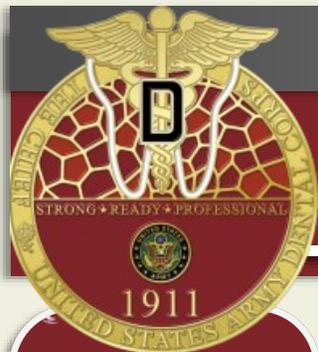


THE DENTAL CORPS BULLETIN



Useful Links

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Dental Corps

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HPSP SUMMER BOLC COURSE: A CAPTAIN'S PERSPECTIVE



By: CPT Kayla Puglisi

My name is Kayla Puglisi, and I am excited to begin my journey with the Army as a 63A. I am from Baltimore, Maryland and graduated from the University of Maryland School of Dentistry in May 2023. I also completed my undergraduate and graduate education in Maryland at the University of Maryland Baltimore County. I commissioned into the Army in June of 2019 through the Health Professions Scholarship Program (HPSP). I first became interested in joining the military when completing my undergraduate degree; I decided I wanted a dynamic career where I could travel and meet new people, and I was interested in the Army as both of my grandfathers are Army Veterans. However, I also knew I wanted to fulfill my dream of becoming a dentist. When I learned about the HPSP from a recruiter visiting our university during a suture clinic, I immediately knew I wanted to apply. I was excited about the opportunity to be able to learn the profession of dentistry debt-free and to begin serving our Soldiers.



Pictured: Keynote BOLC Speaker BG Mary Krueger, MC Corps Chief and CPT Kayla Puglisi at BOLC graduation.

I recently completed HPSP Basic Officer Leaders Course (BOLC) at Fort Sam Houston and am starting the 1-year Advanced Education in General Dentistry (AEGD) residency at Fort Carson. At BOLC I learned a lot about being a Soldier and an Army dentist. I also completed my first FTX, which was a great experience. I really enjoyed going to the marksmanship qualification range and practicing firing from the different positions. Although challenging, I liked completing land navigation in the dark – we started early in the morning and found our points through the sunrise. It really made me focus more on my pace count and shooting my azimuth because I knew I wouldn't be able to look around for the point easily. I found learning the different roles of care and practicing triaging the mannequins to be an engaging experience. The BOLC instructors did a great job of making the training a realistic experience – the mannequins are heavy, they have FLAs driving around, and each of us were assigned to a different role. It is very clear that the cadre are passionate about teaching us everything they can as they share their own personal experiences. As I

get ready to start the AEGD program I find myself eager to take advantage of this opportunity and expand my knowledge and skillsets in dentistry. I am also excited to be holding a handpiece again after a summer without dentistry. At Fort Carson, I hope to gain more hands-on experience with endodontics, implant dentistry, and digital dentistry using CAD/CAM. I am excited to meet my co-residents and to begin serving our Soldiers together.



ARMY ENDODONTICS: PULPAL THERAPY AND INCREASING READINESS

Army endodontics made news at the AAE meeting with Fort Gordon second-year resident CPT Ian Prins placing in the top 3 of all poster research presentations with his work, “Vital Pulp Therapy-Full Pulpotomy Treatment Protocol Addresses Deep Carious Lesions and Increases Readiness in a Deployed Military Setting.” While endodontists are most frequently extending the life of teeth when they perform root canal therapy, more conservative options are sometimes available to better preserve the integrity of the roots themselves. For vital mature permanent teeth with caries extending into the pulp and even in some cases of symptomatic irreversible pulpitis, vital pulp therapy may be a good option.

Picture: CPT Ian Prins ('23) describes the potential operational and readiness impact of modern vital pulp therapy at the Dental College of Georgia's Research Day. His research was awarded 3rd place among all other poster presentations at the AAE Annual Meeting.



