Springs, Colorado, in the Seven Falls Recreation Area. He had fallen approximately fifty feet and landed on a rock shelf that extended out from the face of the mountain. CW3 Greenlund, 2LT Lucero, SPC Haines, and SGT Maloco did a quick crew mission brief and started the aircraft. CW3 Greenlund noted to the crew that the outside air temperature was around 30 degrees (C). He knew his available power would be critical, due to the extreme heat and high altitude environment.

When the crew arrived on scene, they determined that, due to the extreme altitude and outside air temperature, the UH-60A was operating dangerously close to its maximum capability for available power. Due to the extreme grade of the mountainside, the pilots had to be extremely cautious and execute precise maneuvers while operating in this unforgiving area as close to the jagged rock cliff that they could get without putting their own lives in danger.

SGT Maloco strapped himself to the jungle penetrator, and SPC Haines boomed him outside of the aircraft and began lowering him down to the climber's position on the cliff face. When SGT Maloco was on the ground beside the injured climber, he began his medical assessment and initial treatment to stabilize his patient. SGT Maloco signaled to SPC Haines to send down the sked litter. With the sked litter with him on the ground, SGT Maloco began to prepare the patient for extraction.

The two pilots kept the aircraft precisely over the pick-up zone, executing precision hovering, allowing the flight medic and crewchief to continue the hoist rescue operation with minimal difficulty. SPC Haines boomed the injured climber in and secured him safely inside of the aircraft. After SGT Maloco was safely inside the aircraft, the pilots repositioned away from

the dangerous mountainside. The crew safely landed at the hospital, where they transferred the injured patient to Memorial emergency room personnel. Unknown to most was the fact that this was the first actual live mountain hoist rescue mission that any of these crewmembers had ever done.

236<sup>th</sup> Medical Company (AA), Landstuhl, Germany, 9 January 2000, Crewmembers: CW2 Christopher Frey, MAJ Jonathan Frisroe, SGT David Estrada, SGT Glenn Fryer.

The first hoist mission in support of KFOR occurred on Sunday, January 9, 2000, with a call for a child who had been submerged under ice for approximately thirty minutes. The response time, off in eight minutes, enroute time of seven minutes, was excellent. The landing zone was east of Checkpoint Gulf, on the Serbian border inside the 5-km buffer zone. Locals were standing along the banks with sticks, trying to break up the ice on the river. No one could get to the actual hole in the ice where the child had last been seen. The crew decided to hoist Estrada down to try and break up the ice and see if he could see anything through the ice. They hovered up- and downstream searching, with no success. After several minutes, SGT Estrada saw what he thought was a coat and signaled to be lowered in an attempt to reach it. He went completely under—completely submerged in the frozen river. Unfortunately, what he had seen was only a bag.

After some time, the crew had to pull its freezing teammate back into the aircraft and were able to warm him, preventing another casualty by not allowing him to become hypothermic. The crew returned to the site with the dive team on board under night-vision goggles, orchestrating search patterns across the river. The divers went under the ice, and back and forth across the water. Concluding that there was virtually no chance of rescuing this child if they could have found him, the crew returned to Camp Bondsteel through goggles, landing at 1947. Those in the medevac business who fly these aircraft and perform these missions know how much is involved in hoist operations, and that day was no different. These missions don't always work out, as this one didn't. The glory usually goes to the folks who are involved in the ones that work out, but the crew on this mission were all heroes.

498<sup>th</sup> Medical Company (AA), Fort Benning, Georgia, 22 August 2000. Crewmembers: CW2 Trevell Wiggins, WO1 David Woodward, SGT Richard Stickels, SPC David Hernandez.

While supporting the 5<sup>th</sup> Ranger Training Battalion at the Mountain Ranger Camp in Camp Merrill, Georgia, the 498<sup>th</sup> Medical Company (AA) received an urgent MEDEVAC request. A ranger candidate had been attacked by a swarm of wasps in a violent attack. His ranger instructors administered first aid and immediately requested a DUSTOFF.

Within minutes, the crew was airborne, enroute to the point of injury. The medic was very concerned about the soldier's airway, as individuals who are allergic to insect stings can suffer respiratory arrest due to anaphylactic shock.

The only suitable pick-up zone was a hole in the trees approximately ten by fifteen feet. The minimal opening in the

trees made the hoist the only possible means of extraction. The pilot on the controls established a steady hover. The flight medic rode down on the jungle penetrator and quickly assessed the patient's status to ensure his breathing was not restricted. He then rapidly connected the injured soldier onto the jungle penetrator and hoisted him to the aircraft, saving a significant amount of valuable time. Upon further examination, over fifty stings were found on his body. The anaphylactic shock would have killed him, had it not been for the instinctive and rapid response of the outstanding MEDEVAC crew.

—DUSTOFFer—

## Treasurer's Report

### Income and Expenses - Actual

May 01 through October 13, 2000

#### INCOME

DUES	\$2,255.00
INTEREST INCOME	746.50
MEMORIAL FUND	2,550.00
SALES—MEMORABILIA/E-MAIL	673.70
Total Income	\$6,225.20

Interest Income includes \$577.33 on the Bank of America CD and interest earned by the new PFCU CD.

#### EXPENSE

NEWSLETTER PUBLISHING	\$1,794.68
OPERATING EXPENSES	311.33
SALES EXPENSE MEMORABILIA	1,525.19
Total Expenses	\$ 3,631.20

NET INCOME \$ 2,594.00

Our balances in the bank/credit union are as follows:

Bank of America, Military Checking Account	\$13,061.82
Pentagon Federal Credit Union CD	\$10,085.56
Pentagon Federal Money Market Savings	\$10,000.00

The total money set aside in the checking account for memorials is \$5,985.00.

Dan Gower  
COL (R) Treasurer



# Air Ambulance Crew Wins Air/Sea Rescue Award

*by CSM Edward Iannone, aviation branch command sergeant major, Fort Rucker, Alabama  
(From Army Aviation, Official Publication of the Army Aviation Association of America, October 31, 2000.)*

**M**EMBERS OF the crew of a Task Force Hope UH-60 helicopter from the 214<sup>th</sup> Medical Detachment distinguished themselves by exceptionally meritorious service by saving the lives of thirty-six people during Hurricane Mitch disaster-relief operations in Honduras. Their bravery, persistence, and dedication have earned them the distinguished Army Aviation Association of America (AAAA) Air/Sea Rescue Award, created and sponsored by TRW Aeronautical Systems (Lucas Aerospace).

SFC Hector Hernandez, NCOIC for the 214<sup>th</sup> Med. Det., and MAJ David Parramore, the detachment's commander, accepted the award on behalf of the crewmembers at the AAAA Aviation Center Chapter's Annual Awards Banquet at Fort Rucker, Alabama. The AAAA Air/Sea Rescue Award honors members of air rescue commands for outstanding bravery and valiant performance in air/sea rescues.

During the period of November 1 through November 18, 1998, the crew members of "Witch Doctor 36" conducted ten live rescue-hoist missions in severe weather conditions to rescue thirty-six Honduran civilians from the raging floodwaters caused by Hurricane Mitch. These civilians were, in many instances, stranded in trees for a period of several days, exposed to the environment, harassed and often bitten by poisonous snakes also seeking refuge from the raging waters. In one instance, the UH-60 crew conducted a hoist mission to provide food, water, and medical treatment for a Honduran family isolated from civilization for eleven days. Over this sev-

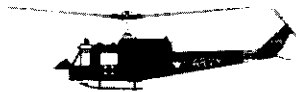
enteen-day period, the crew flew a total of sixty-nine incident-free hours, treated and/or transported 192 injured patients, and transported 23,000 pounds of food and medical supplies and equipment.

"We are proud to be the creator and sponsor of an award that recognizes the achievements of individuals who are willing to risk their own lives to save the lives of others," said Ken Maciver, executive vice president and general manager of TRW Aeronautical Systems (Lucas Aerospace). "As a manufacturer of rescue hoists, we are also thrilled to be able to contribute to the lifesaving efforts of these heroes by giving them the tools to help them do their jobs. These individuals display bravery and heroism every time they go to work, and any action that is taken to recognize these individuals will surely never be great enough to reflect the recognition that they truly deserve."

The Air/Sea Rescue Award was created by TRW Aeronautical Systems (Lucas Aerospace) in 1989 to honor air rescue crews who, by using a personnel rescue hoist, display outstanding dedication and courage to save lives or ease suffering in a crisis. The award became an AAAA award in 1991 with sponsorship by TRW Aeronautical Systems (Lucas Aerospace).

