

2025 Cadet Guide to Care

A guide for Squadron Commanders, Academy Military Training NCOs, First Sergeants and Cadets



United States Air Force Academy

Provided by the 10th Medical Group
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Attachment 1 - 10th Medical Group Digital Healthcare Quick-Guide

Attachment 2 - SHPE_ASIMS Instructions (distribute to Cadets undergoing SHPE, pg4)

Attachment 3 - New Commander's Checklist

Attachment 4 - USAFA Resources for Cadets

Cadet Guide to Care Overview

The *Cadet Guide to Care for Cadets* provides useful information for Leadership and Cadets seeking care, understanding medical standards and services offered at USAFA.

Cadet health care is our priority, if there are areas that feel need clarification or more detail email alisha.l.acosta.mil@heath.mil.

Squadron Leadership should distribute Attachment 1 "10th Medical Group Digital Healthcare Requirements" to cadets.

We have gone digital, with our new electronic health record the fastest, most efficient way to seek care is through **MHS GENESIS Patient Portal** (<https://my.mhsgenesis.health.mil/>)

Cadets are required to track referrals through **TRICARE-West website** (<https://www.tricare-west.com/content/hnfs/home/tw.html>). Contact via the Patient Portal/Message Center (preferred) or by phone at [719-333-5752](tel:719-333-5752).

For AFTER HOURS, Cadets should be familiar with **The Nurse Advice Line (NAL)** @ 719-524-2273, Option 3. OR TRICARE @ 1-800-874-2273. The NAL will direct them to the appropriate after-hours care.

Attachment 1, *10th Medical Group Digital Healthcare Quick-Guide* highlights that all cadets should complete these critical steps in expectation of someday needing care.

1. Establish a DS Logon to Enable Mobile Access to All of the Required Platforms Listed On This Document @ <https://patientportal.mhsgenesis.health.mil/>
2. Update your Profile with Correct Address, Phone Numbers and Emails @ <https://idco-pki.dmdc.osd.mil/idco>
3. Go to the MHS GENESIS Patient Portal to View Your Health Record, Message Your Provider, Schedule Appointments, Renew Medication, Activate Medication @ <https://patientportal.mhsgenesis.health.mil/>
4. Go to www.tricare-west.com to Manage Any Referrals that You Receive Which are Deferred to a Provider Off-Base
5. Go to <https://mhsnurseadvice.com/> to Initiate Online Chat or Video Chat with a Nurse 24/7/365 or call 1-800-TRICARE (874-2273)

Important Phone numbers and Links:

SCHEDULE AN APPOINTMENT: 719-524-2273 option 1

MHS Nurse Advice Line: 1-800-TRICARE (874-2273) or 719-524-2273 option 3

Cadet Medicine Clinic: 719-333-5187

Cadet Medicine Nurses: 719-333-7948, 719-333-7874

Flight Medicine: BEST method is MHS Genesis Patient Portal message “USAF Academy Flight Medicine” or 719-333-5950

Nutritionist: Mitchell Hall 719-333-9812 No referral required

Dental Clinic: 719-333-5359

Dental Clinic After-Hours On-Call Dentist: 719-333-5192

Mental Health Clinic: 719-333-5177

Optometry Clinic: 719-333-5189

Cadet Standards: 719-333-0533

Cadet Case Management: 719-333-3767

10 MDG Benefits Coordinator (Billing Concerns): 719-333-5281

Cadet Physical Medicine: Physical and Occupational Therapy 719-333-5055

<https://patientportal.mhsgenesis.health.mil/>

<https://airforceacademy.tricare.mil/Health-Services/Primary-Care/Cadet-Medicine>

Cadet Medicine - Services

All routine care is appointment-based

Sick Call Services (no appointment) **M/T/Th/F, 0700–1600** ***W, 0930-1600***

Cough/Cold/Sore Throat
Nausea/Vomiting/Diarrhea
Sexually Transmitted Infection (STI)
Urinary Tract Infection (UTI)

Walk-In Services (no appointment) **M/T/Th/F, 0700–1600** ***W, 0930-1600***

Immunizations
Birth Control (IUDs/implants/1st Depo shot by appointment)
Concussion Testing

Over-the-Counter Pharmacy **M/T/Th/F, 0730–1600** ***W, 0930-1600***

Colds, Allergies, Pain, Diarrhea, Topicals, Eye Drops & More!

After Hours

EMERGENCY CARE: call 911 or go to the nearest emergency room. No approval needed.**

Examples of emergencies: Sudden unexpected onset of a medical condition; sudden severe worsening of a chronic condition; a condition threatening life, limb, or eyesight; requires immediate medical treatment or when you are at immediate risk of harming yourself or others.

URGENT CARE: Call NAL 719-524-2273, Option 3, or 800-TRICARE (874-2273) for coordination of care. Cadets must have approval for Urgent Care during duty hours (but not on weekends or outside duty hours). **

**Cadets are required to follow-up in Cadet Medicine Clinic within the next business day after discharge from urgent care, emergency department or hospital.

CONTACT US:

Cadet Medicine Clinic: 333-5187

Hours: M/T/Th/F, 0630–1800
W 0930-1800

(*closed all Federal Holidays and every Wednesday from 0630–0930 for training)

How can I book an appointment?

1. Schedule online via the Patient Portal: <https://patientportal.mhsgenesis.health.mil/>
SELECT ONE of the following by starting to type in "TO Box"
 - USAF Academy Adolescent Medicine
 - USAF Academy Cadet Sports Medicine
 - **USAF Academy Cadet Medicine Messaging**
 - USAF Academy Optometry Messaging
 - USAF Academy Flight Medicine Messaging

OR

2. Call the Access to Care Line (719-524-2273, Option 1)

Treatment Team Meeting

Cadets or Squadron Commanders can initiate a Treatment Team Meeting with all relevant providers. Call the clinic at 333-5187 to coordinate this meeting.

Can't Make it to an Appointment?

Cadets must cancel or reschedule at least 2 duty hours before the appointment start time. A no-show list is sent to CW leadership weekly.

