



SAPA JOURNAL



The Society of Army Physician Assistants

P O Box 07490, Fort Myers, FL 33919 Phone & Fax (239) 482-2162

Vol. 20, NO. 1 A Civilian Organization Representing Army PAs Jan/Feb 2008

**Doctor of Science in Physician Assistant Studies
with a Major in Emergency Medicine, DScPA-EM**
Received from MAJ Leonard Gruppo, PA-C



L to R: MAJ Todd Lindsay Director of EMPA Residencies, CPT James Schmid DScPA-EM, CPT Sharon Rosser DScPA-EM, MAJ Leonard Gruppo Director of Postgraduate PA Education, CPT Yvonne Franco DScPA-EM, CPT George Barbee DScPA-EM, CPT(P) Richard Anschutz Director, EMPA Residency

BAMC

The Army Medical Department Center and School, San Antonio, Texas - The United States Army Medical Department Center and School and Baylor University are pleased to announce a partnership to award the first clinical, professional doctorate degree for Physician Assistants (PA). The degree designation is, "Doctor of Science in Physician Assistant Studies with a major in Emergency Medicine, DScPA-EM." PAs have now joined virtually all other allied health professions at the doctorate level of education. However, it is the advanced clinical training, not the

degree, which is the most important facet of this initiative. The curriculum mirrors the physician-training model and just as PA school is ½ the duration of medical school, this residency is ½ the duration of the emergency medicine (EM) physician residency. It is closely based upon the American Board of Emergency Medicine (ABEM), the Residency Review Commission (RRC) and the American Council on Graduate Medical Education (ACGME) requirements for physician residents in EM.

The training is conducted almost entirely in teaching hospitals and is supervised and approved by board certified emergency physicians and other specialty physicians. It includes more than 740 hours of classroom instruction, 70 hours of procedure lab, 4300 hours of supervised patient care through a variety of carefully selected clinical rotations, a lecture requirement and a robust Internal Review Board approved, original clinical research requirement. There is extensive reading and testing, with a comprehensive midterm and final, oral and written exam. The residents are also trained in emergency ultrasonography to the standards recommended by the American College of Emergency Physicians (ACEP). The degree is awarded in recognition of the expertise attained after 18-months of demanding training. Presently, there is no other way to recognize such advanced training for PAs.

SAPA OFFICERS

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Physician Assistant Educational Scholarship Award)

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The SAPA Journal staff and SAPA Board of Directors encourages membership participation in this publication. Feel free to use this forum to present your views on any topic you desire. The publication of clinical articles on any subject is also solicited, however, to reduce our workload, we do request articles be presented typed, double-spaced format, and on CD, Microsoft Word format. The editor reserves the right of final acceptance of articles as well as the right to serialize articles which are too lengthy to be included in a single issue.

The SAPA Journal is the official publication of the Society of Army Physician Assistants. The views and opinions expressed herein are not necessarily those of the editors, SAPA, the SAPA Board of Directors or the Department of the Army unless explicitly expressed as such

This is not an official Army Publication.

The degree compares very favorably to other allied health and professional doctorate degrees and is an evolution of the 12-month, U.S. Army Emergency Medicine PA residency started in 1991. The degree is currently offered at three training sites, all affiliated with U.S. Army emergency physician residencies: Brooke Army Medical Center in San Antonio Texas, Madigan Army Medical Center in Tacoma Washington and Darnall Army Medical Center in Killeen Texas. A fourth residency is under development at William Beaumont Army Medical Center in El Paso, Texas.

These PAs will:

- Help create a more powerful healthcare team to save additional lives on the battlefield
- Help mitigate physician shortages
- Permit autonomous, not independent, credentialing
- Reduce supervising physician malpractice exposure

This training offers a tremendous and unique professional development opportunity that:

- Strengthens the PA:MD relationship through improved reliability and capability
- Increases corporate flexibility in utilization
- Improves recruiting and retention
- Provides a sound healthcare staffing strategy
- Standardizes training to create predictable graduate outcomes
- Fulfills the suggestion of the ACEP Task

Force on Midlevel Providers, to develop a curriculum for training PAs in emergency medicine Graduates will remain Physician Assistants and will not call themselves "Doctor" in a clinical setting.

