Personnel Utilization

Selection, Training, Utilization, and Career Guidance for Army Medical Corps Officers as Flight Surgeons
SUMMARY of CHANGE

AR 616-110
Selection, Training, Utilization, and Career Guidance for Army Medical Corps Officers as Flight Surgeons

This revision--

- Combines former AR 351-14 (Selection and Training of Aviation Medical Officers) and AR 616-110 (Officer Career Program for Flight Surgeons).

- It provides current overall guidance for Army Medical Corps Officers as Flight Surgeons.
Selection, Training, Utilization, and Career Guidance for Army Medical Corps Officers as Flight Surgeons

By Order of the Secretary of the Army:

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Selection, Training, Utilization, and Career Guidance for Army Medical Corps Officers as Flight Surgeons

The initial course of aviation medicine instruction and meet the prerequisites in AR 600–105 qualify as flight surgeons and will be awarded the aeronautical designation of flight surgeon upon entry in the MC and successful completion of First Year Graduate Medical Education (FYGME). The career program for flight surgeons is designated to train and develop MC officers in the field of aviation medicine; provide effective management and efficient utilization of flight surgeons; and provide career opportunities for flight surgeons commensurate with their capabilities.

**Applicability.** This regulation applies to—

- MC officers of the Active Army, Army National Guard (ARNG), and U.S. Army Reserve (USAR). (The officer career program for flight surgeons is applicable to all MC officers awarded primary specialty skill identifier (SSI) 61N serving on active duty and in the Reserve Components.)
- Senior medical students with a military commission in the Active Army, ARNG, and USAR.
- Allied officers who meet the selection and application standards of paragraphs 6a through c and 7a(b) below.

**Impact on New Manning System.** This regulation does not contain information that affects the New Manning System.

**Army management control process.** This regulation is subject to the requirements of AR 11–2. It contains internal control provisions but does not contain checklists for conducting internal control reviews. These checklists are being developed and will be published at a later date.

**Supplementation.** Supplementation of this regulation and establishment of forms other than DA forms are prohibited without prior approval from The Office of The Surgeon General, HQDA (DASG–PSZ), 5111 Leesburg Pike, Falls Church, VA 22041–3258.

**Interim changes.** Interim changes to this regulation are not official unless they are authenticated by The Adjutant General. Users will destroy interim changes on their expiration dates unless sooner superseded or rescinded.

**Suggested Improvements.** The proponent agency of this regulation is the Office of The Surgeon General. User are invited to send comments and suggested improvements on DA Form 2028 (Recommended Changes to Publications and Blank Forms) directly to Commander, U.S. Army Aeromedical Center (HSXY–C), Ft. Rucker, AL 36362–5333.

**Distribution.** Distribution of this issue has been made in accordance with DA Form 12–9A requirements for 616–series publications. The number of copies distributed to a given subscriber is the number of copies requested in Block 417 of the subscriber’s DA Form 12–9A. AR 616–10 distribution is B for Active Army: ARNG, and USAR.
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Glossary
Section I

Introduction

1. Purpose
This regulation establishes policies and procedures for selection, training, utilization, and career guidance for Army Medical Corps (MC) officers as flight surgeons.

2. References
Required publications and referenced forms are listed in appendix A.

3. Explanation of abbreviations and terms
Abbreviations and special terms used in this regulation are explained in the glossary.

4. Responsibilities
a. The Surgeon General (TSG) is responsible for the Aviation Medicine Program Army-wide.
   b. The Commandant, Academy of Health Sciences, U.S. Army, is responsible for the aeromedical education and training conducted at the U.S. Army School of Aviation Medicine (USASAM).
   c. The Commander, U.S. Army Aeromedical Center (USAAMC) is responsible for supervising the activities of the Dean, U.S. Army School of Aviation Medicine and the Director, U.S. Army Aeromedical Activity (USAAMA).

5. Policies and procedures
Policies and procedures for the development and retention of U.S. Army flight surgeons are in sections II through V below.