ASIMS

Aeromedical Services Information Management System (ASIMS) provides Sq/CCs, AMTs, and Cadets with access to their individual medical readiness (IMR) status

How does a Sq/CC or AMT gain access?

- Commandant of Cadets requests access each summer for all Sq/CCs and AMTs by completing a designee MFR
- Sq/CCs and AMTs can also request access by emailing the BOMC org box @ usaf.usafa.10-mdg.mbx.10-mdg-bomc@health.mil (AMTs must have been designated by Sq/CC in an MFR to receive access)
- After access is granted, visit https://asimsimr.health.mil/imr/Login_Unit.aspx
- Cadets can access status through myIMR @ <https://asimsimr.health.mil/imr/MyImr.aspx>
- Accounts are locked after a month of inactivity; email BOMC org box to unlock

What applies to Cadets?

1. Immunizations
2. Labs
3. Profiles; quarters; grounding

Green=current; yellow=due; red=overdue

In the immunization section, light blue indicates a positive titer (no vaccine needed) and pink indicates a recommended but not required vaccine (e.g., HPV)

What does not apply to Cadets?

1. PHA (PHAQ/MHA): performed at first duty station
2. Dental: will be updated after cadet dental appointments
3. Med Equipment: provided at first duty station

How do I check Individual Medical Readiness (IMR) for my Cadets?

1. Visit https://asimsimr.health.mil/imr/Login_Unit.aspx
2. Unit Report ASIMS → Reports → Unit IMR Status → Click on "Unit POC Login Form"
3. Individual Report ASIMS → Personnel → Personnel list → choose filter
4. If cadets listed not in your squadron, contact the Cadet Med Clinic

Cadet Medicine – Profiles, Quarters, SHPEs

Profiles (AF469):

- Are completed in ASIMS
- May take up to 48 hours to route to Sq/CC
- Sq/CC will receive email to sign the AF469

Quarters Authorization (aka Bedrest):

- Are completed in ASIMS
- Immediately available to Sq/CC and AMTs
- Cadets can view/download through myIMR

Separation History and Physical Exam (SHPE)

- **Who needs a SHPE and when?** Cadets that do not graduate and leave the Academy.
- **How do I complete a SHPE?**
 1. Visit <https://asimsimr.health.mil/imr/myimr.aspx>
 2. Click “My Individual Medical Readiness Status”
 3. Click on the “SHPE” tab
 4. Click “Start New SHPE”
 5. SHPE pre-screening Questions (DD2807-1)
 - a. Purpose is “Separation from AD career”
 - b. Resigning is NOT an Administrative Discharge
 - c. **DO NOT** check that you are filing for VA claim.
You can still file a claim later, but the SHPE must be completed at USAFA.
 6. Demographics
 - a. If PADCODE is blank enter “cadet”
 - b. If separation date is unknown, put in estimated date of separation
 7. **Once complete, call 719-333-5187** to schedule the “separation physical exam” portion
 8. If questions, call 719-333-5684

CONTACT US:

Cadet Medicine Clinic: 333-5187

Hours: M/T/Th/F, 0630–1800
W 0930-1800

(*closed all Federal Holidays and every Wednesday from 0630–0930 for training)

How can I book an appointment?

1. Schedule appointments online via the MHS Genesis Patient Portal:
<https://patientportal.mhsgenesis.health.mil/>
2. Call the Access to Care Line (719-524-2273, Option 1)

After hours? Call Nurse Advice Line (719-524-2273, Option 3 or 1-800-TRICARE)

Emergency? Call 911 or go to the nearest emergency room

Flight Medicine

Sees instructor pilots, Wings of Blue/Green, active duty/reservists assigned to USAFA with rated AFSCs, Occupational Health Exams (fire, security forces), and students in airmanship programs.

1. Return to Fly
2. Basic Airmanship Clearance and Waivers
3. Advanced Airmanship Clearance and Waivers
4. Combat Survival Training & SERE Clearances
5. (Active Duty Only) INITIAL Flying Class I/II/III/GBOW/SWA/ATC Clearances and Waivers

Frequently Asked Questions:

1. Are contacts/ civilian glasses allowed when performing in cadet flying programs to include 490 Jump?

No, contacts and civilian glasses are not allowed. Cadets are only authorized to wear their issued BCGs when performing these duties. See the optometry clinic if needing replacements or updates.

2. Am I cleared for my airmanship after being seen in another clinic?

That answer depends upon what care was provided to you. If you were prescribed medication, underwent a procedure or surgery, were seen in the ER or urgent care, you are no longer cleared for your airmanship. Please reach out to Flight Medicine to schedule an appointment for return to fly.

3. I am scheduled to undergo PRK/SMILE/LASIK surgery soon, am I still cleared for my airmanship?

You can be cleared for your airmanship until you undergo surgery. Once you undergo surgery, you are deemed not cleared for fly duty. You will need to follow up with the Flight Medicine clinic for return to fly.

4. I am in an advanced airmanship program and will be due for my renewal appointment in 3 months when should I schedule my renewal appointment?

You should schedule your appointment at least 2 months prior to your advanced airmanship 2992 expires. This will ensure that you are able to get an appointment before your 2992 expires.

CONTACT US:

Flight Medicine Clinic: 719-333-5950

Location: Cadet Clinic

Hours: 0700-1600 (closed from 1100-1200 for lunch)

Org box: usaf.usafa.10-mdg.mbx.10-amds-ops-flt-med@health.mil

How can I book an appointment?