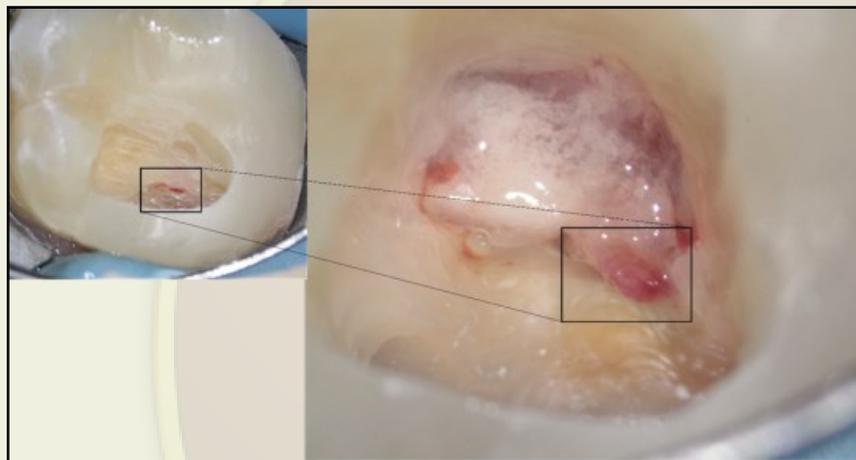
PULPAL PEARLS

By: LTC (P) Joseph Dutner

Just like other connective tissues within the body, a resected pulp is capable of healing once the inflamed portion and its insulting etiology are removed. As recently as a decade ago, you would have a hard time finding endodontists that considered vital pulp therapy to be a predictable treatment option, but newer materials and better-established techniques have led to a more modern, evidence-based approach.

The most influential change in vital pulp therapy has been the introduction of calcium silicate cements. These cements are not only bioactive, but they also form an external layer that the human body treats like hydroxyapatite. As a result, histologic samples demonstrate the establishment of intimate contact with fibroblasts and cementoblasts, which may account for the high success rate of vital pulp therapy with these cements.

There are now many different calcium silicate cements on the market, but the most common ones found in Defense Health Agency clinics are ProRoot® MTA (Dentsply Sirona, Charlotte, NC), EndoSequence® BC RRM™ (Brasseler USA, Savannah, GA), and Biodentine® (Septodont, Saint-Maur-des-fossés Cedex, France). Also used in endodontic microsurgery, perforation repairs, and apical barriers, the handling of these products has a relatively short learning curve. The versatility of their applications in modern dentistry makes it well worth the effort to become comfortable employing them in appropriate clinical situations.



Often, a small caries pulp exposure (left) does not afford the opportunity to inspect the pulp tissue for inflammation as seen after CPT Ian Prins meticulously uncovered the pulp tissue. If vital pulp therapy is unsuccessful despite an intact restoration, it is likely that not all of the inflamed tissue (like seen in the inset on the right image) was removed.



PULPAL PEARLS CONTINUED

Predictable success with vital pulp therapy is achieved with disinfection and the complete removal of inflamed tissue. Proper disinfection protocols include the mandatory use of a dental dam and the application of the antimicrobial solution sodium hypochlorite with passive, superficial rinsing or a moistened cotton pellet. While real-time histology is not possible, there are some findings that suggest inflamed tissue is still present. One such finding is the lack of pulp tissue hemostasis following a few minutes of direct pressure. Under magnification, there are also visual signs that a portion of pulp tissue must be removed. An avascular, fibrotic, or yellowish appearance indicates localized necrosis. Healthy pulp should be homogenous and without dentin chips. Usually, smaller pinpoint pulpal exposures do not afford the opportunity to effectively evaluate the exposed pulp. For a great example demonstrating how an innocent-looking, non-bleeding pulp exposure can represent a small, localized area of irreversible inflammation, see the accompanying figure made possible by CPT Ian Prins' careful un-roofing of an exposed pulp.

If you are unable to visually inspect the exposed pulp under sufficient magnification, one strategy is to perform a full coronal pulpotomy, removing all pulpal tissue within the pulp chamber. This technique may remove more healthy pulp tissue than is technically required, but there may be some benefit to creating these smaller excisional wounds at the canal orifices. Generally, this procedure is not as technique sensitive as a partial pulpotomy. With any pulpal therapy, follow-up and re-evaluation is important to determine that the inflamed pulpal tissue has been removed, especially within the first few months. While cold sensibility tests may not be reliable for teeth with no remaining coronal pulp, the Electric Pulp Test has been shown to be an effective indicator of pulp vitality within the roots of these teeth (Aravind et al., 2022).

From an operational standpoint, vital pulp therapy may provide an excellent and definitive treatment option even in austere environments. The armamentarium, time, and skill required is less than a non-surgical root canal therapy which can benefit both the deployed Soldier and the dental provider. When it comes to the many DRC 3 caries lesions that extend into the pulp, it can also become a valuable force multiplier in the garrison environment. For further information and to read the American Association of Endodontists' position statement on vital pulp therapy, visit the AAE website (https://www.aae.org/wp-content/uploads/2021/05/VitalPulpTherapyPositionStatement_v2.pdf).

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Aravind A, Rechithra R, Sharma R, Rana A, Sharma S, Kumar V, Chawla A, Logani A. Response to pulp sensibility tests after full pulpotomy in permanent mandibular teeth with symptomatic irreversible pulpitis: a retrospective data analysis. *Journal of Endodontics*. 2022 Jan 1;48(1):80-6.