Physicians are residency trained to the *postdoctoral* level and will remain the gold standard of medical expertise with at least twice the medical education. The first class graduates 15 December 2007 from the Army Medical Department Center and School and Brooke Army

Medical Center, Fort Sam Houston Texas.

For more information contact Major Leonard Gruppo, EM PA-C, MPAS, DMO Director, Postgraduate PA Education, U.S. Army;(O) 210-916-3598, (M) 210-838-6207 or leonard.gruppo@mail.us.army.mil

Scholarship for Army Veterans, Retirees, National Guard, Reserves and Active Duty

Received by Donald A. Black, PA-C

As most of you know, the PHYSICIAN ASSISTANT family lost their first PA EVER to be killed in combat. Captain Sean P. Grimes, PA-C lost his life while serving in Iraq on 4 March 2005. Since that day SAPA with the generosity of the Grimes family has established the CAPTAIN SEAN P. GRIMES EDUCATIONAL SCHOLARSHIP AWARD. If you need, or someone you know needs educational financial assistance please visit the SAPA website for details. (www.sapa.org) If you have additional questions please contact: Donald A. Black, PA-C,MPAS, Ret LTC, SP email: donald.black@se.amedd.army.mil Ph: 931-338-1828

LOST MEMBERS

Every year we elect individuals to attend the House of Delegates Session at the annual AAPA conference. These delegates represent the views and concerns of the SAPA constituency. The number of delegates authorized is determined by the number of Fellow members in the chapter. If you know of prior members who have let their membership lapse, encourage them to renew their SAPA and AAPA membership and declare SAPA as their constituent chapter! **cb**

**PA/NP Position with Intermountain
Healthcare in St. George, Utah**

Received from Donald Parsons, PA-C

Intermountain Healthcare is looking for a full time lead PA or NP in the outpatient wound clinic at DPhysician Assistant Needed in Regional in Southern Utah. The wound clinic also provides in-patient consults and coordinates advanced wound technology with surgical services. This is a great opportunity to develop and grow a practice while living in beautiful red-rock country that is a year-round recreation area. St. George is 2 hrs from Las Vegas, 1 ½ hrs from skiing at Brian Head and 2 hrs from the Grand Canyon, Lake Powell and Bryce Canyon. Many hiking and biking opportunities are available less than 20 minutes from the hospital. This is a fast paced clinic that is also combined with a busy Hyperbaric unit. The applicant must have excellent interpersonal, communication and decision making skills. They will provide medical services to individuals, emphasizing wound, ostomy, continence care (WOC). Previous wound experience is a plus but is not necessary. If you are interested in the position please refer to our web site at intermountainhealthcare.org or contact our Human Resource department at 435-251-2121. The job number is #47166. Please also send an e-mail with resume attached to stephen.miller2@imail.org

Physician Assistant Needed

Experienced Physician Assistant to join a highly respected, large volume hip and knee reconstruction surgeon in a hospital based/ private practice-like environment. This practice focuses on “first class” compassionate, quality patient care. Applicant must have excellent “people skills”, significant experience in orthopedics both in the OR and clinic setting, and feel confident functioning at a high level. In hospital patient management, and interfacing with applicable referral specialties a plus. For more information or forward a resume, please contact JWBooher@aol.com

**OFFICE OF THE ADJUTANT GENERAL
VIRGINIA NATIONAL GUARD
BUILDING 316, FT PICKETT
BLACKSTONE, VIRGINIA 23824-6316**

Received from LTC Frank Piper, PA-C

NATIONWIDE AGR VACANCY ANNOUNCEMENT

ANNOUNCEMENT NUMBER: 10-08

POSITION TITLE: Physician Assistant

GRADE: MAJ/04

DMOS/AFSC: MOS 65D (60A/66H with NGB Surgeon Approval)

FEMALE ASSIGNMENT ELIGIBILITY: Yes

UNIT: 34th Civil Support Team
(Weapons of Mass Destruction)

LOCATION: Ft Pickett, Blackstone,
Virginia

OPENING DATE: 17 January 2008

CLOSING DATE: 19 February 2008

POC FOR ADDITIONAL INFORMATION: LTC
Doug Gagnon, (434) 298-6182,
or DSN 438-6182 or SFC Hagans, (434)
298-6249 or DSN 438-6249.

