

# **2009 State of the Flight Surgeon Final Report**

**Society of USAF Flight Surgeons**

21 Jun 2009



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# 2009 Annual State of the Flight Surgeon Report

**Introduction:** In May 2003, then Surgeon General of the Air Force, Lieutenant General “Peach” Taylor challenged the Society of United States Air Force Flight Surgeons (SoUSAFFS) to conduct an annual assessment of the “state of the flight surgeon”. This assessment was designed to engage United States Air Force (USAF) flight surgeons, line commanders, and medical group commanders to serve as a frame of reference for senior leaders of the Air Force Medical Service (AFMS).

The survey is set to follow a three year recurring cycle with the surveys recording the input of the flight surgeon, line commander, and medical group commander cohorts. The first survey in 2004 provided a snap shot of the status of flight surgeons from the point of view of the flight surgeons themselves. This was again accomplished in 2006 concurrent with the scheduled line commander survey.

The original survey of flight surgeons in 2004 was determined to be difficult to objectively quantify for analysis during the 2006 survey development and this drove the 2006 survey instrument changes from the short answer methodology of data collection to a discrete categorical method. Based on a SoUSAFFS 2002 survey of its membership, the 2006 survey was designed to “create a robust baseline dataset that could be used for future comparisons” and “be broad enough to assess success of training programs and to assess motivators for flight surgeon retention and growth”( Fisher, 2006). Additions to the 2009 survey include a look at post-Aerospace Medicine Primary (AMP) training to assess the status of training of USAF flight surgeons and the flight surgeons perspective on the efficacy of that training on their performance in the flight surgeon’s professional activities.

**Methods:** The anonymous 2009 State of the Flight Surgeon Survey was designed to provide demographic information of participants and provide feedback from survey participants regarding perceptions of current training, deployment, job, family, and organizational support. The evaluation tool, a sixty-eight question survey, is attached in Appendix A.

The survey was sponsored by the Surgeon General’s Air Staff, on behalf of SoUSAFFS and conducted through a commercial online venture, SurveyMonkey.com, which provides the web based survey application for the collection of data. This survey was conducted in accordance with (IAW) Air Force Instruction (AFI) 36-2601 and was approved with the following USAF survey control number 09-004. Data and information collected did not contain personal identifying information (e.g. name, rank, age, social security number, etc.) allowing an Institutional Review Board (IRB) exemption. The IRB exemption was granted through the Air Force Research Laboratory (AFRL) at Wright-Patterson Air Force Base, Ohio (see appendix D and E). All USAF active duty flight surgeons in an active flight surgeon position were invited to participate in the

survey through electronic mail via their Major Command (MAJCOM) Chiefs of Aerospace Medicine (SGP).

Descriptive statistical analysis of questions targeting flight surgeon training, deployment, job, family, and organizational support satisfaction are reported. Although comparison of 2009 survey data with previous surveys was intended, this was not possible because the previous survey data was not available for analysis. Reporting of data from the Likert scale type questions were based on grouping “strongly agree” with “agree” responses as well as “strongly disagree” with “disagree” responses for the purposes of description.

**Results:**

For figures listed below, the number of respondents and those who skipped the question asked are shown as “skipped question” at the bottom of the figure.

*Demographics*

A representative sample of each Air Force Specialty Code (AFSC) for Air Force flight surgeons was collected and shown in figure 1. These AFSCs include 048G, 048R, and 048A as the major specialty codes for Air Force flight surgeons. The distribution of each AFSC cross-tabulated with the elapsed time since graduation from the AMP course is shown in figure 2. Most (94%) of 048G flight surgeons are less than five years from AMP graduation, see figure 2.

Figure 1: Frequency Distribution of AFSC

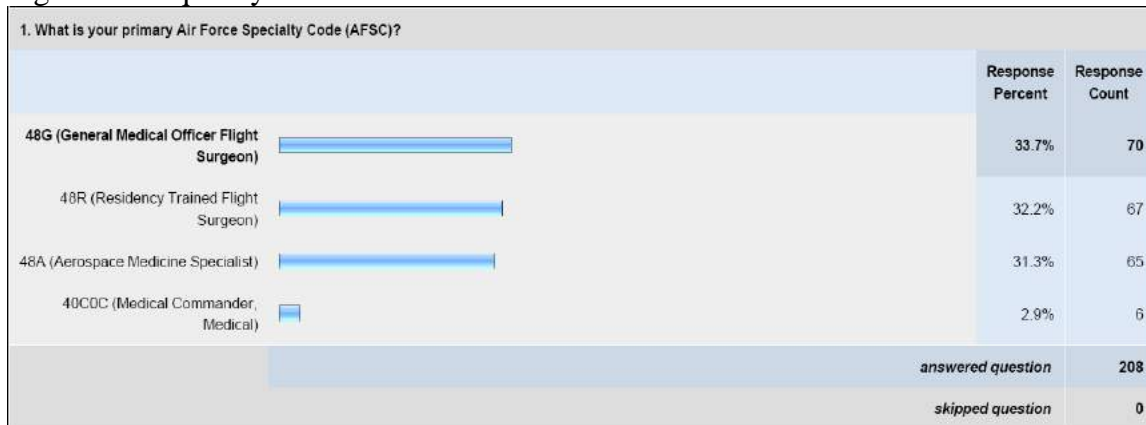




Figure 2: Cross-tabulation of AFSC with Elapsed Time since AMP Graduation

1. What is your primary Air Force Specialty Code (AFSC)?	How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
	<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
48G (General Medical Officer Flight Surgeon)	91.2% (31)	44.7% (34)	6.8% (3)	2.0% (1)	34.0% (69)
48R (Residency Trained Flight Surgeon)	5.9% (2)	40.8% (31)	43.2% (19)	28.6% (14)	32.5% (66)
48A (Aerospace Medicine Specialist)	2.9% (1)	13.2% (10)	47.7% (21)	61.2% (30)	30.5% (62)
40C0C (Medical Commander, Medical)	0.0% (0)	1.3% (1)	2.3% (1)	8.2% (4)	3.0% (6)
<i>answered question</i>	34	76	44	49	203
					<i>skipped question</i> 0

The overwhelming majority of Air Force flight surgeons stated their AFSC matched their currently assigned primary duties as shown in figure 3.

Figure 3: AFSC and Primary Duties Matching

2. Does this AFSC match your primary duties?		Response Percent	Response Count
Yes		90.8%	187
No		9.2%	19
<i>answered question</i>			206
<i>skipped question</i>			2

Distributions of current positions held by the survey respondents are shown in figure 4. Each survey participant chose their current job or position and could choose all that applied. Historical data for the survey participants regarding jobs or positions held are shown in figure 5. Figures 6 and 7 show that 46% of the survey participants have fighter/attack major weapon system experience; and of the 92 participants that responded, 12% graduated from the AMP course less than one year previously, 33% graduated from the AMP course 1-5 years previously, 29% graduated from the AMP course 6-10 years previously, and 26% graduated from the AMP course greater than 6 years previously.

Figure 4: Current Job or Position Held

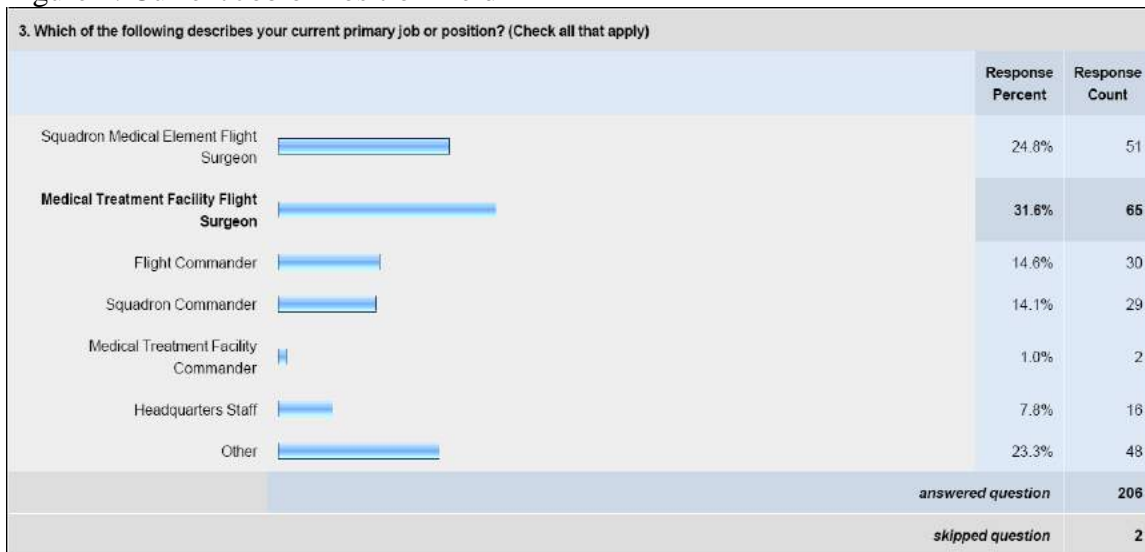


Figure 5: Previously Held Jobs or Positions Held

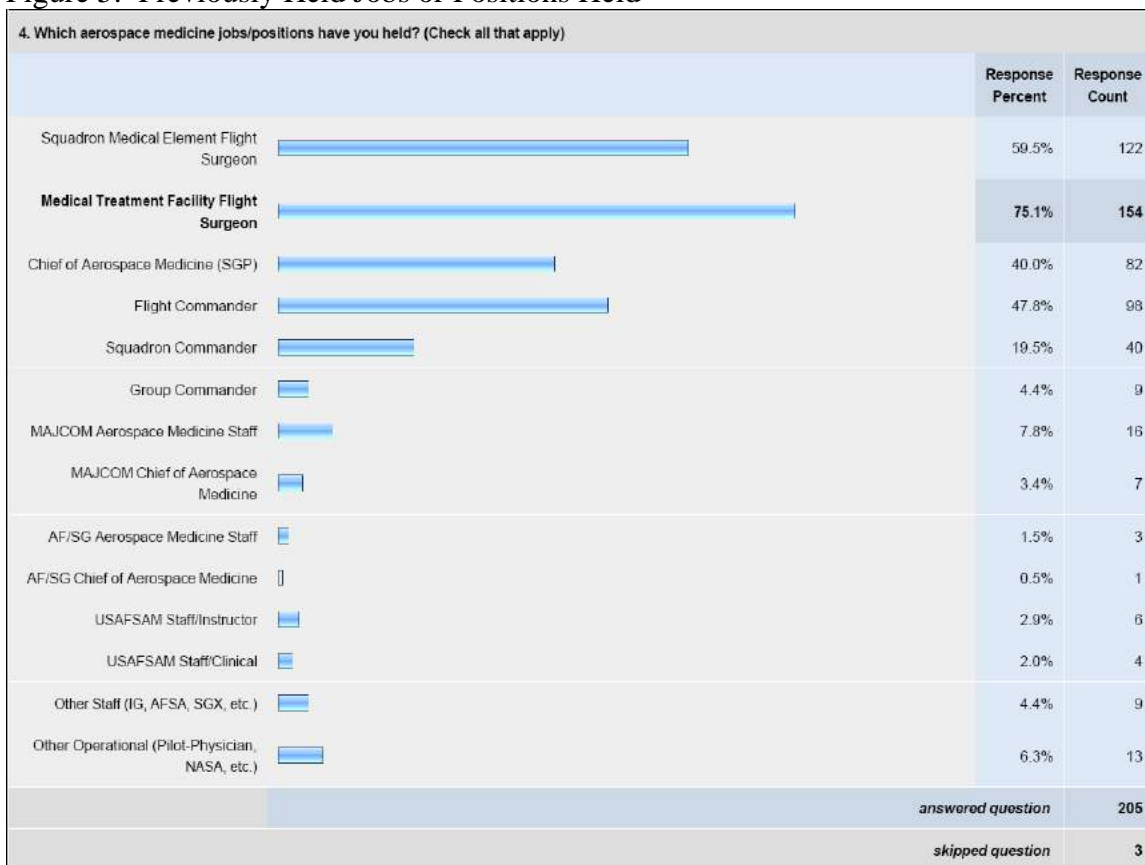


Figure 6: Flight Surgeons with Fighter/Attack Major Weapon System (MWS) Experience

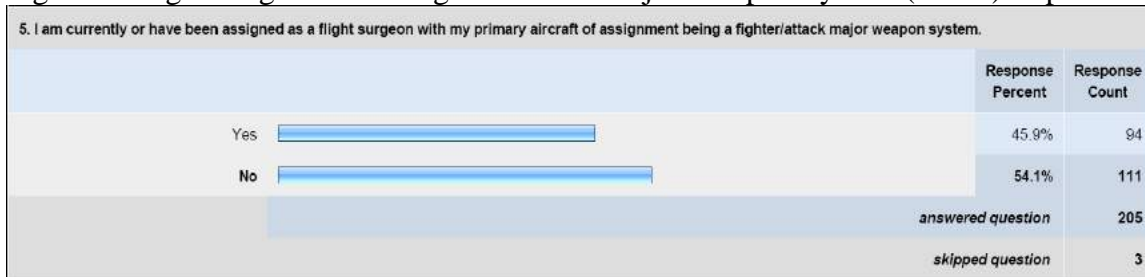
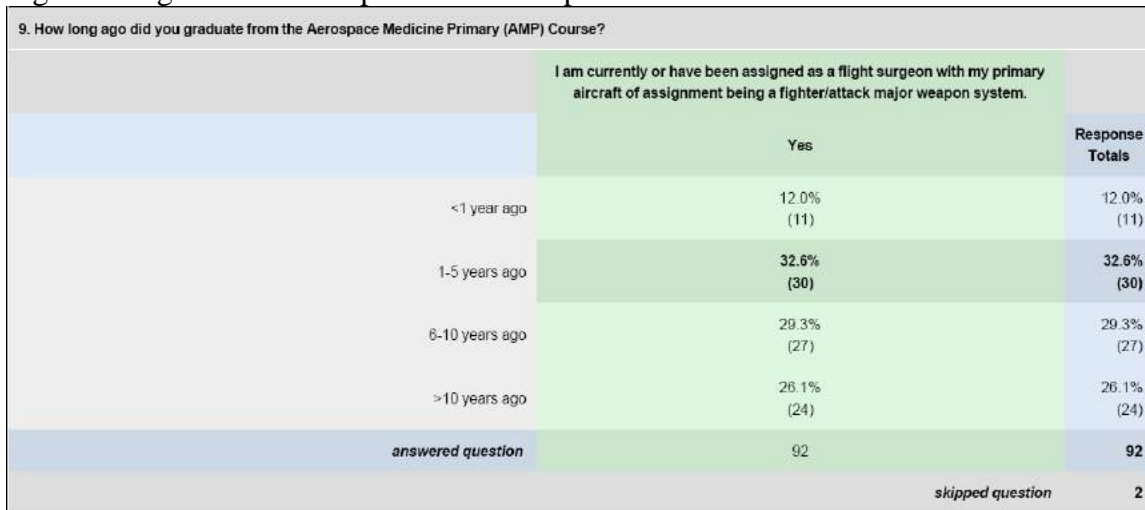


Figure 7: Fighter/Attack Experience vs. Elapsed Time since AMP Graduation



Twenty-six percent of the survey participants were board certified in Aerospace Medicine while more than half of the participants were board certified in a medical specialty.

