59th SURGICAL SPECIALTIES SQUADRONS



MISSION

LINEAGE

859th Surgical Operations Squadron constituted, 5 Mar 1998 Activated, 1 Apr 1998 Redesignated 59th Surgical Specialties Squadron, 31 May 2007

STATIONS

Lackland AFB, TX, 1 Apr 1998

ASSIGNMENTS

59th Surgical Operations (later, 59th Inpatient Operations) Group, 1 Apr 1998

COMMANDERS

HONORS

Service Streamers

None

Campaign Streamers

None

Armed Forces Expeditionary Streamers

None

Decorations

Air Force Outstanding Unit Awards

[1 Apr]-30 Jun 1998

1 Jul 1998-30 Jun 1999

1 Jan 2000-31 Dec 2001

1 Jan 2002-31 Dec 2003

1 Jan-31 Dec 2004

1 Jan 2005-30 Jun 2006

1 Jul 2006-30 Jun 2007

1 Jul 2007-30 Jun 2008

1 Jul 2008-30 Jun 2009

EMBLEM

Approved, 20 Jun 2003

MOTTO

NICKNAME

OPERATIONS

Col Elisha T. Powell IV commanded the 859th Surgical Operations Squadron. He deployed to lead the largest trauma hospital in Iraq in September. During his absence, Lt Col Spencer Frink flawlessly stood in as acting commander. MSgt Kevin Dennis and MSgt Timoteo Cadena provided enlisted leadership for the squadron. The 859th Surgical Operations Squadron's combat medics continued to pave the way in the treatment of combat warriors in support of OIF this year at Balad AB and new deployments to Baghdad, Iraq. Every flight deployed enlisted medics, nurses and surgeons for nearly every AEF to the largest trauma hospital in Iraq.

Ophthalmology Flight: Lt Col Martha Schatz took over as Flight Commander. The flight accomplished 36,370 visits, capturing 97% of the San Antonio market share. The Warfighter Refractive Surgery Center accomplished 10,416 visits and 3,600 state-of-the-art custom refractive surgery procedures. The residency program excelled with the residents' in-service exam scores in the top five percent nationwide. The board certification rate was 100%. Flight personnel supported five humanitarian missions in 2005 - Republic of Georgia, Costa Rica, Peru, Honduras and El Salvador as well as deploying personnel to support OIF.

Plastic Surgery Flight: Maj Earl Ferguson served as Flight Commander. The flight accomplished 1,299 visits and 159 OR procedures. Flight personnel supported one humanitarian mission to Ecuador, performing 36 reconstructive cases. Flight personnel performed combined procedures with general surgery, orthopedics, ENT, oral surgery, ophthalmology, vascular surgery, gynecology and urology.

Ward 7D: Lt Col Glenn Ermer assumed Flight Commander duties for Ward 7D in July. 7D expanded from 42 to 48 staffed beds in the summer of 2005 with the addition of the "H" wing, making it the largest inpatient unit in the AF. It remains the only multi-specialty surgical inpatient unit in the 59th MDW. 7D continued to be the premier training platform for surgical nursing in

the AF; 25 AF nurse transition students were trained in 2005 and staff supported clinical training for hundreds of Phase II and TopSTAR students.

7D continued to meet the challenge of expeditionary and humanitarian medical care deploying 10 nurses and 19 medical technicians to Balad AB in support of OIF over the past year. 7D also sent 3 nurses and 3 medical technicians to support relief efforts in the face of Hurricanes Katrina and Rita. 7D staff were indispensable to airlifting 1,800 critical Hurricane Katrina victims out of the New Orleans area and evacuating 40 bedridden patients from a civilian hospital in Victoria, TX before Hurricane Rita.

Under the guidance of one of the 7D Element Leaders (Maj Cheryl Greentree) 7D was the focal point for a collaboration with the AF Air Warfare Battlelab clinical trial of the vein viewer device. This portable medical device is designed to make: location of intravenous access sites easier and more effective. Another 7D Element Leader, Maj Ken Westenkirchner, led the MDW effort in collaboration with the Tri-Service Product Review Board to trial new hospital beds for purchase by the facility.

7D stood up a new four-bed, step-up unit in November. The step-up unit was designed to relieve the shortage of higher-acuity intensive care beds by accepting patients requiring low risk monitoring, allowing lower acuity patients previously taking an ICU bed to remain in closer observation on the ward. The step-up unit also provided additional benefits as a platform to sharpen the clinical skills of military nurses and medical technicians by caring for patients with a slightly higher acuity.

Orthopedic Surgical Flight: The Orthopedic Surgery Flight consisted of the Orthopedic and Podiatry Clinics, and the Orthotic Laboratory. The Flight Commander was Lt Col Mark Richardson.

Orthopedic Surgery saw 30,000 patient visits and performed 2,000 surgeries. The flight had 12 orthopedic surgeons (with three others in part-time status) covering the entire range of orthopedic subspecialties. There were two podiatrists; two certified orthopedic P.A.s, orthopedic surgical residents in varying stages of training, and five orthopedic P.A.s in training.

The Orthopedic Flight supported nine subspecialties (Sports, Joints, Shoulder Elbow, Foot and Ankle, Tumor Oncology, Hand, Spine, Trauma, and Pediatric). In addition, the Orthopedic Flight had the only physiatrist in the USAF (Dr. Howard Gill).