ARMY DENTAL CORPS SENIOR LEADERS' MEETING

Army Endodontics was well-represented at Army Dental Corps Senior Leaders' Meeting. *From Left to Right:* COL Andy Anderson (JBLM DENTAC Commander), COL Chad Bangerter (Bavaria DENTAC Deputy Commander), LTC(P) Matthew Phillips (Fort Gordon Endodontics Program Director), COL Stephanie Calhoun-Jamison (Fort Eustis DENTAC Commander), LTC Craig Freccero (USMA DENTAC Commander), COL Dentonio Worrell (Hawaii DENTAC Commander).

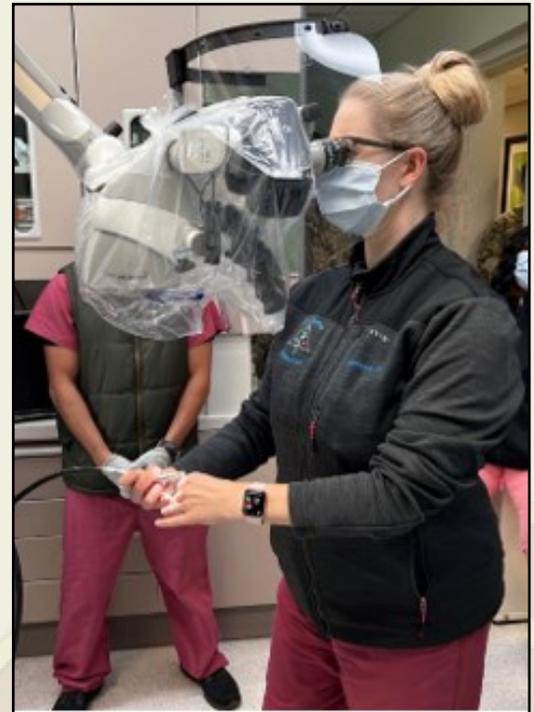




ARMY ENDODONTICS ADVANCES WITH THE SPECIALTY

By: LTC (P) Joseph Dutner

Although its core tenets related to the prevention and treatment of pulpal and periapical disease remain, the endodontic specialty has evolved greatly over the last few decades. A modern, evidence-based endodontist practicing in 2023 is diagnosing with greater confidence and planning out more predictable, conservative, and safer treatment strategies with the aid of cone beam computed tomography. More flexible instruments are used to navigate curved canals and can do so even as endodontic access cavities are getting smaller than the traditional shapes many of us learned in dental school or residency. Root filling materials with better bioactive potential are being utilized for non-surgical root canal treatments, endodontic microsurgery, perforation repairs, apical barriers, and vital pulp therapy. Recently introduced advanced irrigation systems (like the ones with which Fort Gordon residents are training in the accompanying images) are being steadily adopted for their potential to improve our cleaning and disinfection of the root canal system. Through its dedicated residencies and participation in quality continuing education, Army endodontics continuously adapts and modernizes its practice to ensure our Servicemember beneficiaries are receiving the best quality treatment available.



MAJ Brittany Bartenstein ('23) conducts initial training with Fort Gordon's YSGG hard and soft tissue laser. With a flexible and radial (side) – firing tip, the laser energy can disrupt microbial biofilms and is used in an effort to improve cleaning and disinfection of root canals.



Fort Gordon Endodontics welcomed back alumni Dr. Joshua Todd ('17) and Dr. Jacob Weigle ('16) to conduct training on the GentleWave unit. This system, which is becoming more common in endodontic practices, uses multisonic energy to clean root canals by using negative pressure to cycle irrigants throughout the root canal system while requiring less mechanical preparation. *Left:* In the foreground, Dr. Joshua Todd adjusts the unit's settings while CPT Jeremy Hill ('24) gets ready to work behind the microscope. *Right:* CPT Phillipe Mansour ('24) tries out the unit on an extracted tooth.



ARMY ENDODONTICS: DIPLOMATES

By: LTC (P) Joseph Dutner

This year, 10 Army-trained endodontists became board-certified from the American Board of Endodontics. These new Diplomates account for over 10% of all endodontists receiving such status this year! The board certification process is comprised of a written examination, a scenario-based oral examination, and a case history portfolio examination featuring exemplary treatments supported with at least one year of postoperative evaluations.