1. Call the Flight Medicine clinic: 719-333-5950

OR

2. Request through MHS Genesis Patient Portal message box: USAF Academy Flight Medicine Messaging

EMERGENCY or AFTER HOURS:

Emergency: Call 911 or go to the nearest emergency room

Non-Emergency After Hours: Call Nurse Advice Line (719-524-2273, Option 3 or 1-800-TRICARE)

HOW CAN Sq CCs HELP:

- Ensure cadets schedule appointments with Flight Medicine as soon as the need arises...do not wait until the last minute.
- Ensure 4th Class Cadets attend initial BA/CST clearance appointments unless a higher tier activity with the scheduling

Concussions

Return to Learn

- Stage 1: Rest
 - No classroom attendance, formation, briefings, homework, screens, academic reading, loud noise, bright lights, meals in Mitchell Hall
- Stage 2: Return to homework
 - Attempt activity such as homework or reading for 10–30 min, gradually increase time
 - Allow 10–15 min rest between homework activity
 - Do not participate in academic coursework, meals, formations, briefings, marching, running strips
- Stage 3: Return to class with maximum modifications
 - Return to partial day of classes (1–2 classes/day)
 - Avoid classes or activities that lead to symptoms
 - Begin to make up missed work
 - Communicate with professors when experiencing symptoms and ask to leave or modify classes
 - No quizzes, GRs, PE, formations, briefings, marching, and running strips; self-paced meal attendance
- Stage 4: Return to class with minimum modifications
 - Return to full day of classes with breaks as needed
 - Begin quizzes and GRs, but may need adaptations to prevent triggering symptoms
 - Avoid multiple quizzes or GRs on same day
 - Self-paced participation in military formations, briefings, marching, and meals; no running strips
- Stage 5: Full class attendance
 - Work with professors regarding missed work
 - No running strips

Return to Play

- Stage 1: Physical rest
 - Stage 2: Light activity / low impact (max duration: 20 min/d)
 - Stage 3: Moderate activity / light jog (30 min/d)
 - Stage 4: Moderate activity / sports skills / weightlifting (40 min/d)
 - Stage 5: Intensive activity / sports practice but no contact (45–60 min/d)
 - Stage 6: Unrestricted – only when fully cleared!
-

CONTACT US:

Sports Medicine Clinic: 333-5942

Hours: M/T/Th/F, 0630–1800

W 0930-1800

**(*closed all Federal Holidays
and every Wednesday from
0630–0930 for training)**

**Walk-ins welcome all day for
concussions**

USAFA CONCUSSION FACTS:

On average, 300 cadets suffer a
concussion each year.

Cadets with a concussion are
followed by the Sports Medicine
Clinic and enrolled in Return to Learn
and Return to Play protocols.

The average time to complete the
protocols is 3 weeks for males and
4 weeks for females.

Delaying care can cause prolonged
recovery, so it is important to seek
care right away.

No contact activities prior to
clearance by Sports Medicine due to
risk of secondary impact syndrome
and sudden death.

Application of Medical Standards to USAFA Cadets

Questions about your MEB?
Email PEBLO OrgBox @
usaf.usafa.10-mdg.mbx.peblo-
org-box@health.mil

Cadets are subject to three sets of medical standards after appointment to USAFA, and the application of these standards can become exceedingly complex:

- DoD Accession Medical Standards determine suitability for commissioning
- USAF Retention Medical Standards govern an airman's fitness for continued active duty
- USAF Occupational Medical Standards determine fitness for specific AFSCs

Accession Standards:

- Specified in DoDI 6130.03 v1, *Medical Standards for Military Service: Appointment, Enlistment, or Induction*
- Applied by DoDMERB for *applicants* to USAFA; medical waiver authority for applicants is the Accession Medical Waiver Division (AMWD) under AFAC/AM
- After appointment to USAFA, medical waiver authority over current cadets is the USAFA/SG (i.e. 10 MDG/CC)
- Surveillance: DoD accession medical standards are sufficiently broad that by the time of the USAFA Graduation Physical in the C2C year, 25-30% of USAFA cadets do not meet DoD accession standards. Many of these standards are time-limited and frankly don't make sense for our population of cadets in a 4-to-5 year training program (e.g. knee ligament injury within the past year, corneal refractive surgery within 6 months of the commissioning evaluation). Accession waivers are therefore liberally granted. In the absence of substantial and ongoing/projected functional impairment or poor prognosis, waiver for accession (commissioning) is the norm. Straightforward or time-limited disqualifying issues are generally approved at the time of the graduation physical. More complicated cases with uncertain long-term prognosis (e.g. mental health cases, cancer, serious or life-threatening issues) are followed by the 10 MDG's Cadet AMRO (Airman Medical Readiness Optimization) Board, which meets monthly during most of the academic year to maintain surveillance on these more difficult cases. In the absence of safety concerns or significant functional impairment, most cadets with such issues will be followed into their C1C year before a final decision on accession waiver/suitability for commissioning is rendered by the Cadet AMRO Board and USAFA/SG. Sq/CCs with significant concerns about specific cadets' suitability for ongoing training and/or commissioning should discuss those concerns with the Cadet Standards Clinic physicians (Dr. Nelson and Dr. Neubauer).

Retention Standards:

- Governed by DAFMAN 48-123, *Medical Examinations and Standards*, and specified in the associated Medical Standards Directory, found online on the Defense Health Agency's Knowledge Exchange (generally accessible only to DHA staff).
- Although cadets must be held to accession standards, retention standards still apply because cadets in need of accession medical waiver can only be waived to the retention standard, and if they have a condition that fails to meet retention standards, **Medical Evaluation Board (MEB)** must be completed prior to USAFA graduation/commissioning.
- Airmen who do not meet AF retention standards are subject to MEB for *fitness-for-duty evaluation* (MEB may also be accomplished on cadets for *disability benefits evaluation* – see "Disability Evaluation" section).
- The MEB process is managed by AFPC and has multiple steps/opportunities for appeal:

- Step 1 is the Initial Review-in-Lieu of (IRILO) MEB, dispositioned by AFPC/DPMNR. This office determines whether an airman can be returned to duty (RTD), with or without a deployment/assignment-limiting C-code (ALC-C), or whether a “full MEB” is indicated.
- If a full MEB is directed, the next step is for the airman's case to be referred to the Informal Physical Evaluation Board (IPEB) at AFPC. This is a record review. If the IPEB disposition is not RTD, an airman may appeal the IPEB decision to the Formal Physical Evaluation Board (FPEB).
- If an airman appeals to the FPEB, a date for the hearing is established, as this part of the process grants the airman the opportunity to present their case to the FPEB (formerly in person in San Antonio, now more often “virtually” over Teams or similar).
- If the FPEB decision is not RTD, the airman may appeal the decision to SAF-MR, although SAF-MR retains the right to determine whether or not to consider the appeal.
- Potential MEB outcomes include RTD, discharge with severance pay (DWSP), discharge with an existed-prior-to-service (EPTS) characterization, temporary duty retirement listing (TDRL), or permanent medical retirement (PDRL). TDRL and PDRL dispositions will be accompanied by a disability rating percentage and preserve ongoing medical benefits. TDRL dispositions must be revisited periodically (usually annually) and these re-evaluations occasionally result in a RTD disposition that enables an airman to re-enter active duty.
- If an airman is separated from military service via the MEB process, a DD214 will eventually be published by USAFA/A1.