WHO MAY APPLY: Open to all AGR/
Military Technicians/Traditional
officers, grade 1LT/02 through MAJ/04
who are members of the
Virginia Army National Guard or
eligible to become members of the
Virginia Army National Guard. Must be
qualified in the following
Functional Area: 65D (60A/66H with
approval)

REMARKS: Army NG Applicants only. MOS
60A, Physician or 66H, Nurse
Practitioner may be selected to fill
this position with NGB Surgeon
approval. Previous CST or equivalent
experience preferred. CBRNE Responder
(R1) qualification preferred. If not
CBRNE Responder (R1) qualified must
become R1 qualified within 12 months
of assignment. Previous Physician
Assistant assignment in a deployable/
deployed MTOE Unit is desirable.
Emergency/ Trauma experience
desirable. Chemical, Biological
Radiological and Hazardous Materials
Treatment training or experience
desirable. Physician Assistant

related masters' degree desirable.

Additional Information: CST Members are required to maintain 24/7/365 availability to respond to a no-notice alert IAW state and national response requirements. Applicant must meet OSHA standards for wearing personal protective equipment (including respiratory screening). Must relocate and reside within 45 miles of Ft Pickett, Blackstone, VA. Applicant must demonstrate the ability to pass appropriate (ARNG) physical fitness test, meet height/weight standards and present a professional, military appearance. Applicant must possess or be able to gain a Secret clearance and a Government Travel Card. This assignment requires extensive travel (2 or more weeks a month) for training and response operations. Applicants can be a qualified Physician or Nurse Practitioner with NGB Surgeon approval. Health Care Providers (HCPs) assigned to a CST must be appropriately credentialed in accordance with Army Regulation AR40-68, Clinical Quality Management. In accordance with Department of Defense Instruction (DoDI) 6025.6, dated 18 Jul 1985, all military and civilian health care professionals are required to maintain a valid, current license which is the same as a license held by a private citizen healthcare professional in independent practice. In addition to the state credentialing requirement, all HCPs assigned to the CSTs will be privileged, and allowed to practice within a military or federal (e.g., Veterans Administration) or other type of Medical Treatment Facility (MTF).

QUALIFICATIONS FOR ENTRY IN THE AGR PROGRAM:

MEMBERSHIP: When applying for an AGR position on full-time National Guard

duty (FTNGD) under State control, must be a federally recognized ARNGUS soldier. Appointment, or enlistment, must be completed prior to reporting to an initial AGR entry point.

PHYSICAL AND MEDICAL: Must be medically certified as drug free, be tested negative for human immunodeficiency virus (HIV), per AR 40-501 and AR 600-110. Must meet the body composition standards prescribed in AR 600-9. Must meet the medical fitness standards for retention per AR 40-501, chapter 3.

MILITARY EDUCATION: If an officer in the grade of Lieutenant or captain, with less than 5 years time in grade must have completed an officer basic course. Captain, with at least 5 years time in grade, must have completed an officer advanced course. Major, with at least 5 years time in grade, must have completed at least 50 percent of the Army Command and General Staff Officers course (CGSOC), or its equivalent.

YEARS OF SERVICE: Must be able to complete a 3-year initial tour of AD or FTNGD prior to completing 18 years of AS. The date of mandatory removal from an active status based on age, or service (without an extensions), under any provisions of law or regulation.

GRADE AND SPECIALTY: If an officer, must possess the grade equal to or below that authorized for the AGR duty position. Must possess the military occupational specialty (MOS) area of concentration (AOC) commensurate with the AGR duty position.

