What is the first thing that comes to mind when you hear the term medical management? How has medical management been instrumental in our Army during the past few years? These are some of the questions that have been asked several times in recent years. I believe it is important to address these questions while reviewing the definition of leadership to understand how leaders can make a difference in ensuring our troops are being cared for in the best possible way.

Medical management is defined as the whole system of care and treatment of a sick individual. However, it can also be defined as encompassing the use of information technology for health, disease, care, and case management functions. Medical management is designed to modify medical provider behavior to improve the quality of care to patients. With regard to the military, medical management is also about leadership among noncommissioned officers (NCO) who play a key role on a team of U.S. Army professionals.

Just as today’s leaders have assumed many responsibilities during current conflicts and homeland defense activities, so did previous generations of NCO leaders accept the burden of heavy endeavors. The diligence, insight, and compassion of these leaders was very instrumental in building the Army’s trusted reputation – a reputation of solid professional NCO leaders.
who advise their commanders on how to keep Soldiers healthy. These are the men and women who have provided outstanding leadership for each and every Soldier who has put their life on the line in defense of the nation. These remarkable leaders have always endured through a wide range of duties and responsibilities, demonstrating their strength and compassion, from care on the battlefield to care of troops at home. These trusted professionals teach, coach, mentor, and watch over their troops, ensuring that they are fit, ready, and reliable for any mission.

The significance of medical care for Soldiers in the Army dates back as far as the Revolutionary War. During those trying days, leaders failed to focus on the medical health of their troops, which in turn weakened their military force. The lack of proper medical equipment and trained personnel from the Civil War to the Vietnam conflict resulted in many Soldiers being taken out of the fight, with some cases ending in death. Many past military leaders focused primarily on defeating the enemy instead of tending to the ill health of their Soldiers; these cases typically ranged from severe tooth decay, extreme cold weather injuries to diarrhea, and from pneumonia, encephalitis to viruses. The medical readiness of these troops could have been higher if leaders played a more engaged role in monitoring their Soldiers' health. The nation learned a valuable lesson from these previous wars, and since the Persian Gulf War in the 1990s, NCO leaders have been much more vigilant in monitoring the well-being and medical readiness of their troops.

The Medical Protection System, or MEDPROS, is one of the various tools used by leaders today in managing the medical readiness of their troops. MEDPROS affords leaders increased visibility regarding the health of their troops, which leads to unit readiness. Many NCO leaders use MEDPROS to manage the medical readiness of each Soldier, with regard to the following: (1) Identifying the need or requirement for medical warning tags; (2) checking for annual vision screening and identifying if eyeglasses are needed; (3) checking to see if a hearing exam is warranted; (4) screening for dental readiness and annual check-ups; and (5) screening for medical profiles, among other things. Leaders who maintain keen vigilance on monitoring their Soldiers’ individual medical readiness can resolve many problems among their troops while maintaining unit readiness.

The NCO leader’s book is another tool used for managing the medical readiness and status of their troops. This book allows the leader to understand various aspects of the Soldier, such as hometown origin, marital and family status, job and skill qualifications, vaccinations and medical exam history, strengths and weaknesses of job performance, home location, and calendar/appointment scheduling.

Today, those leaders who closely monitor the medical
readiness of their troops will most likely have Soldiers who are fit, ready and prepared to perform their duties in any given environment. On the other hand, those NCO leaders who fail to manage the medical readiness of their troops, assuming that to do so is not their responsibility, will usually face challenges regarding troop readiness.

Several years ago, one of the units in my command was preparing to deploy to Iraq, and was dealing with numerous challenges while preparing for their mission, as many of their Soldiers were not medically ready. The unit’s leadership was not managing their troop’s medical readiness properly, and this caused a major disruption in getting the unit to fully mission capable for the deployment. The unit recognized several troops with medical problems (e.g., back pain, foot pain, and in one case, mental health issues), but the Soldiers were told to continue training and were not supported in treating their ailments. Subsequently, these troops were deployed and after a few weeks into their deployment several of these Soldiers were sent home due to the severity of their health concerns. Additionally, it caused dissension and trust issues within the entire command. Eventually, the unit was able to remedy the situation, but damage had already occurred, and this particular organization struggled throughout the deployment. The lack of medical attentiveness from the leaders caused degradation in the unit’s mission readiness while jeopardizing the health of the Soldier. Good leadership would have probably prevented this from happening – but what is good leadership?

You may have noticed that “leader” and “leadership” have often been mentioned throughout this paper, but what do these terms mean? Many have described the meaning of military leadership in various ways. Some have said that leadership is the act of getting the job done. Others have said it is the art of making things happen, and still others have said that leadership is taking care of people along with doing the task at hand. However, Army Doctrine Publication (ADP) 6-22 defines leadership as, “A process of influencing people by providing purpose, direction and motivation to accomplish the mission and improve the organization.”

ADP 6-22 goes on to state that an, “Army leader is anyone who by virtue of assumed role or assigned responsibility inspires and influences people to accomplish organizational goals.” Leadership is characterized by a complex mix of organizational, situational and mission demands on a leader who applies personal qualities, abilities, and experiences to exert influence on the organization, its people, the situation and the unfolding mission.” In short, Army leadership establishes the fundamental principles to accomplish the mission and care for the troops. During my military career, I have seen that Army NCO leaders believe in teamwork and will find a way for their team to win. They understand that losing is unacceptable, creativity and diversity are essential, quitting is unthinkable, commitment is unquestionable, and victory is inevitable. Leaders know how to win, and winning means knowing your troops and managing their medical readiness at all times. NCO leaders must also continue to teach their Soldiers to accept responsibility for their actions and show them how to manage their own medical readiness (i.e., knowing what medi-

U.S. Army Maj. Stephen Peterman, a dentist assigned to the Wiesbaden Dental Clinic, performs a dental exam on a Soldier during a field training exercise held at Baumholder, Germany, Sept. 4-5, 2019. (U.S. Army photo by Kirk Frady)
to lead with strength and compassion, and
must create an environment in which their
Soldiers feel valued. The care of the Soldier is
the victory which ultimately leads to mission
accomplishment.

The bottom line is that good leadership
typically leads to success – success for the
unit and its people. Leadership is taking care
of people, and those leaders who effectively
manage the medical readiness of their troops
reflect everything that ADP 6-22 states about
leadership. Managing the medical readiness of
Soldiers most certainly concerns leadership,
which contributes to the success of the unit
and the morale of the Soldier. Leaders who
utilize their experiences and resources, such as
MEDPROS and the NCO leader’s book, know
and understand their Soldiers, and realize their
limitations, their strengths, and what makes
them tick. They are right on point in taking
care of their troops, because when it comes
down to it, medical management is every
leader’s business.

If you would like to learn more about this
topic, I recommend that you take time to
review Army Doctrine Publication 6-22, Army
Leadership at https://armypubs.army.mil/
epubs/DR_pubs/DR_a/pdf/web/ARN20039
ADP%206-22%20C1%20FINAL%20WEB.pdf,
and investigate the potential uses of MED-
PROS by visiting the official Army website at

A U.S. Army Soldier with the 38th Infantry Division gazes into a phoropter
during a pre-deployment vision appointment in Avon, Ind., Feb. 2,2019. (U.S. Army photo by Hannah Clifton)

cal vaccinations are due, preparing for eye and hearing
exams, and knowing the type of physical exams that
are due to maintain readiness). Leaders must continue

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