Congratulations to the newest Army-trained ABE Diplomates:

MAJ Chezdan Baker

COL Chad Bangerter

MAJ Jose Burgos

MAJ Kristel Burgos

MAJ Khine Htet

MAJ Jeffrey Loberg (USAF)

MAJ Matthew Massey

MAJ Kony Park

LTC Alexandra Rihani

MAJ Barbara Wegiel



The Grossman Ceremony is the annual event when new ABE Diplomates are recognized for achieving board-certification. *Left:* MAJ Khine Htet, MAJ Kristel Burgos, and MAJ Jose Burgos pose for a picture with their proud Fort Gordon faculty, LTC (P) Matthew Phillips and LTC(P) Joseph Dutner. *Right:* As the first new Diplomates to receive their ABE Certificate signed by their former Program Director, the three show off their unique challenge coins.

PROMOTIONS IN ENDODONTICS:

Fort Liberty's Rohde Dental Clinic celebrated the well-deserved promotions of MAJ Kaleigh Lombardo (*pictured on Right*) and MAJ Rebekah Schott (*pictured on Left*). MAJ Lombardo is beginning her second year of residency while MAJ Schott will be heading to her next assignment as the endodontics mentor of the Hawaii AEGD-2 program.





ARMY ENDODONTICS HIGHLIGHTS



Current and past Fort Liberty endodontic residents reunited at the International Academy of Endodontics meeting in Orlando, FL. *From Left to Right:* MAJ Chezdan Baker ('21), LTC Alexa Rihani ('20), MAJ James Phillips ('19, Assistant Program Director), LTC Steven Delgado (Program Director), MAJ Claire Anderson ('18), MAJ Matthew Massey ('20), MAJ Matthew Kinstler ('23), MAJ James Kearns ('24), CPT Ryan Smith ('24), MAJ Kony Park ('20), MAJ Kaleigh Lombardo ('24), MAJ Rebekah Schott ('23), MAJ Jeffrey Loberg ('21, USAF).

Several members of the Army endodontics community converged at the American Association of Endodontists Annual Meeting in Chicago, the historical birthplace of the specialty. It was a time to update our knowledge, learn the most recent best evidence for techniques and materials, see the newest products on the market, network with colleagues, and celebrate the accomplishments of our members. The meeting was also a chance for the residents to share their Master's project research with a large audience.

Army endo residents and alumni from Fort Liberty also had the opportunity to attend the meeting of the International Academy of Endodontics in Orlando, Florida. At this meeting, the attendees were able to learn about diverse topics such as the fungal origin of diseases, cemental tears, implant treatment planning, 3-dimensional printing in endodontics, as well as a host of restorative dentistry topics, all presented by renowned experts in their fields. Assistant Program Director MAJ James Phillips valued the IAE meeting's "pure focus on learning ... with no corporate sponsorship." By attending the IAE meeting, "the Army was able to show its commitment to lifelong learning. The ideas and broadening perspectives can be shared among our peers creating a far-reaching benefit to the Army."



Pictured: MAJ Rebekah Schott presents her resident research at the AAE Annual Session in Chicago, IL. Her investigation, "Evaluating In Vitro Performance of Void Removal Completed After Continuous Wave Obturation in a Mandibular Premolar Resin Model" provides evidence for techniques that are meant to solve a common challenge providers face when obturating root canals.



LEADING FROM THE FRONT: AN INTERVIEW WITH COL DENTONIO WORRELL



COL Dentonio Worrell recently took command of the US Army Dental Activity Hawaii.

Perhaps it is the readiness mindset that pushes several endodontists to take up the responsibility of leadership within the Dental Corps. One such leader is COL Dentonio Worrell, the current Commander of the US Army DENTAC- Hawaii. His Army career started in the Army Reserves as an Administrative Specialist, and he has gone on to serve as a general dentist, endodontist, AEGD mentor, OIC, Dental Clinic Commander, DCAS Commander, and DENTAC Commander. In addition to his military assignments, he has volunteered his clinical services to those in need, moonlighted in civilian practice, and served as faculty at Virginia Commonwealth University Dental School. His service to others has extended to his advocacy and leadership within organized dentistry, where he was a part of the American Dental Association's Institute for Diversity in Leadership and was selected for the American Association of Endodontists' Leadership Development Program. He has served on the AAE's Practice Affairs Committee and is co-author of the 10th Edition of the AAE's Glossary of Endodontic Terms. His unique experiences, leadership, and dedication to the specialty offer incredible insight for the US Army Dental Corps, and for this reason, we asked him some questions:

How has your dedicated involvement in organized dentistry helped you develop as a Dental Corps Officer, and how does the strengthening of these relationships with professional associations contribute to the Dental Corps mission?