To be eligible for nomination for the AAAA Air/Sea Rescue Award, the rescue must have been performed using any personnel rescue hoist, and the crewmembers named in the nomination form must have had an active role in the rescue effort.

—DUSTOFFer—



**REGISTER EARLY!**  
Reunion 2001  
February 16-18  
Holiday Inn Riverwalk  
San Antonio, Texas  
Advance Registration Form on Insert  
Schedule on page 23  
Registration deadline:  
February 1, 2001



# DUSTOFF Europe

## Seven Days, Six Countries

by LTC Dennis Doyle

**D**USTOFF EUROPE set a new record for deployments and mission support during 21–27 October 2000. Soldiers of the 421<sup>st</sup> Medical Evacuation Battalion found themselves supporting U.S. forces in six countries on two continents, as they participated in KFOR, Victory Strike, Atlas Drop, Focus Relief and Central Region support in Germany. The parallel planning and concurrent execution of multiple operations heavily taxed the soldiers of the 421<sup>st</sup>, but they responded in true DUSTOFF style.

The Medical Evacuation Battalion has continuously supported KFOR operations in Kosovo and Macedonia from the start. The 45<sup>th</sup> Medical Company currently has six aircraft and forty-two personnel there, providing 24/7 MEDEVAC coverage for Task Force Falcon. Additionally, eight M-997 ground ambulances and crews from the 557<sup>th</sup> Medical Company recently completed their six-month deployment in Kosovo.

Victory Strike was a culminating aviation event for V Corps, conducted for the first time at the Drawsko Pomorskie Training Area (DPTA), Poland. The purpose of this exercise was to conduct advanced gunnery aviation and Corps Deep Operations for V Corps attack aviation and artillery units. Over 2,200 soldiers and 67 helicopters participated in the exercise. Imbedded within this task force were four UH-60A MEDEVAC aircraft from the 236<sup>th</sup> Medical Company and three M-997 ground ambulances and crews from the 557<sup>th</sup> Medical Company. As is par for the course, the air and ground evacuation crews were the first to self-deploy and the last to redeploy to ensure start-to-finish exercise coverage.

Soldiers from the 159<sup>th</sup> Medical Company were once again called upon to support Operation Atlas Drop in Tunisia, Africa. This annual training operation, conducted by soldiers of the Southern European Task Force (SETAF) in the scrub-covered hills of northern Tunisia, culminated in a multi-day, live-fire exercise. The 159<sup>th</sup> Medical Company self-deployed two MEDEVAC aircraft and twelve personnel from Wiesbaden, Germany, through Italy and Sicily, with a significant over-water flight leg over the Mediterranean.

During the planning for ATLAS DROP, the 159<sup>th</sup> also was tasked for a short-notice deployment to Nigeria to support Operation Focus Relief. A Forward Support MEDEVAC Team (FSMT), comprised of three aircraft and twenty-five soldiers, deployed via C-5 to Abuja, Nigeria, to join other 30<sup>th</sup> Medical Brigade units to support Special Operations Forces engaged in the training of Nigeria Army soldiers. The initial operation is expected to require 10–14 weeks of medical coverage from the 30<sup>th</sup> Medical Brigade Task Force.

Finally, Central Region support remained constant with a first-up aircraft at Landsruhl (236<sup>th</sup> Medical Company), Katterbach (45<sup>th</sup> Medical Company), and rotating duty at Grafenwoehr and Hohenfels. So for one shining week late in October, DUSTOFF Europe was forward-deployed and on duty in six countries (Germany, Kosovo, Macedonia, Poland, Tunisia and Nigeria) in support of the best fighting force in the world.

### ONE MISSION—ONE TEAM

*Anyone, Anywhere, Anytime*

## Bobby's Wisdom

*More ruthless observations from Vietnam crew chief, Bobby McBride.*

Sometimes, being good and lucky still was not enough. There is always payback.

"Chicken Plates" are not something you order in a restaurant.

If everything is as clear as a bell and everything is going exactly as planned, you're about to be surprised.

The BSR (Bang Stare Red) Theory states that the louder the sudden bang is in the helicopter, the quicker your eyes will be drawn to the gauges. The longer you stare at the gauges, the less time it takes them to move from green to red.

It does too get cold in Vietnam.

No matter what you do, the buller with your name on it will get you. So too can the ones addressed "To Whom It May Concern."

Graviry: It may not be fair, but it is the law.

If the rear-echelon troops are really happy, the frontline troops probably do not have what they need.

# Letters to the Editor

Of some interest are several notes from old DUSTOFFers, who seldom fail to provide an interesting perspective on today's world. Jay McGowan, formerly of the "Original 57<sup>th</sup> DUSTOFF" had a couple of remembrances for the multitudes:

Today, 11 October 2000 is the thirty-fifth anniversary of my return to the United States from the Republic of Vietnam and meeting Pat in San Francisco. Time sure does fly.

In one of our particularly bad nights in country, bad on the pick-up but gorgeous in the air, full moon, broken clouds, good music on AFN, I looked up through the overhead plexiglass and made our Maker a promise. If I returned home intact, I would stop in a church first thing and say thanks.

When I got to San Francisco some months later, I go to the Mark Hopkins Hotel up on Nob Hill and went to the desk. "Sorry, lieutenant, we don't have any rooms. Your wife is just up the street at another hotel." Off I went in a cab, and as we pulled up, I saw there was this huge church, a cathedral, right across the street. I gave my bags to the bell hop and sent him up with a message that I would be right there. I went across to the church and tried the front doors. Locked! I went all around the place—it took up most of a city block—and tried every door. All locked. I just looked up and said "I tried!" And made a bee-line for the hotel and Pat.

Billy Hughes, also an original DUSTOFFer, penned a note detailing his experiences on his return to the United States after a rather serious wounding on a mission in mid-1965:

The C141 that evaced us from Saigon was loaded with the wounded from the Ia Drang Valley. We then went through the Philippines (I met Martha Raye there). We stayed overnight at Clark AFB, and when we were all settled in, the doctors and medics came around to change bandages.

A sergeant next to me told me about the Ia Drang Valley and how he was wounded. He said he was coming across an open field and a sniper hit him. The first shot was through his gut and he went down. He said that the SOB kept firing at them even after he was down. After a few misses, he said he got hit again, and he wasn't sure about the damage. He lay there not moving until he was sure the sniper had moved on to another target. Then he said he put his hand down in his crotch and felt the warm blood. He more or less kept exploring the area, and when he checked his hand, he came up with flesh and his right testicle was missing. At that point he passed out. As it turned out, the sniper had hit him in the groin, took his right testicle off, went into his thigh, hit his femur, and traveled all the way down his leg to stop about two inches from his ankle.

The poor guy was in major pain and was very concerned about his wife back home because he didn't have any children. I told him he would still be able to father children with one testicle, and that brought a smile to his face.

During his surgery, he was cut from crotch all the way to his ankle, and this was in addition to his stomach wound. The doctors came to him and informed him that they needed to change his bandages. Then they proceeded to remove the old ones. They didn't soak the bandages with saline to soften them up; they just tore them off this poor guy. I have never heard a man scream like that. I cried for him. He just about passed out from the pain.

Those of you who have never had a huge open wound, please be advised that the fluids that drain from a wound stick to the bandages and skin about as good as super glue. In defense of the doctors, they had about 300 of us to take care of, but they could have at least soaked the bandages first and cut this poor guy's pain in half. When they finally finished with him, they came to me and I told them they had just changed

*(Letters, continued on page 22.)*

## IDEUS ON NUTRITION

Eldon Ideus, a 1<sup>st</sup> Cavalry alumnus, long an acknowledged expert in matters involving aviation and field medical plans and operations, provided this commentary on the psychosocial and health effects of the consumption of alcohol.

A herd of buffalo can only move as fast as the slowest buffalo, and when the herd is hunted, it is the slowest and weakest ones at the back that are killed first. This natural selection is good for the herd as a whole because the general speed and health of the whole are maintained or even improved by the regular culling of the weakest members.

In much the same way, the human brain can operate only as fast as the slowest brain cell through which the electrical signals must pass. Recent epidemiological studies have shown that, while excessive intake of alcohol kills off brain cells, it attacks the slowest and weakest brain cells first. Thus, regular consumption of beer, wine, and the like, helps to eliminate the weaker cells, constantly making the brain a faster and more efficient machine.

The result of this in-depth study verifies and validates the causal link between all-weekend parties and job-related performance. It also explains why, a few short years after leaving a university and getting married, most professionals cannot keep up with the performance of the new graduates. Only those who stick to the strict regimen of voracious alcohol consumption can maintain the intellectual levels they achieved during their college years.