The Orthotic Laboratory maintained the title of largest orthotic laboratory in the Air Force, building an average of 10,800 orthotic devices. The Orthopedic Clinic continued to push for improvements and the work order was approved for a second digital radiology room to be installed.

One orthopedic surgeon (Dr. Craig Ruder) was sent TDY twice for 10 days in support of The Defense Institute for Medical Research. He went to New Delhi, India and taught a Trauma Surgery Course to India military surgeons, and he went to Napal and taught a First Responders Course to

Napaleze military personnel. Five orthopedic surgeons (Dr. Elisha Powell, Dr. Spencer Frink, Dr. Brian Klatt, Dr. Eric Ritchie, and Dr. Jim Keeney), one orthopedic PA (Capt Duane Heald), and one technician (TSgt Larry Lambert) deployed for 4 1/2 months to Balad AB, Iraq in support of OIF. Dr. Parsons, Dr. Richardson, and SSgt Luis Contreras returned from a four-month deployment to Iraq in January. The deployed orthopedic surgeons performed over 1,500 orthopedic surgical procedures at Balad AB between September 2004 and January 2006.

Otolaryngology Flight: Maj Drew Horlbeck assumed Flight Commander duties in September 2005. Col Joseph Brennan assumed the position of Program Director for the Otolaryngology Residency Program. The flight was the first DoD Otolaryngology Flight to support OIF. Col Brennan with MSgt Kenneth Kasper, Col Joe Wiseman with TSgt Ricardo Santacruz, and Maj Manuel Lopez with MSgt Elijah Anderson and SSgt Cathryn McKenzie were deployed to Balad AB, Iraq.

The Wilford Hall Medical Center Otolaryngology Flight was responsible for a combined 23,000 annual outpatient visits. In August Speech Pathology initiated the first ever training of a clinic fellow. The flight's cochlear implant program was a driving force in developing the future of medicine through a \$8.5M joint research project in telemedicine with the University of Pittsburgh Medical Center and the USAF Surgeon General's Office resulting in a partnership that created the IMITS Program.

We expanded our clinical duties to the Temple Veterans Administration Hospital. The flight continued to support medical readiness exercises, performing four Humanitarian missions to Paraguay, Ecuador, Honduras and Chile in 2005. We continued to run a nationally renowned sleep surgery program as well as the largest cochlear implant program in the DoD. The state-of-the art clinical programs were featured on National Public Radio and Television. The flight began an investigational clinical trial in a fully implantable hearing aid system.

Cardiothoracic Surgery Flight Lt Col Michael Eppinger served as Flight Commander. The flight had 145 total cases, which was outstanding considering the shortages of doctors and support staff due to deployments. Lt Col Eppinger, Col Reed, Maj McNeil, TSgt Voorhies, and SSgt Knapp deployed in support of OEF/OIF in 2005

General Surgery Flight: Lt Col David Smith served as Flight Commander. The General Surgery Flight provided all aspects of surgical care to include general, laparoscopic, bariatric, vascular, colorectal, oncologic, pediatric, trauma, enterostomal and intensive care services. The clinic workload was maintained and 1,867 operative procedures performed although 56% of the staff surgeons deployed during 2005 in support of OIF.

Additionally, as the core of the Level 1 Trauma Center, we cared for 1,046 trauma patients. This continuous real world training translated to excellent combat casualty care at the 332nd EMDG at Balad AB, Iraq. The flight continued its long history of superb trauma education opportunities, holding four Emergency war Courses for 44 students, multiple trauma nursing courses with over 500 participants, and performed international education on trauma and disaster in Honduras, Germany, India, and Sweden. In addition, the trauma team went to Landstuhl Regional Medical

Center and developed a trauma program for the military's largest casualty receiving hospital in Europe.

Neurosurgery: Lt Col Randall McCafferty replaced Maj Gerald Grant as Flight Commander in July. The flight performed all aspects of both cranial and spinal ne6rosurgeifor adult and pediatric patients. The neurosurgeons at Wilford Hall spent the majority of their time managing emergencies and neurotrauma in support of the Level I Trauma Center and GME activities. Three neurosurgeons deployed to the Air Force Theater Hospital in Balad and one neurosurgeon was sent TDY to El Paso for four months.

Urology: Lt Col Duane Cespedes remained the Flight Commander and Lt Col Jay Bishoff remained the Deputy Flight Commander. Col Steven Lynch remained the Residency Program Director. Similar to the majority of clinics within the surgical group, 2005 presented Urology with staffing challenges due to shortages and deployments. Our six-year long urology residency is combined with BAMC and we currently have 16 residents in training.

With 18,000 patient visits, including 7000 clinic procedures and over 1200 operations, the Urology Clinic was one of the busiest clinics in the squadron. The clinic exported its surgical expertise to other medical treatment facilities in the region, including manning assistance to Ft Hood, William Beaumont Army Hospital, Keesler AFB and Elmendorf AFB. In concert with BAMC, we supported two missions to Honduras, performing many operations including kidney stone extractions, prostate operations, kidney removals and urethral reconstructions. Our department spearheaded the effort to modernize the Urology capabilities at Balad AB allowing for deployed members to undergo complex stone and reconstructive procedures in-country, saving countless man-hours and thousands of dollars. These capabilities were not available anywhere else in Iraq or Afghanistan.

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