“Being involved in organized dentistry has widened my aperture and perspective on oral healthcare delivery and all of the behind-the-scenes work that goes into maintaining our profession by the many organizations that represent us. There is a huge political advocacy piece that dentists do not see on a day-to-day basis. Army Dentistry is a minute piece of the pie.

I believe often military dentistry can be overlooked on a national stage since we are such a small cohort of all dentists. Being involved in organized dentistry ensures that we are not forgotten and that we have a seat at the table and can advocate for some of our unique interests. It also allows us to market military dentistry and informally recruit as people are always intrigued about what we do.”

How has your membership in the ADA Institute for Diversity in Leadership influenced your perspective and aspirations for Army dentistry?

“Simply put...I applied for the program because from my perspective, the Dental Corps was/is not very diverse. I have always believed that we should mirror or be close to mirroring the demographics of the wider population. Our Dental Corps does not. Attending the IDL and seeing the perspectives of others from a variety of ‘dental’ backgrounds highlighted that it's not an issue unique to Army Dentistry. My aspiration would be that someday in the future the diversity of the DC more closely reflects that of the general population.”



LEADING FROM THE FRONT: AN INTERVIEW WITH COL DENTONIO WORRELL

What unique attributes does an endodontist bring to the table as a DENTAC or DCAS Commander?

“In my opinion, endodontists are diagnosticians. The problem-solving skillset we use on a daily basis with our patients translates to Command. Most of us develop tremendous patience which is required when patients present with ambiguous symptoms and dental histories that do not make sense, and we are challenged to ascertain the etiology of their chief complaints. I believe effective Command requires patience. Patience with superiors, subordinates, and everyone in between. It also requires patience with yourself as there are constantly new challenges that push you outside of your comfort zone.

Many of us have some level of Type A personality within us and we tend to be our own worst critics. Command teaches you to be patient with yourself and your growth in the position of leadership. The attention to detail that Endodontics requires definitely helps in Command. Finally, many of us Periapical Neurosurgeons are adventurous and slightly crazy, and you have to be a little ‘insane in the membrane’ to sign up for Command. (Cypress Hill pun intended)”



COL Dentonio Worrell and his family are welcomed to Hawaii. *From Left to Right: Summa (12), Joel (10), Dr. Jentel Worrell, COL Dentonio Worrell.*

Given the opportunity, what would you impart upon a younger CPT Worrell at the beginning of his Army dental journey?



Even when freefalling with Golden Knight SSG Jared Zell, COL Worrell remains a committed endodontist, getting in some literature review with the *Journal of Endodontics*.

“Take more pictures during BOLC! I only have 1 or 2 pics from BOLC. On a more serious note, I would tell my younger self ‘Relax, enjoy and appreciate every moment of this crazy adventure.’ This lifestyle we live is truly amazing. Most people live banal lives and take a vacation once or twice a year to fuel their sense of adventure. In the military, our lifestyle IS the adventure. Nineteen years have flown by...I guess overall I’ve been having fun!”



ARMY ENDODONTICS: LIVING, BREATHING, AND TEACHING ARMY READINESS

By: LTC (P) Joseph Dutner

Although the well-known endodontist Dr. Samuel Seltzer has been quoted saying that endodontics is a “big issue over a little tissue,” according to Simecek et al. (Military Medicine, 2014), diseases of that “little tissue” are responsible for 18% of all Dental Disease Non-Battle Injuries in theater, and Wojcik et al. (Military Medicine, 2015) found that anatomic space infections from endodontic disease comprised between 13-15% of the most severe dental emergencies encountered during OIF/OND and OEF. During the COVID-19 lockdowns when dental offices nationwide were often triaging patients with phone consultations, 45 - 63% of actual emergency dental office visits were related to pulpal or periapical conditions, a statistic that reveals the true urgency and need for endodontic treatment (Grossman et al., 2020; Guo et al., 2020; Kumar et al., 2021). This reality is why almost all endodontic treatment needs are classified as Dental Readiness Classification 3 and why the specialty is so integral to maintaining the readiness of the Total Force.



