CAREER FOCUS

Part 1 - Occupational Medicine & Army Aviation Medicine. The doctors who assess groups as well as individuals

MG Braithwaite, NK Cooper

Introduction

"The primary purpose of a medical assessment of fitness for work is to measure that an individual is fit to perform the task involved effectively and without risk to his own or to others' health and safety * " Does this sound like a PULHHEEMS assessment? Of course it does! So why does the Army need trained professionals in Occupational Medicine over and above the already high standard of Army General Practice?

It is true that the majority of Occupational Medicine in the Army takes place at Primary Health Care and Recruit Selection Centres whenever the medical boarding system is applied. But this means that the practitioner must possess experience and preferably formal training in the subject. More and more Army GPs are finding that studying for the Faculty of Occupational Medicine's Diploma in Occupational Medicine adds considerable benefit to their work. Not only do the finer details of disability assessment and rehabilitation underpin one's professional judgement, when expressed in the findings of a medical board, but the systematic study of toxic and environmental hazards encountered in the workplace also helps the practitioner to provide timely advice to the chain of command. A problem prevented is always better than mere amelioration after the event - and this in turn requires getting out of the surgery and becoming thoroughly familiar with the workplaces throughout the world where soldiers and MOD civilians earn their living.

The GP'S role

The Tri-Service course for the Diploma of Occupational Medicine restarted in 2000 in the form of the well known University of Manchester Distance Learning Course adapted for Service needs. Army doctors wishing to undertake this course require the approval of their Commander Medical or equivalent, and will need to attend a total of two foundation days at the Royal Defence Medical College Gosport to complete the four modules of the course. For some five to six months beforehand, the trainee Diplomat will complete distance learning exercises and assignments with feedback provided by named tutors of the Manchester Department of Occupational Medicine.

Foundation days for the first two modules are held by Manchester University staff in various parts of the country and on different dates, allowing flexibility of attendance for those students based say in Germany, Cyprus or Northern Ireland. A high rate of success in the Faculty examinations has attended those who have completed the course in the past. When armed with the Faculty Diploma the GP is well able to illustrate their advice to Commanders with statistical and graphical data.

Occupational Medical Specialist Roles

These involve duties complementary to Army General Practice and require advanced training. They include:

- Medical selection of Army personnel (usually based at the Army Training and Recruitment Agency [ATRA])
- Occupational aspects of primary care given to soldiers and civilians;
- Medical advice especially preventive advice to Commanders in peace and war;
- Advice on equipment issues - especially NBC and climatic personal protection; Medical investigation of accidents and incidents;
- Research on nutrition, hydration, exercise physiology and training injuries
- Disability assessment especially for medical boards (including medicolegal aspects)

Career path

Potential Specialist Registrars (SpRs) in Occupational Medicine require:

- a. General Practice Vocational Training (GPVT) with or without the Diploma in Occupational Medicine. GPVT is normally required because of the large amount of Primary Care involved. MRCP is, like the Diploma in Occupational Medicine, highly desirable but not essential. Occasional exceptions are made for holders of other postgraduate diplomas e.g. MRCP.
- b. The approval of Consultant Adviser Army Occupational Medicine (CAOM) and AMS MCM Division at Glasgow for SpR training in Occupational Medicine.
- c. Acceptance for a Regular Commission in the Army.

Col MG Braithwaite
OBE FFOM RAMC
Consultant Adviser in
Aviation Medicine
Headquarters Director
Army Aviation,
Middle Wallop,
Hampshire. SO20 8DY.

Lt Col NK Cooper
MFOM RAMC
Army Professor of
Occupational Medicine
DERA CHS,
Farnborough,
Hampshire GU14 0LW

When these are achieved the career path consists of 4 years SpR training to cover :

- d. Acceptance by the Wessex NHS Post Graduate Deanery as an SpR in OM.
- e. A total of 4 years in recognized training posts. Time spent at Staff College (Junior & Higher Divisions) is normally accepted for this purpose.
- f. Passing the Associate of the Faculty of Occupational Medicine (AFOM) examinations. The AFOM is usually attempted either during a 12 month full-time M.Sc. course or after attendance at a 3 month full-time AFOM course. Wherever Service commitments permit, release for either of these courses is preferably around the 2 year SpR point.
- g. Submission of an acceptable dissertation for Membership of the Faculty of Occupational Medicine (MFOM).
- h. Achievement of a certificate of completion of secondary training (CCST) on completion of all the above.