Occupational Standards:

- Medical standards for rated and special operational duty AFSCs are specified in the Medical Standards Directory associated with DAFMAN 48-123. Some non-rated AFSCs also have medical requirements specified by the Career Field Manager(s) for those AFSCs, as published in the Air Force Officer Classification Directory (https://mypers.af.mil/app/answers/detail/a_id/7759/kw/afocd):
 - Security Forces (31P), OSI (71S), Bioenvironmental Engineering (43F), and Space Operations (13S) personnel must all meet color vision requirements (score requirements vary).
 - Security Forces (31P) and OSI (71S) personnel must meet Arming/Use-of-Force requirements and must therefore meet specified mental health requirements.
 - With the exception of 13S color vision waivers, there is essentially no medical waiver option available for nonrated AFSCs with medical standards specified in the AFOD.
- Refer to Cadet Guide to Care guidance on Aeromedical Waivers for additional information on application of Occupational Medical Standards.

Disability Evaluation:

- Statutes require service members separated from military service to undergo **Disability Evaluation System (DES)** processing prior to separation if a potentially compensable service-connected medical issue exists. Although most Active Duty service members are processed via the VA's Integrated Disability Evaluation System (IDES) process, USAFA cadets are most often processed through the so-called Legacy Disability Evaluation System (LDES), which streamlines processing for trainees at military training bases. The LDES process mirrors the MEB process, although in most cases a separation decision has already been accomplished due to USAFA disenrollment for non-medical reasons (i.e. academics, discipline, honor, physical fitness), voluntary separation, or accession waiver medical denial. Fitness-for-duty evaluation is therefore not a component of MEB processing accomplished for LDES reasons. Because of delays in MEB processing and production of separation orders, in the past, USAFA cadets have been able to request turnback/excess leave to allow departure from USAFA while the LDES evaluation is completed.

Graduation Physical Timeline

Unlike AD service members, service academy cadets remain subject to both AF *retention* standards and DoD accession medical standards until commissioned. The graduation physical process therefore serves a dual role of clearing cadets for commissioning as well as occupational clearance for their preferred AFSCs (most often pilot, of course), although accession standards may be applied throughout the cadet lifecycle to ensure continued suitability for training at USAFA.

Timeline:

- C4C year: no graduation physical components occur, although initial eye screenings for basic airmanship and CST in the C4C year may lead cadets to mistakenly presume that they have been cleared for pilot or other rated/special operational duty AFSCs.
- C3C year: the **Graduation Eye Exam occurs** in Cadet Optometry, and represents the primary source of potential medical disqualifiers for those with an interest in rated/special operational duty AFSCs. Cadets are briefed on the potential career implications of grad eye exam findings upon completion of all components of this exam. Note that cadets are not uncommonly asked to return for additional testing after completion of the initial components of the exam (e.g. visual field testing, full depth evaluation, referral to ophthalmologist, etc.) Those who fail **color vision testing** are only potentially allowed to re-test if confirmatory color vision tests, accomplished after failure on the Cone Contrast Test (CCT), fail to corroborate the findings of the CCT (this is AF policy, not just a local decision).
- C2C year:
 - **Corneal Refractive Surgery** (CRS) (e.g. SMILE, LASIK, PRK or ICL): after graduation eye exam in the C3C year, cadets eligible for CRS may be placed in CRS priority group 1 or 2. Priority group 1 cadets **MUST** have their excessive refractive error (i.e. nearsightedness or farsightedness) corrected surgically, while those in priority group 2 meet criteria for being able to fly with glasses or contact lenses; CRS is therefore a “nice-to-have” and not a “must-have” for priority group 2 candidates.
 - Cadets undergoing CRS cannot be qualified for rated or special operational duty AFSCs until at least 3-6 months after the procedure. It is therefore **essential that CRS occur prior to October of the C1C year** to ensure rated/SOD AFSC qualification prior to graduation/commissioning. IC athletes must not invoke their athletic requirements as justification for delaying CRS if needed!
 - The **Cadet Graduation Physical** occurs in the C2C year in Cadet Standards Clinic. This examination has multiple components that will not be completed on the same day. The Graduation Eye Exam should already have occurred. During this graduation physical encounter the cadet will undergo comprehensive review of medical history, anthropometric measurements, and a physical exam with one of the aerospace medicine specialists who will discuss, in detail, whether a cadet meets medical standards for rated/SOD AFSCs, whether waiver is needed, and whether waiver is likely. For those pursuing pilot or RPA qualification, the 3.5-hour computer-based neuropsych test is required. Submission of the exam for certification and/or waiver cannot occur until this is completed.
- C1C year:
 - Although a cadet's physical should have occurred in the C2C year, **a substantial number of such examinations are still pending certification and waiver well into the C1C year**. Delays in examination processing often occur because cadets fail to complete required elements of the exam (e.g. neuropsych testing or lab tests), require additional evaluations which may take many months to occur (e.g. pulmonary function testing for those with history of childhood asthma), and disqualifying conditions may not be eligible for waiver consideration until at least 1-2 years of recovery/stability has been demonstrated (e.g. mental health disorders, sinus surgery, recovery from orthopedic surgery).