In forward environments with high operational tempo, dental providers regularly find themselves with two options to manage dental emergencies and get Soldiers, Sailors, Marines, and Airmen back into the fight: tooth extraction or non-surgical root canal therapy. Our patients make countless sacrifices in Service to our country which is why Army endodontists pride themselves on saving teeth and preserving our patient’s future quality of life whenever possible. On the home front, quality endodontic treatment, performed in accordance with the most recent, evidence-based practice, reduces the chance that dental emergencies will affect a Soldier’s mission downrange. Even though the operational and pandemic-related data clearly demonstrate the key role of endodontics in dental readiness, there are fewer than 40 active-duty endodontists serving in clinical roles in the Army. This discrepancy demands that Army endodontists must continue to shape readiness through the mentorship and training of all fellow dental Officers. It is for this reason that Army endodontics dedicates a large portion of its residency curriculum to teaching. While most of the Army Dental Corps is familiar with the high-quality educational content presented by the endodontic residents during the Endo-Perio-Prosth Short Course, the residents are also developing their teaching skills with dental students in their roles as row instructors at the Dental College of Georgia. When dental Officers graduate from the endodontics residency, they do so with a different mindset than their civilian colleagues because the Armed Forces’ mission demands that every military endodontist is also a teacher. Even after residency, faculty development courses and programs from the Uniformed Services University of the Health Sciences continue to better prepare Officers for their essential role as educators. Whether in the formal AEGD 1- and 2-Year Programs or as informal local trainers and mentors, Army endodontists ensure that dental Officers are prepared to safely and effectively manage pulpal and periapical emergencies wherever and whenever required.

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DENTAL HEALTH COMMAND EUROPE UPDATE

Foreign Badges

Over the past several months, Soldiers from Dental Health Command Europe took advantage of our unique geographical location and made a concerted effort to engage with our NATO partners and allies to earn Foreign Military Badges. These opportunities strengthen the bond between our partner nations and forces and allow Soldiers to be part of long-standing traditions. Soldiers take away new skills, enhance their role in the Ready Medical Force, and earn the pride of wearing a foreign military badge on their uniform.



Luxembourg Diekirch Foot March

In honor of John the Blind, also known as John of Luxembourg and King of Bohemia, who fought alongside the French against the English army in 1346, the first edition of the “Marche de l’Armee” was held in 1968. Participants may choose to march on one or two consecutive days, either 12, 20, or 40 km each day.

LTC Cory Richards, MAJ Nathan Kosiba, MAJ Dustin Connor, MAJ Paulo Sarria CPT Cassidy Cornett, CPT Bradley Truong, SSG Lawrence Echon, SGT Jade Craft, SGT Harry Torres, SGT Ireayo Akanbi, and SPC Shamhaan Anthony represented DENTAC-Rheinland Pfalz. COL Scott Rankin, MAJ Samuel Teague, and their friend John represented the DHCE Headquarters and marched 40 km.



Norwegian Foot March



First held in 1915, the Norwegian Foot March is a military endurance test in which participants march or run 30 km (18.6 mi), carrying a rucksack of 11 kg (24 lbs). Time requirements vary by age and gender of participants. The DHCE HQ, along with soldiers from the Baumholder Dental Clinic completed the Norwegian Foot March hosted in Wiesbaden.

From DENTAC-Rheinland Pfalz, MAJ Paulo Sarria, CPT Schuler Luce, SSG Lawrence Echon, SGT Jade Craft, SGT Harry Torres, SPC Paul Gekonge, and SPC Christian Cromwell completed the Norwegian Foot March.



DENTAL HEALTH COMMAND EUROPE UPDATE

Norwegian Foot March

CPT Ross Vandercreek and SGT Adolphus Howard of DENTAC – Bavaria were given certificates and badges for completing the Norwegian Foot March.



German Armed Forces Badge of Marksmanship

The Schützenschnur (German Armed Forces Badge of Marksmanship) was awarded to Soldiers who demonstrated proficiency with the German P8 pistol and G36 rifle. The award ranges from bronze up to gold, based on the lower of the two scores.

From DENTAC – Rheinland Pfalz: MAJ Nathan Kosiba, MAJ Dustin Connor, CPT Cassidy Cornett, CPT Matthew Ellison, SSG Marcus Howell, SSG Lawrence Echon, SGT Jeremy Lozano, SGT Harry Torres, SGT Hongyi Rutschman, SGT Julio Tobal, SGT Jorge Martell-Rivas, SGT Jade Craft, SPC Oh Yeon Woo, SPC Alexander Gonzalez-Benton, SPC Chanda Devkota, SPC Paul Gekonge, SPC Ja Quez Hairston, PFC Italya Davis, and PFC Neveah Jenkins.





DENTAL HEALTH COMMAND EUROPE UPDATE

German Armed Forces Badge

DENTAC-Itlay: SFC Aleksandria Pavlenko and SPC Mackenzie Perlowski were awarded the German Armed Forces Marksmanship Badge (Schutzenschnur) in Gold.