Section II

Application and Selection

6. Prerequisites for selection
Applicants must—
   a. Volunteer for courses of instruction; however, due to unit requirements, commanders may designate qualified MC officers to attend flight surgeon training.
   b. Be MC officers or senior medical students holding a military commission. Reserve Component officers not on extended active duty must request a short tour of active duty for the purpose of attending courses of instruction.
   c. Meet Class 2F flying duty medical examination (FDME) standards as prescribed in AR 40–501, chapter 4. The FDME will contain a completed SF 88 (Report of Medical Examination); an SF 93 (Report of Medical History); and a report of electrocardiogram with original tracings. All FDMEs must be reviewed and qualified by Commander, U.S. Army Aeromedical Center, ATTN: HSXY–AER, Ft. Rucker, AL 36362–5333, prior to class selection. If medically disqualified, the applicant must have a waiverable disqualification as determined by Commander, USAAMC. Air Force and Navy medical standards also apply to Army applicants for Air Force and Navy flight surgeon training programs.
   d. Have 18 months’ retainability following graduation from the Air Force or Army courses or 24 months’ retainability from the Navy course.
   e. Agree to serve a utilization tour in aviation medicine as specified in paragraph 12d.

7. Application
a. Applications should be submitted as follows:
   (1) Active duty. MC officers on continuous active duty (RA and USAR) should submit DA Form 3838 (Application for Professional Training) to HQDA(DATC–OPH–MC), 1900 Half St., SW, WASH, DC 20324–2000. Medical requirements are to be submitted as follows: Officers in FYGME programs will submit a class 2F flying duty medical examination to Commander, U.S. Army Aeromedical Center, ATTN: HSXY–AER, Ft. Rucker, AL 36362–5333, not later than 30 April of the year when the officer is scheduled to attend the course. Other MC officers will submit their applications through Commander, U.S. Army Aeromedical Center, ATTN: HSXY–AER, Ft. Rucker, AL 36362–5333, to HQDA(SGPE-ZA), 1900 Half St., SW, WASH, DC 20324–2000. The application package must include the class 2F FDME.
   (2) Reserve. USAR MC officers not on continuous active duty should submit DA Form 1058–R (Application for Active Duty for Training and Annual Training for Members of the Army Reserve) through command channels to: Commander, ARPERCEN, ATTN: DARP–OPS–MC, 9700 Page Blvd., St. Louis, MO 63132–5260.
   (3) ARNG. ARNG MC officers should submit NGB Form 64 (Application for School Training) through command channels to Commander, ARNG–OAC, ATTN: Military Education Branch, Edgewood Area, Aberdeen Proving Ground, MD 21010–5420.
   (4) Other Services. MC officers of other Services should apply through their Service command channels. Point of contact for Army coordination is the same as given in paragraph 7a(1) above.
   (5) Senior medical students.
      (a) Uniformed Services University of the Health Sciences (USUHS) students should obtain prior approval from the Department of Medical Education and then submit DA Form 3838 through the Department of Military Medicine to the address given in paragraph 7a(1) above.
      (b) Health Professions Scholarship Program (HPSP) students should submit DA Form 4848–R (Application for Annual 45-Day Active Duty for Training (ADT) for Participation in U.S. Army Health Professions Scholarship Program (HPSP)) to HQDA(SGPE–PDM–S), 1900 Half Street, SW, WASH, DC 20324–2000.
      (6) Allied officers. MC officers of allied nations should submit requests through their national command channels to the local U.S. Government representatives. TRADOC has primary responsibility to act on these requests.
   b. Applications will include the following information:
      (1) Name of the school and course title.
      (2) Dates the applicant will be available to attend the course.
      (3) Date of entry on extended active duty and present expiration of term of service or category commitment for ARNG and USAR officers. Personnel in ARNG and USAR not on extended active duty must request active duty for training for the period of the course of instruction for which application is made.
      (4) A statement that the applicant—
         (a) Understands the obligation to serve the utilization tour prescribed in paragraph 12d;
         (b) Has completed an FDME as prescribed in paragraph 6c above; and
         (c) Will participate in frequent flights in Army aircraft at installations or with units where assigned.

8. Selection
Selection of eligible personnel is determined by TSG, except for ARNG personnel for whom this determination is made by the Chief, National Guard Bureau (ARNG–OAC). In all cases, final selection is contingent upon determination of medical fitness by Commander, USAAMC, ATTN: HSXY–AER, Ft. Rucker, AL 36362–5333.

Section III

Training

9. Aviation medicine training schools
The USASAM (Fort Rucker, AL), the U.S. Naval Aerospace Medical Institute (NAMI) (Naval Air Station, Pensacola, FL), and the U.S. Air Force School of Aerospace Medicine (USAFSAM) (Brooks AFB, TX) offer initial courses in aviation and aerospace medicine as well as formal residency programs.