ADMINISTRATIVE REQUIREMENT: Must sign an appropriate certificate of agreement and understanding relative to service on AGR status.

NOTE: OFFICERS NOT CURRENTLY AGR AND NOT QUALIFIED MAY APPLY FOR THIS POSITION. HOWEVER, IF SELECTED AND NOT QUALIFIED, OFFICER WILL NOT BE APPOINTED IN THE AGR PROGRAM UNTIL QUALIFIED. QULAIIFICATIONS FOR SUBSEQUENT DUTY IN THE AGR PROGRAM:

(This applies to current on-board Virginia AGR officers only.)

1. Must possess the grade equal to, or below, that authorized for the AGR duty position as described on the announcement.

BRIEF DESCRIPTION OF DUTIES AND RESPONSIBILITIES:

Physician Assistant: Lead medical practitioner and medical section leader for the Civil Support Team. Responsible for basic health needs and preventative medicine for unit. Responsible for unit urinalysis program. Manages the unit immunization program, physical exams, laboratory tests, pre and post entry evaluations, medical surveillance, and medical rehabilitation. Responsible for all medical records. Responsible for medical logistics, medical equipment and supplies purchase. Responsible for periodic inventory of controlled substances. Lead for unit medical training. Ensures command section is aware of medical section's training goals and training status/level of proficiency. Plans and executes training for the medical section that supports the commander's yearly training guidance and plan. Primary manager for all unit and individual medical treatment such as CLS, EMT. Researches medical training courses, conferences and coordinates/plans these for unit in cooperation with operations section. Provide section training events to operations for inclusion in unit training schedules. As needed, assist operations section with planning and execution of whole-unit events. Researches new medical treatment equipment and makes

equipment recommendations to the command. Responsible for maintenance of Medical van and medical section equipment. Advises commander/deputy commander on matters of medicine, signs, symptoms, treatment and other data of agents. Provides manning for mobile lab and medical treatment operations during deployments. In conjunction with survey and operations, establishes and operates emergency Decontamination. Develops the Site Health and Safety plan and assists with sampling plans. Recommends appropriate PPE to the command based on signs, symptoms and physical appearance of contaminant. Unit Safety Officer - advises command on all safety issues. Provides input for medical section expenditures/budget. Prepares purchase contracts and MIPRs for medical section equipment and training events related to medical treatment and scientific analysis. Conducts liaison with outside agencies and organizations as directed by the command section. Focuses efforts on liaison with Dept of Health, and EMS/ Hospitals and within areas of potential response. Presents unit capabilities briefings to outside agencies. Keep abreast of legal issues affecting the CST to include NFPA 473 and HIPAA. Advises the command of any implications and COAs to consider. Ensures medical section contributes to regular revisions of unit Emergency Response Plan and Standard Operating Guidance to accurately reflect evolution of unit operations. Performs other duties as assigned.

HOW TO APPLY: All interested applicants must submit the following documents:

1. Completed NGB Form 34-1 **(signed and dated)**
2. Copy of current physical (DD 2808/2807-1 within the last 5 years)

3. All documentation to support all periods of active duty service creditable for retirement. Any of the following may be used **DD Form 214 or DA 1506 or NGB Forms 23A.** (Army/Air)
4. **Certified** copy of DA Form 2-1 (Army) (Certified means having the Personnel Services branch (PSB), stamp or type that your DA 2-1 is a "True copy" and signature by PSB personnel **not older than 1 year**, or RIP (Air))
5. Copies of last five (5) OERs.
6. Retirement Point Accounting Management (RPAM) (Army)
7. DA Form 705 (APFT Card) (Army)
8. AF Form 526 (Point Credit Summary) (Air)
9. Photograph in Class A uniform (taken within the last 12 months). Official photo not required. Photo must be dated.
10. Any additional information the applicant may wish to submit for consideration, which enhances their skills as to working in a HAZMAT environment.