Memorial COL Darby 40 Mile March

COL Kevin Parker, LTC Benjamin McGovern, MAJ Roland Miguel, CPT Nichole Eckrich, CPT Juliana Lim, CPT Steven Simpson, CPT Zachary White, and SPC Alexandra Savcic conducted the Memorial COL Darby 40 Mile March on Lake Garda, Italy. The event has been conducted since 2010 to honor COL William Darby, founder of the US Army Rangers, who was killed by German artillery fire on April 30, 1945. The event also commemorates twenty-five members of the 10th Mountain Division who were killed on Lake Garda on the same day when their amphibious vehicle sank.





DENTAL HEALTH COMMAND EUROPE UPDATE

Red Cross Program

The Red Cross Dental Assistant program is one that benefits both the trainees and the clinic that provides their training. The trainees, often military spouses, graduate the program with a skill set they can take with them wherever they PCS, giving them career options at both military and civilian dental clinics. The clinics, in turn, can fill vacancies from a newly qualified pool of candidates. Nowhere is this program more important than in OCONUS clinics, where both spousal employment opportunities and qualified dental assistants are limited.

Wiesbaden Dental Clinic celebrated the graduation of our two Red Cross assistants this week. The efforts of the Red Cross, along with our volunteer's 1,000-plus hours of direct patient care, significantly impacted the clinic's ability to meet the community's needs. WDC is happy to provide the opportunity to train these two outstanding dental assistants. Our volunteers applied for and were offered jobs within the dental clinic.

We look forward to their continued contributions to improving the oral health of our Soldiers!



CPT Mark Park was recognized by USAG-Stuttgart Red Cross director Mr. Peter Budner and Assistant Director Ms. Jeanette Burda for his successful organization of the Red Cross Dental Assistant program on 5 June 2023. Certificates were also presented to Ms. Nancy Robinette, Ms. Adriana Doherty, and Ms. Chona Donnelly for completing the program.





DENTAL HEALTH COMMAND EUROPE UPDATE

DHCE Headquarters



DHCE S-3 NCOs, SSG Luiza Pozniak and SSG Marcus Harbin, conducted an AFN Interview that emphasized the importance of dental readiness. They educated listeners on dental services offered by military dental clinics, and ways military service members can ensure they maintain their dental readiness.

NATO COMEDS Dental Service Panel

COL Rankin attended the NATO COMEDS Dental Service Panel in Tallin, Estonia where he had the opportunity to discuss dental care and interoperability in the European theater with allies and partners.



DENTAC– Italy

DENTAC-Italy soldiers MAJ Roland Miguel, SGT Jacobo Acevedo, and PV2 Alexia Wilkinson hit the ground running after arriving in Ghana. These three DENTAC Italy Soldiers are participating in SETAF-AF's Ghana medical readiness exercise, during which they will provide dental care to Active-Duty Soldiers, family members, retirees, and the local population.





DENTAL HEALTH COMMAND EUROPE UPDATE

DENTAC-Italy

USAG Italy held a garrison wide exercise where U.S. Army Health Center – Italy (USAHC-V), Dental Health Activity – Italy (DHA-I), and Public Health Activity – Italy (PHA-I) personnel responded to a simulated gas explosion exercise by treating urgent patients.

Commander's intent was to provide controlled training for real-world emergencies that require the organization to respond as a unit in caring for garrison community and identify areas for improvement. DHA-I and PHA-I Soldiers and staff were responsible for the triage and movement of patients. Dental clinic providers stood ready in the event of patients requiring dental intervention.



DENTAC-Bavaria

CPT Andrew Kennedy of DENTAC Bavaria (right-hand photo, far left) recently participated in and was on the winning team of the MEDCOM Best Leader Competition held in Grafenwoehr, Germany. The four-day competition challenged Soldiers on their ability to perform a variety of warrior tasks, such as day and night land navigation, obstacle course, and a ruck march. Less than two years into his military career, CPT Kennedy has also earned multiple awards and foreign badges, as well as the highly coveted Expert Field Medical Badge.





DENTAL HEALTH COMMAND EUROPE UPDATE

DENTAC- Rheinland Pfalz

On 26 April 2023, Wiesbaden Dental Clinic participated in DENTAC-RP's SAAPM month talent show. Over the past three years, this SAAPM talent show has grown from a small unit-level event to one that has reached and impacted the entire theater.

For the 2023 talent show, WDC completed a Garrison-wide volunteer project over one year consisting of an on-post visual display and a short film summarizing the project's mission. The project entailed fund-raising the purchase of 7,249 flags, representing each victim of sexual assault within the U.S. military and planting those flags in front of the Keys building and down the main street of the post as a visual testimony to the magnitude of this problem.