Figure 8: Flight Surgeons Board Certified in Aerospace Medicine

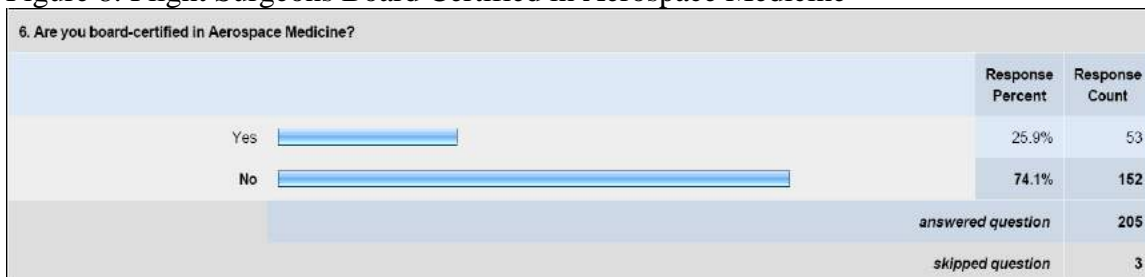
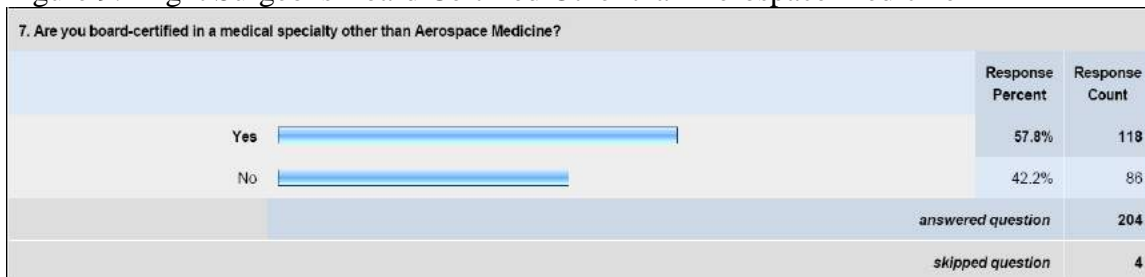
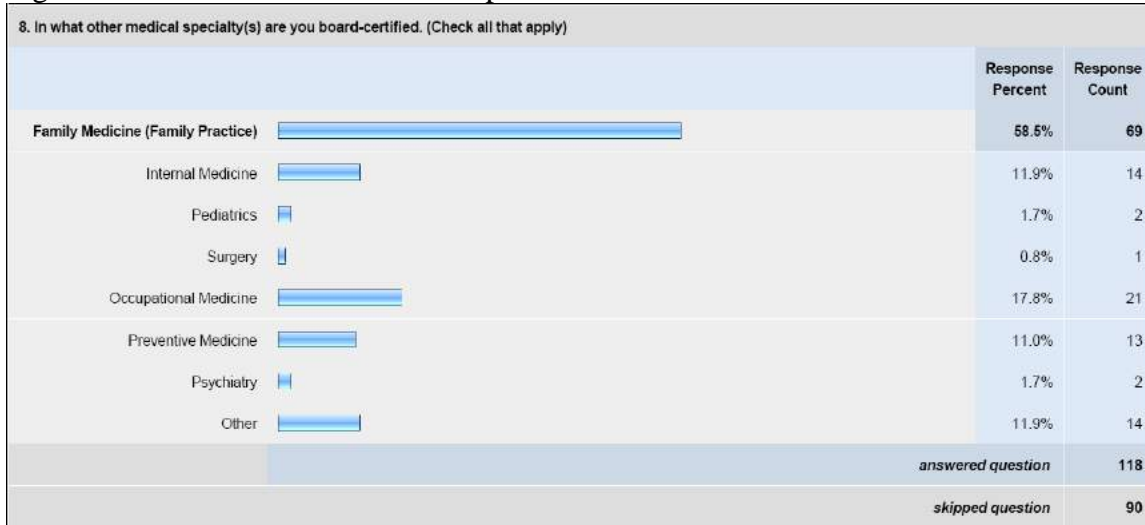


Figure 9: Flight Surgeons Board Certified Other than Aerospace Medicine



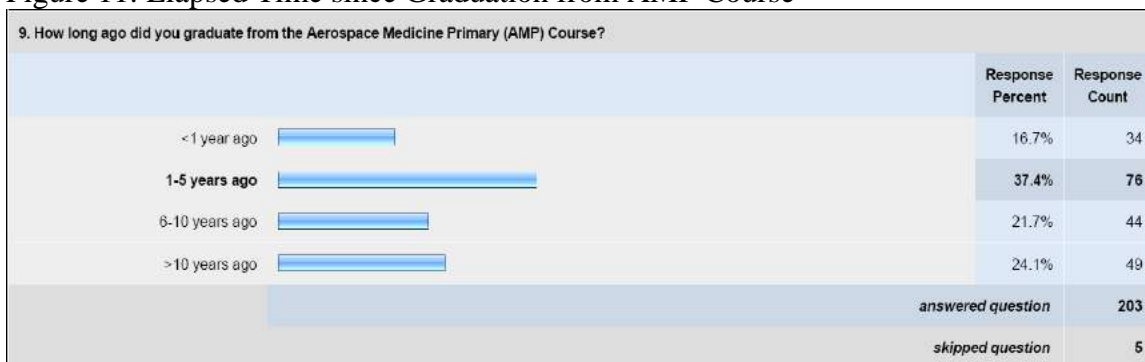
The majority of survey participant’s board certified in a medical specialty other than Aerospace Medicine was board certified in the primary care specialties followed by the preventive medicine medical specialties. This distribution is shown in figure 10.

Figure 10: Distribution of Non-Aerospace Medicine Board Certification



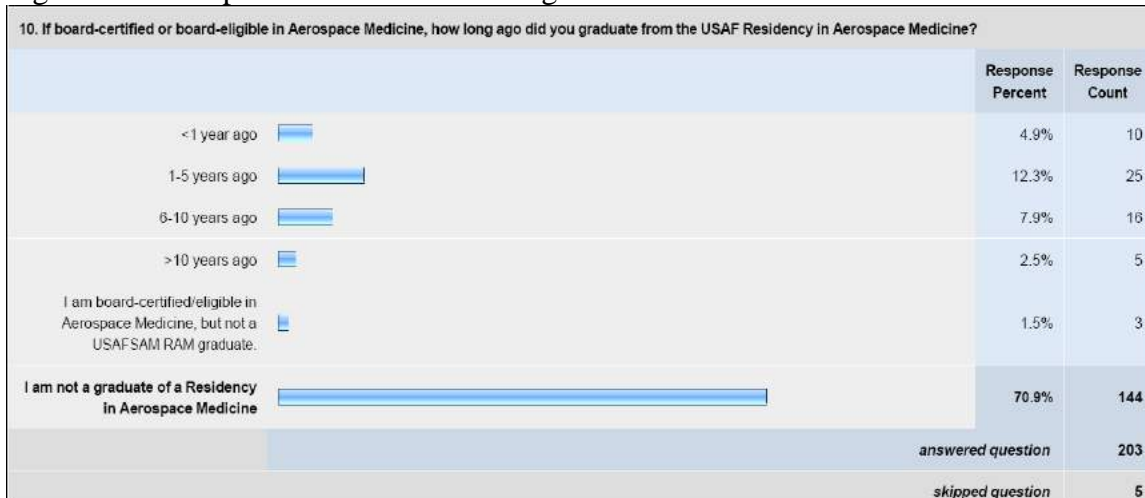
The distribution of elapsed time since graduation from the Aerospace Medicine Primary Course is shown in figure 11. This distribution was relatively equal among the time stratification since AMP graduation.

Figure 11: Elapsed Time since Graduation from AMP Course



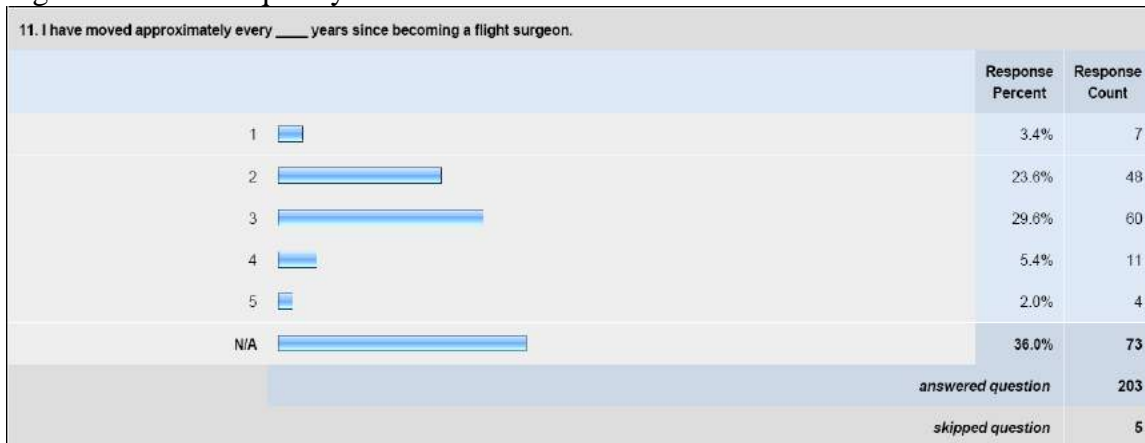
Most survey participants were not graduates of a Residency in Aerospace Medicine (71%), however, the majority of those aerospace medicine residency graduates completed their residency training in the past ten years. Ninety-five percent of the survey participants who are graduates of a residency in aerospace medicine completed their training in the USAF Residency in Aerospace Medicine (RAM). This distribution is shown in figure 12.

Figure 12: Aerospace Medicine Board Eligible/Certified Time since AMP Graduation



Although most survey participants report a permanent change of station (PCS) frequency of every 2-3 years, the majority of flight surgeons who graduated less than five years ago from the AMP course have not had a PCS and likely reflects changes in Air Force PCS policy changes within the last three-four years requiring longer on-station-time before becoming PCS eligible.

Figure 13: PCS Frequency



Those survey participants whom reported an elapsed time since AMP graduation of more than five years tend to have PCS frequency of every 2-3 years.



Figure 14: PCS Frequency vs. Elapsed Time since AMP Course Graduation

11. I have moved approximately every ___ years since becoming a flight surgeon.						
How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?						
	<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	Response Totals	
1	11.8% (4)	3.9% (3)	0.0% (0)	0.0% (0)	3.4% (7)	
2	0.0% (0)	25.0% (19)	38.6% (17)	24.5% (12)	23.6% (48)	
3	0.0% (0)	10.5% (8)	<b>47.7% (21)</b>	<b>63.3% (31)</b>	29.6% (60)	
4	0.0% (0)	7.9% (6)	6.8% (3)	4.1% (2)	5.4% (11)	
5	0.0% (0)	0.0% (0)	2.3% (1)	6.1% (3)	2.0% (4)	
N/A	<b>88.2% (30)</b>	<b>52.6% (40)</b>	4.5% (2)	2.0% (1)	<b>36.0% (73)</b>	
<i>answered question</i>		34	76	44	49	<b>203</b>
<i>skipped question</i>					<b>0</b>	

Questions 12 through 35 focuses on flight surgeon training and the results are shown below.

*Training*

While the majority (61%) of survey participants felt the AMP course prepared them well for flight surgeon duties, 17% did not feel well prepared by the AMP course. Six percent of participants who graduated from the AMP Course less than one year ago and eight percent of participants whom graduated from the AMP course between one-five years ago reported the AMP coursed did not prepare them well for duties as a flight surgeon.

Figure 15: AMP Course Preparation

12. The Aerospace Medicine Primary (AMP) Course prepared me well for my duties as a flight surgeon.							
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Rating Average	Response Count
Choose one	2.5% (5)	<b>58.1% (118)</b>	22.2% (45)	15.3% (31)	2.0% (4)	3.44	203
<i>answered question</i>							<b>203</b>
<i>skipped question</i>							<b>5</b>

Post-AMP sustainment/refresher training was reported not available or adequate by 20% of the survey participants as shown in figures 17-20.

Figure 16: AMP Course Preparation vs. Elapsed Time since AMP Course Graduation

12. The Aerospace Medicine Primary (AMP) Course prepared me well for my duties as a flight surgeon.		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
Choose one		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
Strongly Agree		0.0% (0)	1.3% (1)	2.3% (1)	6.1% (3)	
Agree		50.0% (17)	56.6% (43)	59.1% (26)	65.3% (32)	
Neutral		14.7% (5)	21.1% (16)	27.3% (12)	24.5% (12)	
Disagree		35.3% (12)	17.1% (13)	11.4% (5)	2.0% (1)	
Strongly Disagree		0.0% (0)	3.9% (3)	0.0% (0)	2.0% (1)	
rating average		3.15 (34)	3.34 (76)	3.52 (44)	3.71 (49)	3.44 (203)
answered question		34	76	44	49	203
skipped question						0

Figure 17: Sustainment/Refresher Training is Available

13. Sustainment and refresher training is available after the Aerospace Medicine Primary (AMP) Course to maintain the skills I need to perform my duties.		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Rating Average	Response Count
Choose one		6.4% (13)	48.8% (99)	23.6% (48)	19.2% (39)	2.0% (4)	3.38	203
answered question								203
skipped question								5

Figure 18: Sustainment/Refresher Training is Available vs. Time since AMP Graduation

13. Sustainment and refresher training is available after the Aerospace Medicine Primary (AMP) Course to maintain the skills I need to perform my duties.		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
Choose one		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
Strongly Agree		0.0% (0)	3.9% (3)	9.1% (4)	12.2% (6)	
Agree		32.4% (11)	44.7% (34)	56.8% (26)	59.2% (29)	
Neutral		47.1% (16)	23.7% (18)	18.2% (8)	12.2% (6)	
Disagree		20.6% (7)	23.7% (18)	15.9% (7)	14.3% (7)	
Strongly Disagree		0.0% (0)	3.9% (3)	0.0% (0)	2.0% (1)	
rating average		3.12 (34)	3.21 (76)	3.59 (44)	3.65 (49)	3.38 (203)
answered question		34	76	44	49	203
skipped question						0

Figure 19: Sustainment/Refresher Training is Adequate

14. Sustainment and refresher training is adequate after the Aerospace Medicine Primary (AMP) Course to maintain the skills I need to perform my duties.							
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Rating Average	Response Count
Choose one	4.4% (9)	<b>39.9% (81)</b>	38.0% (73)	18.7% (38)	1.0% (2)	3.28	203
<i>answered question</i>							203
<i>skipped question</i>							5

Figure 20: Sustainment/Refresher Training is Adequate vs. Time since AMP Graduation

14. Sustainment and refresher training is adequate after the Aerospace Medicine Primary (AMP) Course to maintain the skills I need to perform my duties.						
		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
Choose one		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
Strongly Agree		0.0% (0)	3.9% (3)	4.5% (2)	9.2% (4)	3.28 (203)
Agree		20.6% (7)	<b>39.6% (30)</b>	<b>45.5% (20)</b>	<b>49.0% (24)</b>	
Neutral		<b>61.8% (21)</b>	30.3% (23)	36.4% (16)	26.5% (13)	
Disagree		17.6% (6)	25.0% (19)	13.6% (6)	14.3% (7)	
Strongly Disagree		0.0% (0)	1.3% (1)	0.0% (0)	2.0% (1)	
rating average		3.03 (34)	3.20 (76)	3.41 (44)	3.47 (49)	
<i>answered question</i>		34	76	44	49	203
<i>skipped question</i>						0

Two-thirds of the USAF RAM survey participants felt the USAF RAM prepared them well for the duties of an Aerospace Medicine Specialist.

