

AFEHRI File 100.045

Research Materials/Source Documents
STUDENT PAPERS

FILE TITLE: Background Paper on the Evolution of the AF Independent Duty Medical Technican - Physican Assistant

AUTHOR: SMSgt D. Rossell, 3 May 1993

Reviewed by:

AFEHRI Representative G.R. Akin date 29 Dec 97

EPC Representative Joe Chan date 6 Jan 98

Scanner Operator Suey Foster date 3 Jan 98

APPROVED BY:

Gary R. Akin

GARY R. AKIN, CMSgt, USAF

Director

Air Force Enlisted Heritage Research Institute

BACKGROUND PAPER

ON

THE EVOLUTION OF THE AIR FORCE INDEPENDENT DUTY MEDICAL TECHNICIAN

The night is hot, yet the day is cold. The morning is warm, but the afternoon is cool. There is safety while there is danger. There is serenity in the face of fear. There is calm in the presence of turmoil. These enigmatic statements may sound a bit confusing. But the link they have in common is that they describe the variety of conditions existing at remote locations worldwide. At those locations is found the Air Force Independent Duty Medical Technician (IDMT).

As the only enlisted military health care providers in the Air Force, IDMTs are specially trained medics who provide total medical care at remote sites and deployments, in the absence of a physician. In addition to providing medical services, IDMTs serve in a number of other capacities. They are responsible for accomplishing their own medication inventories and laboratory procedures. Their responsibilities further include the inspection and maintenance of environmental health standards, monitoring and control of water supplies, and even the provision of emergency dental care. Although today they are highly trained and motivated, there was once a time when the Air Force did not have these 'Docs Who Wear the Stripes' (8:3).

CMSgt Ignacio V. Cordova is a medic who served in Vietnam in 1970-71. One of the experiences he vividly remembers is the manner in which surgical care was provided to our wounded. 'It was pretty much the standard for wounded soldiers to be rescued, transported to the hospital, and prepared for surgery within 18 minutes from the time that they were injured. However, one problem that became evident was that the personnel who needed priority care were not always the ones who were transported first. An education void existed among young medics that did not allow them to triage (sort) casualties skillfully.

SMSgt Rossell/SrNCOA/Seminar F/dr/4230/3 May 93

It was evident from testimony such as this that increased medical training was indeed required for our medics (5:-).

In 1967, there emerged an Air Force initiative aimed at creating just such advanced training. The training would allow for expansion of care that had previously been limited only to physicians. The goal was to provide more effective medical care at the paraprofessional level (4:-). Initially, there were objections to this idea from some physicians and nurses. Their position was one of concern: "Having enlisted technicians perform patient diagnosis and treatment, who didn't have the extensive training of physicians, was a calculated risk." (1:-) Nevertheless, most health care professionals agreed that there is a legitimate place and mission for what we now call the IDMT.

Maj Janet Lee is the Course Director for the Physician Assistant Program at Sheppard AFB, Texas. As a physician, she believes that the IDMTs have served a vital role in Air Force Medicine. She presents this important opinion of IDMTs:

"There are too many remote locations and mobility units to make it possible to staff with a physician, or even a physician assistant. Although their medical training is not as extensive, IDMTs can provide competent care within the limitations of their training" (7:--). Her rationale was the same consensus that was reached when the IDMT training plan was first proposed in 1969 (1:-).

Appendix C of 3AZR90270, Medical Service Technician-Independent Duty (MST-ID) contained a course chart that defined training objectives. The original MST-ID course was divided into five subject headings called training blocks. Block I was titled "Introduction to Site Administration". It contained such subjects as medical administration, pharmaceutical medications, and laboratory test procedures. Block II provided training for the treatment of medical disorders ranging from ear aches to toe aches,

including emergency dental care. Emergency procedures were presented in block II and block IV progressed to public health issues. Finally, block V afforded students the opportunity to apply and hone their skills in the clinical environment. In this clinical phase, students would actually see patients at the Sheppard AFB hospital, under the close supervision of physicians. Upon successful completion of this program, graduates would be certified as IDMTs. Usually they would immediately be assigned to remote duty. The whole process for training these experienced senior medics was done in only 45 training days! (2:-)

Although IDMTs did, and still do, accomplish their medical duties without constant supervision, there remain health care professionals who are wary of the IDMTs' limited scope of training. However, it is important to note that in the 23 year history of the Air Force IDMT, not one medical malpractice lawsuit has ever been decided against an IDMT.

MSGt Jack E. Cross, Jr. is currently a senior instructor in the IDMT course and has a strong philosophy regarding the quality of IDMT training. 'It's not necessarily what the technicians know that's important. It is most critical for them to clearly identify a situation that is beyond their control and act decisively to evacuate that person to a facility capable of rendering proper care (6:-).