10. Initial aviation medicine courses
MC officers who meet the prerequisites stated in section II may apply for training in the following courses:
    a. The NAMI offers a 24-week aviation medicine course three times a year. The course includes limited flight training. Students attend on permanent change of station orders.
b. The USAFSAM offers a 7-week aerospace medicine course three times a year.

c. The USASAM offers two courses in Army aviation medicine. Commissioned MC graduates of these courses are awarded the aeronautical designation of flight surgeon in accordance with AR 600–105; the Flight Surgeon Badge in accordance with AR 672–5–1; and SSI 61N in accordance with AR 611–101. Proficiency designations for SSI 61N are awarded in accordance with AR 611–101. For award of aviation badges and certificates to persons who are not U.S. Army officers, the provisions of AR 672–5–1 and AR 600–105 will apply. The two courses are the—

1. Army Aviation Medicine Officer’s Orientation Course which provides 2 weeks of intensive training in Army aviation medicine. This course is required for all graduates of the U.S. Navy or U.S. Air Force flight surgeon courses before certification and designation as an Army flight surgeon.

2. Army Flight Surgeon Primary Course which provides 7 weeks of comprehensive training in aviation medicine to include flight training experience in rotary wing aircraft. Normally the course is offered three times a year.

Section IV
Utilization

11. Authorization of flight surgeons, SSI 61N

The role of Army Aviation Medicine is to support Army aviation’s mission. Flight surgeon requirements are determined by the number of aviation personnel supported, with the ratio of 250 aviation personnel per one flight surgeon generally not to be exceeded. Aviation personnel include individuals on operational and nonoperational status within the area supported by the flight surgeon. Variables such as size, number, and location of units supported, frequency of deployment, mission requirements, and area support requirements may increase the number of flight surgeons required to conduct the Aviation Medicine Program. Questionable cases will be submitted for review by TSG (HSXY–AER) or the Chief, National Guard Bureau (ARNG–OAC).

a. Flight surgeons are required in the table of organization and equipment (TOE) of aviation battalions or squadrons and larger units to provide advice on medical matters to the commanders and to provide medical treatment for assigned unit personnel.

b. Flight surgeons, SSI 61N, are required in tables of distribution and allowances (TDA) as follows:

1. Medical section of headquarters elements at installations which provide medical support for Army aviation operations, regardless of size.

2. Staff sections of major command headquarters in the position of aviation medicine consultant.

3. Faculty positions at selected U.S. Army schools.

4. Staff positions at selected U.S. Army medical research and development activities.

5. Staff positions in selected Department of Army supervised activities.

6. Staff positions in the Office of TSG, Department of the Army.

7. Clinical positions in medical treatment facilities for the purpose of providing aeromedical consultation and/or aviation medicine support.

12. Utilization

Flight surgeons will be utilized as follows:

a. Flight surgeons will be utilized in aviation medicine activities when the officer is assigned against an authorized SSI 61N coded position. Officers assigned to tactical aviation organizations will participate in medical staff planning activities associated with tactical aviation operations.

b. Other duties will not jeopardize the primary aviation medicine effort. Flight surgeons should not be utilized in other medical activities when fulltime application to aviation medicine is required to meet local aviation medicine requirements. (This is not an exemption for all flight surgeons from other medical activities.)

c. Qualified flight surgeons engaged in other primary activities may assist in providing aviation medicine support. Residency-trained aerospace medicine specialists trained in another medical specialty will normally be assigned positions requiring their specialty in aerospace medicine and practice their additional specialty when properly credentialed by the appropriate medical treatment facility commander.

d. Flight surgeons will serve a utilization tour in an authorized flight surgeon position, or an authorized position that requires the SSI 61N for 18 months after completion of the Army, or Air Force basic course in aviation medicine or 24 months after completion of the Navy basic course in aviation medicine. Graduates of the Aerospace Medicine Residency Program will normally be assigned to aviation medicine positions.

13. Flight status

a. Flight surgeons assigned to aviation medicine duties will participate in frequent flights in Army aircraft. Flying in Army unit aircraft is an essential part of a successful aviation medicine program. Flight time will be recorded on DA Form 759 (Individual Flight Record and Flight Certificate—Army). These forms will be distributed per FM 1–300.

b. TSG, the Chief, National Guard Bureau, Commander, U.S. Army Aviation Center, and Commander, U.S. Army Aeromedical Center as specified in AR 600–105, are authorized to place flight surgeons on flying status. Flight surgeons, senior flight surgeons, and master flight surgeons are designated as crewmembers and authorized monthly aviation career incentive pay (ACIP) per AR 37–104–3, DOD Pay Manual (table 2–1–6), and AR 600–105.

c. Officers desiring to withdraw from the aviation medicine career field must forward a written request to HQDA (DAPC–OPH–MC), 1900 Half Street, SW, WASH DC 20324–2000. Approval of such requests will be based upon the needs of the service.