Figure 21: USAF RAM Preparation

15. The USAF Residency in Aerospace Medicine prepared me well for my duties as an Aerospace Medicine Specialist.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	6.9% (14)	15.3% (31)	4.9% (10)	5.9% (12)	0.5% (1)	<b>66.6% (135)</b>	3.66	203
<i>answered question</i>								203
<i>skipped question</i>								5

Survey participants reported attendance and benefit of post-AMP training courses as shown in figures 22-52.

Figure 22: Advanced Trauma Life Support (ATLS) Course Attendance

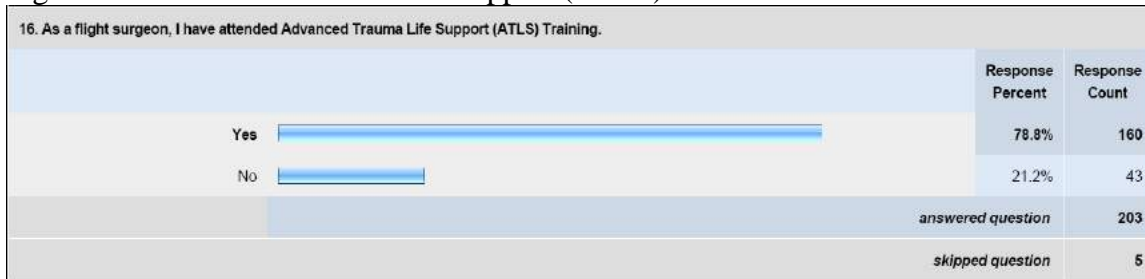


Figure 23: ATLS Attendance vs. Elapsed Time since AMP Graduation



Figure 24: ATLS Preparation for Flight Surgeon Duties

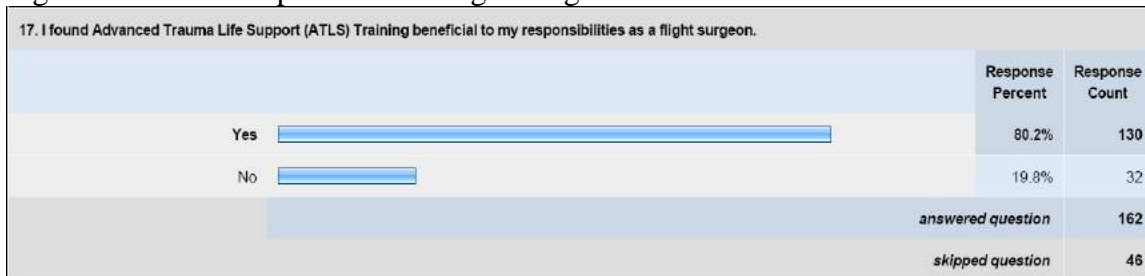


Figure 25: Aircraft Mishap, Investigation, and Prevention (AMIP) Course Attendance

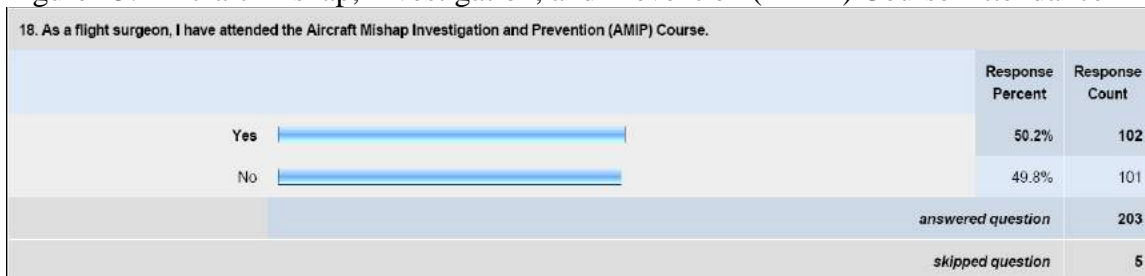


Figure 26: AMIP Attendance vs. Elapsed Time since AMP Graduation

18. As a flight surgeon, I have attended the Aircraft Mishap Investigation and Prevention (AMIP) Course.		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
Yes		11.8% (4)	42.1% (32)	65.9% (29)	75.5% (37)	50.2% (102)
No		88.2% (30)	57.9% (44)	34.1% (15)	24.5% (12)	49.8% (101)
<i>answered question</i>		34	76	44	49	203
<i>skipped question</i>						0

Figure 27: AMIP Preparation for Flight Surgeon Duties



19. I found the Aircraft Mishap Investigation and Prevention (AMIP) Course beneficial to my responsibilities as a flight surgeon.		Response Percent	Response Count
Yes		96.1%	98
No		3.9%	4
<i>answered question</i>			102
<i>skipped question</i>			106

Figure 28: Global Medicine Course Attendance



20. As a flight Surgeon, I have attended the Global Medicine Course.		Response Percent	Response Count
Yes		55.2%	112
No		44.8%	91
<i>answered question</i>			203
<i>skipped question</i>			5

Figure 29: Global Medicine Course Attendance vs. Elapsed Time since AMP Graduation

20. As a flight Surgeon, I have attended the Global Medicine Course.		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
Yes		23.5% (8)	44.7% (34)	68.2% (30)	81.6% (40)	55.2% (112)
No		76.5% (26)	55.3% (42)	31.8% (14)	18.4% (9)	44.8% (91)
<i>answered question</i>		34	76	44	49	203
<i>skipped question</i>						0

Figure 30: Global Medicine Course Preparation for Flight Surgeon Duties

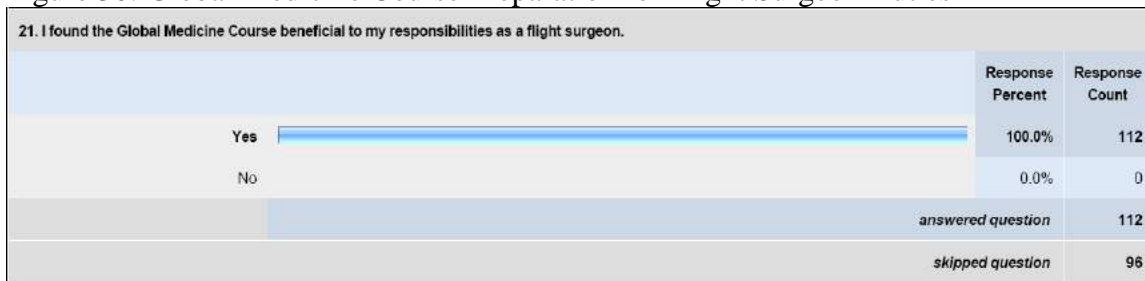


Figure 31: Advanced Clinical Concepts in Aeromedical Evacuation (ACCAE) Course Attendance

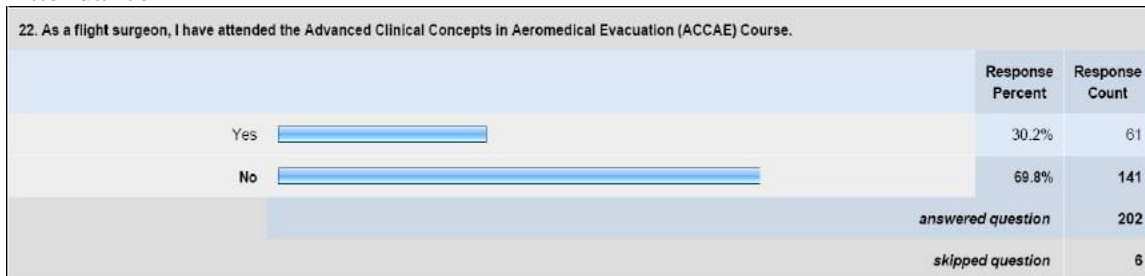


Figure 32: ACCAE Course Attendance vs. Elapsed Time since AMP Graduation

22. As a flight surgeon, I have attended the Advanced Clinical Concepts in Aeromedical Evacuation (ACCAE) Course.						
		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				
		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	Response Totals
Yes		0.0% (0)	21.1% (16)	55.8% (24)	42.9% (21)	30.2% (61)
No		100.0% (34)	78.9% (80)	44.2% (19)	57.1% (28)	69.8% (141)
<i>answered question</i>		34	76	43	49	202
<i>skipped question</i>						1

Figure 33: ACCAE Course Preparation for Flight Surgeon Duties

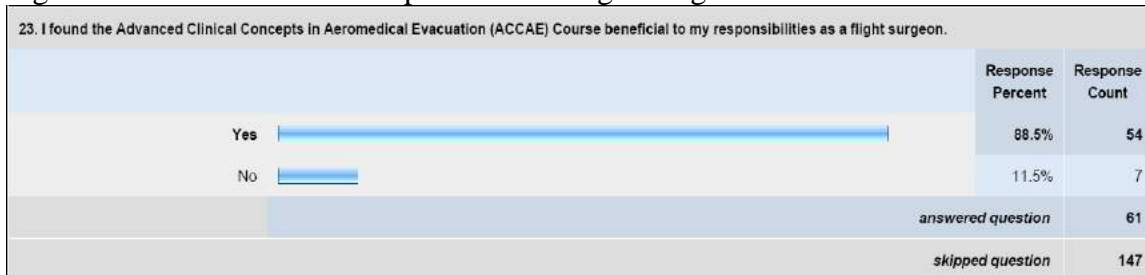


Figure 34: Contingency Preventive Medicine (CPM) Course Attendance

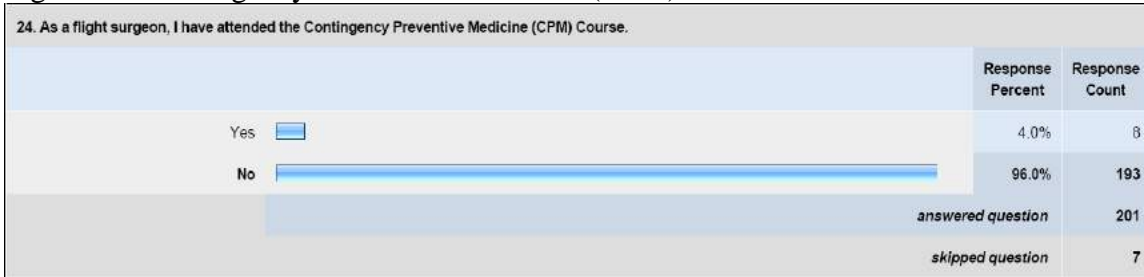


Figure 35: CPM Course Attendance vs. Elapsed Time since AMP Graduation

24. As a flight surgeon, I have attended the Contingency Preventive Medicine (CPM) Course.		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				
		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	Response Totals
Yes		0.0% (0)	1.3% (1)	14.0% (6)	2.1% (1)	4.0% (8)
No		100.0% (34)	98.7% (75)	86.0% (37)	97.9% (47)	96.0% (193)
<b>answered question</b>		<b>34</b>	<b>76</b>	<b>43</b>	<b>48</b>	<b>201</b>
<b>skipped question</b>						<b>2</b>

Figure 36: CPM Course Preparation for Flight Surgeon Duties

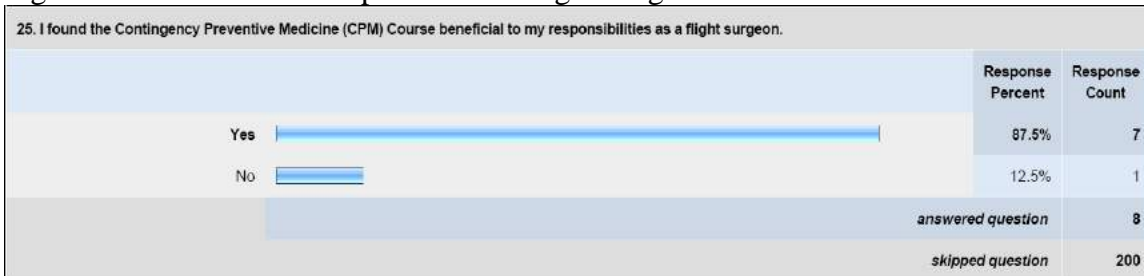


Figure 37: Occupational Medicine Course Attendance

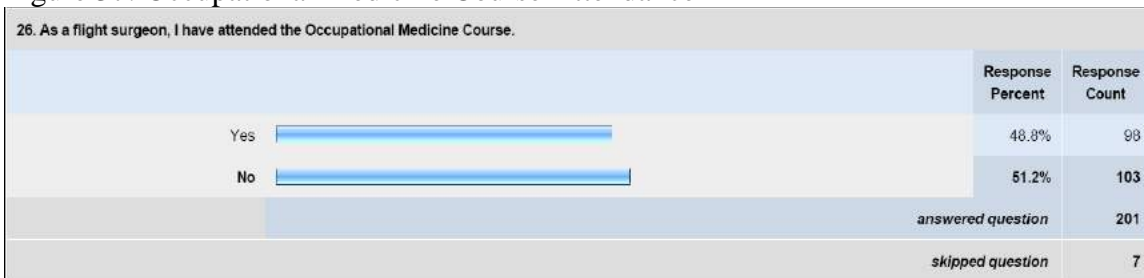




Figure 38: Occupational Medicine Course Attendance vs. Time since AMP Graduation

26. As a flight surgeon, I have attended the Occupational Medicine Course.		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
Yes		23.5% (8)	38.2% (29)	62.8% (27)	70.8% (34)	48.8% (98)
No		76.5% (26)	61.8% (47)	37.2% (16)	29.2% (14)	51.2% (103)
<i>answered question</i>		34	76	43	48	201
<i>skipped question</i>						2

Figure 39: Occupational Medicine Course Preparation for Flight Surgeon Duties



27. I found the Occupational Medicine Course beneficial to my responsibilities as a flight surgeon.		Response Percent	Response Count
Yes		92.9%	91
No		7.1%	7
<i>answered question</i>			98
<i>skipped question</i>			110