Thus, this is a call to arms. As our country is losing its technological edge, we cannot shudder in our homes. Go back into the bars. Quaff that pint. Your company and your country need you to be at your peak, and you should not deny yourself the career you could have. Take life by the bottle and be all you can be!

# THE ARMY'S AEROMEDICAL FIXED-WING TESTBED PROGRAM

by CPT Scott M. Nowicki, MS

With healthcare being a major funding issue, the Department of Defense (DoD) is continually looking for ways to save money and improve healthcare for soldiers, dependents, and retirees. One innovative way the United States Army Medical Command (MEDCOM), the Southeast Regional Medical Command (SERMC), and the United States Army Aeromedical Center (USAAMC) are helping reduce costs associated with healthcare is to develop, test, and field a new medical evacuation (MEDEVAC) platform and mission profile. The United States Army Aeromedical Center-Air Ambulance Detachment (USAAMC-AAD) is operating two C-12D fixed-wing aircraft that have been saving thousands of flight hour dollars, while saving hundreds of thousands of dollars in medical expenses.

## Background

For years the Army has transported thousands of patients in the UH-60 Blackhawk or UH-1 Huey rotary-wing MEDEVAC platforms and flown many very expensive flight hours. Due to the rising costs of operating vintage aircraft and managing a perpetual personnel shortage Army-wide, a better and more efficient means of transporting patients between medical treatment facilities necessitated the resurrection of the Army's fixed-wing aeromedical mission proposals. One of the lessons learned during the Gulf War was that the Army needed an aeromedical evacuation platform capable of high-capacity rapid transport of injured or wounded soldiers. Unfortunately, during the draw down, the fixed-wing high-lift capacity aeromedical concept was put on the back burner in support of the UH-60Q procurement program. Through proper staffing and coordination, SERMC staffed a test proposal to utilize C-12D fixed-wing aircraft as an air evacuation platform. The USAAMC-AAD at Fort Rucker received two C-12D aircraft in November 1998 to serve as the home for the Army aeromedical fixed-wing regional mission. These aircraft were configured with Spectrum medical beds specifically designed for patient aeromedical evacuation. The combination of the C-12D and the medical bed configuration allows for rapid transportation of injured soldiers, retirees, and dependents within the Southeast Region's sector of responsibility.

The purpose of the C-12D fixed-wing testbed is to save the MEDCOM, the Army, and DoD money. With reduced ancillary services at most installation hospitals, some patients were forced out of the military healthcare system and dispersed within the civilian sector to local area hospitals. While civilian healthcare services were being provided to the patients, increasing costs to the military medical centers were being incurred. By incorporating a rapid, inexpensive aeromedical platform for patient transfer, beneficiaries can be retained in the military system and transferred to military medical treatment facilities within the region to receive their medical care.

At the end of the first year (FY 1999), the testbed saved the government over \$400,000 after costs for the two aircraft and lost time for special practitioners had been subtracted. Additionally, these savings were achieved while operating under very strict criteria for patient transfer (routine category). After costs, the program has proven to be a phenomenal success. In fact, it is the only flight program in the Army that actually has the ability to make and save money.

## Start-up Program Costs

USAAMC-AAD was chosen for the testbed program due to the unique characteristics of the unit. First, the unit is a Table, Distribution, and Allowances (TDA) unit, which allows the personnel and equipment flexibility to implement such a program. Second, the unit's mission is to provide crash-rescue support to the United States Army Aviation Center and School (USAAVNC) and to provide air ambulance services within the Southeast Region. Additionally, due to the unit's utilization of the Spectrum medical bed in the UH-1, only one additional bed had to be purchased for the C-12D program, at a cost of \$42,000. Finally USAAVNC is already classified as a fixed-wing maintenance site, which kept initial bed-down costs to a minimum.

## Cost Savings Analysis

The C-12D aircraft can fly up to an altitude of 31,000 feet, with a 1,900-mile range at speeds over 285 miles per hour. With the C-12D's performance, it is a very cost efficient and stable instrument platform, allowing substantial savings over other MEDEVAC platforms in the Army inventory. A typical UH-1 costs approximately \$850 per flight hour, and the UH-60 costs approximately \$1,600 per flight hour to operate. The C-12D operates at approximately \$503 per flight hour, and its operational readiness rate is far better than the other two airframes.



## Capabilities

The capabilities of the C-12D aircraft, as stated earlier, are a 31,000-foot ceiling, enabling the aircraft to fly over most weather. Additionally, with a 285-mph cruise speed, the aircraft has a 1,900-mile range. Finally, the cabin pressure can be maintained at sea level at 13,820 feet, enabling head trauma victims to be transferred in the smoother higher-performance altitudes.

The medical capabilities of the C-12D/Spectrum Bed combination are:

- Cardiac monitors/defibrillators
- I.V. solutions
- Oxygen supplies and necessary regulators and gauges to deliver oxygen
- Intubation equipment
- FAA approved stretcher
- Basic and advanced airway management
- Hand-operated bag-valve mask resuscitators
- Portable suction units
- Pulse oximeter
- Blood pressure cuffs
- Drug box on-demand
- Fixed suction apparatus
- Infant transport adapter
- Patient loading device



- 3,500 liters oxygen capability
- 1 x 28 Volt DC receptacle
- Dual 350 Watt, 115 Volt AC inverters
- Dual Pneumatics/Mobile Overhead Pneumatics with light source (11 liters/min @ 50 PSI)
- Supply outlets for oxygen, medical air, and vacuum (14 liters per minute @14 in. hg.)
- U.S. Air Force approved vibration kit
- Flight Medic skill level EMT/EMT-I or better (ACLS/BTLS, and PALS)

These capabilities enable USAAMC-AAD to accomplish its medical mission day, night, and in inclement weather.

## Personnel

The C-12D aircraft utilizes a crew of three, whereas the UH-1 and UH-60 typically utilize a crew of four or five. The crew consists of two pilots and a flight medic. The pilots are qualified in both fixed-wing and rotary-wing platforms, which provides a vast experience and knowledge base. Most of the pilots have at least 1,000 hours before attending the fixed-wing course. The flight medic must be an Emergency Medical Technician (EMT) or higher (most are EMT-Intermediate) and be Advanced Cardiac Life Support/Basic Trauma Life Support (ACLS/BTLS) and Pediatric Advanced Life Support (PALS) certified. For higher-level care, a flight surgeon can be summoned. With a crew of three and a patient, passenger seating is available for two.

## FY 2000 Results to Date

While operating under stringent criteria for the first year, savings of \$400,000 were realized. Missions have increased this current year by over 30 percent, due to aggressive marketing efforts by SERMC's Evacuation Cell. Additionally, SERMC is drafting an agreement with the United States Air Force (USAF) that will allow the program to expand outside of the region. Currently, negotiations are underway for the program to possibly serve as a feeder for the USAF C-9 Nightingale aircraft, with the Air Force billing third-party insurance for the flight, allowing the program to easily surpass the targeted goal of \$1 million in savings.

## Future

The C-12D continues to be a valuable asset to the SERMC. Other regions in the MEDCOM are taking notice, and many inquiries are being made as to the possibility of starting up fixed-wing assets in their respective regions. In an era of budget cuts, the money-making platform of the C-12D presents a viable option for these regions. As for the tactical application of the C-12D, the possibility is on every DUSTOFF pilot's mind.

—DUSTOFFer—



# 22nd Annual DUSTOFF Association Reunion

## February 16-18, 2001 — Registration Form

Member's name \_\_\_\_\_ Spouse's name \_\_\_\_\_

Home address \_\_\_\_\_

Military address \_\_\_\_\_ e-mail address \_\_\_\_\_

Favorite DUSTOFF Unit/Year \_\_\_\_\_

### Dues:

		Totals
New Member Dues	\$15 + \$10 initial fee (E5 & below—\$7.50)	\$ _____
Annual Dues	\$15 (E9 & below—\$7.50)	\$ _____
Past Dues (Catch up)	\$15 per year owed as back dues	\$ _____
Life Member Dues	\$100 (one-time payment) (Enlisted—\$50)	\$ _____

### Reunion Registration:

Member/Spouse	\$15/person	_____ persons	\$ _____
Non-member/Guest	\$20/person	_____ persons	\$ _____

### Hotel Reservations:

Call Holiday Inn Riverwalk at 800-445-8475 or local (210) 224-2500 to reserve your room at \$115.00/night.

Please mention you are with the DUSTOFF Association.

