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Introduction

The physician assistant (PA) community and the United States military have deep roots literally back to the founding of the PA profession. On 6 October, the PA community will begin its celebration of National PA week. The Fort Bragg medical community will celebrate as well. This date is significant for two reasons—it is the date three former Vietnam era Navy Corpsman graduated from Duke University’s PA Program, and it represents the birthday of Dr. Eugene Stead, the founder of this prestigious program and the father of the PA profession.

The PA profession traces its past back to an article written in 1961 by Dr. Charles L. Hudson. His work entitled “Expansion of Medical Professional Services with Nonprofessional Personnel” was published in the Journal of The American Medical Association (JAMA). Due to a shortage of physicians and allied health care professionals, Hudson’s vision was to create two new groups of providers to assist doctors in performing supervised primary care support to the public. During the 1961 American Medical Association (AMA) Conference, he described these two groups of providers. He suggested that the first group of individuals who lacked formal medical education would undergo on the job training (like physicians of the past) to serve in medical and surgical inpatient settings along with operating and emergency rooms. The second group was to be called externs. These individuals were to undergo formalized medical training somewhere between that of a technician and a physician. These graduates would work as primary care physician extenders. For this group, he proposed a two-year college program followed by a two-year clinical rotation leading to a Bachelor of Science degree. He stated that these “assistants to doctors” could be employed to handle routine care allowing doctors to handle more complex procedures and care for more patients.

Three physicians took Dr. Hudson’s vision to heart. Dr. Eugene Stead, Jr, at Duke University, Dr. Richard Smith at the University of Washington, and Dr. Hu Myers at Alderson-Broaddus College all bought into the idea of creating a PA program and began to develop curricula to address the national primary care shortage. During the Vietnam Conflict, roughly 30,000 medics were being discharged annually. These individuals had developed exceptional medical skills while serving in the military, but much of their training failed to translate into civilian education or hiring into health care professions. Dr. Stead and Dr. Smith both felt that these former military medics could be trained to fill the primary care void.

In 1965, Dr. Stead was the first to create a PA program. Originally, he hoped to convince the nursing community that his development of a nurse clinician program was a worthy cause. Disillusioned by their rejection of his proposal, he enlisted former Vietnam Navy Corpsmen into his PA program. His idea was to develop a curriculum based on clinical versus didactic training, as this approach would produce results much more quickly. Ultimately, the medical model utilized was similar to the program employed to fast track training of physicians during World War II.

Around the same time, Dr. Smith started his MEDEX (Medicine Extension) model focusing on the development and employment of graduates in medically underserved communities. In 1966, Congress passed the Allied Health Professions Personnel Act (PL-751) which promoted the development of medical programs to train new types of primary care providers. This act was the impetus for the development and funding of increasing numbers of PA programs.

On 6 October 1967, three of the four original Duke students graduated from the PA program—Victor H. Germino, Kenneth F. Ferrell, and Richard J. Scheeele. Due to the fledgling nature of the profession, all three were hired and remained within the Duke University Medical Center. Dr. Hu C. Myers disagreed with the educational philosophy of his counterparts Stead and Smith. Dr. Myers believed that a degree was necessary to confer a sense of professionalism on this new career field. In 1967, he established the first baccalaureate degree producing program at Alderson-Broaddus College. It quickly became clear that the federal government favored degree producing schools so the majority of new programs followed Dr. Myers’ lead. Later, in 1968, Duke hosted the first of four conferences to promote the PA profession, developed and standardized curriculums, and
pushed to enact legislation for PAs. In addition, the American Association of Physician Assistants (AAPA) was founded. Its purpose was to provide a national professional society to represent physician assistants in all areas of practice and to promote the profession.2

In 1969, the MEDEX program was launched with ex-military corpsmen. One year later, Kaiser Permanente became the first HMO to hire PAs. In 1971, the American Medical Association (AMA) passed a resolution to recognize PAs and began to develop national certification standards. In addition, Dr. Marvin Gliedman and Dr. Richard Rosen established the first post graduate residency in Surgery at Montefiore Medical Center, Bronx, NY. Later that year, Congress authorized the Army to train 400 PAs.1

The 1970s

The Air Force created the first military PA program in 1971. The Navy and Army quickly followed suit. In 1973, the first Army PA class graduated and its students became Warrant Officers. Upon assignment, these graduates were designated as battalion surgeons. Through their expertise and proximity to the troops, they earned the designation of "doc."4 Congressional Medal of Honor (MoH) Recipient SFC Louis Rocco was a member of this first class. He earned the MoH while serving in Vietnam. During a helicopter casualty evacuation mission, the Blackhawk Rocco was traveling in was shot down. Despite a broken wrist and hip, and while under heavy enemy fire, he moved several wounded crew members to safety and was credited with saving their lives.5 Unfortunately, in October 2002, CW2 (retired) Louis Rocco succumbed to lung cancer.