If you have been recommended in your Annual Confidential Report for Staff Training, opportunities exist to attend the Junior Command and Staff Course (JCSC) as a Major for some 5 months - or indeed even the Higher Command and Staff Course (HCSC) for a year. Although nil (or at best minimal) recognition is given for time spent at Staff College to count towards the 4 years as an SpR, staff training is nevertheless essential for many staff consultant posts. It may therefore take 5-6 years or sometimes longer to complete SpR training, particularly if operational postings supervene.

Army Occupational Medicine SpR Posts (non-aviation - see Part 2 for aviation medicine posts)

All are established for a Major, but exceptionally may be occupied by a Lt Col.

- MOD AMD HEALTH, Keogh Barracks - SO2 Occ Med
- HQ LAND Medical Staff Division, Wilton - SO2 Health (requires at least basic staff training)
- HQ 1 (UK) Armoured Division, Herford, Germany - SO2 Prev Med (basic staff training preferred)
- HQ Northern Ireland, Lisburn - SO2 Occ Med (basic staff training preferred)
- HQ ATRA, Upavon - SO2 Occ Med Recruiting Group
- Medical Support Unit, Hereford - RMO to 22 SAS
- Army Reserves Training and Mobilization Centre (RTMC), Chilwell, Nottingham - SMO
- 16 Close Support (CS) Regiment, Colchester - SO2 Occ Med (to be confirmed)
- 7 Bn REME Wattisham - RMO(to be confirmed)

- Defence and Evaluation Research Agency Centre for Human Sciences (DERA CHS) Farnborough, Hants - attached SpRs (mainly participation in research, including medical cover by exception)

Army Occupational Medicine Consultant Posts (non-aviation)

Army Consultant Adviser in Occupational Medicine. The principal adviser in Occupational Medicine to DGAMS ranked Lt Col - Col. At least basic staff training and wide experience in Army OM consultant posts are essential pre-requisites. Often held as a "double-hatted" position by a Commander Medical at a mainland UK Div/Dist.

Army Professor of Occupational Medicine. The lead post for all Occupational Medicine training which involves considerable liaison with both the Faculty of Occupational Medicine and Wessex Deanery (as Deputy Regional Specialty Adviser) and with the RDMC. The holder is often "double-hatted" in a staff or command post.

AMD Health Unit SO1 Occupational Medicine. Responsible for development and promulgation of Army OM policy in conjunction with the Tri-Service OM policy focus at Surgeon General's Department.

SO1 Health, Medical Staff Division, HO LAND. Responsible for promulgating Army OM policy and advising LAND Command formations and units on a wide variety of OM and other clinical (including medico-legal) matters.

SO1 Preventive Medicine, British Forces Germany Health Service (BFGHS), Bielefeld, Germany.

Ditto but for BFG only. Works closely with:

- a. Commander Medical United Kingdom Support Command (Germany) [UKSC(G)], Rheindahlen who is also Deputy Director BFGHS at Wegberg
- b. Director Secondary Health Care Administration Centre, Bielefeld (especially on Standing Medical Board matters)
- c. Director Primary and Community Care at HQ BFGHS Wegberg (especially on Standing Medical Board matters)
- d. Officer Commanding Army School of Health (Germany) [SOH(G)], Sennelager who is a fully qualified Environmental Health Officer (EHO)

Command Adviser in Occupational Medicine, HQ Northern Ireland.

Ditto as for LAND, but for Northern Ireland only.

HQ ATRA Upavon, SO1 Occ Med - OM policy for all Army recruiting and training
DERA CHS Consultant in Occupational

Medicine. A research and development post dealing with exercise physiology and climatic trials, and trials of personal protective equipment. Supervision of Army SpRs attached to DERA CHS.