### Chuck Mateer Golf Classic:

Ft. Sam Houston Club Member	\$20/person	_____ persons	\$ _____
Non-member Military	\$32/person	_____ persons	\$ _____
Non-member Civilian	\$37/person	_____ persons	\$ _____

### Friday Night:

Mexican Buffet	\$25/person	_____ persons	\$ _____
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### Spouses' Luncheon:

TBA	\$18/person	_____ persons	\$ _____
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### Saturday Night Reunion:

Beef	\$26/person	_____ persons	\$ _____
Chicken	\$26/person	_____ persons	\$ _____

**PLEASE REGISTER EARLY.** Registration deadline is February 1, 2001. Please send registration form and check to: DUSTOFF Association, P. O. Box 8091, Wainwright Station, San Antonio, TX 78208.

### DUSTOFF Store:

See reverse side of this form. Store orders will ready for pick-up at the registration desk on February 16, 2001.

# The DUSTOFF Store

Item	Price	Size	Quantity	Total
Ball cap — Maroon	\$10		_____	\$ \$ _____
Ball cap — White	\$10		_____	\$ \$ _____
Ball cap — Tan	\$10		_____	\$ \$ _____
Golf shirt — Maroon (sm, med, lg, xl, xxl)	\$20	_____	_____	\$ \$ _____
To mail shirts and caps, add \$5 per order (not necessary if attending reunion).				\$ \$ _____
DUSTOFF Decal	\$1		_____	\$ \$ _____
DUSTOFF Koozie	\$2		_____	\$ \$ _____
DUSTOFF Directory	\$3		_____	\$ \$ _____
DUSTOFF Pocketknife	\$4		_____	\$ \$ _____
DUSTOFF Coin	\$5		_____	\$ \$ _____
DUSTOFF 20th Reunion Poster	\$1 (marked down)		_____	\$ \$ _____
DUSTOFF Tie Tac/Lapel Pin	\$5		_____	\$ \$ _____
DUSTOFF or Medevac Print	\$10		_____	\$ \$ _____
DUSTOFF Flag/Giudon				
One-sided	\$40		_____	\$ \$ _____
Two-sided	\$60		_____	\$ \$ _____
To mail coins, koozies, knives, posters, decals and directories, add \$3 per order (not necessary if attending reunion).				\$ \$ _____
TOTAL ORDER				\$ \$ _____

Send check or money order, payable to DUSTOFF Assn., to:

DUSTOFF Association  
P. O. Box 8091  
San Antonio, TX 78208

(Please allow 4–6 weeks for delivery of mail orders.  
If attending reunion, pick up order at registration.)

*Visit DUSTOFF on-line*  
at  
**<<http://www.dustoff.org>>**

# HISTORICAL OBSERVATIONS FROM THE "BEAR"

*Submitted by Dick Scott*

*While serving as the battalion commander of the 45th Medical Battalion, 3rd Armored Division, Germany, in 1971, LTC Paul "Bear" Bloomquist wrote the following notes on the Vietnam War and his experiences to LTC Dick Scott, then the Chief, Aviation Branch at the Army Surgeon General's Office. Many of you may know that Paul was killed only months later by a terrorist bomb at V Corps HQ in Frankfurt.*

Dick:

A number of comments, historical and otherwise, on the early days in Vietnam . . .

Vince Cedola was one of the first Army aviators to be awarded Vietnamese Air Force wings for a rescue operation while he was with the 82<sup>nd</sup> Medical Detachment (Helicopter Ambulance) in the Delta. Pat Brady always went out armed to the teeth—about 20 pounds of arm and ammo. General Hamrick [then Chief of the Corps] watched an air assault to include a little action on his trip in 1965. We supported the early stages of the defoliation operations—I can give you a few stories about this—combat and humor—on and off duty.

I am sure you heard that I enhanced the relationship between the MSC aviators and the Army Nurse Corps during my tour in the Republic of Vietnam. So much in fact, that I married a nurse. I arrived in Vietnam in February 1964 ABD was assigned to the 57<sup>th</sup> Medical Detachment, which consisted of five UH-1A aircraft, three located in Saigon, one in Pleiku, and one in Qui Nhon. In April we placed the two aircraft from up north in the Delta at Soc Trang. We had to support the maintenance of all of these aircraft from the Saigon site. In late 1964 the 82<sup>nd</sup> Medical Detachment arrived and went to Soc Trang, and we moved all of the 57<sup>th</sup> back to Tan Son Nhut in Saigon. In the spring of 1965, we began to see large combat elements, the first of which was the 173<sup>rd</sup> Airborne Brigade. The best means of supporting these elements was to field-site aircraft with their brigade surgeon. When the 1<sup>st</sup> Infantry Division arrived shortly thereafter, our assets were rather excitedly strained in trying to cover all the American units.

During this period, our command and control element changed from the U.S. Army Support Group, Vietnam, to the U.S. Army support Command, Vietnam, and shortly to the U.S. Army Vietnam. During that period, we were also assigned under a provisional aviation group and, not long afterward to a logistical command. Our TOE changed to give us six UH-1B aircraft and some more aviators about this same time frame. In mid to late 1965, a number of other aeromedical units began to move into the country, including the 498<sup>th</sup> medical company up north in Qui Nhon and Nha Trang and the 283<sup>rd</sup> and 254<sup>th</sup> Medical Detachments in II Corps with us. We then changed our method of support, which provided specific ground units support from specific aeromedical units. This seemed to work very well, allowing a closeness and familiarity with methods of operation. About this time, the U.S. Army, Vietnam, Surgeon's Office was formed and I moved to that office and stayed there until departing in mid-October.

The call sign DUSTOFF became synonymous with medical evacuation and simply could not be changed. The advi-

sors, the Vietnamese Army, the Air Force, and everyone else knew it and our frequencies by heart. At first, we used DUSTOFF and the last three digits of the tail number. With some overlapping tail numbers and the change to the "B" model UH-1, we began to confuse the air traffic control system and changed, around 1 July 1964, to DUSTOFF call signs by individual. The first and last time that Chuck Kelly used the call sign "DUSTOFF 6" was when he was killed on 1 July 1964. When the 82<sup>nd</sup> arrived, we began to use the last digit of the unit's number and our individual number to designate the aircraft commanders of the mission.

We began to infuse people into the new units coming in by swapping out older guys and making sure they didn't all rotate at once. Major problems in the early days included: Shortages of MSC pilots. Our TOEs had no warrant officers in their structure. We had all kinds of concerns about the type and amount of weaponry to use on medical evacuation aircraft. We tried door-mounted M60s and a little of everything else. We had no hoists early on but recognized the need for them. We did make prodigious use of the Air Force air traffic control for our support missions, to include finding supporting fighters when we needed them. Our first Vietnamese combat ration was exciting—rice, fish, and warm beer was an experience worth remembering.

Right after the 173<sup>rd</sup> Airborne Brigade arrived, they took some casualties and called for a medical evacuation mission. We arrived overhead and told the guy to throw smoke and we'd call the color. He said he couldn't throw smoke or it would give his position away. We informed him that our landing a helicopter in his area would also give his position away. He thought about it a bit and then marked with smoke.

[Historical note: Then-MAJ Bloomquist departed Vietnam in mid-October 1965, precisely at the same moment that LTs Jim Truscott and Alex Ortolano were getting their aircraft shot up in virtually the departure path of Bloomquist's airliner. MAJ Bloomquist was awarded the Army Aviator of the Year Award by the Army Aviation Association of America (AAAA) upon his return to the United States.]