Figure 40: Human Performance Enhancement (HPE) Course Attendance


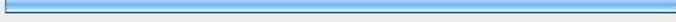
28. As a flight surgeon, I have attended the Human Performance Enhancement (HPE) Course.		Response Percent	Response Count
Yes		2.5%	5
No		97.5%	196
<i>answered question</i>			201
<i>skipped question</i>			7

Figure 41: HPE Course Attendance vs. Elapsed Time since AMP Graduation

28. As a flight surgeon, I have attended the Human Performance Enhancement (HPE) Course.		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
Yes		0.0% (0)	0.0% (0)	7.0% (3)	4.2% (2)	2.5% (5)
No		100.0% (34)	100.0% (76)	93.0% (40)	96.8% (46)	97.5% (196)
<i>answered question</i>		34	76	43	48	201
<i>skipped question</i>						2



Figure 42: HPE Course Preparation for Flight Surgeon Duties


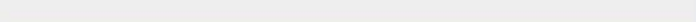
29. I found the Human Performance Enhancement (HPE) Course beneficial to my responsibilities as a flight surgeon.			Response Percent	Response Count
Yes			100.0%	5
No			0.0%	0
<b>answered question</b>				<b>5</b>
<b>skipped question</b>				<b>203</b>

Figure 43: Critical Care Air Transport Team (CCATT) Course Attendance



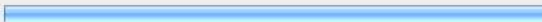

30. As a flight surgeon, I have attended the Critical Care Air Transport Team (CCATT) Course.			Response Percent	Response Count
Yes			13.9%	28
No			86.1%	173
<b>answered question</b>				<b>201</b>
<b>skipped question</b>				<b>7</b>

Figure 44: CCATT Course vs. Elapsed Time since AMP Graduation

30. As a flight surgeon, I have attended the Critical Care Air Transport Team (CCATT) Course.						
		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				
		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	Response Totals
Yes		0.0% (0)	13.2% (10)	11.6% (5)	27.1% (13)	13.9% (28)
No		100.0% (34)	86.8% (66)	88.4% (38)	72.9% (35)	86.1% (173)
<b>answered question</b>		<b>34</b>	<b>76</b>	<b>43</b>	<b>48</b>	<b>201</b>
<b>skipped question</b>						<b>2</b>

Figure 45: CCATT Course Preparation for Flight Surgeon Duties

31. I found the Critical Care Air Transport Team (CCATT) Course beneficial to my responsibilities as a flight surgeon.			Response Percent	Response Count
Yes			78.6%	22
No			21.4%	6
<b>answered question</b>				<b>28</b>
<b>skipped question</b>				<b>180</b>

For the 94 (46%) survey participants that have had fighter/attack major weapon system experience, 23% were 048G flight surgeons, 33% were 048R flight surgeons, and 40% were 048A flight surgeons. Of those 048G flight surgeon participants who have fighter/attack experience, 31% have been to the Top Knife course; 47% of 048Rs and 60% of 048As with fighter/attack experience have attended Top Knife.

Figure 46: Top Knife Attendance

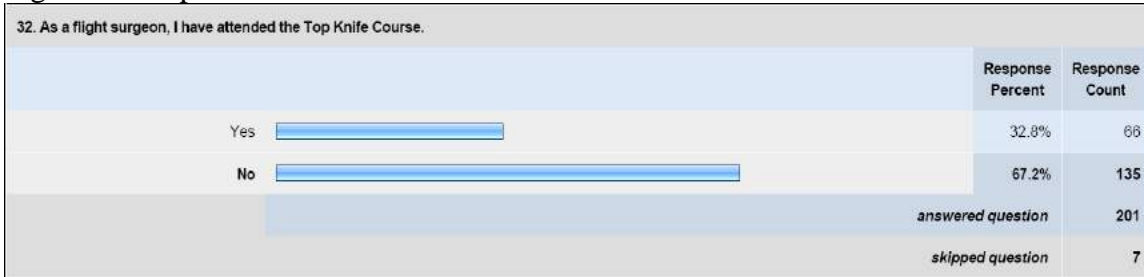


Figure 47: Fighter/Attack Experience Distribution among Flight Surgeon AFSCs

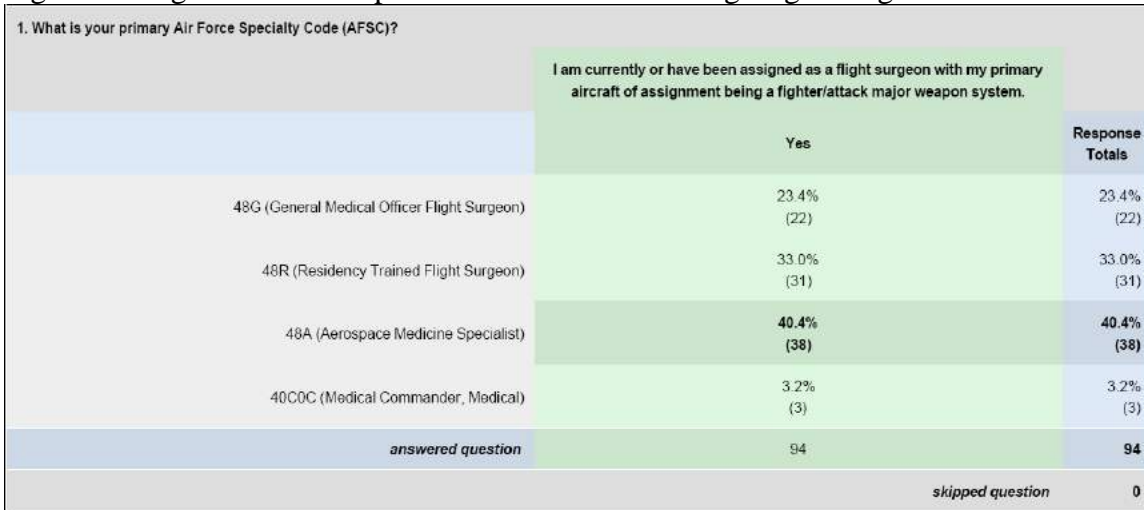


Figure 48: Top Knife Preparation for Flight Surgeon Duties

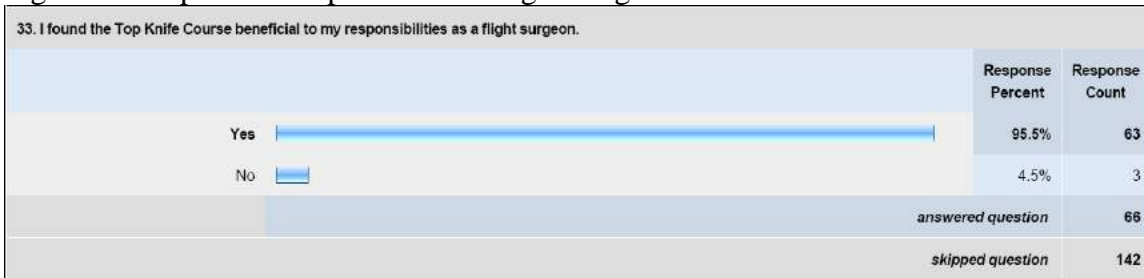


Figure 49: SGP Symposium Attendance

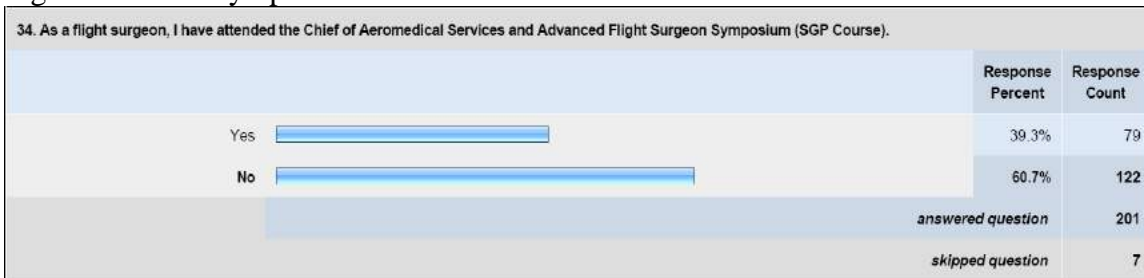
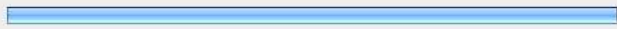



Figure 50: SGP Symposium Attendance vs. Elapsed Time since AMP Graduation

34. As a flight surgeon, I have attended the Chief of Aeromedical Services and Advanced Flight Surgeon Symposium (SGP Course).						
		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				
		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	Response Totals
Yes		0.0% (0)	34.2% (26)	<b>69.8%</b> <b>(30)</b>	47.9% (23)	39.3% (79)
No		<b>100.0%</b> <b>(34)</b>	<b>65.8%</b> <b>(50)</b>	30.2% (13)	<b>52.1%</b> <b>(25)</b>	<b>60.7%</b> <b>(122)</b>
<i>answered question</i>		34	76	43	48	201
<i>skipped question</i>						2

Figure 51: SGP Symposium Preparation for SGP or Senior Flight Surgeon Duties

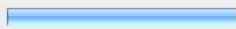




35. I found the Chief of Aeromedical Services and Advanced Flight Surgeon Symposium (SGP Course) beneficial to my responsibilities as an SGP or senior flight surgeon.		
	Response Percent	Response Count
Yes 	88.6%	70
No 	11.4%	9
<i>answered question</i>		79
<i>skipped question</i>		129

Questions 36 through 44 focuses on deployment issues and the results are shown below.

*Deployment*

One-third of survey participants have not been deployed while the majority (45%) have been deployed for 8 months or less in the past three years and 8% have been deployed for more than 12 months in the previous three years.

Figure 52: Deployment Frequency

36. I have been deployed ___ months in the past three years.		
	Response Percent	Response Count
0 	33.3%	67
1-4 	18.9%	38
4-8 	25.9%	52
8-12 	13.9%	28
>12 	8.0%	16
<i>answered question</i>		201
<i>skipped question</i>		7

Thirty-eight percent of those participants who have graduated from the AMP course less than five years ago have not deployed. Twenty-eight percent of participants with six or

more year's elapsed time from AMP graduation have not deployed in the previous three years

Figure 53: Deployment Frequency vs. Elapsed Time since AMP Graduation

36. I have been deployed ___ months in the past three years.		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
0		67.6% (23)	25.0% (19)	27.9% (12)	27.1% (13)	33.3% (67)
1-4		14.7% (5)	17.1% (13)	14.0% (6)	29.2% (14)	18.9% (38)
4-8		14.7% (5)	35.5% (27)	25.6% (11)	18.8% (9)	25.9% (52)
8-12		2.9% (1)	13.2% (10)	18.6% (8)	18.8% (9)	13.9% (28)
>12		0.0% (0)	9.2% (7)	14.0% (6)	6.3% (3)	8.0% (16)
answered question		34	76	43	48	201
skipped question						2

Figure 54: Training for Deployed Patient Care

37. I was well trained to perform the patient care duties required of me while deployed.		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one		21.0% (42)	40.5% (81)	8.5% (13)	4.5% (9)	1.5% (3)	26.0% (52)	4.01	200
answered question									200
skipped question									8

Figure 55: Training for Deployed Operational Tasks

38. My training prepared me well to accomplish the operational tasks required of me while deployed.		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one		18.0% (36)	42.0% (84)	8.0% (16)	4.5% (9)	2.0% (4)	25.5% (51)	3.93	200
answered question									200
skipped question									8

Figure 56: Family Preparation for Deployment

39. My family was prepared for my deployment.		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one		8.0% (16)	40.0% (80)	9.0% (18)	8.0% (16)	0.5% (1)	34.5% (69)	3.72	200
answered question									200
skipped question									8

Figure 57: Family Support during Deployment

40. My family was well cared for during my deployment.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	6.5% (13)	33.0% (66)	17.5% (35)	5.5% (11)	1.0% (2)	36.5% (73)	3.61	200
answered question								200
skipped question								8

Figure 58: Right Equipment Available During Deployment

41. While deployed the right equipment was available for my team.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	10.0% (20)	41.5% (83)	12.0% (24)	8.0% (16)	3.0% (6)	25.5% (51)	3.64	200
answered question								200
skipped question								8

Figure 59: Equipment in Good Repair While Deployed

42. While deployed the equipment was in good repair for my team.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	8.5% (17)	49.5% (99)	10.0% (20)	6.0% (12)	1.5% (3)	24.5% (49)	3.76	200
answered question								200
skipped question								8

Figure 60: Deployment Training for Support Staff

43. My support staff was well trained for the deployment mission.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	9.0% (18)	45.0% (90)	11.5% (23)	4.0% (8)	3.5% (7)	27.0% (54)	3.71	200
answered question								200
skipped question								8

Figure 61: Deployed Correct Complement of Professional/Support Staff

44. I deployed with the right complement of professional and support staff.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	9.0% (18)	41.5% (83)	12.5% (25)	9.0% (18)	2.5% (5)	25.5% (51)	3.61	200
answered question								200
skipped question								8

Questions 45 through 62 focuses on job related issues and the results are shown below.

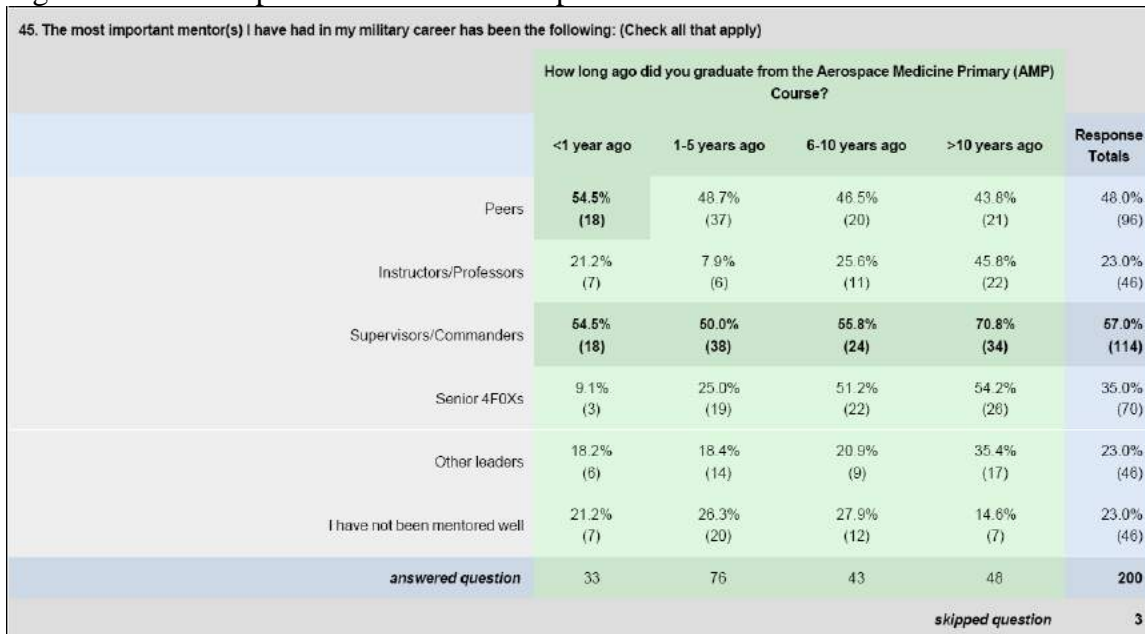
*Job*

Survey participants reported supervisors/commanders and peers as the most important mentors in their careers, see figure 62.