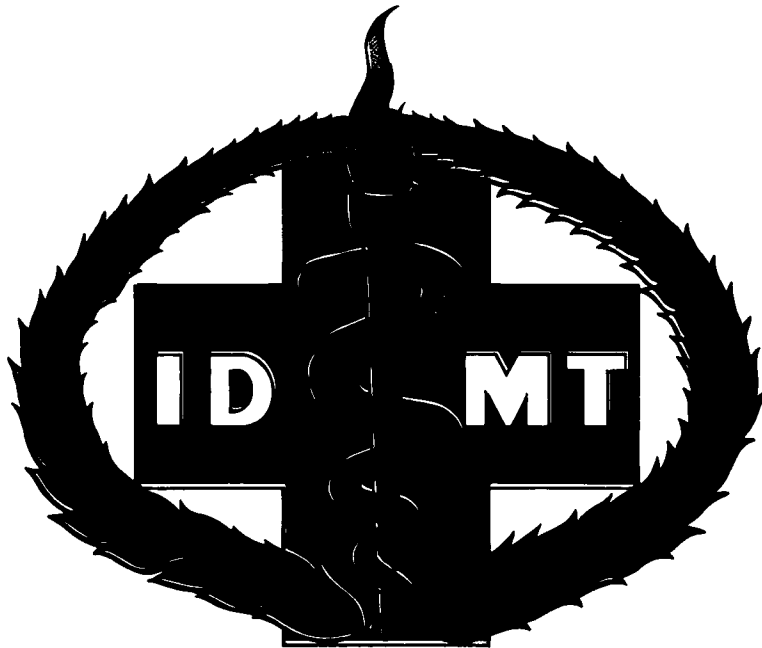
In the past 23 years, many changes have been made to the IDMT curriculum. Advances in medical technology, along with the changing Air Force mission have resulted in the creation of a course training standard (3:-) that supplements the 902X0 medical career field specialty training standard. As a result of all these changes, a special experience identifier '496' is given to all 90270 personnel who complete IDMT training. As you might expect, other course documents have also changed.

Instead of the five blocks of training that comprised the original IDMT course, there are now eight. New blocks include medical readiness training

and increased patient clinical training time. Course length has been expanded to 50 training days.

These changes and updates have prepared Air Force IDMTs to be the very best. In 1991, after carefully evaluating Air Force IDMT course and the United States Navy IDMT course (almost a year long), the United States Coast Guard chose the Air Force program to train their personnel. Even though the Navy's course was nearly three times longer, the comprehensive quality that was developed in the Air Force's Course over the past 23 years was viewed as superior. The Coast guard now sends two personnel to each Air Force IDMT class at Sheppard AFB, Texas. They also have voluntarily assigned a full time Coast Guard instructor to serve along side the Air Force instructor staff.

As you can imagine, the responsibility that is placed on IDMTs has been, and continues to be, tremendous. Strong motivation, high levels of maturity, and thorough training, combine to make our Air Force medics at remote sites the very best. They are indeed worthy to be referred to by their nickname, "the Doc who wears the stripes" (8:3)



The above symbol is the 'unofficial' logo of the Independent Duty Medical Technician. It was designed in the early 80s and was submitted to the Air Force for approval. The request was denied because at that time, there was no medical badge that had been approved for wear by all medical personnel. Interestingly enough, this symbol, minus the IDMT letters, was later approved for wear by all 900XX series AFSCs and is worn by all medics today who qualify in the various skill levels.

BIBLIOGRAPHY

1. Air Training Command. 3AZR90270, Development Plan, 3 March 1969.
2. Air Training Command. J3AZR90270 004, Course Chart, 9 January 1992.
3. Air Training Command. J3AZR90270 004, Course Training Standard, 9 January 1992.
4. Air Training Command. AAR90270, Revision of Medical Service Technician Course, 12 July 1967.
5. Cordova, Ignacio V., CMSgt. Telephone Interview. Sheppard AFB, Texas, 14 April 1993.
6. Cross, Jack E. Jr., MSgt. 'Special Interest Groups For IDMTs'. Unpublished Talking Paper, 390th Medical Training Group, Sheppard AFB, Texas, 12 January 1993.
7. Lee, Janet C., Maj. Telephone Interview. Sheppard AFB, Texas, 15 April 1993.
8. Preheim, Richard A., CMSgt. 'The Doc Who Wears the Stripes.' USAF Medical Service Digest, Vol. 39, No 3, (Fall 1988). pp 3-6.