

Chapter 17

THE ARMY NATIONAL GUARD PHYSICIAN ASSISTANT

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Introduction

The Army National Guard (ARNG) is one component of the total Army, which consists of the active Army, the ARNG, and the Army Reserve. The ARNG is composed primarily of civilians serving their country, state, and community on a part-time basis. The ARNG is responsible for Role 1 and Role 2 care at the battalion level. The physician assistant (PA) is a critical member of the ARNG medical team, accountable for a multitude of missions. This tactical role represents the cornerstone of the care provided by the PA in the ARNG. As a part-time provider, the ARNG PA aids the local community during times of natural disasters, performs counterdrug and border control missions, participates in overseas state partnerships programs, and deploys to support Department of Defense (DOD) missions.

Unit Structure

The ARNG is an operational force that serves as a primary combat reserve of the Army and provides ready units that support global and domestic requirements. Because of this, the ARNG will replace an active Army unit structure in combat, necessitating a unit structure that mirrors the Army. When an ARNG unit deploys, it must be able to operate in the same capacity as its active duty counterparts.

Basic Duty Types

Traditional Guard

The vast majority of ARNG PAs are part-time members who serve one weekend each month and an additional 2 weeks per year (usually during the summer). These traditional ARNG members may also mobilize to support state or federal missions.

Active Guard Reserve

Although ARNG PAs usually support Army health services on a part-time basis, the Active Guard Reserve (AGR) program provides some full-time opportunities as well. The AGR program increases overall readiness in a National Guard force that primarily trains and operates part time. AGR PAs who serve full time enjoy the same benefits and entitlements as active component PAs. This includes an active duty retirement after 20 years of active federal service.

US Code identifies two categories of AGR positions available for ARNG PAs, Title 10 and Title 32.^{1,2} Title 10 AGR PAs work at the federal level in support of the DOD, Department of the Army, National Guard Bureau, and the 54 states, territories, and federal district. Title 10 positions typically necessitate permanent change of station moves to assignment locations within or outside the continental United States (CONUS or OCONUS). The Title 32 AGR PA's duty assignment is linked to a specific state. It is usually a fixed position, but permanent change of station moves within the confines of the state border might be required.²

Career Opportunities

ARNG assignments vary from state to state due to differences in force structure and individual state operating requirements. There are multiple posts and opportunities for the PA (area of concentration 65D) serving in the ARNG. Generally, part-time PAs are assigned to ARNG TOE (table of organization and equipment) units that mirror the TOE structure of the active Army (eg, the composition of a brigade combat team). The following PA positions are examples of the assortment of opportunities that are available to both traditional and AGR PAs.

Brigade or Battalion Physician Assistant

There are numerous ARNG 65D TDA (table of distribution and allowances) positions at joint force headquarters in each state and territory. PAs are responsible for overall medical readiness. The PA participates in all soldier readiness processing and performs statewide periodic health assessments as part of the medical readiness mission. A thorough understanding of DOD health care policy and relevant Army regulations is crucial for the joint force headquarters PA because these positions are primarily engaged in administrative medical duties.

Civil Support Team Physician Assistant

Civil support teams (CSTs) are unique to the ARNG. These rapidly deployable teams support civil authorities in response to chemical, biological, radiological, or nuclear threats or hazards. There are 57 operational National Guard teams spread across the states and territories.

The role of the CST PA extends beyond the clinic to subject matter expertise on biological and chemical weapon exposure treatment. The CST PA provides technical and clinical expertise as the principal medical advisor to the CST commander. The CST PA's primary mission is to respond to and assess suspected chemical, biological, radiological, or nuclear events. The CST PA also advises civilian responders regarding appropriate actions and facilitates requests to expedite the arrival of additional state and federal assets to help save lives, prevent human suffering, and mitigate property damage. Additionally, the CST PA manages the occupational health program for the 22 assigned HAZMAT (hazardous materials) technicians and is responsible for providing emergency medical treatment for CST members during incident responses. CST PAs often speak and instruct at disaster management and preparedness conferences statewide.

Aeromedical Physician Assistant

The ARNG is home to 21 air ambulance companies and 27 Charlie medical companies (housed in a general support aviation battalion), and is responsible for approximately 60% of the Army medevac capability, providing numerous part-time APA opportunities. There are multiple ARNG AGR Aeromedical PA positions across the National

Guard. These positions include Title 32 assignments at the following locations:

- 49th Missile Defense Battalion, at Fort Greely, Alaska;
- Eastern ARNG Aviation Training Site (EAATS) at Fort Indiantown Gap, Pennsylvania;
- High-Altitude ARNG Aviation Training Site (HAATS) at Gypsum, Colorado; and
- Western ARNG Aviation Training Site (WAATS) at Marana, Arizona.