Figure 62: Most Important Mentors



Figure 63: Most Important Mentors vs. Elapsed Time from AMP Graduation



Survey participants overwhelmingly reported the greatest difficulty or felt the most uncomfortable with administrative requirements. This was followed by 17% having difficulty in accomplishing flying events and 13% being uncomfortable with their medical skills; data is shown in figure 64 and 65.

Figure 64: Greatest Difficulty or Feel Most Uncomfortable




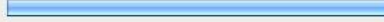

46. I have the greatest difficulty or feel most uncomfortable with ____.		Response Percent	Response Count
medical skills		12.5%	25
accomplishing flying events		16.5%	33
deployed operations		5.5%	11
<b>administrative requirements</b>		<b>55.5%</b>	<b>111</b>
officership/military personnel requirements		10.0%	20
		<b>answered question</b>	<b>200</b>
		<b>skipped question</b>	<b>8</b>

Figure 65: Greatest Difficulty/Feel Most Uncomfortable vs. Time since AMP Graduation

46. I have the greatest difficulty or feel most uncomfortable with ____.	How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
	<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
medical skills	12.1% (4)	10.5% (8)	9.3% (4)	18.8% (9)	12.5% (25)
accomplishing flying events	15.2% (5)	15.8% (12)	16.3% (7)	18.8% (9)	16.5% (33)
deployed operations	9.1% (3)	5.3% (4)	7.0% (3)	2.1% (1)	5.5% (11)
<b>administrative requirements</b>	<b>54.5%</b> <b>(18)</b>	<b>57.9%</b> <b>(44)</b>	<b>58.1%</b> <b>(25)</b>	<b>50.0%</b> <b>(24)</b>	<b>55.5%</b> <b>(111)</b>
officership/military personnel requirements	9.1% (3)	10.5% (8)	9.3% (4)	10.4% (5)	10.0% (20)
<b>answered question</b>	<b>33</b>	<b>76</b>	<b>43</b>	<b>48</b>	<b>200</b>
					<b>skipped question</b>
					<b>3</b>

Top barriers to performance reported by survey participants were staffing issues with guidance, leadership, training, and equipment/space to follow; see figure 66 and 67.

Five percent of survey participants did not feel well trained for patient care duties in-garrison. All but one of the respondents was less than five years from AMP graduation; see figure 68 and 69.



Figure 66: Top Three Barriers to Job Performance

47. The top three barriers to performing my job are: (Choose three)			Response Percent	Response Count
training			52.0%	104
<b>staff</b>			<b>79.0%</b>	<b>158</b>
guidance			64.5%	129
leadership			57.0%	114
equipment/space			47.5%	95
			<b>answered question</b>	<b>200</b>
			<i>skipped question</i>	<b>8</b>

Figure 67: Top Three Barriers to Job Performance vs. Time since AMP Graduation

47. The top three barriers to performing my job are: (Choose three)		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
training		78.8% (26)	48.7% (37)	39.5% (17)	50.0% (24)	52.0% (104)
<b>staff</b>		48.5% (16)	<b>78.9% (60)</b>	<b>90.7% (39)</b>	<b>89.6% (43)</b>	<b>79.0% (158)</b>
guidance		<b>84.8% (28)</b>	71.1% (54)	48.8% (21)	54.2% (26)	64.5% (129)
leadership		45.5% (15)	67.1% (51)	60.5% (26)	45.8% (22)	57.0% (114)
equipment/space		42.4% (14)	34.2% (26)	60.5% (26)	60.4% (29)	47.5% (95)
<b>answered question</b>		33	76	43	48	<b>200</b>
		<i>skipped question</i>				<b>3</b>

Figure 68: Training for Patient Care Duties

48. I am well trained to perform patient care duties expected of me.							
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Rating Average	Response Count
Choose one	29.5% (59)	<b>53.5% (107)</b>	12.0% (24)	4.5% (9)	0.5% (1)	4.07	200
<b>answered question</b>							<b>200</b>
<i>skipped question</i>							<b>8</b>



Figure 69: Training for Patient Care Duties vs. Elapsed Time since AMP Graduation

48. I am well trained to perform patient care duties expected of me.		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
Choose one		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
Strongly Agree		12.1% (4)	35.5% (27)	41.9% (18)	20.8% (10)	
Agree		51.5% (17)	43.4% (33)	53.5% (23)	70.8% (34)	
Neutral		27.3% (9)	13.2% (10)	2.3% (1)	8.3% (4)	
Disagree		9.1% (3)	6.6% (5)	2.3% (1)	0.0% (0)	
Strongly Disagree		0.0% (0)	1.3% (1)	0.0% (0)	0.0% (0)	
rating average		3.67 (33)	4.05 (76)	4.35 (43)	4.13 (48)	4.07 (200)
answered question		33	76	43	48	200
skipped question						3

Seven percent of survey participants reported not being well trained to perform operational/deployment support tasking; and in figure 71 those flight surgeons reporting not being trained to perform well at operational/deployment support tasking were all less than five years from AMP graduation.

Figure 70: Training for Operational/Deployment Support Tasking

49. I am well trained to perform operational/deployment support tasking.		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Rating Average	Response Count
Choose one		25.0% (50)	51.5% (103)	18.5% (33)	4.5% (9)	2.5% (5)	3.92	200
answered question								200
skipped question								8

Figure 71: Training for Operational/Deployment Support Tasking vs. Time since AMP Graduation

49. I am well trained to perform operational/deployment support tasking.		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
Choose one		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
Strongly Agree		3.0% (1)	26.3% (20)	32.6% (14)	32.7% (16)	
Agree		45.6% (15)	47.4% (36)	53.6% (23)	59.2% (29)	
Neutral		33.3% (11)	15.8% (12)	14.0% (6)	8.2% (4)	
Disagree		9.1% (3)	7.9% (6)	0.0% (0)	0.0% (0)	
Strongly Disagree		9.1% (3)	2.6% (2)	0.0% (0)	0.0% (0)	
rating average		3.24 (33)	3.87 (76)	4.19 (43)	4.24 (49)	3.93 (201)
answered question		33	76	43	48	200
skipped question						3

While 54% of the flight surgeons surveyed felt well trained for command and leadership, nearly 20% reported to the contrary; and 32% of 048G flight surgeons, 20% of 048R flight surgeons, and 7% of 048A flight surgeons did not feel well trained for command and leadership functions expected of them. While 7% of 048A flight surgeons do not plan to become an AFMS leader, 28% of 048R and 53% of 048G flight surgeons plan on not becoming AFMS leaders.

Figure 72: Training for Command/Leadership Functions

50. I am well trained to perform command and leadership functions expected of me.							
Choose one	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Rating Average	Response Count
	21.0% (42)	32.5% (65)	27.0% (54)	17.5% (35)	2.0% (4)	3.53	200
answered question							200
skipped question							8

Figure 73: Planning to Become AFMS Leader

51. I plan to become a medical leader in the Air Force (commander, command surgeon, etc.).								
Choose one	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
	27.6% (55)	23.6% (47)	14.6% (29)	9.5% (19)	18.6% (37)	6.0% (12)	3.34	199
answered question								199
skipped question								9

Figure 74: Planning to Become AFMS Leader vs. Elapse Time since AMP Graduation

51. I plan to become a medical leader in the Air Force (commander, command surgeon, etc.).		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
Choose one		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
Strongly Agree		12.1% (4)	17.3% (13)	44.2% (19)	39.8% (19)	
Agree		15.2% (5)	21.3% (16)	32.6% (14)	25.0% (12)	
Neutral		16.2% (6)	22.7% (17)	9.3% (4)	4.2% (2)	
Disagree		18.2% (6)	8.0% (6)	4.7% (2)	10.4% (5)	
Strongly Disagree		24.2% (8)	28.0% (21)	9.3% (4)	8.3% (4)	
N/A		12.1% (4)	2.7% (2)	0.0% (0)	12.5% (6)	
rating average		2.69 (33)	2.92 (75)	3.98 (43)	3.88 (48)	3.34 (199)
answered question		33	75	43	48	199
		skipped question				4

While most survey respondents feel well trained for job performance, 24% of 048G flight surgeons did not feel well trained for the performance of their job. This is opposed to the 8% of 048R and 2% of 048A flight surgeons.

Figure 75: Feel Well Trained for Job Performance

52. I feel well trained to do my job well.								
Choose one	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
	19.1% (38)	47.7% (95)	21.6% (43)	9.5% (19)	2.0% (4)	0.0% (0)	3.72	199
answered question								199
skipped question								9

Figure 76: Feel Well Trained for Job Performance vs. Time since AMP Graduation

52. I feel well trained to do my job well.		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
Choose one		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
Strongly Agree		0.0% (0)	17.3% (13)	25.6% (11)	29.2% (14)	
Agree		45.5% (15)	38.7% (29)	53.5% (23)	58.3% (28)	
Neutral		33.3% (11)	26.7% (20)	18.6% (8)	8.3% (4)	
Disagree		15.2% (5)	14.7% (11)	2.3% (1)	4.2% (2)	
Strongly Disagree		6.1% (2)	2.7% (2)	0.0% (0)	0.0% (0)	
N/A		0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)	
rating average		3.18 (33)	3.53 (75)	4.02 (43)	4.13 (48)	3.72 (199)
answered question		33	75	43	48	199
		skipped question				4

Figure 77: Tools and Equipment to Perform Job Well

53. I have the tools and equipment to do my job well.								
Choose one	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
	11.1% (22)	54.0% (107)	25.3% (50)	7.6% (15)	2.0% (4)	0.0% (0)	3.65	198
answered question								198
skipped question								10

While guidance was pointed out as one of the top three barriers to job performance previously, 41% felt the Air Force provides adequate guidance. Among AFSCs, 39% of 048G, 27% of 048R, and 7% of 048A flight surgeons felt there was inadequate guidance for the performance of their jobs.

Figure 78: Adequate Guidance

54. The Air Force provides me with adequate guidance to do my job well.								
Choose one	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
	5.6% (11)	40.9% (81)	28.8% (57)	19.2% (38)	5.6% (11)	0.0% (0)	3.22	198
answered question								198
skipped question								10

A lack of sufficiently trained enlisted support was reported by 51% of 048A, 41% of 048R, and 20% of 048G flight surgeons.

Figure 79: Sufficiently Trained Enlisted Support

55. My enlisted support staff is trained and sufficient to help me do my job well.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	7.6% (15)	<b>36.4% (72)</b>	19.7% (39)	23.7% (47)	12.6% (25)	0.0% (0)	3.03	198
<i>answered question</i>								198
<i>skipped question</i>								10

Figure 80: Sufficiently Trained Enlisted Support vs. Time since AMP Graduation

55. My enlisted support staff is trained and sufficient to help me do my job well.						How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago					
Choose one	Strongly Agree	12.1% (4)	6.8% (5)	7.0% (3)	6.3% (3)					
	Agree	<b>51.5% (17)</b>	<b>39.2% (29)</b>	30.2% (13)	<b>27.1% (13)</b>					
	Neutral	27.3% (9)	20.3% (15)	16.3% (7)	16.7% (8)					
	Disagree	9.1% (3)	20.3% (15)	<b>41.9% (18)</b>	22.9% (11)					
	Strongly Disagree	0.0% (0)	13.5% (10)	4.7% (2)	<b>27.1% (13)</b>					
	N/A	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)					
	rating average	3.67 (33)	3.05 (74)	2.93 (43)	2.63 (48)				3.03 (198)	
	<i>answered question</i>	33	74	43	48				198	
	<i>skipped question</i>									5

While two-thirds of respondents reported support and encouragement from their leadership, 22% of 048G, 13% of 048R, and 10% of 048A flight surgeons did not feel they were supported or encouraged by their leadership.

Figure 81: Leadership Support and Encouragement

56. My leadership supports me and encourages me to do my job well.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	19.7% (39)	<b>43.9% (87)</b>	21.7% (43)	9.6% (19)	5.1% (10)	0.0% (0)	3.64	198
<i>answered question</i>								198
<i>skipped question</i>								10

Figure 82: Professional Environment

57. The environment I work in today is more friendly now than three years ago.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	6.6% (13)	19.7% (39)	<b>30.3% (60)</b>	18.2% (36)	8.6% (17)	16.7% (33)	2.97	198
<i>answered question</i>								<b>198</b>
<i>skipped question</i>								<b>10</b>

Figure 83: Enjoy Being a Flight Surgeon in the Air Force

58. I enjoy being a flight surgeon in the Air Force.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	34.8% (69)	<b>43.4% (86)</b>	10.1% (20)	6.1% (12)	5.6% (11)	0.0% (0)	3.96	198
<i>answered question</i>								<b>198</b>
<i>skipped question</i>								<b>10</b>

Figure 84: Enjoy Being a Flight Surgeon in the USAF vs. Time since AMP Graduation

58. I enjoy being a flight surgeon in the Air Force.								
		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals		
Choose one		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago			
Choose one	Strongly Agree	24.2% (6)	25.7% (19)	<b>53.5% (23)</b>	39.6% (19)	198		
	Agree	<b>36.4% (12)</b>	<b>45.9% (34)</b>	32.6% (14)	<b>54.2% (26)</b>			
	Neutral	16.2% (6)	12.2% (9)	9.3% (4)	2.1% (1)			
	Disagree	12.1% (4)	5.4% (4)	4.7% (2)	4.2% (2)			
	Strongly Disagree	9.1% (3)	10.8% (8)	0.0% (0)	0.0% (0)			
	N/A	0.0% (0)	0.0% (0)	0.0% (0)	0.0% (0)			
<i>rating average</i>		3.55 (33)	3.70 (74)	4.35 (43)	4.29 (48)	3.68 (198)		
<i>answered question</i>		33	74	43	48	<b>198</b>		
<i>skipped question</i>						<b>5</b>		

Figure 85: Longevity Plans

59. I plan to stay in the USAF for the following term: (Choose one)			Response Percent	Response Count
Only for my training commitment			31.3%	62
Beyond my training commitment but short of retirement eligibility			7.1%	14
Just until retirement eligibility			28.8%	57
Past retirement eligibility			32.8%	65
			<b>answered question</b>	<b>198</b>
			<b>skipped question</b>	<b>10</b>