—DUSTOFFer—





# Rules of the Air

For those who may have forgotten, these basic laws of aviation of manned flight sometimes need to be reviewed:

1. Every takeoff is optional. Every landing is mandatory.
2. If you push the stick forward, the houses get bigger. If you pull the stick back, they get smaller. That is, unless you keep pulling the stick all of the way back then they get bigger again.
3. Flying isn't dangerous. *Crashing* is dangerous.
4. It's always better to be down here wishing you were up there, than up there wishing you were down here.
5. The only time you have too much fuel is when you're on fire.
6. The rotor is just a big fan on top of the plane used to keep the pilot cool. When it stops, you can actually watch the pilot start sweating.
7. When in doubt, hold on to your altitude. No one has ever collided with the sky.
8. A good landing is one from which you can walk away. A great landing is one after which they can use the plane again.
9. Learn from the mistakes of others. You won't live long enough to make all of them yourself.
10. You know you've landed with the wheels up if it takes full power to taxi to the ramp.
11. The probability of survival is inversely proportional to the angle of arrival. Large angle of arrival, small probability of survival, and vice versa.
12. Never let an aircraft take you somewhere your brain didn't get to five minutes earlier.
13. Stay out of the clouds. The silver lining everyone keeps talking about may be another airplane going in the opposite direction. Reliable sources also report that mountains have been known to hide out in clouds.
14. Always try to keep the number of landings you make equal to the number of takeoffs you've made.
15. There are three simple rules for making a smooth landing. Unfortunately, no one knows what they are.
16. You start with a bag full of luck and an empty bag of experience. The trick is to fill the bag of experience before you empty the bag of luck.
17. Helicopters can't fly; they're just so ugly that the earth repels them.
18. If all you can see out the window is ground that's going round and round, and all you can hear is commotion coming from the passenger's compartment, things are not all as they should be.
19. In the ongoing battle between objects made of aluminum going hundreds of miles per hour and the ground going zero milers per hour, the ground has yet to lose.
20. Good judgement comes from experience. Unfortunately, the experience usually comes from bad judgement.
21. It's always a good idea to keep the pointy end going forward as much as possible.
22. Keep looking around. There's always something you missed.
23. Remember, gravity is not just a good idea. It's the law, and it's not subject to repeal.
24. The three things most useless to a pilot are the altitude above you, the runway behind you, and a tenth of a second ago.

## How to Contribute Articles to *The DUSTOFFer*

*The DUSTOFFer* would like to publish your article. If you have a recollection of a particular DUSTOFF or MAST mission, please share it with our members. If your unit has been involved in an outstanding rescue mission or worthwhile program, please submit your essay about it to *The DUSTOFFer*. Send photographs with your article or attach them electronically to your e-mail.

Send typed, double-spaced hard copy to the address below or e-mail your article to [secretary@dustoff.org](mailto:secretary@dustoff.org) or [jtrus5@aol.com](mailto:jtrus5@aol.com).

Please send your contributions to:

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San Antonio, TX 78208



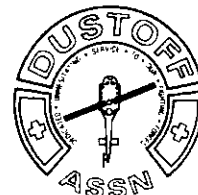
For months the feeling of a need to honor our DUSTOFF heroes has been present within the Executive Council. Many ideas were discussed. Then, at the fall meeting of the Executive Council, the establishment of a DUSTOFF Hall of Fame was approved. The procedures for nomination are provided below. The DUSTOFF Hall of Fame will be housed at the AMEDD Museum on Fort Sam Houston. The members of the first class of inductees are MG Patrick Brady, MAJ Charles Kelly, MG Spurgeon Neel, CW3 Mike Novosel, and SFC Louis Rocco. All are currently members of the Army Aviation Hall of Fame.

Please read the procedures below carefully and submit your nominations as directed, using the form on page 16.



# DUSTOFF Association

P. O. Box 8091, Wainwright Station, San Antonio, TX 78208



## DUSTOFF HALL OF FAME NOMINATIONS

Suspense date for nominations: June 1, 2001

### Usage

This form is to be used for the submission of all nominations for the DUSTOFF Association Hall of Fame. It may be reproduced locally, or additional copies may be obtained from the DUSTOFF Association secretary, by writing to: DUSTOFF Association, P. O. Box 8091, Wainwright Station, San Antonio, TX 78208.

### Criteria

The DUSTOFF Association-sponsored Hall of Fame honors those persons who have made (a) an outstanding contribution to DUSTOFF aviation over an extended period, (b) a doctrinal or technical contribution, (c) an innovation with an identifiable impact on DUSTOFF aviation, (d) efforts that were an inspiration to others, or (e) any combination of the foregoing, and records the excellence of their achievements for posterity. All persons are eligible for induction, except active duty generals and colonels. Membership in the DUSTOFF Association is not a requirement for individuals nominated for the DUSTOFF Hall of Fame. Any individual, military or civilian, may nominate an individual for consideration for the DUSTOFF Hall of Fame.

### Documentation

The DUSTOFF Association Hall of Fame Executive Council will consider only the following in making its selections:

1. A 100-word summary of the accomplishments of the individual nominee.
2. Up to three additional pages of date, or 1,500 words (whichever is greater), amplifying the accomplishments of the nominee
3. The nomination must include a photograph of the nominee in any size, preferably in color.

### Submission

Any person may submit this Nomination Form directly to the DUSTOFF Association Hall of Fame Executive Council for consideration. Nominations should be postmarked no later than July 1, 2001, and mailed or express-mailed to DUSTOFF Association, ATTN: Hall of Fame Executive Council, P. O. Box 8091, Wainwright Station, San Antonio, TX 78208. Nominations material, including photographs, will not be returned.

### Selection

The Executive Council, which is composed of current officers and former presidents of the Association, is responsible for selecting a specific number of candidates from all nominees received for placement on the DUSTOFF Association Hall of Fame ballot.

### Balloting

The selected candidates, their qualifications and their photos will be published in a ballot to be mailed to all DUSTOFF members in good standing. These members will be asked to elect a specified number of inductees from those candidates appearing in the ballot. Balloting is conducted annually.

### Induction

The induction will take place at the DUSTOFF Association Annual Reunion in February each year. The actual Hall of Fame is located at the U.S. Army Medical Department Museum in Fort Sam Houston, Texas. The elected inductees will be inducted in the DUSTOFF Hall of Fame in ceremonies held during an annual reunion, where the portraits of the inductees and descriptive narratives will be presented for display.



# DUSTOFF Association

P. O. Box 8091, Wainwright Station, San Antonio, TX 78208



## DUSTOFF HALL OF FAME NOMINATION FORM

(The next induction to take place at the DUSTOFF Annual Reunion in February 2002)

NAME OF NOMINEE

ADDRESS OF NOMINEE

CITY

STATE

ZIP CODE

NAME OF NOMINATOR

DATE

ADDRESS OF NOMINATOR

CITY

STATE

ZIP CODE

NOMINATOR'S COMMERCIAL PHONE NUMBER

NOMINATOR'S COMMERCIAL FAX NUMBER

NOMINATOR'S E-MAIL ADDRESS

REASON FOR NOMINATION (100-WORD SUMMARY)

On or before June 1, 2001, return this page with up to three additional pages of data or 1,500 words (whichever is greater), amplifying the accomplishments of the individual nominee, and a color photo of any size to:

DUSTOFF Association

ATTN: Hall of Fame

P. O. Box 8091

San Antonio, TX 78208

## Closing Out the Flight Plan

Herbert Halstead (MAJ, Ret.), Life Member since 1991, passed away on July 21, 2000. His favorite unit was the 254<sup>th</sup> Med. Co. (1966-7).



### DUSTOFF Association Membership Report October 14, 2000

Honorary Life Members	14
Life Members	758
Current Annual Members	138
Units	71
Corporations	5
Inactive	643
Other	3
Totals	1,629

### New Members This Year

New Corporate Members	3
New Life Members	30
New Members	44
Total	77

## NEW ENTRIES ON THE FLIGHT MANIFEST

William G. Allen	LM	Fairbanks, AK
Laurence K. Araujo	LM	San Antonio, TX
Jose Bonilla	LM	APO AE
Bob Brower	LM	Minnetonka, MN
John Cooper	LM	Allentown, PA
Jason S. Davis	LM	Fort Bragg, NC
Robert Dougherty	LM	Casey, IL
Robert J. Grider	LM	Sumner, WA
Kenneth A. Hamilton	LM	Toms River, NJ
Frank M. Heffernan	LM	Cape Coral, FL
Robert S. Hesketh	LM	Elisabethtown, KY
Michael Hillard	LM	Methuen, MA
Thomas C. Jackson	LM	San Antonio, TX
Charles B. Lang	LM	Lincoln, NE
James A. Leible	LM	San Antonio, TX
Darrin M. Madison	LM	New Orleans, LA
Frank Morales	LM	Colorado Springs, CO
Francisco Paulino	LM	Manhattan, KS
Reuben D. Rieke	LM	Lincoln, NE
Brian Schwalen	LM	Alamo, CA
Sherrill Shaaf	LM	San Antonio, TX
George Shaughnessy	LM	Toledo, OH
John M. Travers	LM	Harrisburg, PA
Jack Washburne, Jr.	LM	Northport, AL
Graham J. Bundy	M	Killeen, TX
Tommy L. Johnson	M	Kingsville, TX
Doris P. Knuckles	M	Max Meadows, VA
Nelson E. Luce	M	Scottsdale, AZ
Patrick E. Malone	M	Fayetteville, NC
Anthony A. Meador	M	Sanford, NC
Alex J. Orrolano	M	Dahlonega, GA
Dave Richardson	M	San Bernadino, CA
Craig L. Smith	M	Whiting, ME
Gerard J. Taylor	M	Forest City, PA

LM = Life Member  
M = Member

## DUSTOFF on the World Wide Web

It is now possible to have an e-mail address, such as [dustoff12@dustoff.org](mailto:dustoff12@dustoff.org). The DUSTOFF Association is now offering e-mail addresses based on the [dustoff.org](http://dustoff.org) domain name. For only \$10 a year, you may obtain an additional personal e-mail address that will be forwarded automatically to your current e-mail address.