There are also SpR and Consultant OM staff posts in the Surgeon General's Department. These are competed for on an opportunity basis with candidates from the other 2 Services.

Further Information

If interested in training for the Diploma in Occupational Medicine as a GP, please contact your Commander Medical via the SMO.

If interested in full-time specialist training

to MFOM and Consultancy (and the earlier you express an interest the better), please contact the Consultant Adviser in Army Occupational Medicine (currently Comd Med 4 Div on Aldershot Mil 2042). Generally there is an opportunity for at least one non-aviation SpR per year to commence training.

References

1. *Cox, Edwards, McCallum. Fitness for Work 2nd Edn. RCP OUP 1997 revision.
2. Regulations for the Diploma, Associateship and Membership of the Faculty of Occupational Medicine may be obtained from 6. St Andrew's Place, Regent's Park, London NW1 4LB (Tel. 020-7317-5890/Fax 020-7317-5899.
Website: www.facocmed.ac.uk
e-mail: FOM@facocmed.ac.uk

Part 2 - Army Aviation Medicine -The Flying Doctors

Fancy combining a rewarding career in Army medicine with the excitement of being a helicopter pilot? If so, read on.

Army Aviation Medicine (Avn Med) is a sub-speciality of Army Occupational Medicine (OM). Specialists in Avn Med (SAMs) "dual" train in both OM and Avn Med"

Mission

The mission of Army Aviation Medicine is to enhance the effectiveness of Army Aviation by promoting health and minimising the deleterious physical, psychological and pathological factors associated with aviation.

Roles

The roles are many and varied, and the experience and credibility of SAMs is enhanced by undertaking flying training and a tour as a helicopter pilot. (The reader is referred to The Army Medical Services Magazine, Vol 55, Number 2 -June 1999, page 78 for a SAM's description of the Army pilot's course).

The roles include:

- Medical Selection of Aircrew.
- Primary care of aircrew (and Regimental personnel).
- Occupational Health of Army Aviation Units.
- Medical Advice to Commanders in peace and war.
- A major contribution to flight safety through:
 - a. Aviation Medicine Training of aircrew.
 - b. Advice on equipment issues (e.g. personal clothing and survival equipment).
- Medical investigation of accidents and incidents.
- Aeromedical research.

Career path

The prerequisite qualifications for all potential Specialist Registrars (SpR) are as follows:

- a. GPVT (a Diploma in Occupational Medicine is preferable but not mandatory). You need to be GPVT because of the high content of primary care involved in the sub-speciality.
- b. Approved in turn by CA Avn Med, CAOM and AMS MCM Div to apply for SpR training in Army Avn Med.
- c. Already applied for pilot training. (AGAI 43)
- d. Medically acceptable for pilot training. (see Annex K to AGAI 43)
- e. Attended aptitude tests.
- f. Passed flying grading (preferable but not mandatory).
- g. Accepted for a Regular Commission in the Army.

Once these requirements have been achieved, the career path is likely to consist of the following outline path of flying training and 4 years SpR training:

- a. Six months "SHO" in Avn Med in a supernumerary post attached to either the School of Army Aviation, Middle Wallop or 4 Regiment AAC at Wattisham. (This period is to confirm the suitability of the candidate to practise Army Avn med and also to give the candidate some "exposure" to Avn med before committing a career change). This does not count towards the 4 years of SpR training.
- b. Attend the Army Pilot's course (15-18 months depending on the time of year that the course commences).
- c. Undertake a flying tour as an Army pilot (3-12 months depending on availability).
- d. Be accepted by the Wessex Deanery as an SpR in Occupational Medicine (rather

- like an interview board for a training job in the civilian sector).
- e. Commence SpR training to include the following:
 - (1) 4 years in recognised training posts (see below for available posts).
 - (2) Attend the Diploma in Aviation Medicine course (7 months commencing January). This does count towards the 4 years of SpR training.
 - (3) Sit the Associate of the Faculty of Occupational Medicine (AFOM) exam. This is normally attempted following either an MSc course in Occupational Medicine or attendance on a 3-month AFOM course, and is usually done after approximately 2 years of SpR training. This does count towards the 4 years of SpR training (up to a maximum total of 12 months total academic training).
 - (4) Submit (and have accepted) a dissertation for Membership of the Faculty of Occupational Medicine (MFOM).
 - (5) Receive a certificate of completion of secondary training (CCST) once all the above have been completed.
 - (6) Be approved as a consultant by the Armed Forces Consultant Approval Board.

