59th AEROSPACE MEDICINE SQUADRON

LINEAGE

STATIONS
Lackland AFB, TX

ASSIGNMENTS

COMMANDERS
Col Michel L. Bunning

HONORS
Service Streamers
Campaign Streamers
Armed Forces Expeditionary Streamers
Decorations

EMBLEM

EMBLEM SIGNIFICANCE

MOTTO

NICKNAME

OPERATIONS
Optometry Flight: The Optometry Flight entered into an agreement with the Veteran's Administration to open an Optometry Clinic at the new North Central Federal Clinic. This clinic will provide routine and specialized care to both TRICARE Prime enrollees from the 59th MDW and VA patients. The USAF Optometry Residency Program was improved by adding rotations in neuron-ophthalmology, advanced color vision testing, and electrophysiological testing at Armstrong Lab, Brooks City-Base, TX. The flight began the clinical use of AHLTA and led the wing in coding compliance and timeliness. Despite the implementation of a slower coding system, the flight managed to increase patient visit productivity by 4% and exceeded its monthly RVU goal by 70%. These accomplishments allowed appointment access for TRICARE Prime enrollees to be as short as three days. The flight also had two USAF winners for the AFMS annual awards. Lt Col Randall Collins was selected as the 2005 Colonel Floyd M. Morris Award winner as the USAF Optometrist of the Year and Capt Chad Simpson was the 2005 Colonel P. Timothy Ray Award winner as the USAF CGO Optometrist of the Year.
hazard inspections and sampling support to Lackland AFB's child development centers were key to Lackland AFB being awarded the 2005 AETC Child Development Center Program of the Year. Flight occupational and environmental programs were key to a successful 2005 ESOHCAMP inspection and were flawless; the HQ AETC inspection team found zero deficiencies in Bioenvironmental Engineering programs. Optimizing the use of $200K in NBC detection tools, the flight protected Lackland AFB against CBRNE terrorism. The team field tested ridged biological-agent collection techniques for HQ ACC; their expertise and flawless execution was instrumental in the development of new Air Force biological response protocols. Bioenvironmental Engineering's innovative programs optimized health protection for 27K troops and improved the health of the Air Force's largest populated base. Overall, in 2005 the team supported 35K operations with aircraft, executing 15K flying hours with zero serious health issues.

Flight Medicine Flight: The Flight Medicine Flight completed a merger with ASF personnel and ASF mission, facilitating 523 patient movements for OIF/OEF, and other air-evacuation movements. Flight Medicine led the 59th MDW in training, implementation, and comprehensive use of CHCS-11. They also developed a model training program under the new AFI for all WHMC IDMTs in Flight Medicine and Trainee Health, ensuring 100% of all skill levels were ready for deployment.

Public Health Flight: This was the largest such flight in the Air Force with over 77K people served. The Hospital Employee Health Program maintained a compliance rate averaging 98%. The Occupational Health Medical Examination compliance rate averaged 99% with an occupational examination population of more than 1,500 personnel. The flight successfully assisted with deploying over 1,021 medical personnel to OIF with zero theater discrepancies out of 46,945 opportunities for error. The flight reduced the time from deployment return and post-deployment health screening to less than five days for deployment returnees across two wings. The staff maintained close-to-zero basic trainee holdovers on the Guaranteed Training Program and for special duty assignments for administrative purposes, preventing valuable training slots from going vacant. The staff led the continuation of Lackland's Anthrax Vaccine Immunization Program Team to keep anthrax education for required recipients available and current. The staff procured critical deployment medications and vaccinations for over 360 Airmen attending the Basic Combat Convoy Course in support of Army deployments. The flight took Preventive Health Assessment and Individual Medical Readiness reports and briefings to the leadership. Squadron, group, and wing commanders all received group or individual briefings on the base PIMR rate which sustained an above-AF-standard level of readiness for the entire year of 2005.

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Sources