The BIG ADVANTAGE is, you may use this e-mail address forever; it never changes, even if you change personal e-mail addresses. So go ahead and get transferred, change internet service providers, whatever. When you get a new local e-mail address, just notify us and we'll redirect your DUSTOFF e-mail address to whatever e-mail address you'd like.

It's a great way to have a unique e-mail address and help the DUSTOFF Association prosper. Find out more by visiting the DUSTOFF Association Web site at [www.dustoff.org](http://www.dustoff.org) and then clicking on E-mail.

# Some Thoughts on War and Warriors

*An address by Joe Galloway, author of We Were Soldiers Once . . . and Young,  
at the Vietnam Helicopter Pilots Association Reunion banquet, July 3, 2000, Washington, D.C.*

**T**HANK YOU, Goldie, for that introduction. And thanks to all of you for giving me the honor of speaking to you. I have got to tell you that looking out across this assemblage I must confess: I haven't seen this many bad boys collected in one location since the last time I visited Leavenworth Prison.

When I first learned that I would be doing this gig, I asked an aviator buddy of mine what else I needed to know. He said, well, most of you would be bringing your wives along, that half of you were so damn deaf you couldn't hear a word of what I was saying, the other half would be so damn drunk you couldn't understand what I was saying, so I might just as well talk to the ladies.

I have waited years to be able to share this story with so august a group of aviator veterans as this: A few years ago I was at a large official dinner and I was seated next to a nice lady who was the wife of a two-star general. I knew the lady had two college-age daughters and I also knew that one of them had been dating a Cavalry lieutenant. So I thought to make some polite conversation, and I offered her my condolences at her daughter's choice of companionship. "Oh, no," the general's wife said. "He is a fine young man. Nothing wrong with him, and at least he isn't a goddam aviator!"

I just wanted you to know that your successors in the "bizness" continue to win friends and influence people in high places.

Before I go along any further in this thing I need to ask you some questions: Is there anyone here who flew with the 1<sup>st</sup> Cavalry Division? The 229<sup>th</sup>? The 227<sup>th</sup>? How about the old 119<sup>th</sup> out of Holloway? Any Marine pilots who flew them old CH-34 Shuddering Shithouses? Now, I know I am among close friends. I know that old Ray Burns from Ganado, Texas, is here, and I have got to tell you a story about me and Ray that goes back to October of 1965.

Plei Me SF Camp was under siege by a regiment of North Vietnamese regulars. I was trying to get in there—like a fool—but after an A1E and a B57 Canberra and one Huey had been shot down, they declared it a No-Fly Zone. So I was stomping up and down the flight line at Holloway, cussing, when I ran across Ray. He asked what the problem was, and I told him. He allowed as how he had been wanting to get a look at that situation and would give me a ride. I still have a picture I shot out the open door of Ray's Huey. We are doing a kind of corkscrew descent and the triangular berms and wire of the camp below fill that doorway, along with the puffs of smoke from the impacting mortar rounds inside the camp. Hell, I can scare myself bad just looking at that photo.

Well, old Ray drops on in and I jump out, and the Yards boil out of the trenches and toss a bunch of wounded in the doot, and Ray is pulling pitch—grinning—and giving me the bird. When the noise is gone, this sergeant major runs up: Sit, I don't know who you are but Major Beckwith wants to see you right away. I ask, which one is the major? And I am in-

formed he is the very big guy over there jumping up and down on his hat. I go over slowly.

The dialogue goes something like this: Who the hell are you? A reporter. Son, I need everything in the goddam world from food and ammo to water to medevac to reinforcements, and I wouldn't mind a bottle of Jim Beam. But what I do not need is a goddam reporter. And what has the Army in its wisdom delivered to me? Well, I got news for you. You ain't a reporter no more; you are my new corner machine-gunner.

Ray, I want to thank you for that ride. Wasn't for you and Chuck Oualline, I wouldn't have had half as much fun in Vietnam. Hell, every story anyone has about Vietnam starts and ends with a helicopter. You guys were simply fantastic. Thank you all. Thank you for every thing—large and small.

Now I guess I got to get down to business. All of you know that I have spent most of the last forty years hanging out with the Infantry—a choice some folks view as perverse if not totally insane. But there was always method in my madness: with the Infantry, things happen close enough that I can see what's happening—and slowly enough most times that even I can understand what I'm seeing. There's just this one little downside to my long experience with the Infantry: During that time, I have personally been bombed, rocketed, strafed, and napalmed by the U.S. Air Force, U.S. Navy, U.S. Marines, and U.S. Army Aviation—as well as by the air forces of South Vietnam, Laos, Sri Lanka, India, and Pakistan.

Now I don't consider myself an inconsiderable target—and wasn't even back when I could fit comfortably behind a palm tree—but here I am, running my mouth, nothing hurt beyond my dignity. Don't get me wrong; I don't hold any grudges against those gallant winged warriors. But ever since the first time they attacked me and missed, I have never, ever used the words "surgical bombing strike" in any story I ever wrote.

I had the chance to say some good things about all of you at the Memorial Service at the Wall on Sunday. I meant every word of that—and more. You chopper guys were our heroes in Vietnam. You were our rides, but you were much, much more than that. We were always either cussing you for hauling our butts into deep kimchi, or ready to kiss you for hauling us out of it. I have a feeling that without you and your birds that would have been a much shorter and far more brutish war.

You were our heroes, though, first last and always. You saved us from having to walk to work every day. You brought in our food and ammo and watet, and sometimes even a marmite can full of hot chow. To this day I think the finest meal I ever ate was a canteen cup full of hot split pea soup that a Huey delivered to a hilltop in the dry paddies of the Bong Son Plain in January of 1966. For a moment there I thought, if the Army could get a hot meal out to an Infantry company on patrol maybe, just maybe, we could win the damn war. Oh, well.

*(Thoughts, continued on page 21.)*

# *From the Wiregrass*

by COL Scott Heintz

Greetings from the Wiregrass! Much has occurred since the last newsletter, and a synopsis follows. The Aviation Branch began work on their aviation transformation plan (ATP) in February. The plan is built around multi-functional aviation battalions and the proposed structure is under resourced utility airframes. Initial assumptions of the ATP included a "hands-off" approach with regard to MEDEVAC and SOF UH60s. During an IPR to the VCSA however, this assumption was challenged (by the VCSA) who stated that he was "willing to take MEDEVAC down by 30%," harvesting those airframes to fill the shortages in the ATP.

What followed was a series of briefings and a lot of hard work by some of the AMEDD's finest to protect our resources. The last proposal presented to the VCSA included four courses of action that included an across-the-board 30% reduction, a 20% reduction, and two options made up of tiered reductions of both active and National Guard air ambulance units. Within all options, KOREA and SOUTHCOM air ambulance units remain resourced at 100%. The plan was staffed with the MACOMs and all came back with strong "non-support" of any reduction in air ambulance resources. As of 1 November, the ATP was put on hold by General Abrams, the TRADOC commander. The USAAVNC DCDD and DAMO-FDV staffs are re-working the ATP per General Abrams's guidance. Not sure how this will turn out yet or how it will affect us, but worst-case scenario may be a 20% reduction in our assets. It has been (and continues to be) a tough fight.

The following people deserve recognition for the incredible effort they've put forth in presenting a solid argument against any reductions in air ambulance resources: LTC Georgia Jones; Mr. Eric Abraham (retired MS) and MAJ Brad Golden, working out of AMEDD Force Development; LTC Pat McMurray, AMEDD C&S; and LTC David MacDonald, OTSG (briefed both the Army DCSOPS and the VCSA), who remains the primary POC. We also received valuable input from the AMEDD representatives in the MACOMs, especially LTC Tracey Wyatt at FORSCOM. I'd be glad to discuss what has taken place with any of you; just drop me an e-mail or call. I'll keep you posted.

The 507<sup>th</sup> is scheduled to receive three UH-60Qs in January 2001, and LTC Pfeiffer continues his Herculean effort to keep production and fielding of the Q on track, to include a push to accelerate the distribution plan to almost double its current rate.

