

U.S. Army Europe and 7th Army

contact: paoci@eur.army.mil
phone: 49-6221-57-5815 / DSN 370-5815
fax: 49-6221-57-6376 / DSN 370-6376



RELEASE #2009-04-01-2

2009: THE YEAR OF THE NCO

April 1, 2009

U.S., allied medical personnel tackle 'extraordinarily difficult standard' during Expert Field Medical Badge training, testing

By Spc. Fabian Ortega

U.S. Army Europe Public Affairs Office

GRAFENWOEHR, Germany – Thirty-eight U.S. Army Europe and partner nation medical personnel were recognized as expert medics March 30 after two weeks of training and testing at Grafenwoehr, Germany.



SPC FABIAN ORTEGA

Staff Sgt. Stephanie W. Fair, a medic with U.S. Army Health Clinic-Hohenfels, simulates a call for medical evacuation during Expert Field Medical Badge testing at Grafenwoehr, Germany March 27.

The newest recipients of the Expert Field Medical Badge were among more than 240 hopefuls vying for the coveted skill badge, which only a few in the medical field earn.

“They have met the extraordinarily difficult standard that is required to be an expert medic,” said Gen. Carter F. Ham, commander of U.S. Army Europe. “It’s tough... it’s not enough just to be a good Soldier; you have to be an expert Soldier. You have to be an excellent tactician and be expert in (warrior tasks),” he said.

Ham said the EFMB identifies medical personal as the best in their field.

“Once you are an EFMB holder, and other Soldiers see that badge on your chest, expectations are high,” he said. “We know what you’ve been through and we know what you’re capable of and so we expect that much more of you, each and every day.”

Before earning the badge, medics endure 120 hours of continuous testing on a range of medical and warrior tasks.

Those tasks are combined into scenarios that challenge medics to evacuate the sick and wounded, react to a nuclear, biological and chemical threat, or perform emergency medical treatment under a simulated battlefield environment, said Capt. Justin M. Trisler, officer-in-charge of the Grafenwoehr EFMB testing.

Medics must also successfully complete day and night land navigation courses, a written test, and a 12-mile foot march, he added.

Capt. Aaron Brooks, a general dentist with Landstuhl Dental Activity, said the challenge of competing for what has historically been a very difficult qualification badge to earn, inspired him to get it on his first try.

“I’ve heard a lot about the EFMB ... that got me really excited to come out here and try to compete,” said Brooks.

The captain said the EFMB was everything he had heard about and more.

Brooks completed the 12-mile foot march with only two minutes to spare on the three-hour time limit.

“I spend a lot time in a chair,” said the dentist. “So the ruck march was very challenging.”

As a dentist, Brooks said the training he received during EFMB testing is good preparation for what he will face if he deploys.

“Some people asked why a dentist would come out and compete for EFMB,” he said. “(During a deployment) dentists actually do triage as one of their duties. So I felt this was a really great opportunity to come out and get some really good training before I go downrange.”

Other EFMB recipients said the heartbreak of watching other fellow competitors not make it through testing was tough, but that’s what adds to the badge’s prestige.

“A Combat Medic Badge you’re pretty much guaranteed if you deploy with an infantry battalion... EFMB you really have to go out there and earn it,” said Pvt. Robert Torrey, a medic with Company A, 503rd Infantry, 173rd Airborne Brigade Combat Team.

Torrey, who was among the thirty-eight to receive the EFMB, said when rain, sleet and snow took turns assaulting the EFMB testing site, he and his platoon used chants and cadences to help each other pull through the events.

“My platoon built really good cohesion,” he said. “It was pretty motivating when it was cold, rainy and miserable. It helped us stay positive.”

Although more than 200 medical personnel were unsuccessful in their attempt at earning the badge, Brig. Gen. Keith W. Gallagher, commander of Europe Regional Medical Command, said the lifesaving skills the medics received during training and testing will prove valuable on the battlefield.

“(Noncommissioned officers), commanders go back and continue the momentum that we started this week,” Gallagher said. “Continue to train your Soldiers and make sure that they can replicate and demonstrate those skills that they learned here to be what we call combat medics.

