94th AEROMEDICAL EVACUATION SQUADRON

LINEAGE

STATIONS
Dobbins AFB, GA

ASSIGNMENTS

COMMANDERS

HONORS
Service Streamers

Campaign Streamers

Armed Forces Expeditionary Streamers

Decorations

EMBLEM
On a disc Azure, in front of a set of flight wings displayed fesswise Argent, a cross couped Gules, surmounted by a caduceus Or, with a snake of the second wound about the shaft; in chief four White mullets arranged in an arc; in base a stylized aircraft fesswise of the third, all within a narrow border Yellow. Attached above the disc, a Blue scroll edged with a narrow Yellow border and inscribed “FLYING SAMARITAN” in Yellow letters. Attached below the disc, a Blue scroll edged with a narrow Yellow border and inscribed "94TH AEROMED EVAC SQ" in Yellow letters.

EMBLEM SIGNIFICANCE
Ultramarine blue and Air Force yellow are the Air Force colors. Blue alludes to the sky, the primary theater of Air Force operations. Yellow refers to the sun and the excellence required of Air Force personnel. The four stars represent the fourth state admitted to the union and reflect the pride of the unit’s members. The caduceus affixed over a cross (reflecting human welfare and medical help) and centered on flight wings is symbolic of medicine. The stylized aircraft alludes to support of the wing’s flying mission as do the other wings. All elements
support the unit’s motto, “FLYING SAMARITAN,” always ready to render medical attention.

**MOTTO**

**NICKNAME**

**OPERATIONS**

The 94th Aeromedical Evacuation Squadron was selected for the Air Force Outstanding Unit Award for 2005 -- an award of excellence for excellence of service. The 94th AES mission involves the deployment of eight aeromedical evacuation crews, trained and equipped to provide inflight medical care on mission-directed aircraft configured for patient movement. The 94th AES is also capable of deploying an aeromedical evacuation operations team to provide operational and mission support at locations supporting AE operations. The AE operations team oversees the scheduling of air crews and transportation of patients. “Five-man crews consisting of two flight nurses and three medical technicians perform the patient aeromedical mission,” said Col. Evelyn Byars, 94th AES commander. “Other support personnel include health service officers, supply technicians, administrative technicians, training managers, a first sergeant and squadron aviation resource managers.” Unit accomplishments include the display of “exceptional mission readiness capability with a high degree of teamwork deployments in support of Operations Enduring Freedom and the Global War on Terrorism.” “We adopted and committed ourselves to a vision of what we wanted to be,” said Colonel Byars. “Each member is actively engaged in observing and demanding adherence to our roots — the Air Force Core Values. We reorganized and aligned squadron functions to meet aeromedical evacuation’s transitioning mission. We recruited pipeline students, senior NCOs and officers, to enhance our roles and performance capabilities. And we mentored, nurtured, trained extensively and provided recognition for each other.” The 94th AES utilized team activities to build and foster esprit de corps. According to Colonel Byars, the challenging aspect of the career field is the demand of more than one weekend per month and two weeks per year participation. “Our ground support staff’s participation is equally as demanding,” she said. A unit is never great by itself,” said the colonel. “The command support and guidance of the 94th Airlift Wing and 22nd Air Force AE gave us a platform to meet and exceed our Air Force mission. The support of the 700th Airlift Squadron pilots, the life support team, the tent training provided by civil engineering, and the support of retired Col. Lee Hutchinson, the former 94th Operations Group commander contributed to our success.2006