Figure 86: Longevity Plans vs. Elapsed Time since AMP Graduation

59. I plan to stay in the USAF for the following term: (Choose one)						
	How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals	
	<1 year ago	1-5 years ago	6-10 years ago	>10 years ago		
Only for my training commitment	63.6% (21)	48.6% (36)	9.3% (4)	2.1% (1)	31.3% (62)	
Beyond my training commitment but short of retirement eligibility	6.1% (2)	9.5% (7)	9.3% (4)	2.1% (1)	7.1% (14)	
Just until retirement eligibility	21.2% (7)	21.6% (16)	41.9% (18)	33.3% (16)	28.8% (57)	
Past retirement eligibility	9.1% (3)	20.3% (15)	39.5% (17)	62.6% (30)	32.8% (65)	
<b>answered question</b>		33	74	43	48	<b>198</b>
		<b>skipped question</b>			<b>5</b>	

Figure 87: Top Three Things Keeping Flight Surgeons in Aerospace Medicine

60. What are the top three things keeping you in the aerospace medicine career field? (Choose three)			Response Percent	Response Count
military family lifestyle			24.2%	48
flying/operational opportunities			77.3%	153
deployment opportunities			26.8%	53
clinical environment			30.3%	60
future military opportunities (command/promotion)			34.3%	68
future civilian jobs unattractive			9.1%	18
pay/bonuses			39.9%	79
Recession			14.1%	28
other			43.9%	87
			<b>answered question</b>	<b>198</b>
			<b>skipped question</b>	<b>10</b>



Figure 88: Top Three Things Keeping Flight Surgeons in Aerospace Medicine vs. Elapsed Time since AMP Graduation

60. What are the top three things keeping you in the aerospace medicine career field? (Choose three)					
	How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
	<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
military family lifestyle	12.1% (4)	27.0% (20)	34.9% (15)	18.8% (9)	24.2% (48)
flying/operational opportunities	<b>63.6%</b> <b>(21)</b>	<b>79.7%</b> <b>(59)</b>	<b>79.1%</b> <b>(34)</b>	<b>81.3%</b> <b>(39)</b>	<b>77.3%</b> <b>(163)</b>
deployment opportunities	18.2% (6)	33.8% (25)	32.6% (14)	16.7% (8)	26.8% (53)
clinical environment	36.4% (12)	35.1% (26)	20.9% (9)	27.1% (13)	30.3% (60)
future military opportunities (command/promotion)	30.3% (10)	24.3% (18)	51.2% (22)	37.5% (18)	34.3% (68)
future civilian jobs unattractive	9.1% (3)	8.8% (5)	9.3% (4)	12.5% (6)	9.1% (18)
pay/bonuses	51.5% (17)	27.0% (20)	32.6% (14)	58.3% (28)	39.9% (79)
Recession	24.2% (8)	13.5% (10)	11.6% (5)	10.4% (5)	14.1% (28)
other	54.5% (18)	52.7% (39)	27.9% (12)	37.5% (18)	43.9% (87)
<b>answered question</b>	<b>33</b>	<b>74</b>	<b>43</b>	<b>48</b>	<b>198</b>
					<b>skipped question</b> <b>5</b>

Figure 89: Factors Influencing Plans to Leave USAF before Retirement Eligibility

61. If you plan to leave the USAF before retirement eligibility, which factors most influenced this decision? (Check all that apply)		
	Response Percent	Response Count
<b>I do not plan to leave the USAF before retirement eligibility</b>	52.0%	103
personal/family reasons	29.3%	58
civilian employment opportunities	21.7%	43
deployments/ops tempo	22.7%	45
dissatisfaction with work	26.8%	53
future military opportunities unclear	7.6%	15
future military job unattractive	16.7%	33
pay/bonuses	17.7%	35
other	13.8%	27
<b>answered question</b>		<b>198</b>
		<b>skipped question</b> <b>10</b>



Figure 90: Factors Influencing Plans to Leave USAF vs. Time since AMP Graduation

61. If you plan to leave the USAF before retirement eligibility, which factors most influenced this decision? (Check all that apply)					
	How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
	<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
I do not plan to leave the USAF before retirement eligibility	21.2% (7)	32.4% (24)	72.1% (31)	85.4% (41)	52.0% (103)
personal/family reasons	57.6% (19)	40.5% (30)	9.3% (4)	10.4% (5)	29.3% (58)
civilian employment opportunities	36.4% (12)	32.4% (24)	14.0% (6)	2.1% (1)	21.7% (43)
deployments/ops tempo	48.5% (16)	25.7% (19)	11.6% (5)	10.4% (5)	22.7% (45)
dissatisfaction with work	48.5% (16)	36.5% (27)	18.6% (8)	4.2% (2)	26.8% (53)
future military opportunities unclear	15.2% (5)	10.8% (8)	4.7% (2)	0.0% (0)	7.6% (15)
future military job unattractive	30.3% (10)	23.0% (17)	14.0% (6)	0.0% (0)	16.7% (33)
pay/bonuses	30.3% (10)	27.0% (20)	9.3% (4)	2.1% (1)	17.7% (35)
other	18.2% (6)	20.3% (15)	9.3% (4)	4.2% (2)	13.6% (27)
<b>answered question</b>	<b>33</b>	<b>74</b>	<b>43</b>	<b>48</b>	<b>198</b>
				<i>skipped question</i>	<b>5</b>

Figure 91: Factors Influencing Plans to Remain in USAF

62. The following factors are important considerations to my remaining in the Air Force:								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Financial compensation	29.4% (58)	<b>38.1% (75)</b>	22.3% (44)	5.6% (11)	2.0% (4)	2.5% (5)	3.90	197
Professional autonomy	27.9% (55)	<b>43.7% (86)</b>	15.2% (30)	6.6% (13)	4.1% (8)	2.5% (5)	3.87	197
Confidence in leadership	24.4% (48)	<b>41.6% (82)</b>	19.3% (38)	7.6% (15)	4.1% (8)	3.0% (6)	3.77	197
Input into the assignment process	<b>37.6% (74)</b>	30.5% (60)	15.7% (31)	7.1% (14)	5.6% (11)	3.6% (7)	3.91	197
Time available to take leave	21.8% (43)	<b>47.7% (94)</b>	21.3% (42)	6.1% (12)	0.5% (1)	2.5% (5)	3.86	197
Sense of duty	<b>39.6% (78)</b>	39.1% (77)	12.7% (25)	4.1% (8)	2.5% (5)	2.0% (4)	4.11	197
Quality work environment	37.6% (74)	<b>43.7% (86)</b>	10.7% (21)	4.1% (8)	1.5% (3)	2.5% (5)	4.15	197
Health benefits for the family	26.9% (53)	<b>41.6% (82)</b>	20.8% (41)	3.0% (6)	1.0% (2)	6.8% (13)	3.97	197
Lifestyle	37.6% (74)	<b>43.1% (85)</b>	13.7% (27)	2.5% (5)	0.5% (1)	2.5% (5)	4.18	197
Frequency of PCS	18.8% (37)	<b>37.6% (74)</b>	27.9% (55)	11.2% (22)	1.5% (3)	3.0% (6)	3.63	197
Frequency of deployments	<b>31.5% (62)</b>	29.4% (58)	24.4% (48)	8.6% (17)	2.5% (5)	3.6% (7)	3.82	197
Length of deployments	<b>35.0% (69)</b>	27.9% (55)	23.4% (46)	8.1% (16)	3.0% (6)	2.5% (5)	3.86	197
Unique challenges of aerospace medicine	28.4% (56)	<b>42.6% (84)</b>	15.2% (30)	7.1% (14)	3.6% (7)	3.0% (6)	3.88	197
Opportunity to fly	37.6% (74)	<b>39.6% (78)</b>	14.7% (29)	4.6% (9)	1.5% (3)	2.0% (4)	4.09	197
<i>answered question</i>								197
<i>skipped question</i>								11

Questions 63 through 65 focuses on family related issues and the results are shown below.

*Family*

Figure 92: Family’s Needs Met during the Previous Year

63. My family’s health care, financial, and legal needs were met during the last 12 months.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	27.4% (54)	<b>48.2% (95)</b>	5.1% (10)	5.1% (10)	1.5% (3)	12.7% (25)	4.09	197
<i>answered question</i>								197
<i>skipped question</i>								11

Figure 93: Spouse Able to Maintain Satisfying Career

64. My spouse has been able to maintain a satisfying career while I have been on active duty.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	7.1% (14)	22.3% (44)	12.2% (24)	14.2% (28)	12.2% (24)	<b>32.0% (63)</b>	2.97	197
<i>answered question</i>								197
<i>skipped question</i>								11

Figure 94: Family is Supportive

65. My family is supportive of my Air Force career.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	24.4% (48)	<b>44.7% (88)</b>	15.7% (31)	3.0% (6)	3.6% (7)	8.6% (17)	3.91	197
<i>answered question</i>								197
<i>skipped question</i>								11

Questions 66 through 68 focuses on family related issues and the results are shown below.

*Organizational Support*

Figure 95: Aerospace Medical Association (AsMA) Annual Meeting is Valuable

66. The Aerospace Medical Association (AsMA) annual meeting is valuable for my professional development.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	16.2% (32)	20.8% (41)	20.8% (41)	5.6% (11)	4.1% (8)	<b>32.5% (64)</b>	3.59	197
<i>answered question</i>								197
<i>skipped question</i>								11

Figure 96: AsMA Annual Meeting is Valuable vs. Elapsed Time since AMP Graduation

66. The Aerospace Medical Association (AsMA) annual meeting is valuable for my professional development.						
		How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
		<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
Choose one	Strongly Agree	0.0% (0)	12.3% (9)	20.9% (9)	<b>29.2% (14)</b>	
	Agree	12.1% (4)	15.1% (11)	<b>32.6% (14)</b>	25.0% (12)	
	Neutral	21.2% (7)	24.7% (18)	20.9% (9)	14.6% (7)	
	Disagree	0.0% (0)	5.5% (4)	4.7% (2)	10.4% (5)	
	Strongly Disagree	6.1% (2)	2.7% (2)	2.3% (1)	6.3% (3)	
	N/A	<b>60.6% (20)</b>	<b>39.7% (29)</b>	18.6% (8)	14.6% (7)	
rating average		3.00 (33)	3.48 (73)	3.80 (43)	3.71 (48)	3.59 (197)
<i>answered question</i>		33	73	43	48	197
<i>skipped question</i>						6

Figure 97: Association of Military Surgeons of the U.S. (AMSUS) Annual Meeting is Valuable

67. The Association of Military Surgeons of the U.S. (AMSUS) annual meeting is valuable for my professional development.								
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A	Rating Average	Response Count
Choose one	2.5% (5)	8.1% (16)	26.4% (52)	9.1% (18)	6.6% (13)	47.2% (93)	2.83	197
<i>answered question</i>								197
<i>skipped question</i>								11

Figure 98: Useful SoUSAFFS Products/Events

68. Which Society of USAF Flight Surgeons (SoUSAFFS) products/events do you find useful? (Check all that apply)		
	Response Percent	Response Count
Flight Surgeon's Checklist	76.6%	151
Aircraft Mishap Investigation Handbook	73.6%	145
Flight Surgeon's Toolkit (CD-ROM)	26.4%	52
FlightLines (Newsletter)	37.6%	74
Website	24.9%	49
SoUSAFFS luncheon (at AsMA annual meeting)	17.8%	35
SoUSAFFS social (at AsMA annual meeting)	17.3%	34
I do not find any of the listed products/events useful	4.1%	8
I have not used or attended any of the listed products/events	10.2%	20
<i>answered question</i>		197
<i>skipped question</i>		11

Figure 99: Useful SoUSAFFS Products/Events vs. Elapsed Time since AMP Graduation

68. Which Society of USAF Flight Surgeons (SoUSAFFS) products/events do you find useful? (Check all that apply)					
	How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?				Response Totals
	<1 year ago	1-5 years ago	6-10 years ago	>10 years ago	
Flight Surgeon's Checklist	63.6% (21)	71.2% (52)	86.0% (37)	85.4% (41)	76.6% (151)
Aircraft Mishap Investigation Handbook	48.5% (16)	72.6% (53)	81.4% (35)	85.4% (41)	73.6% (145)
Flight Surgeon's Toolkit (CD-ROM)	12.1% (4)	24.7% (18)	32.6% (14)	33.3% (16)	26.4% (52)
FlightLines (Newsletter)	18.2% (6)	31.5% (23)	39.5% (17)	58.3% (28)	37.6% (74)
Website	15.2% (5)	21.9% (16)	30.2% (13)	31.3% (15)	24.9% (49)
SoUSAFFS luncheon (at AsMA annual meeting)	0.0% (0)	11.0% (8)	32.6% (14)	27.1% (13)	17.8% (35)
SoUSAFFS social (at AsMA annual meeting)	3.0% (1)	8.2% (6)	34.9% (15)	25.0% (12)	17.3% (34)
I do not find any of the listed products/events useful	12.1% (4)	2.7% (2)	2.3% (1)	2.1% (1)	4.1% (8)
I have not used or attended any of the listed products/events	21.2% (7)	11.0% (8)	7.0% (3)	4.2% (2)	10.2% (20)
<b>answered question</b>	33	73	43	48	<b>197</b>
					<b>skipped question</b> 6

**Discussion:** The 2009 State of the Flight Surgeon Survey provides a snap shot of the state of affairs of USAF flight surgeons regarding the demographic makeup of the respondents and their views regarding training, deployment, job, family, and organizational support issues affecting them.

Regarding demography and training of the survey participants, there was a representative sample with nearly equal representation between the major USAF flight surgeon AFSCs. Equal representation from the major AFSCs leads one to assume a board range of training, experience, and support issues would be revealed through the survey. In fact, many issues do have a skewed effect due to the diversity of training and experience among the major AFSCs. For instance, 45% of the 048G flight surgeons participants were less than one year from AMP graduation and 94% were less than five years from AMP graduation. This likely tends to skew some of the confidence related survey questions such as one-third of the 048G survey participants did not feel well prepared by the AMP course verses 9% of the 048R and 5% of the 048A flight surgeons who tend to have more experience. However, this survey did not take into account recent changes in the curriculum of the AMP course.

Responses regarding the availability and adequacy of sustainment and refresher training were similar among the three major AFSCs. Unfortunately, nearly one-quarter of each AFSC cohort felt that sustainment and refresher training was either not available, or

adequate. Responses gauging the attendance and benefit of other post-AMP training opportunities revealed that one-third of 048G flight surgeons are not attending ATLS training. Three-quarters of the 048G and nearly two-thirds of the 048R flight surgeon participants had not attended the AMIP course; conversely 90% of the 048A flight surgeons had attended the AMIP course resulting in an overall 50% rate of attendance for the survey participants. The global medicine course was attended by 79% of the 048A, 52% of the 048R, and only 35% of the 048G flight surgeon cohorts. While nearly three-quarters of the 048A flight surgeon participants had attended the ACCAE course, less than one-quarter of the participants for each 048R and 048G cohort had attended the ACCAE course. Three-quarters of the 048A flight surgeons had attended the occupational medicine course, but only one-third of the 048R and 048G flight surgeons had attended this course. The CPM, CCATT, and HPE courses were overwhelmingly rated as beneficial for the responsibilities of a flight surgeon by those participants who had previously attended the courses; unfortunately, the majority of all participants had not attended these courses.