In 1975, the Army determined that enough PAs were on active duty and terminated its program. Within 3 years, a shortage ensued, and the Army Surgeon General ordered the program restarted. Due to a lack of funding, the Army contracted with the Air Force and began sending students to Sheppard Air Force Base for training. In September of 1979, the Army resumed its program at Fort Sam Houston, Texas.4

The first PAs to receive baccalaureate degrees graduated from Alderson-Broaddus in 1972. During the same year, the first American Association of Physician Assistants (AAPA) Annual National Conference was held at Sheppard Air Force Base, Texas. Also, the National Commission on Certification of Physician Assistants (NCCPA) was founded. Its purpose was and is to provide certifying examinations.2

Chief Warrant Officer 3 (CW3) Bob Scully was named the first Army PA Consultant to the Surgeon General in 1976. Though one of the first to produce graduates from PA training, the Army would be the last to commission them. Air Force PAs were first commissioned in 1978 and Navy graduates commissioned in 1988.4 In 1979, for the first time PAs were added to the teaching staff of the Army PA Program. Prior to that date, instructors were all physicians.6

In 1976, a group of former Army PAs, stationed at Fort Hood, Texas, started a civilian organization to represent Army PAs. The first recorded meeting for the Society of Army Physician Assistants (SAPA) was held on 24 September, 1976. In 1980, the first SAPA Annual PA Refresher Conference was held in Fayetteville, NC. To this day, the annual conference continues to be held in Fayetteville. The SAPA has an average active membership of around 600.7

The 1980s

Between 1980 and 1981, the Army began its first specialty programs for PAs to include orthopedics, cardiovascular perfusion, emergency medicine, occupational medicine, and aviation medicine.4 Former SFC Donald Hohman graduated from the Army PA Program in 1982. Hohman, then a medic, was taken prisoner during the Iran Hostage Crisis and was released after 444 days. He was credited with providing medical care for his fellow detainees. When released, he was asked what he wanted to
do; he stated go to PA school and then do Phase II training at Fort Carson. He graduated from PA school, and CW2 Hohman retired from the Army after a successful PA career. In 1983, Army PAs first proved their worth during combat operations in support of Operation Urgent Fury. That year, CW2 Gerald T. Mlaker became the first PA to earn The Surgeon General’s Physician Assistant Recognition Award (TSG-PARA) and 33 years later Captain (CPT) Manny Menendez became the latest recipient.

In 1984, a study found that PAs provided care to 79% of patients seen by primary care physicians at half the cost. The Defense Audit Task Force on Non-Physician Health Care Providers recommended to Congress that all military PAs be commissioned Officers. SAPA became critical in lobbying for this commissioning.

In 1984, the Army graduated its first class to earn baccalaureate degrees (a requirement for commissioning) from Oklahoma University. In addition, CW3 Jimmie Keller became the first Army PA assigned to the White House Medical Unit.

In 1987, National PA Day was established and the Journal of the American Academy of Physician Assistants (JAAPA) was founded. In 1988, the Public Health Service commissioned PAs, and to this date is the only organization to promote a PA to the flag officer ranks (Rear Admiral, Michael Milner). A year later, Navy PAs were commissioned.

The 1990s

Despite Congress’ desire to commission Army PAs, it was not until 1990 that a proposal to do so was approved by the Army Chief of Staff. A year later the Defense Authorization Bill included funding for commissioning. This bill authorized the inclusion of Army PAs into the Army Medical Specialist Corps (ASMC) while creating a fourth Assistant Chief of the AMSC to supervise the PA section. In 1991, over 300 PAs saw action in Operations Desert Shield/Storm. A year later, on 4 February 1992, 257 warrant officers were commissioned throughout the globe to the ranks of Second Lieutenant through Major. In addition, the Army integrated PAs into the AMEDD Promotion Plan allowing them to compete for advancement as commissioned officers. Two months later, Major (MAJ) Jimmie E. Keller became the first PA appointed Chief, Physician Assistant Section, Assistant Chief, Army Medical Specialist Corps.