Following the flag-planting, the team at WDC devoted countless hours to producing a powerful video documenting the project and the organization's unified commitment to denouncing sexual assault and harassment within our military. The video received the endorsement and participation of numerous leaders within the organization, including BG Clinton Murray, BG Jonathan Byrom, CSM Michael Carlan, COL Christina Bembenek, CSM Lima, COL Andrew Landers, COL Scott Rankin, and SGM Cesar Quintana.

What a truly astounding achievement of organization-wide unification against sexual assault and harassment! In the words of MAJ Nathan Kosiba and CPT Bradley Truong, "The hope (was) to show that a small, motivated, dental clinic with a vision and a desire to make a difference can change people's mindsets and approach to sexual harassment and sexual assaults." Outstanding work!

<https://www.dvidshub.net/video/880197/sexual-assault-awareness-and-prevention-remember-we-team>





DENTAL HEALTH COMMAND EUROPE UPDATE

Save the Date: 65th Garmisch Dental Excellence Symposium



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ADA C.E.R.P.® Continuing Education
Recognition Program

The U.S. Army Dental Corps is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry.

* Additional details and updates coming soon!



CONTINUING EDUCATION

Discuss these opportunities with your Command and Professional Development Officer.

Captain Career Course (CCC)

Phase 1 is now required. Visit <https://www.atrrs.army.mil/atrrscc/> and search Course # 6-8-C22 for available dates. Submit signed DA3838 to HRC, DC Professional Development Officer.

Dental Management Development Course (DMDC)

This is a one week, in-person course that focuses in on the leadership and management of Army Dental clinics and personnel, taught by dental, for dental. This is an excellent course for current or future OICs or NCOICs or clinic leaders wishing to refine their skillset in managing an Army Dental Clinic. The course is held at the Medical Center of Excellence, JBSA.

For further information, contact course manager:

SFC Chris Coleman
(210) 221-7741 (Commercial)
(803) 465-2747 (Personal Cell)
christopher.m.coleman18.mil@army.mil

Intermediate Level Education (ILE)

The primary method of completion is distance learning ILE. Submit signed DA3838 to HRC, DC Professional development Officer.

Expert Field Medical Badge (EFMB)

EFMB training and information can be found on the U.S. Army Medical Center of Excellent website: <https://medcoe.army.mil/efmb>. Testing for EFMB is conducted annually at multiple sites across the Army.

Army Training Requirements and Resources System (ATRRS)

[Brigade Healthcare Provider Course](#)

[Tactical Combat Medical Course](#)

Defense Medical Readiness Training Institute (DMRTI)

[Combat Casualty Care Course \(C4\)](#)

Joint Medical Executive Skills Program

Visit <https://www.health.mil/Training-Center/LEADS> for information on the following courses: Healthcare Management Course, JMESI Intermediate Executive Skills, Capstone Course for Military Health System Leaders.



CONTINUING EDUCATION

[Joint Senior Medical Leader Course](#)

[Capabilities Development Course](#)

[Defense Strategy Course](#)

FREE ACCESS TO JOURNALS AND LITERATURE

Did you know that the AMEDD Virtual Library grants you access to full text literature? Your level of access is dependent upon the network your computer is associated with. Generally, hospital networks provide the most comprehensive offering of articles for immediate access. However, if your network cannot access the article you are searching for, you will be directed to request the content from the AVL. This typically takes about 48 hours, according to librarians at the Stimson Library in the Medical Center of Excellence. The link to the AVL is always present on the Page 1 “Helpful Links” Sidebar, and it can be found below as well. After navigating to the AVL home page, register for a free OpenAthens account on the menu bar and search the PubMed portal for articles, or find specific journals in the resource section of the home page. Also found on the home page are UpToDate, Lexicomp, and Ovid, among other resources.

<https://medlinet.amedd.army.mil/>

HEALTH PROFESSIONS LOAN REPAYMENT PROGRAM

MILPER MESSAGE 22-479

FISCAL YEAR 2023 ACTIVE-DUTY HEALTH PROFESSIONS LOAN REPAYMENT PROGRAM (ADHPLRP)
ISSUED: [12/7/2022 1:16:54 PM]

The Surgeon General (TSG) has approved the ADHPLRP as a retention initiative to maintain adequate numbers of selected qualified Army Medical Department (AMEDD) commissioned officers on active duty and within the active component. Funding available for FY23, up to \$40,000 (pre-tax) per year in loan repayment funding for qualified educational loans is available for each selected eligible applicant, for a contract period of up to three years.

<https://www.hrc.army.mil/Milper/22-479>