- The **Dental Clinic** sees cadets for a pre-commissioning dental evaluation in the C1C year, primarily to establish a Dental Readiness Classification. Cadets in need of wisdom tooth extraction will be referred at this time to the Oral Surgery Clinic for extraction. Removal of wisdom teeth is a requirement that should happen prior to graduation for those pursuing rated AFSCs, to avoid potential flying training disruption.

Aeromedical Waivers

Aeromedical waivers are waivers for rated (pilot/CSO/ABM) and special duty (RPA/ATC/missile operations (MOD)/special warfare (SWA)) governed by DAFMAN 48-123 and the Medical Standards Directory.

Waiver Authority:

- The primary aeromedical waiver authority is AFAC/AM (Accessions Medical Waiver Division)
- USAFA is NOT the aeromedical waiver authority for rated or special operations AFSC qualification.
- The USAFA flight surgeons in Cadet Standards coordinate evaluation of all disqualifying conditions and submit any waiver requests to the waiver authority, as needed, as part of the graduation physical process.

One Waiver per Airman, Not per Condition:

- One waiver request is submitted addressing *all* disqualifying conditions.
- Evaluation/required testing must be complete for all conditions to submit the waiver request

Waiver Timelines:

- Waivers cannot be processed until all aspects of the graduation physical have been completed.
 - It can take many months for a graduation physical package to be ready for certification because of the time it takes to complete examination requirements and the time to process through several iterative layers of review at USAFA before it's ready for submission.
 - Cadets need to expedite completion of all additional examination requirements (e.g. neuropsych testing, laboratory tests, specialty consults) ASAP.

What if the waiver isn't complete by the time of the rated match?

- Many USAFA graduation physicals remain in incomplete or pending status at the time of USAFA's rated and non-rated match processes.
- Having an incomplete status does not interfere with the AFSC matching process or being selected for specific career fields.
- Cadet Standards flight surgeons have an extensive discussion with each cadet during the graduation physical to provide an idea of each cadet's likelihood of qualification for any given AFSC, based on medical history and exam and knowledge of past precedent/waiver authority behavior.
- Predicting waiver outcome is an inexact science and unfortunately "surprises" will occur. Coaching cadets to have a "Plan B" and consider both rated and non-rated AFSCs is highly encouraged.

The Aeromedical Consult Service (ACS):

- The ACS is located at Wright-Patterson AFB and consists of a variety of medical specialists (i.e. ophthalmology, cardiology, neurology, pulmonology, etc.) with aeromedical expertise.
- These specialists may be asked by AMWD to review specific cases to provide a recommendation and/or risk assessment for a particular medical condition.
- The ACS does not have decision authority, but their recommendations carry significant weight.
- In most cases, their review will consist of a review of records although, in rare cases, TDY travel for in-person evaluation may be required (this is at ACS discretion).

Common Specific Conditions: (this is by no means an exhaustive list)

- **Corneal Refractive Surgery (i.e. PRK, LASIK or SMILE):**
 - Although waiver is not required for all refractive surgery cases, at least 3-6 months (sometimes a year) of visual stability is required before the physical can be submitted for certification.

- **Other Eye Conditions:**
 - Many eye conditions require waiver submission for rated AFSCs (largest category for DQ)
 - In most cases, waiver is possible depending on severity of the issue
 - Color vision deficit and vision uncorrectable to 20/20 are disqualifying for all rated/special operational duties without the possibility of medical waiver. Defective depth perception and optic nerve head drusen are not waiverable for pilot/CSO positions.
- **Concussion:**
 - Requires waiver if associated with loss of consciousness, amnesia, or recovery >45 days.
 - Requires MRI of the brain and other neurologic testing, depending on severity
- **Short/Tall Stature:**
 - Waivers are very objective, with outcome dependent upon the results of computerized analysis done by 19th AF to determine an applicant's fit in each of the cockpits in the AF inventory.
 - Additional anthropometric measurements are required for this calculation and are done on a walk-in basis in the Cadet Standards Clinic (333-0533).
- **Asthma:**
 - Any lifetime history of asthma, bronchospasm, wheezing, or reactive airway disease is disqualifying for rated AFSCs other than RPA and requires additional evaluation and waiver
 - Evaluation includes at least two or three breathing tests (pre/post bronchodilator spirometry, methacholine challenge, exercise challenge) over multiple visits depending on cause.
- **History of Eczema/Atopic Dermatitis:**
 - History of eczema or atopic dermatitis after age 12 is consider disqualifying for pilot/CSO
 - Dermatology evaluation is required to confirm that the condition has resolved.
 - Pulmonary function testing is also required to help exclude asthma given overlap between eczema, asthma and allergies.
- **Mental Health Conditions:**
 - Most MH conditions require a period of stability after return to psychological "best baseline".
 - The stability period required depends on the type of diagnosis (mood disorders – 2 years, adjustment disorder – 1 year, eating disorders – 2 years, anxiety disorders – 2 years)
 - With any MH history, a MH clearance eval is required to confirm diagnosis and set best baseline.

Waiver Decision Feedback:

- Waiver *approval* decisions will appear in COMPASS on a cadet's Personnel Summary page upon receipt by Cadet Standards Clinic of a disposition by the Waiver/Certification Authority. Sq/CCs may view Q/DQ decisions in COMPASS Campus Community under Medical Related Data for cadets assigned to their squadron.
- Waiver *denial* decisions will be communicated to you, the Sq/CC, to facilitate in-person notification of "bad news" and the "what's next" discussion. Disqualification/waiver denial will not be reflected in COMPASS until notification from you back to Cadet Standards staff that you have communicated the denial decision to the cadet.

Exceptions to Policy (ETP):

- LINE (i.e. non-medical) process that permits a handful of "exceptional" cadets, who have been medically disqualified from rated or special operational duty AFSCs, to receive consideration from a HQ AETC/CC-led board for approval to enter AFSCs despite medical disqualification.
- A medical disqualification must have been rendered to start the ETP process
- Boards convene monthly between January and May (sometimes as late as Jun) of C1C year.
- You, as the Sq/CC, will determine whether a cadet should be nominated and develop an ETP package for CW leadership. You will be asked to justify characterization of a cadet as "exceptional" to merit nomination for ETP consideration.
- A more detailed discussion of the ETP process is covered under separate title

Cadet Standards flight surgeons and staff are always available to answer questions, provide additional detail, discuss case requirements, and help with preparation for discussion/planning for each cadet.