In 1992, PA legend CW3 William “Doc” Donovan earned the Soldiers Medal after saving fellow Rangers from drowning following a helicopter crash. In 1997, Donovan, who served in Vietnam and multiple operations to include Eagle Claw, Urgent Fury, Just Cause, Desert Storm, and Restore Hope, became the first and only PA to be inducted into the U.S. Army Ranger Hall of Fame. Donovan was the senior medic on the ill-fated attempt to rescue the hostages held in Iran. These hostages included future PA Donald Hohman. Today, fellow PA legend and United States Army Special Operations Command (USASOC) Senior PA LTC Earl “Buck” Benson remains the sole active duty PA to have served in Vietnam. Buck has served 8 combat tours to include Vietnam, Desert Storm, Iraqi Freedom, and Enduring Freedom.

In 1993, there were over 26,000 PAs working in 50 states and U.S. territories. MAJ Patrick D. Feely became the first Army PA promoted to Lieutenant Colonel (LTC). A year later, LTC Donald Parsons was selected as the first PA to hold the title of Director, Army PA Program. In 1994, CPT Michael Cavanaugh became the first PA to be selected below zone to Major.

During the early 1990s, the federal government began mandatory cutbacks. These cutbacks led to the combination of the military’s PA programs. In 1995, the Army PA Program was selected as the Interservice PA Program (IPAP) with an effective date of May 1996. Today, this program teaches students from the Air Force, Army, Coast Guard, and Navy. However, the majority of IPAP students are members of the active or reserve Army. Recently, the program has lengthened from 24 to 29 months. Currently, students attend a 16-month didactic phase followed by a 13-month clinical phase at one of the 21 Phase II sites. The IPAP was recently
ranked 13th out of 164 U.S. programs by the U.S. News and World Report.12 The vision of this program is “to be recognized as the world-class leader in Physician Assistant education.”13 Students come from ROTC, service academies, active duty, and reserve forces. About three quarters of the students are men, and the average Soldiers’ time in service (TIS) is three to eight years. Upon graduation from IPAP, students earn their Masters of Physician Assistant Studies (MPAS) from the University of Nebraska Medical Center.11

In 1997, Army PA CPT Steve Salyer became the first military PA to have a medical book published, *The Physician Assistant Emergency Medical Handbook.*6 On 8 July, 1997 a Blackhawk helicopter crashed in a densely wooded area on Fort Bragg. I LT Timothy Alspach was the first Army PA to be killed in a training event.13

Until 1998, PAs were not required to pass the national recertification examination. In 1992, NCCPA certification became a mandatory requirement for commissioning. However, for several years there were PAs who failed to pass the Physician Assistant National Certifying Exam (PANCE). In late 1999, MAJ Dave Kay, Phase 2 coordinator at Fort Hood, was tasked by COL Louis Smith to develop a retraining course for those PAs who had failed the PANCE multiple times. MAJ Kay’s program was approximately four weeks in duration and was held just prior to the PANCE testing. Despite this program, eight of the 12 attendees failed the PANCE. The eight individuals who failed were involuntarily transferred to other branches in the Army, mainly the Medical Service Corps (MSC) to serve out their remaining obligation.

The Beginning of the 21st Century

In 2000, the entire active duty Army PA force became NCCPA certified for the first time. In 2000, Mississippi was the last state to authorize PAs to practice in the state.2 On 1 April 2002, LTC William Tozier became the first active duty PA promoted to Colonel (COL).14

Following 9/11 and the beginning of conflicts in Iraq and Afghanistan, Army PAs found themselves overworked and understaffed. The Army PA became the most deployed AMEDD officer. Today, the Army has 1041 active duty PAs including IPAP students, those retiring, and those attending graduate level education. Collectively, Army PAs have conducted 2,065 combat tours for a total of 8,292 months. Individually, Army PAs averaged 27 months or 2.65 combat tours (MAJ A. Jackson, personal communication, September 18, 2012). It has not been uncommon for a PA to have three or four year long deployments in support of the Global War on Terrorism (GWOT).

In 2002, then MAJ Sherry Womack became the first female to see action with Special Forces troops as noted by Lt. Gen. Francis “Frank” Wiercinski’s official statement “the first woman to accompany the Special Forces in combat.”15 In addition, then CPT Tom Schumacher became the first PA to command at the company level when he took the guidon for Bravo Company, 261st Multifunctional Medical Battalion. Two years later, on 17 May 2002, he passed command to CPT Fred Foltz, the first company level change of command between two Army PAs.35

In 2003, CPT James Rice and fellow PAs developed a rough draft for a predeployment trauma course designed to prepare front line PAs for combat. The Tactical Combat Medical Care (TMC) Course gained the Army Surgeon General’s approval and began in April 2004. The course was developed to teach PAs the techniques required to treat preventable causes of battlefield death. Shortly after its inception, and secondary to the combat medical expertise of the TCMC PA staff, other medical providers began to attend the course. Today, all providers deploying to Role I and II assignments are required to attend the program.16 In June 2004, COL Louis Smith became the first and only PA to attend a resident Senior Service College. He graduated from the National War College and earned a Master’s in Strategic Studies.35