Section V
Career Guidance

14. Career guidance for flight surgeons

MC officers entering to enter aviation medicine will perform duties in the field of aviation medicine as specified in section IV. Flight surgeons will obtain, in addition to their knowledge and application of aviation medicine, an appreciation and understanding of the operational aspects of Army aviation. This will require the flight surgeon to participate in the planning and execution of Army aviation operations. Flight surgeons desiring careers in the AMEDD must further their medical knowledge and ability to perform medical command and staff assignments. Flight surgeons may apply for residency programs leading to board certification in aerospace medicine, or in other medical specialties. Residency training, board certification, and completion of Army military professional development courses and schools will qualify the flight surgeon to compete for staff and command positions of increasing responsibility.

15. Advanced specialty training

Aerospace medicine is recognized as a specialty by the American Board of Preventive Medicine, the American Osteopathic Board of Public Health and Preventive Medicine, and TSG. Advanced training leading to board certification in aerospace medicine, including a Master of Public Health degree or equivalent, is available for officers who desire to enter this career field. Residency application guidance is contained in AR 351–3.
Appendix A
References

Section I
Required Publications

AR 37–104–3
Military Pay and Allowances Procedures: Joint Uniform Military Pay System Army (JUMPS—Army). (Cited in para 13b.)

AR 40–501
Standards of Medical Fitness. (Cited in para 6c.)

AR 351–3
Professional Training of Army Medical Department Personnel. (Cited in para 15.)

AR 600–105
Aviation Service of Rated Army Officers. (Cited in the summary and paras 10c, 11b(7), and 13b.)

AR 611–101
Commissioned Officer Specialty Classification System. (Cited in para 10c.)

AR 672–5–1
Military Awards. (Cited in para 10c.)

DoD Unnumbered Manual
DoD Military Pay and Allowances Entitlements Manual. (Cited in para 13b.) (This publication can be obtained from the Naval Publications and Forms Center, Code 3015, 5801 Tabor Avenue, Philadelphia, PA 19120, using DD Form 1425 (Specifications and Standards Requisition).)

FM 1–300
Flight Operations and Airfield Management. (Cited in para 13a.)

Section II
Referenced Forms

DA Form 759
Individual Flight Record and Flight Certificate—Army

DA Form 1058–R
Application for Active Duty for Training and Annual Training for Members of the Army Reserve (Prescribed in AR 135–200)

DA Form 3838
Application for Professional Training

DA Form 4848–R
Application for Annual 45-Day Active Duty for Training (ADT) for Participants in U.S. Army Health Professions Scholarship Program (HPSP) (Prescribed in AR 601–141)

NGB Form 64
Application for School Training

SF 88
Report of Medical Examination

SF 93
Report of Medical History
Glossary

Section I
Abbreviations

ACIP
aviation career incentive pay

AMEDD
U.S. Army Medical Department

ARNG
Army National Guard

FDME
flying duty medical examination

FYGME
First Year Graduate Medical Education

HPSP
Health Professions Scholarship Program

MC
Medical Corps

NAMI
Naval Aerospace Medical Institute

RA
Regular Army

SSI
specialty skill identifier

TDA
table(s) of distribution and allowances

TOE
table(s) of organization and equipment

TSG
The Surgeon General

USAAMA
U.S. Army Aeromedical Activity

USAAMC
U.S. Army Aeromedical Center

USAFSAM
U.S. Air Force School of Aerospace Medicine

USAR
U.S. Army Reserve

USASAM
U.S. Army School of Aviation Medicine

USUHS
Uniformed Services University of the Health Sciences

Section II
Terms

Aviation medicine
The medical specialty practiced by Army flight surgeons. Flight surgeons provide aviation and general medical support to Army aviation personnel. It includes the practice of both preventive and clinical medicine as well as the promotion of aviation safety.

Aerospace medicine
A subspecialty of the American Board of Preventive Medicine and the Osteopathic Board of Public Health and Preventive Medicine. Board certification requires successful completion of an approved program of graduate medical education.

Flight medicine
The medical specialty practiced by Air Force flight surgeons.

Flight surgeon
A physician trained in the specialty of aviation or aerospace medicine.

Flight surgery
A nonexistent term

Aviation medical officer
Obsolete term for flight surgeon

General medicine officer
A physician qualified and credentialed to practice general medicine.