Special Warfare Airman

If a Cadet has interest in pursuing Special Warfare Airman (SWA) selection (CRO, STO, TACP-O), schedule grad physical EARLY.

- SWA selection is not awarded through the typical AFSC match and requires application to attend an initial selection (Phase 1) event
- Selection opportunities are available several times per year
 - STO initial selection is now a formalized AETC course with the requirement to apply, *meet course prerequisites* and be selected for the course
 - Although a certified physical exam is preferred, the special warfare communities accept an AF Form 422 in lieu of a completed/certified physical in the application process
 - Once the graduation physical is in process, Cadet Standards can generate the AF Form 422
- Career field managers can no longer waive medical conditions, medical certification and waiver authority resides with the Accessions Medical Waiver Division (AMWD) in San Antonio TX. The physical exam and waiver processing often takes **6+ mos**
 - If waiver is denied, and with support of the entire USAFA chain of command, a few cadets may be nominated for *Exception-to-Policy (ETP)*
 - Standards and waiver/ETP tolerance on visual acuity, depth perception, and color vision have been tightened *for operational reasons*

HOW CAN Sq/CCs HELP the PROCESS:

- Encourage cadets to make their decision early and commit
- Encourage cadets to start the grad physical early by scheduling the exam as early as possible in your C2C year
- Encourage cadets to get stuff done (lab tests, x-rays, specialty consults etc.) in a timely fashion
 - Plan for the additional testing requirements
 - Get consults scheduled ASAP. Don't miss appointments.
 - Stay engaged with where their physical is in the process
- The goal would be to have a completed/certified physical examination by spring of the C2C year
- Selection process questions should be directed to the SWA Liaison (a fellow Sq/CC or faculty member)

Exception to Policy (ETP) Process

Basics

- The ETP process is a line-of-the-Air Force board process separate from medical qualification
- The ETP process begins when medical qualification is completed and a decision of "disqualified" has been rendered
- The ETP process allows for a reconsideration for those deemed "exceptional"
- The process is based on risk assessment, weighing safety risk associated with a given medical condition vs. the exceptional qualities of the individual (whole person concept)
- If approved, the ETP overrides the medical waiver disqualification
- Typically used for those not selected for pilot but can be used for reconsideration of medical disqualification for initial training in any AFSC

The Selection Process

- The ETP process starts with the decision to continue to seek selection for a given career field despite medical disqualification
- The first step is a discussion with your cadet regarding the decision to pursue ETP
 - This step can happen at any time there is a concern regarding qualification
 - An early discussion allows you, as the Sq/CC, to provide leadership positions/challenges
- It is your decision, based on cadet performance, as to whether you will support and press for ETP
- You, as the Sq/CC, develop a request package with cadet participation (as defined by USAFA/A1 process) which is submitted "up the chain" to the Commandant.
- The Commandant selects cadet packages based on selection criteria established by CW (GOM, class standing, PCSM, leadership etc.) and forwards recommended candidates to the Superintendent through A1 for consideration/submission to the Force Development Exception to Policy (FD-ETP) Board

The Board

- HQ AETC defines membership/attendance with AETC/CC as chair and decision maker
- AETC/CC has delegated authority from SAF/MR (Air Force Manpower and Readiness)
- Board convenes monthly to consider packages submitted from USAFA, AFROTC, ANG, AF Reserves\
- Boards for USAFA cadets are typically held Jan-May of C1C year
- When USAFA has a candidate meeting the board, the Superintendent, with supporting staff, will attend to represent USAFA and the cadet
- The medical case is typically presented by AETC/SG with input from the candidate's medical provider (Cadet Standards provides input for USAFA cadets)
- Discussion centers on risk to Aviator/flight safety/mission completion posed by the medical condition

The Decision

- The board has relatively broad latitude in decision, unlike the medical waiver process
 - Medical waiver process is all or none for pilot/CSO qualification (i.e. good for all aircraft or medically disqualified)
 - Board can grant "categorical" ETPs, limited types of aircraft or missions
- Once the decision is made, the personnel/assignment system is updated through AFPC
- The medical qualification physical examination is updated by AFMED/SG staff to reflect the ETP

Mental Health - CDE

Command Directed Evaluations (CDEs). Please call the Mental Health Clinic directly to consult with a provider regarding a CDE.

Sq/CCs can request either Routine or Emergency Command Directed Evaluations (CDEs)

*** Important! CC's or supervisors may make informal, non-mandatory recommendations for Service members under their authority to seek MH care when circumstances do not require a CDE based on safety or mission concerns.

1. Routine CDE (appt required within 7 business days)

- Sq/CC requests CDE
- Mental Health determines whether the request for evaluation is appropriate
- Limited Confidentiality: CDE opens lines of communication between Mental Health and CC in relation to fitness for duty

2. Emergency CDE (Same-day appointment. After hours CDEs can be completed at the nearest ER)

- CC or supervisor believes that there is an imminent danger to self or others
- CC or supervisor will contact the Mental Health Clinic to discuss circumstances and observations regarding the member that led to referral either prior to or while member is en-route to evaluation

AOC Responsibility for CDEs:

- Pre-existing documentation is helpful showing that the service member has been formally counseled concerning deficiencies and given opportunity to overcome them (routine only)
- Consult with Base Legal Office/Mental Health Clinic to determine whether a CDE is legal and appropriate
- Inform the member of date, time, and place of scheduled CDE.

CONTACT US:

Main Clinic (Community Center)

Phone: 333-5177 OR 5178

Location: 5136 Community Center Drive, USAFA, CO 80840

Hours: M-F, 0730-1630

Call or walk-in to book an appointment!