Should you consider yourself a candidate for staff training (and have been recommended in you Annual Confidential Report), there is an opportunity to attend the Junior Command and Staff course (JCSC) as a Major (or even attend Staff College). This does not count towards the 4 years of SpR training but is necessary if you aspire to one of the staff consultant posts.

If you have done your sums correctly, you will see that the training time from GPVT to Consultant in OM/Avn Med can be as long as 7 years. The sub-speciality is therefore looking for GPVT candidates who are no older than 30 (although this can be extended slightly if we get the "perfect" candidate with the "right stuff.")

The Army Aviation Medicine Posts

A brief description of the established SAM posts is given below.

Regimental Posts

Most of the AAC Regiments have an establishment for a SAM which are all recognised training posts. All are established for a Major, although may exceptionally be occupied by a Lt Col.

1 Regt AAC, Gutersloh, Germany supporting the Utility Regiment equipped solely with Lynx (from late 2000). This post also provides the OM support to the Gutersloh Garrison (Logistics Regiment and workshops, etc).

2 (Training) Regiment AAC, Middle Wallop, supporting the School of Army

Aviation.

3 Regiment AAC, Wattisham supporting one of the Attack Regiments (Apache-equipped from Sep 03).

4 Regiment AAC, Wattisham supporting one of the Attack Regiments (Apache-equipped from Jun 04). Note: it is anticipated that from 2001, this will be a consultant post supervising the SpR in 3 Regt AAC.

9 Regiment AAC, Dishforth supporting one of the Attack Regiments (Apache-equipped from Dec 02).

Other training posts

Defence and Evaluation Research Agency, Centre for Human Sciences (DERA CHS), Farnborough. An opportunity exists to spend about 1 year in a research training post. This may be either in Avn Med or OM.

You could also achieve a period of SpR training in a general OM post (see Part 1).

Consultant Posts

Research posts

DERA CHS Consultant in Avn Med. A research and development post primarily involved in rotary-wing project support and applied and corporate research.

US Army Aeromedical Research Laboratory (USAARL), Fort Rucker, ALABAMA, USA. This is an exchange post with USAARL. Previous research experience is essential (achieved as a minimum by the MFOM dissertation project, but preferably after the DERA CHS post).

Staff Posts

Although these posts do have a degree of clinical involvement, they are primarily staff jobs. SO1 J1 Avn Med, Joint Helicopter Command (JHC), Wilton. A Lt Col staff officer with responsibility for Aviation medicine matters within the command - a tri-service responsibility. Basic staff training is an essential prerequisite.

Consultant Adviser in Aviation Medicine (Army), Middle Wallop. The principal medical adviser to Director Army Aviation. This is the "pinnacle" of Army Avn Med in the rank of Lt Col-Col. Both basic staff training and experience in other Avn med consultant posts are an essential prerequisite.

Occupational Medicine and general AMS Command and Staff Posts. All these posts are available (upon recommendation) to consultants in OM/Avn Med (see Part 1).

Further Information

If you have got this far in the article, your interest has obviously been stimulated! For further information, please contact the Consultant Adviser in Aviation Medicine (Army) or one of the other SAMs (telephone

numbers below). We don't mind how early in your military medical career you express an interest -there is generally an opportunity to accept at least one SpR each year.

Telephone Numbers

Consultant Adviser in Aviation Medicine

(Army): Middle Wallop 4367
SAM 1 Regt AAC Gutersloh 2678
SAM 2 (Trg) Regt AAC Middle Wallop 4224
SAM 3 Regt AAC Wattisham 8276
SAM 4 Regt AAC Wattisham 8276
SAM 9 Regt AAC Dishforth 4601
SO1 Avn Med JHC Salisbury 2552