

Appendix O

Work Groups Key Concerns

Group 1. Medical Care

- M1. Establish and resource a formalized and standardized IET PTRP program at all IET installations.
- M2. Develop and standardize a BCT profile form and an AIT site specific profile form.
- M3. Establish a quality profile PT program for all IET units based on installation resources.
- M4. Conduct health care orientation for all IET soldiers: conduct a cadre training course for all medical providers at each IET installation.
- M5. Establish chartered committee to address/monitor injury prevention issues/recommendations from seminar.

Group 2. Research Issues

- R1. Develop surveillance systems (identify and link appropriate databases). Pilot Systems: MTS/ADS FT Jackson, FT Sam System.
- R2. Coordinate research efforts: identify test beds; allocate resources; prioritize research topics.
- R3. Research intervention: disseminate existing information: current forums; www.
- R4. Research implementation: Standup and monitor PTRP & FTU across TRADOC now.
- R5. Research Monitoring: establish IET CALL: publication; www database.

Group 3. Injury Prevention Training

- T1. Establish an IET CALL Forum (publications and web based). Link with an injury prevention web page. (TRADOC, CHPPM)
- T2. Revise the Drill Sergeant MFT Curriculum to be battle focused & hands-on for IET environment. (APFS)
- T3. Incorporate IET Injury Prevention Training into all POIs for PCC, CTC, DS School, and any cadre level school. (TRADOC)
- T4. Review and update FM 21-20 to include injury prevention. (APFS/TRADOC)
- T5. Establish standardized database for IET commanders providing a feedback mechanism. (TRADOC/MEDCOM consultants-MRMC, CHPPM)
- T6. Establish quality assurance teams at post level to evaluate training (similar to APFS fitness teams). (APFS/TRADOC)
- T7. Involve medical personnel in training (physical therapist, athletic trainer, exercise physiologist). (TRADOC/Fitness School/Medical)
- T8. Establish MOS-based PT in AIT. (TRADOC/Branch specific/USARIEM/Fitness School)
- T9. Establish injury prevention training, education, and physical fitness conditioning at the Reception Battalion. (TRADOC)

Appendix O - continued

Group 4. Pre-Basic Combat Training

- P1. Bring MEPS under TRADOC for QA.
- P2. Change recruiter quota system.
- P3. Initial physical assessment and training plan at recruiting station.
- P4. Letter through to COS USA, to Sec of Defense encouraging wellness improvement in our schools.
- P5. Continued interest of Soldier physical fitness and injury prevention by DCS for IET training.

Group 5. The Way We Train: Practices and Procedures

- W1. Revise MFT course (+ field test) (APFS); less classroom and more practical
Revise POI. (Benning/APFS)
- W2. Revise screening criteria to include injury risk factors. (CHPPM, APFS, TRADOC)
- W3. Define fitness requirements for each MOS. (USARIEM, ARL, Branch Proponents)
- W4. Create a test on these requirements. (TRADOC and above)
- W5. Soft-run track with proper lighting at each training center (ideal= 1 track/bn). (TRADOC) **
- W6. Cross training equipment (examples: bikes, pools, weights, medicine balls, plyometric equipment). (TRADOC) **
- W7. Increase personnel for special programs (FTU, PTRP, etc.). (TRADOC) **
- W8. Standardize training areas. (TRADOC) **
 - Lighting protection
 - Heat prevention shelters
 - Safety equipment—mats, etc.
 - Risk assessment required for this..
- W9. Design a test for LE stress index. (USARIEM)
- W10. Define obtainable goals (different for men and women, etc.). (CHPPM)

** Exchange ideas with other commands