Satellite Clinic (Sijan Hall)

Phone: 719-333-1338 OR 1339

Hours: M-F, 0730-1630

Alcohol & Drug Abuse Prevention and Treatment (ADAPT)

Location: 5136 Community Center Drive, USAFA, CO 80840

Hours: M-F, 0730-1630

Phone: 719-333-5177

Org Box: usaf.usafa.10-mdg.mbx.10-mdg-adapt-clinic@health.mil

AFTER HOURS CONTACTS:

On-call MH Coverage for
CONSULTATION ONLY

Call 10ABW Command Post at 719-333-2633

Mental Health – High Interest List

High Interest List (HIL). A list that tracks members identified with elevated safety concerns or vectored to a higher level of care.

What is HIL and what is helpful for? Increased clinical oversight for the member and collaborative communication between Mental Health Clinic and Command Team.

AOC's responsibilities for members on the High Interest List/discharge from higher level of care:

1. It is important to bring the member into the Mental Health Clinic (MHC) following discharge from a higher level of care. This shows support for the member and allows the mental health provider (MHP) to coordinate continued care with military leaders as well as provide appropriate clinical updates.
2. Attend Team Treatment Meetings (TTM) when requested by the MHP. This will help ensure everyone is on the same page in relation to the member's care and safety.
3. Provide pertinent collateral information in regards to member's mental health.
4. Ensure members living environment is safe (be open to MHP recommendations during TTM).
5. Maintain awareness of member's safety plan.
6. Be available for updates on member's mental wellbeing/treatment progress as needed (information will be provided consistent with HIPAA guidance).

CONTACT US:

Main Clinic (Community Center)

Phone: 333-5177 OR 5178

Location: 5136 Community Center Drive, USAFA, CO 80840

Hours: M-F, 0730-1630

How can I book an appointment?

Routine Appt - Call 333-5177 OR 5178

Crisis Care – Call or walk in during business hours

AFTER HOURS CONTACTS:

On-call MH Coverage for
CONSULTATION ONLY

Call 10ABW Command Post at 719-333-2633/333-2000

Satellite Clinic (Sijan Hall)

Phone: 719-333-1338 OR 1339

Hours: M-F, 0730-1630

Alcohol & Drug Abuse Prevention and Treatment (ADAPT)

Location: 5136 Community Center Dr. USAFA, CO 80840

Hours: M-F, 0730-1630

Phone: 719-333-5177

Mental Health - ADAPT

Alcohol and Drug Abuse Prevention and Treatment (ADAPT):

The mission of ADAPT is to educate individuals on how to engage in healthy coping behaviors, and, if they choose, to use alcohol responsibly and develop a healthy relationship with legal substances (AFI 44-121).

Commander Referral (Mandatory)

A Sq/CC will refer all service members for assessment (WITHIN 7 Days) when substance use, or misuse is suspected to be a contributing factor in any misconduct:

- Within in 24 Hours
 - o DWI/DUI
- Within 7 days
 - o Public intoxication
 - o Drunk and disorderly
 - o Spouse/child abuse and maltreatment
 - o Underage drinking
 - o Positive UA
 - o When notified by medical personnel
 - o Any other alcohol related incident

Referral Process for Commander Referral

1. Sq/CC or AMT contacts ADAPT team
2. ADAPT will send referral form to Sq/CC or AMT to complete and submit
3. Sq/CC or AMT will be contacted via telephone/e-mail to schedule assessment for the member
4. After evaluation, Sq/CC or AMT will be informed of assessment outcome

Self-Referral (Voluntary) is available if member:

- Is not under investigation for suspected drug use/involvement
- Has never been apprehended for drug involvement
- Has never been ordered to provide a urine sample as part of a drug testing program in which the results are pending or have been returned as positive
- Has not been advised of a recommendation for administrative separation for drug abuse

CONTACT US:

Main Clinic (Community Center)

Phone: 333-5177 OR 5178

Location: 5136 Community Center Drive, USAFA, CO 80840

Hours: 0730-1630

How can I book an appointment?

Routine appt - Call 333-5177 OR 5178

Crisis Care – Call or walk In during business hours

Alcohol & Drug Abuse Prevention and Treatment (ADAPT)

Location: 5136 Community Center Drive, USAFA, CO 80840

Hours: M-F, 0730-1630

Phone: 719-333-5177

Org Box: usaf.usafa.10-mdg.mbx.10-mdg-adapt-clinic@health.mil

AFTER HOURS CONTACTS:

On-call MH Coverage for
CONSULTATION ONLY

Call 10ABW Command Post at 719-333-2633/333-2000

-
- Has not already entered treatment for drug abuse

AOCs SHOULD KNOW:

- ADAPT is non-punitive. Ensure members are aware this is not part of their punishment. We are a prevention and treatment focused program.
- If member reports in medical appointment UCMJ items (i.e., drinking underage, drinking during duty day, etc.), Sq/CC will be notified to refer from a command standpoint.

Other medical referrals that may occur where the Sq/CC is not notified are; if the member is of age and reports alcohol abuse, rolls an ankle and goes to the ER, etc. These members will be referred to ADAPT by the medical personnel who sees them. However, unless they are diagnosed the command team will not be notified.

Family Advocacy Program -FAP

Family Advocacy Program Prevention and Treatment (FAP): to provide a continuum of services from secondary prevention to clinical treatment designed to build community health and resilience and promote family, community, and mission readiness by reducing domestic abuse and child maltreatment. (DAFI 40-301)

Commander Referral (Mandatory)

A Sq/CC will report all known or suspected incidents of domestic abuse involving intimate partners to FAP for assessment and appropriate services within 24 hours.

Intimate Partner is defined as a person who is or has been in a social relationship of a romantic or intimate nature with the alleged abuser as determined by length of relationship, the type of relationship, and the frequency of interaction between the person and the alleged abuser.

Domestic Abuse includes physical abuse, emotional abuse, and sexual abuse.

