



13 August 2025

Army Medicine Teammates,

This summer has been marked by dynamic transformation as the Army optimizes formations in support of our mission and the Warfighter. As PCS season slows and Families prepare for the upcoming school year, I am excited to share news and updates from across the Army and Army Medicine.

As Command Chief Warrant Officer Deanna Hughes, Command Sergeant Major John Dobbins, and I meet Soldiers across the world, **it is clear our Soldiers and Civilians are agile, adaptive and continuously transforming to deliver Combat Ready Care at the point of need.**

Over the past month:

- Thanks to the swift, skilled, and selfless response by Winn Army Community Hospital staff members on 7 August 2025, five gunshot victims on Fort Stewart received life-saving care.
- Active Duty, National Guard, and Reserve medical units, with Air Force and Navy, came together for Global Medic 25-02 at Fort McCoy, executing the largest Combined, Joint, and Multi-Compo medical exercise in Army Medicine history.
- The Total Force celebrated Army Medicine's 250th Birthday.
- Army took to the field with grit and the warrior spirit at the 15th DoD Warrior Games in Colorado Springs, Colorado, taking home over 180 medals over 9 days of competition.
- We recognized the accomplishments of MG Anthony McQueen as the Deputy Surgeon General, who transitioned from one impactful position to another, leaving the National Capital Region for Fort Sam Houston to take command of the Medical Center of Excellence (MEDCoE).

PHOENIXMed

To accelerate electronic medical documentation at the point of care, Operational Medicine Information Systems-Army (OMIS-A) developed and recently deployed PHOENIXMed on the Army cloud. On 11 August 2025, a 1st Armored Brigade Combat Team, 1st Infantry Division Role 1 battalion aid station in Konotop, Poland successfully documented the first live patient encounter in PHOENIXMed. This product was so intuitive that the clinicians were able to dive right in with several minutes of real-time familiarization. **This application is simple, user friendly, and functional.** This is exactly the type of product we need at the tactical edge: secure, scalable, and built to keep our forces mission ready. I expect Army Medical leaders at all echelons to think agile and deliver true capabilities for the warfighter at the pace of change. Units interested in PHOENIXMed should contact OMIS-A at email: usarmy.detrick.peo-enterprise.list.omis-a-pmo@army.mil.

Army Warrior Leader Certification (AWLC)

Congratulations to the leaders who were selected to compete for BN and BDE command! You may have seen or heard the recent rescinding of the Army Directive on the Command Assessment Program (CAP). The Army remains committed to command certification under a transformed construct. To remain lean, agile, and aligned with readiness and lethality, removing CAP's status as a program of record enables the Army to adapt and improve the program based

on operational requirements. **All candidates for CSL command billets at the LTC, COL, and BDE CSM level must be certified by Army Warrior Leader Certification (AWLC) at Fort Knox.** Officers and senior enlisted leaders selected for AWLC will attend in October and November 2025. The Army will continue to make decisions that strengthen the ability to select leaders best prepared to fight, win, and lead formations on future battlefields.

Cardiogenetics Testing

We don't often associate young, healthy, fit Soldiers as at-risk for heart disease or life-altering cardiac events. Hereditary cardiovascular events can strike at any time, sometimes during rigorous training. The Walter Reed Cardiogenetics Clinic's geneticists and genetic counselors, together with adult and pediatric cardiologists, offer cardiac screening, genetic counseling, genetic testing, and cardiovascular management to reduce sudden cardiac events for those who meet screening criteria. When a Soldier aged 40 or younger passes away from sudden cardiac death, the clinic offers postmortem genetic testing to identify a genetic explanation and reduce mortality in surviving relatives. Units who experience the loss of a teammate due to sudden cardiac death should contact the clinic at email: MiCAP.genetics@usuhs.edu or mark.haigney@usuhs.edu.

Retention


We are very close to reaching retention goals for the Fiscal Year 2026 ETS cohort. The experiences of our teammates are invaluable, and the Army needs their leadership and expertise to shape the future. Whether you are in FORSCOM, USASOC, MEDCOM, ARMEDCOM, National Guard, or other units, I encourage all leaders to **personally engage** Soldiers to thank them for staying on the team as well as learn why they might be considering ETS and what would influence them to re-enlist.

DEOCS

For those in OTSG/MEDCOM, you should have received an email inviting you to take the Defense Organizational Climate Survey (DEOCS). Your voice matters! **The DEOCS is your chance to shape OTSG/MEDCOM's climate.** Honest, anonymous feedback helps leadership identify areas for improvement and build a stronger, more cohesive team. Thank you in advance for taking a few minutes to complete the survey. Your input contributes to a better working environment. Go to SurveysDRC.com/DEOCS to take the DEOCS for OTSG/MEDCOM and use your official email to log in.

Army Medicine is continuously transforming to deliver Combat Ready Care, and I am excited to share this journey with you.

Combat Ready Care... This We'll Defend.


MARY KRUEGER IZAGUIRRE
Lieutenant General, U.S. Army
The Surgeon General and
Commanding General,
U.S. Army Medical Command