Forty-six percent of the survey participants reported current or previous fighter/attack major weapon system experience with 33% reporting attending the Top Knife course. Of those with previous fighter/attack MWS experience, 23% were 048G, 33% were 048R, and 40% were 048A flight surgeons and only 54% of those who are currently or previously assigned to a fighter/attack MWS have attended the Top Knife course.

While two-thirds of the 048A flight surgeons responded that the USAF RAM prepared them well as Aerospace Medicine Specialists, 16% disagreed. And for those who were graduates of the USAF RAM, 62% were less than five years since graduation from the RAM. The overall rate of attendance for the SGP Symposium was 39%; the course is designed for senior flight surgeons and the attendance rate for 048R flight surgeons was 48% and 048A flight surgeons was 62%.

Deployment issues included PCS frequency for which, one-third of the respondents reported they had not deployed beyond one month for the previous three years. 19% reported deploying 1-4 months in the past three years, 26% had deployed for 4-8 months in the previous three years, and 14% had deployed for 8-12 months in the previous three years. 8% of flight surgeons reported more than 12 months deployed in the previous three years. As stated above in the results section, 38% of those participants who have graduated from the AMP course less than five years ago have not deployed; and 28% of participants with six or more year's elapsed time from AMP graduation have not deployed in the previous three years. The survey results demonstrate that a very small percentage of any AFSC flight surgeon deployed for more than 12 months in the past three years. While a surprising percentage of Air Force flight surgeons have not deployed more than one month in the past three years.

For those with deployment experience, the majority reported they were well trained for patient care duties while deployed, this included 68% of the 048G, 89% of the 048R, and 92% of the 048A flight surgeons. These percentages were similar to reported training regarding in-garrison patient care duties with 62% of 048G, 99% 048R, and 93% 048A

flight surgeons stating they are well trained. Only 13% of the 048G, 8% of the 048R, and 4% of the 048A flight surgeons felt they were not well trained for deployed patient care duties. The majority also reported they were well prepared to accomplish the required operational tasks needed. This was reported by 60% of 048G, 85% of 048R, and 92% of 048A flight surgeons. Only 18% of the 048G, 8% of the 048R, and 2% of the 048A flight surgeons disagreed. Flight surgeons reported they were well trained for in-garrison operational support and deployment support task by 56% of 048G, 85% of 048R, and 92% of 048As; with 16% of 048G flight surgeons disagreeing.

For those flight surgeons deployed, 55% of the 048G reported their family was prepared for the deployment and 53% felt their family was well cared for during the deployment as opposed to the 048R and 048A flight surgeons where nearly three-quarters felt their family was prepared for the deployment. Of note, only 58% of the 048A flight surgeons felt their families were well cared for during deployment.

Seventy-seven percent of participants who had deployed reported they had the right equipment available. This was the case for 64% of 048G, 66% of 048R, and 75% of the 048A flight surgeons. However, 13% of the 048G and 25% of the 048R participants who had deployed disagreed. The majority of those deployed also felt their enlisted support staff was well trained while only 10% disagreed; this was preserved within the AFSC cohorts. Conversely, 51% of 048G, 48% of 048R, and 31% of 048A flight surgeons felt the in-garrison enlisted support staff was well trained or sufficient to help the flight surgeons perform well.

Job related issues were addressed to include mentor experience. The most important mentors were reported in the following order: supervisors/commanders, peers, senior 4FOXs, instructors/professors, and other leaders. Overall, 23% of the flight surgeon respondents recorded they have not been mentored well. This was the same percentage as those who reported instructors/professors, and other leaders as their most important mentors. The distribution of important mentors was different for the three major participant AFSCs. The most common important mentors for 048G in descending order are: peers, supervisors/commanders, other leaders, senior 4FOXs, and instructors/professors. For the 048R flight surgeons: supervisors/commanders, peers, senior 4FOXs, other leaders, and instructor/professors. The descending list for 048As: supervisors/commanders, senior 4FOXs, peers, instructors/professors, and other leaders. Unfortunately, 29% of the 048G and 25% of the 048R flight surgeons did not feel well mentored. The mentoring effect of senior 4FOXs appears to be nearly extinguished as time passes from the elimination of the 4FOX AFSC and limited exposure expected for new flight surgeons to former 4FOX personnel. The most important reported mentors are now supervisors/commanders and peers.

Survey participants reported their greatest difficulty or felt most uncomfortable with accomplishing administrative requirements followed by flying currency, medical skills, officership/military personnel requirements, and finally deployed operations. Each cohort was similar in that the most common difficulty was accomplishing administrative

requirements; however the second most common concern with 15% of the 048G and 16% of the 048A flight surgeons was with their medical skills.

Participants chose barriers to job performance and they are listed in descending order: staffing, guidance, leadership, training, and equipment/space. While the most common barrier was staffing for experienced flight surgeons, guidance was cited as the most common barrier for 048G flight surgeons. Guidance as a barrier was listed in the top three among each cohort and as the second overall most common barrier to job performance. When each major AFSC was asked to report whether the Air Force provides them with adequate guidance, only 30% of 048Gs, 48% of 048Rs, and 61% of 048As felt they were given adequate guidance for the performance of their jobs. Although, equipment/space as a barrier was the fifth most common barrier overall, the experienced flight surgeons chose this to tie for the third most common barrier for each cohort (048A and 048R).

Participants reported they were well trained to perform the leadership and command functions expected of them by 29% of the 048G, 51% 048R, and 80% of the 048As. While 20% of the 048R flight surgeons did not feel they were well trained for leadership, only 7% of the 048As felt they were not trained well for leadership. This parallels the intent by flight surgeons to become medical leaders in the AFMS. There appears to be a self-selection of individuals that occurs by the time 048A flight surgeons have trained to obtain this AFSC. This is fortunate because 048As tend to be assigned to leadership and command functions.

Most 048As and 048Rs felt well trained to perform their jobs well at 85% and 75% respectively. However, only 40% of 048Gs agreed. Nearly a quarter of 048Gs did not feel well trained overall for their job.

The right in-garrison tools and equipment was available to 80% of 048A and 66% of 048Rs, unfortunately, only 49% of 048G participants agreed. Of note, nearly the same percentage of 048Gs was neutral on this question and may support the presumption that the right tools and equipment are available in our flight medicine facilities.

Most 048As felt their leadership supported and encouraged them, but only 67% of the 048R and 51% of the 048Gs felt this same support. The work environment was reported as more friendly now than three years ago by 21% of 048G, 36% of 048R, and 23% of 048As but fortunately, most of the participants reported they enjoy being a flight surgeon in the Air Force. While most 048G flight surgeons plan on separating from the Air Force after completion of their training commitments, two-thirds of 048Rs and 90% of 048As plan to remain in the Air Force at least until retirement eligibility. The most common reason for survey participants to remain in aerospace medicine was flying/operational opportunities followed by varied interest depending on AFSC. For 048G and 048R, there were “other” factors that played into why they would stay in aerospace medicine. For 048As, the future military opportunities including the possibility of serving in a command position was important. For those planning to leave the Air Force before retirement eligibility, personal or family reasons were the most common factor followed



by dissatisfaction with work and deployment/ops tempo. While all the factors listed in question 62 were reported to be important factors influencing flight surgeons to remain in the Air Force, the most important included input into the assignment process, a sense of duty, frequency of deployments, and length of deployments.

Participants largely reported their family's health care, financial, and legal needs were met during the last year and that their families are supportive of their Air Force careers, but only one-third to half of the participants by AFSC felt their spouse had been able to maintain a satisfying career.

Finally, questions regarding organizational support showed that nearly three-quarters of 048A flight surgeons felt that the Aerospace Medical Association annual meeting was valuable to their professional development while only 54% of the 048Rs and 23% of the 048Gs felt the same. Less than one-quarter of the 048X AFSCs felt the Association of Military Surgeons of the U.S. was of value toward their professional development. The most useful products/events provided by the SoUSAFFS were the Flight Surgeon's Checklist and the Aircraft Mishap Investigation Handbook. The SoUSAFFS newsletter *FlightLines* was the third most useful product for 048R and 048A participants whereas the website was the third most useful product for 048G participants. The AsMA associated functions were most useful for 048As and to note, nearly 20% of the 048G, and 10% of 048R flight surgeons have not used or attended any of the listed products/events provided by the SoUSAFFS.

## APPENDIX A

### SOCIETY OF USAF FLIGHT SURGEONS SURVEY QUESTIONS

*Note: The actual web-based presentation may have been slightly different than this depiction*

#### **Demographics**

1. What is your primary Air Force Specialty Code (AFSC)?
  - A. 48G (General Medical Officer Flight Surgeon)
  - B. 48R (Residency Trained Flight Surgeon)
  - C. 48A (Aerospace Medicine Specialist)
  - D. 40C0C (Medical Commander, Medical)
  
2. Does this AFSC match your primary duties?
  - A. YES
  - B. NO
  
3. Which of the following describes your current primary job or position?  
(Check all that apply)
  - A. Squadron Medical Element Flight Surgeon
  - B. Medical Treatment Facility Flight Surgeon
  - C. Flight Commander
  - D. Squadron Commander
  - E. Medical Treatment Facility Commander
  - F. Headquarters Staff
  - G. Other

4. Which aerospace medicine jobs/positions have you held?  
(Check all that apply)
- A. Squadron Medical Element Flight Surgeon
  - B. Medical Treatment Facility Flight Surgeon
  - C. Chief of Aerospace Medicine (SGP)
  - D. Flight Commander
  - E. Squadron Commander
  - F. Group Commander
  - G. MAJCOM Aerospace Medicine Staff
  - H. MAJCOM Chief of Aerospace Medicine
  - I. AF/SG Aerospace Medicine Staff
  - J. AF/SG Chief of Aerospace Medicine
  - K. USAFSAM Staff/Instructor
  - L. USAFSAM Staff/Clinical
  - M. Other Staff (IG, AFSA, SGX, etc.)
  - N. Other operational (Pilot-Physician, NASA, etc.)
5. I am currently or have been assigned as a flight surgeon with my primary aircraft of assignment being a fighter/attack major weapon system.
- A. Yes
  - B. No
6. Are you board-certified in Aerospace Medicine?
- A. Yes
  - B. No
7. Are you board-certified in a medical specialty other than Aerospace Medicine?
- A. Yes
  - B. No
8. In what other medical specialty(s) are you board-certified?  
(Check all that apply)
- A. Family Medicine (Family Practice)
  - B. Internal Medicine
  - C. Pediatrics
  - D. Surgery
  - E. Occupational Medicine
  - F. Preventive Medicine
  - G. Psychiatry
  - H. Other

9. How long ago did you graduate from the Aerospace Medicine Primary (AMP) Course?
- A. < 1 year ago
  - B. 1-5 years ago
  - C. 6-10 years ago
  - D. > 10 years ago
10. If board-certified or board-eligible in Aerospace Medicine, how long ago did you graduate from the USAF Residency in Aerospace Medicine?
- A. < 1 year ago
  - B. 1-5 years ago
  - C. 6-10 years ago
  - D. >10 years ago
  - E. I am board-certified/eligible in Aerospace Medicine, but not a USAFSAM RAM graduate.
  - F. I am not a graduate of a Residency in Aerospace Medicine.
11. I have moved approximately every \_\_\_\_\_ years since becoming a flight surgeon.
- A. 1
  - B. 2
  - C. 3
  - D. 4
  - E. 5
  - F. N/A

## **TRAINING**

12. The Aerospace Medicine Primary (AMP) Course prepared me well for my duties as a flight surgeon.  
(Choose one)
- A. Strongly Agree
  - B. Agree
  - C. Neutral
  - D. Disagree
  - E. Strongly Disagree

13. Sustainment and refresher training is available after the Aerospace Medicine Primary (AMP) Course to maintain the skills I need to perform my duties.  
(Choose one)
- A. Strongly Agree
  - B. Agree
  - C. Neutral
  - D. Disagree
  - E. Strongly Disagree
14. Sustainment and refresher training is adequate after the Aerospace Medicine Primary (AMP) Course to maintain the skills I need to perform my duties.  
(Choose one)
- A. Strongly Agree
  - B. Agree
  - C. Neutral
  - D. Disagree
  - E. Strongly Disagree
15. The USAF Residency in Aerospace Medicine prepared me well for my duties as an Aerospace Medicine Specialist.  
(Choose one)
- A. Strongly Agree
  - B. Agree
  - C. Neutral
  - D. Disagree
  - E. Strongly Disagree
16. As a flight surgeon, I have attended Advanced Trauma Life Support (ATLS) Training.
- A. Yes
  - B. No
17. I found Advanced Trauma Life Support (ATLS) Training beneficial to my responsibilities as a flight surgeon.
- A. Yes
  - B. No

18. As a flight surgeon, I have attended the Aircraft Mishap Investigation and Prevention (AMIP) Course.
- A. Yes
  - B. No
19. I found the Aircraft Mishap Investigation and Prevention (AMIP) Course beneficial to my responsibilities as a flight surgeon.
- A. Yes
  - B. No
20. As a flight surgeon, I have attended the Global Medicine Course.
- A. Yes
  - B. No
21. I found the Global Medicine Course beneficial to my responsibilities as a flight surgeon.
- A. Yes
  - B. No
22. As a flight surgeon, I have attended the Advanced Clinical Concepts in Aeromedical Evacuation (ACCAE) Course.
- A. Yes
  - B. No
23. I found the Advanced Clinical Concepts in Aeromedical Evacuation (ACCAE) Course beneficial to my responsibilities as a flight surgeon.
- A. Yes
  - B. No
24. As a flight surgeon, I have attended the Contingency Preventive Medicine (CPM) Course.
- A. Yes
  - B. No
25. I found the Contingency Preventive Medicine (CPM) Course beneficial to my responsibilities as a flight surgeon.
- A. Yes
  - B. No

26. As a flight surgeon, I have attended the Occupational Medicine Course.
- A. Yes
  - B. No
27. I found the Occupational Medicine Course beneficial to my responsibilities as a flight surgeon.
- A. Yes
  - B. No
28. As a flight surgeon, I have attended the Human Performance Enhancement (HPE) Course.
- A. Yes
  - B. No
29. I found the Human Performance Enhancement (HPE) Course beneficial to my responsibilities as a flight surgeon.
- A. Yes
  - B. No
30. As a flight surgeon, I have attended the Critical Care Air Transport Team (CCATT) Course.
- A. Yes
  - B. No
31. I found the Critical Care Air Transport Team (CCATT) Course beneficial to my responsibilities as a flight surgeon.
- A. Yes
  - B. No
32. As a flight surgeon, I have attended the Top Knife Course.
- A. Yes
  - B. No
33. I found the Top Knife Course beneficial to my responsibilities as a flight surgeon.
- A. Yes
  - B. No



34. As a flight surgeon, I have attended the Chief of Aeromedical Services and Advanced Flight Surgeon Symposium (SGP Course).