SECURITY CLEARANCE: Position requires a "SECRET" security clearance. Must be able to obtain as a minimum, an "interim" clearance **prior to appointment** to the position. Soldiers with a prior revoked or denied clearance are not eligible for either an interim or a waiver and should not apply. If tentatively selected for a position and soldier cannot be granted an interim clearance prior to appointment to the position, the offer for the position may be revoked. Non USA citizens are not eligible for a security clearance per DOD 5200.2R.

LENGTH OF TOUR: Three (3) years subject to program continuance; members successfully completing initial tour will be afforded priority for tour extension, after completing initial tour. Selected individual will be required to remain in this position for 3 years subject to program continuance;

members successfully completing initial tour will be afforded priority for tour extension, after completing initial tour. Selected individual will be required to remain in this position for 3 years, unless command directed to another position.

QUALIFICATION REQUIREMENTS: Must meet all selection criteria IAW NGR 601-1, 600-200, 600-5, 600-10 and AR 135-18.

SPECIAL INFORMATION: Incomplete applications submitted for this vacancy announcement will not be considered. Applicants are responsible for maintaining current information on their application. Failure to provide current information may result in non-referral for consideration.

REMARKS: Submit applications to this HQ, ATTN: JFHQ-VA-J1-M, Building 316, Ft Pickett, Blackstone, Virginia 23824-6316, NLT close of business day of this announcement. Do not submit application packets in notebooks, folders, document protectors or with any other form of binding. **No faxed applications will be accepted.**

A complete listing of all current Virginia National Guard AGR Employment Opportunity Announcements is available at:

<http://vko.va.ngb.army.mil/viriniaguard/> click on Virginia National Guard and then click Job Vacancies.

FOR THE ADJUTANT GENERAL:

//signed//

THOMAS L. MORGAN III

LTC, GS, VaARNG

J1

CME for Military PAs

Excerpted from AAPA NEWS Vol. 29, No. 2: Article entitled AAPA Members Offered Variety of CME Opportunities in 2007 by Jane Howard

AAPA announced a new CME service designed to help PAs serving in the military. Developed by GEF at the request of AAPA, and with the support of the PA foundation, this program enabled PAs in the military to access lectures on-line and earn CME credit program, free to all PAs serving in the

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military in the United States and overseas, is available at www.CMElectures.org/AAPAmilitary. It covers 125 lectures on 18 medical and surgical topics. An on-line post-test is given at the end of each lecture, and PAs who successfully pass the test earn a Certificate of Participation. In addition, CDs including 70 of the CME lectures were distributed through AAPA federal service constituent organizations. In addition to on-line and workshop opportunities, the Academy provided CME opportunities to its members through a series of monographs published in concert with the Journal of the American Academy of Physician Assistants (JAAPA) and AAPA News.

WANTED

Received from Paul W. Lowe, PA-C

SAPA needs someone to take over the responsibilities and duties of Newsletter Editor. If someone within our membership has good computer skills along with a desire to help this organization, you may be the right one for the job. Please let me know of your willingness to help by contacting me at lowepw@earthlink.net.

Casey Bond, the current newsletter editor has done an outstanding job but desires to step down after the SAPA conference this April. I'm sure each of you would agree that he has been a valuable leader and servant for SAPA over the

past 10 + years and we all owe him our gratitude. Below is Casey's letter to the SAPA BOD. Thank you Casey for your willingness to serve. Paul W. Lowe, SAPA President

SAPA BOD,

I've been contemplating this for some time now and have decided I need to seek the advice of the SAPA BOD. I took on the job of newsletter editor when Hal gave it up in March 2005 because no one else stepped up to the plate and I didn't want to see the newsletter die. I have never claimed any particular abilities in this, just a willingness to attempt to keep it going. I find myself immersed now in a new job which doesn't allow me to give the newsletter the attention it deserves.

I will bring editor related materials to the conference to hand off to whoever is willing to take this on and I will assist them in the transition. Thank you all for your patience and tolerance for the last 17 issues.

Editor's note: It has been my pleasure to serve as newsletter editor these past three years. If at any time during my tenure I have offended anyone in any way, I offer my sincere apologies. SAPA is a wonderful organization made up of great people. I look forward to seeing you all in April! **cb**

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