“That skill is the difference between life and death. When they call ‘medic,’ ‘corpsman’ or ‘doc,’ they will know you have the skills to save their life,” said Gallagher.

The following 38 USAREUR and partner nation medical personnel earned the Expert Field Medical Badge:

Cpl. Jonathan Sohilaït, 11th Infantry Battalion, the Netherlands
Cp. Samuel Dee, 11th Infantry Battalion, the Netherlands
Sgt. Marian Pacnar, 5th Special Forces Regiment, Slovakia
Spc. Perfecto Lozano, 1st Squadron, 91st Cavalry, 173rd Airborne Brigade Combat Team
2nd Lt. Phillip Hicks, 4th Squadron, 2nd Stryker Cavalry Regiment
Staff Sgt. Stephanie Fair, U.S. Army Health Clinic Hohenfels
Petty Officer 3rd Class James Hawkins, Landstuhl Regional Medical Center
Pfc. Daniel Flynn, 4th Battalion, 319th Airborne Field Artillery, 173rd Airborne Brigade Combat Team
Capt. Kyle Smith, Bavaria Medical Activity
Sgt. Charles Smith, Landstuhl Dental Activity
Pvt. Robert Torrey, 173rd Airborne Brigade Combat Team
Capt. Rush Twilley, 2nd Battalion, 503rd Infantry, 173rd Airborne Brigade Combat Team
Spc. Jacob Roberts, 2nd Battalion, 503rd Infantry, 173rd Airborne Brigade Combat Team
Sgt. Johnathan Betten, 2nd Battalion, 503rd Infantry, 173rd Airborne Brigade Combat Team
Spc. Saidkhodja, Kasimov, Landstuhl Regional Medical Center Dental Activity
Pvt. William Haynes, 173rd Airborne Brigade Combat Team
Spc. Scott Johnson, 1st Battalion, 503rd Infantry, 173rd Airborne Brigade Combat Team
Pfc. James Oliver, 1st Battalion, 503rd Infantry, 173rd Airborne Brigade Combat Team
Pvt. Robert Cardinalli, 1st Battalion, 503rd Infantry, 173rd Airborne Brigade Combat Team
Sgt. Kristofer Reynolds, 1st Battalion, 503rd Infantry, 173rd Airborne Brigade Combat Team
Pfc. Enock Nyaenya, Brigade Support Battalion, 173rd Airborne Brigade Combat Team
Sgt. James Robinson, Brigade Support Battalion, 173rd Airborne Brigade Combat Team
Capt. Scott Krueger, 5th Battalion, 7th Air Defense Artillery
Sgt. Thomas Sager, Europe Regional Veterinary Command

Capt. Aaron Brooks, Landstuhl Regional Medical Center Dental Activity
Staff Sgt. Gary Paul, 1st Squadron, 2nd Stryker Cavalry Regiment
Capt. Jeffery Bass, Regimental Support Squadron, 2nd Stryker Cavalry Regiment
1st Lt. Charles Wyatt, Headquarters and Headquarters Company, 173rd Airborne Brigade
Combat Team
1st Lt. William Hackenbracht, Headquarters and Headquarters Company, 173rd Airborne
Brigade Combat Team
2nd Lt. Thomas Holmes, 421st Multifunctional Medical Battalion, 30th Medical
Command
Spc. James Zachary, 212th Combat Support Hospital, 30th Medical Command
Pfc. Roberto Ducay, 421st Multifunctional Medical Battalion, 30th Medical Command
2nd Lt. Joshua Causey, 95th Military Police Battalion
Capt. Richard Sonnier, Landstuhl Regional Medical Center
2nd Lt. Mathew McCreery, 212th Combat Support Hospital, 30th Medical Command
Spc. Patrick Callahan, 212th Combat Support Hospital, 30th Medical Command
Sgt. Julian Hallinan, Landstuhl Regional Medical Center
Staff Sgt. Colin Reed, Landstuhl Regional Medical Center



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