- A. Yes
- B. No

35. I found the Chief of Aeromedical Services and Advanced Flight Surgeon Symposium (SGP Course) beneficial to my responsibilities as an SGP or senior flight surgeon.

- A. Yes
- B. No

## **DEPLOYMENT**

36. I have been deployed \_\_\_\_\_ months in the past three years.

- A. 0
- B. 1-4
- C. 4-8
- D. 8-12
- E. >12

37. I was well trained to perform the patient care duties required of me while deployed.

(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

38. My training prepared me well to accomplish the operational tasks required of me while deployed.

(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

39. My family was prepared for my deployment.  
(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

40. My family was well cared for during my deployment.  
(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

41. While deployed the right equipment was available for my team.  
(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

42. While deployed the equipment was in good repair for my team.  
(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

43. My support staff was well trained for the deployment mission.  
(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

44. I deployed with the right complement of professional and support staff.  
(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

## **JOB**

45. The most important mentor(s) I have had in my military career has been the following:  
(Check all that apply)

- A. Supervisors/Commanders
- B. Instructors/professors
- C. Senior 4F0Xs
- D. Peers
- E. Other leaders
- F. I have not been mentored well

46. I have the greatest difficulty or feel most uncomfortable with \_\_\_\_\_.

- A. medical skills
- B. administrative requirements
- C. accomplishing flying events
- D. officership/military personnel requirements
- E. deployed operations

47. The top three barriers to performing my job are:  
(Choose three)

- A. Training
- B. Staff
- C. Guidance
- D. Leadership
- E. Equipment/Space

48. I am well trained to perform patient care duties expected of me.  
(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree

49. I am well trained to perform operational/deployment support tasking.  
(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree

50. I am well trained to perform command and leadership functions expected of me.  
(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree

51. I plan to become a medical leader in the Air Force (commander, command surgeon, etc.).  
(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

52. I feel well trained to do my job well.

(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

53. I have the tools and equipment to do my job well.

(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

54. The Air Force provides me with adequate guidance to do my job well.

(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

55. My enlisted support staff is trained and sufficient to help me do my job well.

(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

56. My leadership supports me and encourages me to do my job well.  
(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

57. The environment I work in today is friendlier now than three years ago.  
(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

58. I enjoy being a flight surgeon in the Air Force.  
(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

59. I plan to stay in the USAF for the following term:  
(Choose one)

- A. Only for my training commitment
- B. Beyond my training commitment but short of retirement eligibility
- C. Just until retirement eligibility
- D. Past retirement eligibility

60. What are the top 3 things keeping you in the aerospace medicine career field?  
(Choose three)

- A. military family lifestyle
- B. flying/operational opportunities
- C. deployment opportunities
- D. clinical environment
- E. future military opportunities (command, promotion)
- F. future civilian jobs unattractive
- G. pay/bonuses
- H. recession
- I. other

61. If you plan to leave the USAF before retirement eligibility, which factors most influenced this decision?  
(Check all that apply)

- A. Personal/family reasons
- B. Civilian employment opportunities
- C. Deployments/ops tempo
- D. Dissatisfaction with work
- E. Future military opportunities unclear
- F. Future military jobs unattractive
- G. Pay/Bonuses
- H. Other
- I. I do not plan to leave the USAF before retirement eligibility



62. The following factors are important considerations to my remaining in the Air Force:

- A. Financial compensation
- B. Professional autonomy
- C. Confidence in leadership
- D. Input into the assignment process
- E. Time available to take leave
- F. Sense of duty
- G. Quality work environment
- H. Health benefits for the family
- I. Lifestyle
- J. Frequency of PCS
- K. Frequency of deployments
- L. Length of deployments
- M. Unique challenges of aerospace medicine
- N. Opportunity to fly

(Choose one for each of the factors above)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

## **FAMILY**

63. My family's healthcare, financial, and legal needs were met during the last 12 months.

(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

64. My spouse has been able to maintain a satisfying career while I have been on active duty.

(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

65. My family is supportive of my Air Force career.

(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

## **ORGANIZATIONAL SUPPORT**

66. The Aerospace Medical Association (AsMA) annual meeting is valuable for my professional development.

(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

67. The Association of Military Surgeons of the U.S. (AMSUS) annual meeting is valuable for my professional development.

(Choose one)

- A. Strongly Agree
- B. Agree
- C. Neutral
- D. Disagree
- E. Strongly Disagree
- F. N/A

68. Which Society of USAF Flight Surgeons products/events do you find useful?  
(Check all that apply)

- A. Flight Surgeon's Checklist
- B. Aircraft Mishap Investigation Handbook
- C. Flight Surgeons Toolkit (CD-ROM)
- D. *FlightLines* (Newsletter)
- E. Website
- F. SOUSAFFS luncheon (at AsMA annual meeting)
- G. SOUSAFFS social (at AsMA annual meeting)
- H. I do not find any of the listed products/events useful
- I. I have not used or attended any of the listed products/events

# APPENDIX B

## Air Force Survey Office Approval Letter



DEPARTMENT OF THE AIR FORCE  
AIR FORCE MANPOWER AGENCY  
RANDOLPH AIR FORCE BASE TX

26 Feb 2009

MEMORANDUM FOR LT COL (DR) WALDROUP

FROM: AFMA/MAPP  
550 E Street East, Suite 116  
Randolph AFB TX 78150-4451

SUBJECT: Request for Survey Approval

The 2009 State of the Flight Surgeon Survey is approved for use with Air Force participants. A Survey Control Number (SCN) of USAF SCN 09-004 is assigned and valid through 26 Feb 10. Please ensure SCN and expiration date are stated in the introductory protocol and on all survey administration documents.

The public may request survey results under the provisions of the Freedom of Information Act (FOIA). Results released outside the Air Force require coordination with Public Affairs before dissemination.

Please coordinate with the Air Force Labor Relations Program on surveys administered to civilian employees by calling DSN (312) 665-5737.

Questions or concerns can be directed to the Air Force Survey Office at DSN 487-2200. We wish you great success with your data collection effort.

//Signed//

DR. DONNA-MISCHELL NAVARRO  
Personnel Psychologist, Air Force Survey  
Office

# APPENDIX C

## Participant Cover Letter



**DEPARTMENT OF THE AIR FORCE**  
USAF SCHOOL OF AEROSPACE MEDICINE (AFMC)  
BROOKS CITY-BASE TEXAS

02 Mar 2009

### MEMORANDUM FOR 2009 STATE OF THE FLIGHT SURGEON SURVEY PARTICIPANTS

FROM: DANIEL O. WYMAN, MD, MPH  
Brigadier General, USAF, MC, CFS  
Commander, 81<sup>st</sup> Medical Group  
President, Society of USAF Flight Surgeons

SUBJECT: Surgeon General's Air Staff/Society of USAF Flight Surgeons 2009 State of the Flight Surgeon Survey

1. This letter is to request your anonymous and voluntary participation in the 2009 State of the Flight Surgeon Survey sponsored by the Surgeon General's Air Staff and the Society of USAF Flight Surgeons.
2. The purpose for this survey is to gather feedback from Air Force flight surgeons regarding training, deployment, job, family, and organizational support. This survey is also intended to assess, through hypothesis testing, the efficacy of current training and motivators for flight surgeon retention and growth.
3. This survey will be conducted IAW AFI 36-2601 and has been approved with the following USAF survey control number 09-004 (valid until February 26, 2010). Data and information collected will not contain personal identifying information (e.g. name, rank, age, SSN, etc.). This survey will be conducted through the commercial online vendor SurveyMonkey.com and their privacy policy can be reviewed at [http://www.surveymonkey.com/Monkey\\_Privacy.aspx](http://www.surveymonkey.com/Monkey_Privacy.aspx). All active duty flight surgeons in an active flight surgeon position are invited to participate in this survey. The data compiled will undergo statistical analysis and comparison to previous surveys. The results will be reported through the Society of USAF Flight Surgeons. Participation is voluntary and no adverse action(s) will be taken against any flight surgeon that chooses not to participate. The survey is expected to take ten minutes to complete.
4. The survey can be accessed at:  
[http://www.surveymonkey.com/s.aspx?sm=u6vkYsLH5TK\\_2b\\_2fsWSLoz9AA\\_3d\\_3d](http://www.surveymonkey.com/s.aspx?sm=u6vkYsLH5TK_2b_2fsWSLoz9AA_3d_3d)

5. The point of contact and principle investigator for this survey is Lieutenant Colonel (Dr.) Anthony Waldroup, USAFSAM/FEER, Brooks City-Base, Texas at DSN 240-3757 or (210) 536-3757. Lt Col Waldroup's e-mail address is [Anthony.Waldroup@brooks.af.mil](mailto:Anthony.Waldroup@brooks.af.mil).

//SIGNED//

DANIEL O. WYMAN, MD, MPH  
Brigadier General, USAF, MC, CFS  
Commander, 81<sup>st</sup> Medical Group  
President, Society of USAF Flight Surgeons

# APPENDIX D

## Institutional Review Board Exemption Approval



DEPARTMENT OF THE AIR FORCE  
AIR FORCE RESEARCH LABORATORY  
WRIGHT-PATTERSON AIR FORCE BASE OHIO 45433

20 FEB 2009

MEMORANDUM FOR USAFSAM/FECN (Anthony Waldroup)

FROM: 711 HPW/IR (AFRL IRB)

SUBJECT: Request for exemption from human experimentation requirements

1. Protocol title: 2009 State of the Flight Surgeon Survey
2. Protocol number: F-WR-2009-0044-E
3. The above protocol has been reviewed by the AFRL IRB and determined to be **exempt** from IRB oversight and human subject research requirements per 32 CFR 219.101(b) (2) which exempts "Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures or observation of public behavior, unless: (i) Information obtained is recorded in such a manner that human subjects can be identified, directly or through identifiers linked to the subjects; and (ii) Any disclosure of the human subjects' responses outside the research could reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects' financial standing, employability, or reputation."
4. This exemption applies only to the requirements of 32 CFR 219, DoDD 3216.2, AFI 40-402, and related human research subject regulations. If this project is a survey, attitude or opinion poll, questionnaire or interview, consult AFI 36-2601, Air Force Personnel Survey Program, for further guidance. Headquarters AFPC/DPSAS is the final approval authority for conducting attitude and opinion surveys within the Air Force.
5. The IRB must be notified if there is any change to the design or procedures of the research to be conducted. Otherwise, no further action is required.
6. For questions or concerns, please contact the IRB administrator, Andrew DiBella at [andrew.dibella@wpafb.af.mil](mailto:andrew.dibella@wpafb.af.mil) or (937) 656-5437. All inquiries and correspondence concerning this protocol should include the protocol number and name of the primary investigator.

*Sarah Fortuna*  
SARAH FORTUNA, Maj, USAF, MC, FS  
AFRL IRB



# APPENDIX E

## Institutional Review Board Exemption Request



DEPARTMENT OF THE AIR FORCE  
USAF SCHOOL OF AEROSPACE MEDICINE (AFMC)  
BROOKS CITY-BASE TEXAS

20 Jan 2009

MEMORANDUM FOR AFRL/RHH (Wright Site Institutional Review Board)

FROM: USAFSAM/GE  
Brooks City Base, TX

SUBJECT: Request for exemption from human experimentation requirements (32 CFR 219, DoDD 3216.2 and AFI 40-402) for 2009 State of the Flight Surgeon Survey.

1. The purpose of this survey, the only of its kind, is to gather feedback from Air Force flight surgeons regarding training, deployment, job, family, and organizational support. This survey is intended to assess, through hypothesis testing, the efficacy of current training and motivators for flight surgeon retention and growth. This survey is conducted on behalf of the Air Force Surgeon General's Air Staff and the Society of USAF Flight Surgeons. The results of the survey will be briefed by the President of the Society of USAF Flight Surgeons, Brigadier General Daniel O. Wyman, at the Society of USAF Flight Surgeons Luncheon during the 80<sup>th</sup> Annual Scientific Meeting of the Aerospace Medical Association. A report will be generated by the Society of USAF Flight Surgeons and will be publicly available. There will be no personal identifying information in the data collected or reported.
2. This request is based on the Code of Federal Regulations, title 32, part 219, section 101, paragraph (b) (2) Research activities that involve the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior unless: (i) Information obtained is recorded in such a manner that human subjects can be identified, directly or through identifiers linked to the subjects; and (ii) Any disclosure of the human subjects' responses outside the research could reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects' financial standing, employability, or reputation.
3. The following information is provided to show cause for such an exemption:
  - a) Equipment and facilities: Data collection will occur through a commercial online survey vendor (SurveyMonkey.com) and will not contain personal identifiers. Survey participants (active duty flight surgeon in active flight medicine positions) will receive a request to participate through an e-mail notification and will be coordinated through MAJCOM Chiefs of Aerospace Medicine to the bases.
  - b) Subjects:
    - Source of subjects – Active duty Air Force flight surgeons (n = ~472).

c) Timeframe: The expected timeframe of six weeks to occur spring 2009.

d) Data collected: Through a survey instrument, demographic information collected will include AFSC, medical board eligibility/certification, current/previous aerospace medicine job position, and length of time from graduation from the Aerospace Medicine Primary Course, as well as the number of PCS moves as a flight surgeon. Training data collected will assess perceptions of current training and assess the level of training among Air Force flight surgeons. Deployment, job, family, and organizational support survey questions will assess the perceptions of Air Force flight surgeons regarding these issues of motivation for retention and growth.

e) Risks to Subjects: The risks to survey subjects are minimal. No personal identifiers will be collected by the commercial online survey service (SurveyMonkey.com). This data will be provided to the principle investigator in a data file without personal identifiers. Briefing and reports containing the data will not contain personal identifiers. The commercial online survey service privacy policy has been and can be reviewed at:  
[http://www.surveymonkey.com/Monkey\\_Privacy.aspx](http://www.surveymonkey.com/Monkey_Privacy.aspx).

f) Informed consent: A cover letter will be provided to invited survey participants. This cover letter will describe the purpose of the survey, sponsors, disposition of the results, provide assurance that participation in the survey is voluntary and anonymous, and that no adverse action will be taken against those who choose not to participate.

4. If you have any questions about this request, please contact Lieutenant Colonel Anthony Waldroup (primary investigator) – DSN Phone 240-3757 or (201) 536-3757; E-mail – [Anthony.Waldroup@brooks.af.mil](mailto:Anthony.Waldroup@brooks.af.mil).

//SIGNED//

ANTHONY WALDROUP, MD, MPH  
Lieutenant Colonel, USAF, MC, SFS  
Principal Investigator

Attachment:

1. Survey instrument
2. Cover letter for survey participants

## References

Fisher, C., et al. (2006). Retrieved November 17, 2008. 2006 State of the flight surgeon final report. Society of United States Air Force Flight Surgeons.  
<http://www.sousaffs.org/resources/sofs06.doc>

Green, B., et al. (2004). Retrieved November 17, 2008. 2004 State of the flight surgeon final report. Society of United States Air Force Flight Surgeons.  
<http://www.sousaffs.org/FLarchives/FL-2004-08.pdf>