The UH-1 divestiture study has been completed by the Navigator Group and is under review at AMCOM (UH-1 PM office). Expect it to be briefed to the Army DCSOPS sometime in November. The AMEDD has contracted KPMG to do an air ambulance optimization study that parallels the Navigator study and will encompass how best to support not only those installations currently supported by UH-1 MEDEVAC,

but all installations with a MEDEVAC requirement. This study begins November 9. Options being considered at those sites currently being covered by UH-1s include out-sourcing, whereby a civilian air ambulance provider would be contracted to provide the entire MEDEVAC mission at that site. Again, I'll keep you posted on status.

USAARL continues to make progress on obtaining AWRs for our medical equipment. LTC Wilson and his staff are closer to having blanket AWRs on our MES than we've ever been. Just a reminder, currently no medical equipment has a valid AWR. There was a one-time waiver granted for Operation Desert Storm, but that was rescinded once the war ended. We'll post updates to the AWR status via the MEPD web page and e-mails to the commands.

The hoist program continues, after some minor problems with funding. The UH PM received \$615,000 for hoist repair and overhaul. Lucas will overhaul a minimum of twenty hoists per FY. AMCOM will determine if the contract needs to be expanded to handle fifty hoist repair/overhauls a year. Units should start to turn in hoist by the end of November 2000. Hoists turn-around will take approximately two weeks. Additionally, AMCOM will fund four hoists operational and intermediate maintenance classes for the next two years at Ft. Rucker, Alabama. Overseas units will have the option to fund training teams (from CONUS) to their locations. More info to follow on this program. Questions should be directed to SFC Marroquin, e-mail: <robert.marroquin@se.amedd.army.mil>, or phone, DSN 558-1170 (comm: 334 255).

## **DUSTOFF KUDOS**

Three of our Evacuation Battalions changed out this summer. LTC Fred Gargiulo passed the colors of the 36<sup>th</sup> Evacuation Battalion to LTC Monty Nanton; LTC Garry Atkins, the colors of the 421<sup>st</sup> to LTC Dennis Doyle; and LTC Chuck Keller the colors of the 52<sup>nd</sup> Evacuation Battalion to LTC Bill Miklosey. A big "hooah DUSTOFF" to those coming out of command and best of luck to the new commanders. Seven of our air ambulance companies will change out this summer. Those selected for command include: MAJ Axtman, MAJ Bolton, MAJ Gentry, MAJ Henschel, MAJ Matner, MAJ Roupe, and MAJ Toner. Congratulations!

SSC: LTC Tom Bailey is currently a student at the U.S. Army War College. As of this date, the list for next year has not been released.

Congratulations to LTC(P) Pete Garibaldi who was selected for promotion to colonel on the recent board.

We've got somewhat of a sports celebrity in our midst here at Ft. Rucker. Newly promoted-to-major Anthony "Miles"

*(From the Wiregrass, continued on page 21.)*

# Top of the Schoolhouse

by 1SG Dave Litteral

The Mission of The United States Army School of Aviation Medicine (USASAM) is a focused one: Enhance operational readiness of U.S. Army warfighting forces by conducting aeromedical training of both aviation and medical soldiers, focussing on the aviation environment, aviation safety, and preventive medicine. Our vision is to strive to be the DOD center of excellence for rotary wing aviation medicine, education, and doctrine.

Many things are currently going on at USASAM. In addition to researching, writing, and instructing the materials in the courses conducted here, our staff participates in Aviation Resource Management Surveys (ARMS) and provides an enlisted Standardization Flight Instructor (SI) who travels around the world as part of the Directorate of Evaluation and Standardization (DES) team. Many alumni may recall "passing through 25,000 feet" while in the U.S. Army's only altitude chamber, also owned and operated by USASAM. For a more thorough view of what we are doing here, please check out our Web site: [www.usasam.amedd.army.mil](http://www.usasam.amedd.army.mil).

Today there is a push to reduce the amount of time soldiers spend away from their units. A great deal of time, money, and effort are being spent on distance-learning (DL) initiatives. Common sense dictates that some topics simply cannot be taught by digital medium. USASAM has also taken a couple of its courses on the road, training larger units at their home station.

Our staff works closely with MEDEVAC Proponency, USAARL, and the United States Army Aviation Center (USAAVNC) to evaluate the direction Army Aviation is traveling in order to keep our courses up to date with doctrine and technology. Meanwhile, the Army Medical Department is going VFR-Direct with its 91W program. The new MOS will encompass the former 91B and 91C. You can view specifics on the program at [www.cs.amedd.army.mil/91W](http://www.cs.amedd.army.mil/91W).

USASAM is the alma mater for most flight medics. I say most because I am one of the "old-timers" grandfathered into the program. Although I had always respected USASAM, I had never considered it home. Moreover, I had never even been to Fort Rucker, one of the best-kept secrets in the Army.

I started flying with (then LTC) Ben Knisely at the 421st Medical Company (AA). In fact Ben, Al Vianni, Glen Whitt and I performed the first UH60 MEDEVAC mission in Europe in 1983. I flew with such notables as (then MAJ) Rich Beauchemin at the 571<sup>st</sup> Med Det (RA), (then MAJs) Thresher and Agosta at the helm of the 377<sup>th</sup> Med Co (AA) and another tour at the 571<sup>st</sup> with (then MAJ) Wes Potter.

Many others consider USASAM to be their alma mater. Among those are graduates of the Medical Evacuation Doctrine Course (2CF7), the Aeromedical Psychology Training Course, the Aviation Officer Pre-Command Course, and graduates of the Flight Surgeon Primary Course. Additionally, countless snowbirds have been gainfully employed here at the school while waiting for their flight training to begin.

I have the honor of being First Sergeant of USASAM. In

the short time I have been here, I have had the opportunity to visit with a couple MEDEVAC units and get feedback on how Air Ambulance units are doing business and how we can help as a training institution. We support the units so they can support the Warfighters.

The units have some great NCOs out there in the MEDEVAC companies. 1SG Mike Brennan out west at the 571<sup>st</sup>, 1SG Jeff Woodward at the 82<sup>nd</sup>, and 1SG Paul Goodspeed (who quickly brags that the 50<sup>th</sup> is the only DUSTOFF unit organic to a division), are among the first sergeants out there who actually were flight medics. USASAM recently lost to PCS, SFC Wayne Knowles, SFC Dennis Hatcher, and 1SG Velarde. They are doing DUSTOFF jobs at Ft Polk, Ft Drum, and 498<sup>th</sup>, respectively. I know there are many more out there with flight experience, especially in the RC units. I look forward to meeting with or hearing from you soon.

Mike Brennan and Jeff Woodward allowed me to spend some time with their medics. Some of the recommendations of these young warriors were: an ASI versus SQI identifying flight medics, water training during the Flight Medic Course, continuing medical education on the USASAM Web site, more flight time during flight medic training, a UH60 trainer for the training site, and more realistic training at the hoist tower. Frank Morales (571<sup>st</sup>) mentioned a hands-free mike for hoist missions as well, but I'll have to defer that to Proponency.

Our Education Branch is led on the NCO side by SFC Dana J. Franklin. He is the quintessential medic/soldier. He came to us from Project Warrior at NTC. His depth of operational experience is a tremendous asset to USASAM. He and SSG Rodriguez are continually looking for avenues to enhance the training of flight medics.

There are many things that motivate me here. Without editorializing at length, I will list a couple:

First, The U.S. Army Medical Department Journal, (July-September 2000), ran a great series of articles on Aviation Medicine. One particular article was titled, "U.S. Army MEDEVAC in the New Millennium: A Medical Perspective." In short, flight medics were identified as the weak link. The authors recommended "enhanced standards, improved training, sustained skills, and medical oversight."

The medic and his meager equipment in the back of the helicopter are the only arguments we have against the Army scraping off the red crosses and implementing a total CASEVAC system with utility platforms. Flight medics should be trained and certified to a minimum of EMT-I. Likewise, units need to push to get one hundred percent of their flight medics to the Flight Medic Course. The AMEDD owes this to the Warfighters and their moms and dads back home. If you are looking for a point of contact to start your own EMT training program (at any level), contact Mr. Jim Miller, EMT-P. He is the EMT coordinator for the Army. He is on the 91W project and you can reach him on that website or [James.Miller4@cen.amedd.army.mil](mailto:James.Miller4@cen.amedd.army.mil).