Digressing to a clear Monday morning, as many are rising from bed to rub the crust from their eyes, the six-member crew from the 94th Airlift Aeromedical Evacuation Squadron sat quietly, reading through their flight crew checklist which included patient profiles, crew-member assignments, emergency plans, mock aircraft layouts and other vital information that is kept on their person at all times, said Master Sgt. Shane Grizzle, non-commissioned officer in charge of Aeromedical Evacuation Flight Operations. The routine training mission from Ramstein, Germany to Rota, Spain, a simulated deployment, included two litter patients and one ambulatory patient. The aeromedical evacuation crew is comprised of six members; two flight nurses of whom one is the medical crew director (MCD) and three medical technicians. Lastly, a designated medical clinical coordinator (MCC) controls the required training, said Grizzle. The two-hour training reflects the worldwide missions these highly trained members must conduct.
in real-life. That is, to provide in-flight medical care to patients as they fly them to full-time stabilized care. “Our training missions always have simulated life threatening medical emergencies and simulated in-flight aircraft emergencies,” said Lt. Col. David Rodberg, 94th AES training flight commander. “In turn, we are able to provide outstanding in-flight care to our wounded warriors and return them to safety and to a higher echelon level of care.” As crew members conduct the pre-brief meeting, Senior Airman Dewayne McDaniel, 94th Aeromedical Evacuation Squadron member, is drawn to the door hinges as he listens intently. McDaniel said he has a few more hours of training before he may take part in flying missions, but the last 14 months of his life have been dedicated to training. “I’ve been through all types of training,” said McDaniel. “From three phases of tech school training, flight school, survival, evasion, resistance, escape (SERE training) and the Flight Training Unit located at Pope AFB, but I’m still not fully qualified.” A new member must have a timeline because they’re going to be dedicated to this job for continuous training to be prepared for these types of missions, said Lt. Col. Cynthia Bradford, 94th Aeromedical Chief Flight Nurse. After initial training, these members must continuously conduct monthly training, flying local and cross-country missions to satisfy currency requirements and ensure mission readiness, said Rodberg. “The 94 AES has supported numerous war and peacetime missions,” said Rodberg. “We’ve supported missions in Iraq, Afghanistan, Pakistan and other parts of Asia. In a short notice, we were able to provide crews for humanitarian relief efforts such as hurricanes Ike and Katrina, and spent two weeks evacuating civilian casualties in support of Operation Restore Hope, Haiti.” Even some of our military elite forces are being treated on our missions, said Rodberg. “We have treated many Army Rangers, Navy Seals and numerous other wounded warriors,” Rodberg said. “All of our wounded are able to take a deep breath of relief once we are airborne. The patients become more relaxed. I can literally feel the stress release from their bodies knowing they are going to receive exceptional in-flight care.” Following the two-hour in-flight training, the crew files back into the briefing room, ready to discuss the effectiveness of the training. Although the day’s routine mission did not include the sights and sounds of live human patients, Capt. Jeff Wilson, the mission MCC, said he was pleased with the training conducted in-flight. “In our scenario, we had a male ambulatory patient getting treated for his battle wounds. The patient’s squad member and friend was also wounded and treated for anxiety because he wanted to ensure his friend was not going to die,” said Wilson. “We discussed possible restraints, went over the emergency checklist and covered radio discipline – critical when communicating in a patient or in-flight emergency.” In addition to improving medical response aptitude, the training is beneficial to members because they can become familiarized with all the medical equipment and the contents contained within our medical bags, said Wilson. “It’s always a learning experience,” said Lt. Col. Cynthia Bradford, the mission Medical MCD as she concludes the meeting. “Just follow the regulations – you can never go wrong with what’s written in the regulations.” The crew dismisses. This time, the members are more prepared to respond to any military and humanitarian medical emergencies when needed. 2011

94th Aeromedical Evacuation Squadron is very unique and challenging, it requires a great deal of training and dedication in order to be fully proficient in delivering quality patient care. The mission of the 94th AES is twofold, during peacetime is to train all personnel to achieve a level of proficiency in each assigned AFSC and during wartime is to deploy to transport critically injured patients from the AOR to CONUS to return to home station or support a natural
disaster tasking. It takes approximately two years to train a medical technician. It takes one year to train a flight nurse. Aside from the flyers, support ground and administrative, personnel are assigned to support the launch and recovery of missions. Oftentimes, the ground personnel are assigned to the Aeromedical Evacuation Operations Team (AEOT) and are deployed to a forward location. The team is highly skilled and manages the day to day operations. The AEOT is responsible for scheduling crews and tracking missions, coordinating with the Medical Air Staging Facility (MASF) to prepare patients and provide logistical support to launch and recover missions. The unit can be activated within 72 hours to support natural disaster CONUS and OCONUS or mobilized to support a wartime contingency. Taking care of patients in-flight is very challenging and rewarding. The crew usually is placed on a 12-hour crew rest and alerted to report for duty. The 94th AES crew is universally qualified on C130, KC-135 and C-17 aircrafts. The patient load for each mission ranges from one patient to 50+ patients. Patient acuity varies from a stable ambulatory patient to multiple trauma patients (IED injuries) requiring life support equipment such as ventilators, oxygen and medications to sustain vital signs. The Critical Care Air Transport Team (CCATT) which consists of a critical care doctor, flight nurse and respiratory therapist usually accompanies critically ill patients. The team is highly trained in trauma and emergency care that can render advance lifesaving interventions to an unstable patient. With the advent of CCATT and highly advance resuscitative equipment and medications, a soldier injured in combat including immediate care receive on the ground by Army MTFs, the survival rate is 96%-98%, once transported to higher level of care. Additionally, the flight nurses as well as the medical technicians are highly trained team members who assess and observe changes in patient status. In-flight care is very difficult because patient status can deteriorate quickly due to the effects of altitude. Integral to a successful mission management in-flight is crew resource management among the medical team as well as the front end crew. This process is dynamic and important to utilize. To date since the initial start of the OEF/OIF including three humanitarian relief efforts, the 94th AES have flown approximately 500 combat/peacetime missions and transported over 5,000 patients to home station as well as to higher echelon of care. The men and women of the 94th AES have a unique desire and dedication to serve their country. They are not only highly trained to deliver exceptional in-flight medical and nursing interventions, but are very compassionate and supportive to the injured soldiers. Each member is always ready to volunteer to deploy because they like the experiences and challenges that they encounter. Each member of the 94th AES is committed to the delivery of safe and quality patient care.

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Sources