EARLY APPOINTMENT PROGRAM FOR PHYSICIANS

This instruction outlines requirements for medical/osteopathic students appointed in the Medical Service Corps prior to completing requirements for reappointment in the Medical Corps. This program is also called the Early Commissioning Program for Physicians.

Medical students commissioned in the ANG as Medical Service Corps officers will be provided a paid part-time military medicine clerkship not available at civilian medical schools. The ANG program will offer, to the extent possible in a part-time program, military medicine training for up to four years, which will prepare physicians for peacetime medical operations and wartime and civilian disaster casualty management.

SUMMARY OF CHANGES

This is the initial publication of ANGI 41-102, and replaces ANGR 169-9, 1 Nov 88.

1. References and Abbreviations. See attachment 1.

2. Program Participation:
2.1. While enrolled in an accredited medical or osteopathic school, the participant is awarded a probationary appointment as a second lieutenant in the Air National Guard Medical Service Corps (MSC). Upon graduation, the participant will be re-appointed into the Medical Corps (MC).
2.2. Participation in the program requires two days of inactive training per month and fifteen days of annual training per year. Annual training credit may be granted by the MDS commander for medical school training in direct casualty management or formal Air Force medical courses.

3. Participant Status:
3.1. Appointments are made in the MSC in the grade of second lieutenant.
3.2. Participants are assigned to an ANG medical squadron.
3.3. Reappointment to the MC is contingent on the participant meeting all of the following criteria:
3.3.1. Successful completion of the requirements for the MD/DO degree.
3.3.2. Acceptance into an accredited post-graduate training program.
3.3.3. Agreement (signed) to serve in the ANG as a physician for a period of not less than four years.
3.4. Participants who fail to meet these criteria or are otherwise not qualified will be discharged from the Medical Service Corps. Discharge or separation in accordance with AFI 36-3209, paragraph 2.21, may also be appropriate. If discharge or separation under AFI 36-3209 is not appropriate, participants may access any other AFSC for which they are qualified.

4. Eligibility:
4.1. The Early Appointment Program is available to students enrolled in medical or osteopathic schools approved by HQ USAF/SG (Surgeon General).
4.2. Applicants must meet the eligibility criteria for appointment as an MSC, prescribed in AFI 36-2005, with the exception of the requirement for a degree in business, management, or a related area of study, and the GRE or GMAT requirement.

5. Application Process:
5.1. Information regarding the program and application process may be obtained from any ANG medical unit or recruiting office. Inquiries may also be directed to Directorate of Manpower and Personnel, Medical Recruiting (ANG/MPPRM), 3500 Fetchet Avenue, Andrews AFB MD 20762-5157. (DSN 278-8356 or 1-301-836-8356).
5.2. Applications should be submitted directly to the ANG medical unit concerned. The ANG Regional HP Recruiter is the point of contact (POC) for this program.

6. Selection:
6.1. Selection of participants will be made by the State.
6.2. Application packages will be forwarded to ANG Officer Programs, (ANG/MPPMO) for final

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processing in accordance with NGR (AF) 36-4 and AFI 36-2005.

7. Annual Training (AT) Programs:

7.1. AT programs must offer schedule flexibility to accommodate civilian training rotations. Medical students may use AT to attend formal military medicine courses for which they can receive medical school credit.

7.2. Program participants shall be scheduled to attend the Military Indoctrination for Medical Service Officer (MIMSO) Course (two weeks) upon receiving commission.

7.3. Following completion of the third year of medical or osteopathic training, the participant shall attend the Aerospace Medicine Primary (AMP) course. Although successful completion of the AMP course and an accredited first-year residency (PGY-I) entitle the participant to wear the flight surgeon's wings, aeronautical orders will be issued after re-commissioning in the medical corps and assignment to a RPI-5 billet.

7.4. Annual Training Program:

7.4.1. First Year Med Students:
MIMSO, Maxwell AFB AL

7.4.2. Second Year Med Students:
Joint Medical Readiness Training or overseas Annual Training, or local EMT Course.

7.4.3. Third Year Med Students:
Joint Medical Readiness Training or overseas Annual Training or local EMT Course.

7.4.4. Fourth Year Med Students:
Aerospace Medicine Primary (AMP) Course, Brooks AFB TX (8-week medical school elective).

8. Role of the Medical Student in the ANG Unit (reference AFI 41-115 and AFI 44-102):

8.1. Unit Training Assembly (UTA) clerkship rotations during the first two (pre-clinical) years will be overseen by non-physician professionals (Public Heath Officer, Bioenvironmental Engineer, Dentist, Nursing, Optometry) to provide a broad view of occupational and preventive medicine.

8.2. The third and fourth year clerkship will be overseen by the MDS Chief of Aeromedical Services, to focus on examination and aeromedical disposition, trauma management, public health and occupational medicine. These guidelines and local training rotations shall be provided to the medical student upon commission.

8.3. First and second-year students may be utilized in any non-credentialled capacity directed by the ANG medical unit commander. An MSC officer may function in that capacity under the supervision of the medical unit senior administrative (MSC) officer and direction of a MDS professional (BEE/PH/RN/OD/DDS).