Installation medical facilities that use local MEDEVAC units for day-to-day transports should include the MEDEVAC unit in JCAHO Inspections. Doing so would give Installation Commandets and the MEDCOM the visibility of how well our MEDEVAC units are doing their medical job.

The second thing that motivates me is "lessons learned." The last DUSTOFFer ran a story from Kosovo. In the article, the Commander recounts the events of a mission where the medic was dunked (for lack of a better term) in a frozen river to look for a young boy who had reportedly fallen in. Please allow me to play armchair QB for a moment. Where did we learn this maneuver? Where did the flight medic get his training in water rescue and the dangers of hydraulics? What good is a hypothermic medic? Why not send down the crew chief?

My point is: proper training helps mitigate risk. Flight medics should definitely be trained and equipped to do water rescue. We are calling upon our medics to do these rescues more and more as we are involved in operations other than war. We need to train and equip our flight medics commensurate with the missions they are performing.

We are looking forward to taking an active role in redefining what a flight medic is and how he/she does business. Smaller, more mobile medical units in support of smaller, lighter brigade-sized combat teams may change the size of MEDEVAC units. Full-scale war, clearing the battlefield missions versus rescue missions and operations other than war will dictate what type of support we provide. Medics and aircrews must be trained and equipped for both contingencies. To quote my boss, COL McGhee, Dean of USASAM, "It's time to put the medic back into flight medic."

I look forward to hearing your suggestions. You can email me at: David.Littrall@se.amedd.army.mil.

—DUSTOFFer—

(Thoughts, *continued from page 18.*)

I think often of all you did for us—all you meant to us: You came for our wounded. You came to get our dead brothers. You came. . . when the fight was over. . . to give us a ride home from hell. There isn't a former Grunt alive who doesn't freeze for a moment and feel the hair rise on the back of his neck when he hears the "whup-whup-whup" of those helicopter blades.

What I want to say now is just between us—because America still doesn't get it, still doesn't know the truth—and the truth is: You are the cream of the crop of our generation—the best and finest of an entire generation of Americans. You are the ones who answered when you were called to serve. You are the ones who fought bravely and endured a terrible war in a terrible place. You are the ones for whom the words duty, honor, country have real meaning, because you have lived those words and the meaning behind those words. You are my brothers in arms, and I am not ashamed to say that I love you. I would not trade one of you for a whole trainload of instant Canadians, or a whole boatload of Rhodes Scholars bound for England, or a whole campus full of guys who turned up for their draft physicals wearing panty hose.

(*From the Wiregrass, continued from page 19.*)

Armstrong won the National Wake-boarding Championship Competition in Orlando, Florida, in August—no small feat, considering among those competitors he defeated was last year's champion, who had won the title the three years previous. Congratulations, Miles, on the promotion and the championship.

I encourage you to check out the November issue of Rotor & Wing. On page 12, the Army's chief of Aviation, MG Bergantz, discusses future tilt-rotor procurement for the Army: "Downstream somewhere, once we start fielding Comanches [in 2006], who knows, maybe we'll take another look at that [the V-22]. There are probably certain things you want to do, perhaps with medical. For example, you've got that 'golden hour,' and you want to get people back to the hospital fast."

Always great to get support from the chief of Army Aviation for our mission. That's all for now. As always, if you're in Ft. Rucker, lunch at Larry's is on me. Fly safe and . . .

DUSTOFF!  
Colonel Scott Heintz



On behalf of a country that too easily forgets the true cost of war—and who pays that price—I say thank you for your service! On behalf of the people of our country who didn't have good sense enough to separate the war they hated from the young warriors they sent to fight that war, I say we are sorry. We owe you all a very large apology . . . and a debt of gratitude that we can never adequately repay.

For myself and all my buddies in the Infantry I say: Thanks for all the rides in and out—especially the rides out. It is great to see you all gathered here for this reunion.

A friend of mine, Mike Norman, a former Marine Grunt, wrote a wonderful book called *These Good Men* about his quest to find and reunite with all the survivors of his platoon from Vietnam. He thought long and deep about why we gather as we have done this evening, and he explained it thusly: I now know why men who have been to war yearn to reunite. Not to tell stories or look at old pictures. Not to laugh or weep. Comrades gather because they long to be with the men who once acted their best—men who suffered and sacrificed—who were stripped raw. . . right down to their humanity. I did not pick these men. They were delivered by fate and the military. But I

(Thoughts, *continued on page 22.*)

(Letters, continued from page 10.)

my bandages on the plane. Of course that was a lie, but I had an open incision on my thigh that was about thirteen inches long and about two-and-a-half inches wide at the center. Needless to say, my bandages were also stuck to my wound.

This was the same story at every stop all the way back to McGuire AFB in New Jersey, as we stopped overnight in Oakland, Scott AFB in Illinois, and finally, Fort Dix. At each stop, they tore the bandages off with no regard whatsoever for the pain of the poor wounded soldiers. Each time, I told them that my bandages had just been changed. I know what you are thinking about the risk of my getting infected, but I figured since they were hitting me with about two million units of Penicillin every day, I'd be okay.

When I arrived at Valley Forge Army Medical Center, I told the doctor assigned to me that the bandages hadn't been changed for about seven days. He really chewed my ass, but at least he soaked the wound and was extremely careful about taking it off. It was rough, but it came off with a minimal amount of pain. When he got the final bandages off, he all but turned green from the odor. I was very lucky.

Every morning they came around for ward rounds and changed everyone's bandages, and they were just like the other doctors. They just ripped the bandages off, and we cried from the pain. Finally, I realized that the only way to beat them was to remove the bandages myself before they arrived at my bed. They permitted me to do this because I was a medic, or so they said. It still hurt like hell when I did it. So I asked one of the ward medics for a large tube of sterile ointment. He gave me a

tube of ointment that's used for vaginal infections. I would apply this to my wound right after the doctors left and I'd then rebandage the wound. The next day, the bandages would come off with about the discomfort of a band-aid. Now, why couldn't they do that for all of the other guys?

—DUSTOFFer—

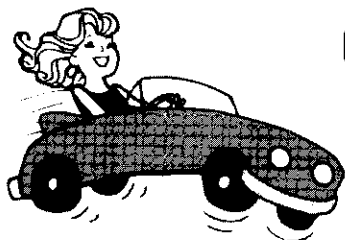
(Thoughts, continued from page 21.)

know them in a way I know no other men. I have never given anyone such trust. They were willing to guard something more precious than my life. They would have carried my reputation, the memory of me. It was part of the bargain we all made—the reason we were so willing to die for one another. As long as I have memory I will think of them all . . . every day. I am sure that when I leave this world, my last thought will be of my family and my comrades—such good men.

I'm going to shut up now and let us all get down to the real business of drinking and lying, er, telling war stories. Thank you. I salute you. I remember you. I will teach my sons the stories and legends about you. And I will warn my daughters never, ever to go out with . . . aviators.

Good evening. God bless.

—DUSTOFFer—



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# 22nd Annual DUSTOFF Association Reunion

## Tentative Schedule

### February 16-18, 2001

#### *Friday, February 16, 2001*

1100-1200 Registration	Chuck Mateer Golf Classic, Fort Sam Houston Golf Course
1200-1700 Tee time	Chuck Mateer Golf Classic, Fort Sam Houston Golf Course
1200-1800 Registration	DUSTOFF Reunion Holiday Inn Riverwalk Flamingo Room (7th Floor)
1500-1800 Hospitality Suites Open	Holiday Inn Riverwalk Smoking Room #TBA — Non-smoking Room #TBA Reunion nametag required for entry.
1900-2100 Buffet	Holiday Inn Riverwalk Tarantella Ballroom (7th Floor) Dress: Texas Casual
2100-0200 Hospitality Suites Open	

#### *Saturday, February 17, 2001*

0900-1230 Professional & Business Meeting	Holiday Inn Riverwalk Tarantella Ballroom (7th Floor)
TBA	Spouses' Luncheon Departs
Location TBA	Spouses' Luncheon
1500-1800 Hospitality Suites Open	
1800-1900 Cocktails	Holiday Inn Riverwalk Lobby (7th Floor)
1900-2130 21st Annual Reunion Banquet	Holiday Inn Riverwalk Tarantella Ballroom (7th Floor) Beef or Chicken Dress: Coat & Tie
2130-0200 Hospitality Suites Open	

#### *Sunday, February 18, 2001*

0930-1030 Memorial Service	Holiday Inn Riverwalk Tarantella Ballroom (7th Floor)
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• Please note: To hold the line on cost, no wine will be served with dinner. However, carafes of wine will be sold at the hotel bar prior to and during dinner.

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