An aeromedical physician assistant (APA) works along with the supervising unit flight surgeon to function as an aviation medicine team. They jointly manage their assigned unit's aviation medicine program to help prevent aviation accidents and ensure that all aircrew members are trained and fit for flying duty.

Deputy State Surgeon

Deputy state surgeons (DSSs) plan, coordinate, direct, and implement the medical readiness programs of the state. They serve as the state surgeon's full time representative to the adjutant general, the chief of staff, and other directorate-level staff elements. They function as a liaison between the state, the National Guard Bureau, and federal organizations concerning matters relevant to medical readiness and medical support missions. Direct responsibilities include command health programs, and medical and dental readiness requirements for mobilization and deployment. Additional DSS duties include operations, medical education, sustainment, clinical proficiency training, credentialing of state health care providers, and the fiscal management of the state's medical readiness funding.

Army Medical Department (AMEDD) branch qualification is required for this position. Medical Service Corps (MS), Medical Specialist Corps (SP), and Nurse Corps (NC) officers frequently compete for the DSS position.

Special Operations Physician Assistant

The ARNG special forces (SF) PA has additional training requirements due to the nature of the mission. They typically go through an extensive, demanding training cycle that meets active duty standards. They train

with their units 3 or 4 days per month, plus an additional 2 to 4 weeks per year. The ARNG special forces group (SFG) headquarters are in Alabama (19th SFG) and Utah (20th SFG). However, company elements are located in Texas, California, Washington, Colorado, Florida, South Carolina, Indiana, Ohio, West Virginia, Maryland, Rhode Island, Mississippi, and Massachusetts.

The missions undertaken by National Guard SF encompass a broad spectrum of capabilities, including unconventional warfare, counterterrorism, foreign internal defense, and special reconnaissance. The Florida element developed a Rapid Impact Assessment Team (RIAT). Their mission is to rapidly mobilize and deploy to a disaster area and, in coordination with local officials, determine and report immediate victim needs (food, water, shelter, medical, and security) following a major or catastrophic disaster. SF soldiers from 3rd Battalion, 20th SFG, make up the RIAT and perform the RIAT missions.

Duty Locations

Each state has its own Guard, as required by the Constitution. No other branch of the military exists by constitutional requirement. In addition to a presence in the 50 states, today's ARNG is based in the District of Columbia and the US territories of Guam, Puerto Rico, and the US Virgin Islands, collectively referred to as the "54." Traditional and Title 32 PA assignments are established throughout the 54 states and territories. The Title 10 PA jobs primarily exist in the national capital region; the regional health commands; US Army Forces Command; and the Medical Center of Excellence, Joint Base San Antonio–Fort Sam Houston, Texas. There are multiple positions in the national capital region, at the Pentagon, the Office of the Surgeon General, and the National Guard Bureau.

PAs considering a transition from active duty to the ARNG and civilian PAs interested in serving with the ARNG should contact the state's Army Medical Department recruiter.

Lessons Learned and Tips for Success

Career development for the ARNG PA is crucial. Professional military education is integral to career progression for the ARNG PA, and completing the appropriate military schools is important to progressing

through the ranks on time.³ Although Intermediate Level Education is not required, it makes officers more competitive for the Department of the Army lieutenant colonel promotion board.^{3,4}

The ARNG PA must be proactive as their own career manager. They must work with their unit S1 (personnel staff officer) to maintain and regularly update their officer record brief. They should also seek educational and career broadening opportunities.

Conclusion

The majority of ARNG PA positions at the brigade level and below emphasize the critical function of PAs in Role 1 and Role 2 missions. ARNG battalion PAs should understand their responsibility in mentoring and training unit combat medics, and recognize their duty as advisors to unit commanders in matters of combat health readiness and preventive care.

Regardless of position, the central task of the ARNG PA is primary medical officer of the state medical command, infantry battalion, or one of the many other combat arms or combat support units. Specialty assignments, with different professional requirements, provide additional opportunities for PAs.

References

1. US Department of the Army. *The Active Guard Reserve Program*. DA; 2017. Army Regulation 135-18.
2. National Guard Bureau. *The Active Guard Reserve (AGR) Program Title 32 Full Time Guard Duty (FTNGD) Management*. NGB; 2015. NGBR 600-5.
3. Jackson A. Career management. In: *US Army Physician Assistant Handbook*. Borden Institute; 2018:Chap 12.
4. US Department of the Army. *Army Medical Department Officer Development and Career Management*. DA; 2007. DA PAM 600-4.