8.4. First, second, and third-year students shall not be granted clinical privileges.

8.4.1. Third-year students may, at the discretion of the attending physician, participate in routine physical evaluations. Any history and physical examination performed by a third-year medical student is for training only and will not be included as an official part of the medical record. The attending physician must observe any third- year student exam and complete the official SF 88 and 93.

8.4.2. Student entries on the SF 600 may not be signed by third-year students. These notes are written in addition to, not in lieu of, required attending physician notes. Student notes will always be countersigned within 24 hours by an attending physician who is responsible for the content of the note.

8.4.3. Medication prescriptions and laboratory orders may not be written by any medical students.

8.5. Fourth-year students may be credentialed to perform history and physical examinations.

8.5.1. Any history and physical examination performed by a fourth-year medical student should be recorded on an SF 88 and 93 and must be countersigned by an attending physician. It becomes a permanent part of the medical record. Completion of any part of the history and physical examination by a medical student does not relieve the attending physician of the responsibility for ensuring that an adequate and accurate history and physical are performed. In support of that fact, an additional note by the attending physician must be entered on the SF 88, block 73, stating that the history and physical are as stated or, if necessary, specifying certain additions or deletions.

8.5.2. Entries on the SF 600 may be written and signed by fourth-year students. These entries are written in addition to, not in lieu of, attending staff entries. Students' notes will always be countersigned by the attending physician who is responsible for the content of the note.

8.5.3. Fourth-year students may, at the discretion of an attending physician, participate in all routine diagnostic evaluations. It is recognized that fourth-year students are capable of more complex involvement than third-year students, but attending physician discretion is still required.

8.6. Program participants are exempt from the requirement to attend the Health Service Administration Course.

9. **Clinical Privileges.** Medical students are not awarded clinical privileges for patient care while on annual training or on active duty status.

10. **Mobilization.** Because medical students are in a pipeline training program, they shall not be involuntarily mobilized for state or federal operations. They may volunteer for brief (less than 30 days) CONUS state or federal disaster relief operations with the written agreement of the medical school training director to provide elective credit for such service.

11. **Rank and Retirement Credit:**
11.1. All medical students are initially commisioned as second lieutenants.
11.2. A medical student is eligible for promotion to first lieutenant after two satisfactory years of service, or at the earliest, in the third year of medical school.
11.3. A medical student with two years of service as 1st lieutenant may, upon graduation, be reappointed as a captain in the Medical Corps. Officers may not be reappointed to MC without prior approval by ANG/MPMO.
11.4. Service points in the Early Commissioning Program as an MSC officer apply toward retirement.

12. **Military Service Obligation.** In accordance with NGR (AF) 36-2, paragraph 1-4k, all officers without prior military service accrue an eight-year military service obligation (MSO).

13. **Incentives:**
13.1. No financial incentives (bonuses) are offered to medical students in this program.
13.2. All medical students shall be given a current copy of the approved Reserve Component Critical Shortage Specialties list, and briefed on current financial incentives available to residents in training by the local base recruiter at initial commissioning.

DONALD W. SHEPPERD
Major General, USAF
Director, Air National Guard

OFFICIAL

DEBORAH GILMORE
Chief
Administrative Services

1 Attachment
References and Abbreviations

REFERENCES AND ABBREVIATIONS,

References:

AFI 36-3209	*Separation Procedures for Air National Guard and Air Force Reserve Members,* Aug 94.
AFI 36-2005	*Appointment in Commissioned Grades and Designation and Assignment in Professonal Categories--Reserve of the Air Force and United States Air Force (Temporary),* Aug 94.
NGR (AF) 36-4	*Federal Recognition of Promotion in the ANG of the US and as a Reserve of the AF below the grade of General Officer,* Feb 92.
AFI 41-115	*Authorized Health Care and Health Care Benefits in the Military Health Services Systems* , (formerly AFR 168-4), Jul 94.
AFI 44-102	*Patient Care and Management of Clinical Services* (formerly AFR 160-12), Jul 94.
NGR (AF) 36-2	*Appointment of Officers in the Air National Guard of the United States and as Reserves of the Air Force,* Aug 92.

Abbreviations:

AFSC	Air Force Specialty Code
ANG	Air National Guard
AMP	Aerospace Medicine Primary
AT	Annual Training
BEE	Bioenvironmental Engineer
CONUS	Continental United States
DDS	Doctor of Dental Surgery
EMT	Emergency Medical Technician
GMAT	Graduate Management Admisssions Test
GRE	Graduate Records Exam
MC	Medical Corps
MDS	Medical Squadrons
MIMSO	Military Indoctrination for Medical Service Officer
MSC	Medical Service Corps
MSO	Medical Service Obligation
OD	Doctor of Optometry
PGY-1	Post Graduate Year - 1
PH	Pharmacist
POC	Point of Contact
RN	Registered Nurse
RPI	Rated Position Indicator
SF	Standard Form
SG	Surgeon General
UTA	Unit Training Assembly