Following the attacks at the World Trade Center and Pentagon, Scott Donoughe was inspired to serve his country. In 2004, he became the first civilian trained PA to join the Army in support of the GWOT, entering service as a second lieutenant.24 In 2004, COL Smith became the first PA selected to command at the LTC/COL level. He commanded the Schweinfurt Army Health Clinic, Schweinfurt, Germany. He later commanded the Rader U.S. Army Health Clinic, Fort Myer, VA.

A year later, CPT Patrick Williams became the first to earn the Silver Star while serving as a PA.17 Currently, there are 26 active duty PAs who have been wounded in action, and 52 have received awards for valor. In 2005, CPT Sean Grimes was the first PA ever killed in combat. On 4 March 2005, his vehicle was hit by an improvised explosive device (IED). Since his death, four other PAs have died while supporting GWOT.18 CPT Anthony R. Garcia died on 17 February 2006 of non-combat
wounds, CPT Kafele Sims died on 16 June 2009 of non-combat related injuries, CPT Cory J. Jenkins died on 25 August 2009 following an IED attack, and CPT Michael P. Cassidy died on 17 June 2010 of non-combat related injuries.19, 20, 21, 36

On 5 June 2005, MAJ Ray Sterling became the 75th Ranger Regiment’s first Senior PA. A year later, he became the first to serve in the Asymmetric Warfare Group (AWG). On April 2006, the family of CPT Sean Grimes started an annual scholarship utilizing part of his life insurance policy. The Captain Sean P. Grimes scholarship awards $6000 annually to a worthy reserve Soldier, active duty service member, or veteran who plans on attending PA school or for a PA to attend graduate school. In 2011, the Captain Sean P. Grimes PA Training Center opened at Blanchfield Army Community Hospital (BACH). According to former Phase II clinical coordinator, COL (retired) Don Black, “This classroom will allow PA students to expand their medical knowledge in a group setting while undergoing their clinical rotations at BACH.” In 2006, CPT John Detro became the first Army PA to earn the Association of Military Surgeons of the United States (AMSUS) Federal PA of the Year Award.22

During the GWOT time frame, LTC Leonard Gruppo, then MAJ and Director of the Army’s Emergency Medicine PA (EMPA) Residency, proposed a doctorate level clinical training program for specialty PAs. The goal was to produce specialty PAs with a substantially higher level of clinical competency to provide increased capability far forward on the battlefield. The EMPA doctoral program started in July 2006 and expanded the previous certificate program from 12 to 18 months. The first class graduated on December 15, 2007. These PAs became the first in the nation to earn a clinical doctorate degree. The graduates included CPT George Barbee, CPT Yvonne Franco, CPT Sharon Rosser, and CPT James Schmid who earned a Doctor of Science in Physician Assistant studies with specialization in Emergency Medicine (DScPA-EM). In addition to that first graduation, as the newly established Director of Postgraduate PA Education, he oversaw the creation of a DScPA in Orthopaedics with MAJ Craig Paige and a new residency in General Surgery with MAJ Patrick Sherman and MAJ Dave Freel; the latter was recently approved for a DScPA.6 Today, Army PA education continues to progress with postgraduate fellowships and other activities on the cutting edge of PA evolution.

Many PAs have set firsts.

I Aug 2008: COL Michael Robertson became the first PA to take command of a Combat Support Hospital.24

September 2008: COL Louis Smith held the highest ranking position of any deployed PA when he became the Deputy Commander, 44th Medical Command.

January 2009: MAJ Sherry Womack became the first female to serve as the XVIII Airborne Corps PA.25

April 2009: LTC (P) John Balser, acting PA Section Chief, Assistant Corps Chief, Army Medical Specialist Corps became the first PA to command a Forward Surgical Team (FST). The 240th FST deployed to Jalalabad, Afghanistan in September 2009.26

29 March 2009: The Army Medical Specialist Corps recognized its first Iron Major recipients. The first two PAs recognized were MAJ James Jones and MAJ David Bauder. These PAs, along with other SP Corps recipients, attended a one week leadership symposium in Washington, DC from 29 March - 2 April. The Iron Major award was started to recognize Majors and Promotable Captains who have displayed outstanding leadership skills, the ability to mentor junior officers, and who can foresee and participate in the future growth and potential of the SP Corps.27

3 April 2010: As pictured to the right, General Stanley McChrystal presented the Silver Star to CPT Chris Cordova, making him only the second
PA to earn this prestigious medal.

May 2010: MAJ Amelia Duran-Stanton became the first PA to win the Army Medical Specialist Corps New Horizon Research Award. The New Horizon Research Award was established in 2007 by the SP Corps Research Committee to develop a perpetual award recognizing outstanding up and coming research SP Corps Officers for their contributions to research and/or clinical investigation as they start their careers as researchers.9

20 July 2010: LTC (P) John E. Balser became the first PA to be sworn in during a combat deployment becoming the 6th Chief, Physician Assistant Section and Assistant Chief of the Army Medical Specialist Corps.26

11 November 2010: MAJ (P) Tom Schumacher took command of the Womack Army Medical Center’s Warrior Transition Brigade (WTB).30 Since then, he has been the first PA selected to command a Multifunctional Medical Battalion, South Korea. He will take command in June 2013. In addition, LTC Schumacher is the first PA to ever be selected double below zone to Major and Lieutenant Colonel.31

8 April 2011: LTC (P) Balser and MAJ John F. Detro became the first two PAs to pass the guidon during a field grade level change of command ceremony that was conducted at Fort Bragg, NC.32

20 June 2011: MAJ Jonathan Saxe, General Surgery Fellow was awarded the inaugural LTG Frank Ledford (former Army Surgeon General) Post-Graduate PA Research Award. This award recognizes research conducted by students who are currently attending or have recently completed graduate school.33

January 2012: MAJ Cleve Sylvester became the first PA to perform duties as the Deputy Chief of Orthopedics, Winn Army Community Hospital, Fort Stewart. He was recently named the 541st FST commander.35

August 2011: LTC Leonard Gruppo became Director of the Fort Bliss Wellness Fusion Campus (WFC). The Campus is the first of its kind in the Army and became the template for other installations. The WFC covers about a square mile on West Fort Bliss and provides a variety of assessments, education, and treatment for Soldiers, Family Members, and Department of the Army Civilians. It spearheads the installation risk reduction, suicide prevention, and resilience campaign efforts by consolidating relevant assets from the major commands of FORSCOM, IMCOM, and MEDCOM as well as consolidating related staff sections including Operations, Research, MRT, PRT, PPPT, ASIST, CSF-PREP, Suicide Prevention, and the CHPO for efficiency and synergy of purpose in an aggressive, programmed, deliberate, accountable, and innovative application of Comprehensive Soldier and Family Fitness.34

July 2012: LTC (P) John Balser graduated from the Non-Resident Army War College, Carlisle Barracks. Currently, no other Army PAs are attending. However, LTC Tom Schumacher has been recently selected to attend the resident course.33

Recently, several PAs have been selected as Clinic Officers in Charge (OIC) to include MAJ Michael Davidson, Troop Medical Clinic (TMC) Korea; MAJ Douglas (Sean) Foster, TMC 10, Fort Campbell; CPT Jody Dunkley, TMC, Fort Sill; MAJ (P) Rob Heath, Robinson Clinic, Fort Bragg; LTC Kohji Kure, Monroe TMC, Fort Hood; and MAJ Erin Stibral, Pope Clinic, Fort Bragg.35

Army PAs filling other key and developmental billets include LTC Richard Ares, Inspector General, Tripler Army Medical Center; MAJ Scott Baumgartner, Aide de Camp to The Surgeon General; MAJ Brian Burke, Joint Readiness Training Center (JRTC) Surgeon; LTC Larry France, National Training Center (NTC) Surgeon; MAJ Chris Georgiana, Executive Officer, Recruiting Command; LTC Karl Kisch, Deputy Department Chief, Clinical Services (DCCS), Bavaria, Germany; MAJ John Knight, Chief of Soldier Health Services, Fort Campbell; LTC Leslie Randolph-Moss, Deputy IG, Pentagon; and LTC Richard Villarreal, Deputy Commander, 10th CSH, Fort Carson.35

Today’s Army PA is not only a clinician but a leader. Army PA are seasoned veterans generally with years of prior service. By drawing on their experiences, PAs can lead in both tactical and clinical settings. They continue to pave the way for the future leaders of the Army PA profession and Army Medical Specialist Corps. Perhaps in the future, a PA will become the Army Medical Specialist Corps Chief. Maybe one day, an Army PA will attain flag officer rank. One thing is for certain, the future of the Army PA is bright and the potential is limitless.
Acknowledgement: This work is dedicated to the pioneers of our profession along with military PAs past, present, and future.

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