Referral Process for Commander Referral

1. Sq/CC or AMT contacts Family Advocacy Program (FAP).
2. FAP will determine if incident meets AF FAP's reasonable suspicion of maltreatment threshold and the level of risk/safety.
3. If an incident meets AF FAP's reasonable suspicion of maltreatment threshold, the Sq/CC or AMT are contacted regarding decision to open a case and any safety concerns.
4. Individual assessments are scheduled and conducted with each intimate partner.
5. Sq/CC or AMT are advised of Central Registry Board (CRB) date and required training.
6. If incident meets criteria for domestic abuse an intervention plan is developed and Sq/CC shall direct the active component alleged offender to complete the treatment plan.

Victim Restricted Reporting (Voluntary):

- Adult victims of abuse only
- Does not initiate the investigative process or notification to the victim's or alleged abuser's commander
- Allows victim to receive clinical counseling services and Domestic Abuse Victim Advocacy services
- Victim is not eligible for a restricted report if the victim has informed chain of command, law enforcement agency, or legal

CONTACT US:

Family Advocacy (Community Center)

Phone: 333-5270

Location: 5136 Community Center
Dr. USAFA, CO 80840

Hours: 0730-1630

How can I book an appointment?

Routine appt - Call 333-5270

Crisis Care- Domestic Abuse Victim
Advocate (DAVA) hotline
855-336-7833

*DAVAs are trained crisis
interventionists that provide urgent/
emergent telephonic or in-person
response, risk assessment, safety
planning, information/referrals,
explanation of reporting options, and
court/medical accompaniment
services.*

AFTER HOURS CONTACTS:

DAVA Hotline 855-336-7833

Call 10ABW Command Post at
719-333-2633/333-2000 for On-call
MH Provider

On-call MH Coverage for
CONSULTATION ONLY

AOCs SHOULD KNOW:

- FAP is non-punitive, ensure members are aware this is not a punishment. We are a prevention and treatment focused program.
- The CRB is not a disciplinary or legal proceeding and does not afford due process under the law.

Emergency Room vs. Urgent Care

Emergency Room:

- Dial 911 or go to the nearest Emergency Room
- Referral is never required for emergency care from an emergency care facility.

Examples of emergencies: Sudden unexpected onset of a medical condition; sudden severe worsening of a chronic condition; a condition threatening life, limb, or eyesight; requires immediate medical treatment or when you are at immediate risk of harming yourself or others.

Urgent Care:

- Cadets must have prior authorization to receive care from an Urgent Care facility during duty hours. Failure to receive authorization will result in a Point of Service charge and you will be responsible for the bill.
- Prior authorization is not required after hours or on weekends.
- Call the 24/7/365 MHS Nurse Advice Line at 719-524-2273, option 3 or 1- 800-TRICARE to receive authorization before you go to an Urgent Care.

Routine Care:

- Is always conducted through 10 MDG.
- Routine care will NOT be authorized outside of the network unless a referral is placed by the PCM.

NOTIFYING MEDICAL

If a cadet is hospitalized in local area OR outside of local area, cadets or their chain of command can call 719-333-5780/5979 during the duty day.

If no answer, or after hours, please call 719-337-8361, the govt cell phone of 10 MDG Chief of Medical Staff.

Care while Traveling

CONUS TRAVEL

Emergent Care: dial 911 or go to nearest Emergency Room

Non-Emergent Care: Call the MHS Nurse Advice Line (24/7/365) at 719-524-2273 option 3 or 1-800-TRICARE

Use of any medical insurance other than TRICARE PRIME is prohibited without written consent from the Air Force.

INTERNATIONAL TRAVEL

Before you go:

- Get medical clearance from Cadet Medicine Clinic @ 719-333-5208
- Download MyCare Overseas App or save the TRICARE Overseas website link (<https://www.tricare-overseas.com/>)

Non-Emergent Care While Overseas:

- If available, use the closest MTF.
- If unavailable, use MyCare Overseas App or TRICARE Overseas website; follow the instructions for your country
- Keep an itemized copy of all medical bills and the address of the provider(s) so you can submit for reimbursement

If app or website is not working, try these numbers:

- Eurasia-Africa 44-20-8762-8384 (overseas) or 877-678-1207 (stateside)
- Latin America/Canada 215-942-8393 (overseas) or 877-451-8659 (stateside)
- Pacific 65-6339-2676 (overseas) or 877-678-1209 (stateside)

UPON RETURN

If medical reimbursement questions after travel, contact Beneficiary Services at 719-333-7978

EMERGENCY CARE

- Dial 911 or go to nearest Emergency Room (no referral needed)
- Schedule next day follow-up with the Cadet Medicine Clinic
- **What is an example of an emergency?** The sudden unexpected onset of a medical condition or the acute exacerbation of a chronic condition that is threatening to life, limb or eyesight, requires immediate medical treatment or manifests painful symptoms requiring immediate response to alleviate suffering or when the patient is at immediate risk of harming themselves or others.

If Cadet Becomes Ill While Away:

If a cadet is hospitalized in local area OR outside of local area, cadets or their chain of command can call 719-333-5780/5979 during the duty day.

If no answer, or after hours, please call 719-337-8361, the govt cell phone of 10 MDG Chief of Medical Staff.

COVID-19 and Flu

To minimize the risk of a disruptive outbreak, cadets with flu-like symptoms should be evaluated by the Cadet Medicine Clinic so they can be tested and dispositioned.

What are the common symptoms of these viruses?

Fever, chills, fatigue, body aches, headache, cough, difficulty breathing, sore throat, congestion, and nausea.

When can I get tested?

- Walk-in testing is M–F 0700–1600.

What is included in the test?

- COVID-19, influenza A and B, and RSV.
- Strep test is performed for select patients.

How can test result be found?

- Results are typically available later that day.
- Cadet can view the result on the MHS Genesis Patient Portal (<https://my.mhsgenesis.health.mil/pages/home>)
- Cadet will be notified by Cadet Medicine Clinic of positive result.

What happens if test is positive?

- Follow instructions provided by medical provider
- Stay on quarters for duration assigned by provider
- Sq/CC and AMT can view quarters slips at <https://asims.health.mil/WebApp/MainMenu.aspx>.
- Cadet can view quarters slip at <https://asimsimr.health.mil/imr/MyIMR.aspx>

What happens to the roommate?

Roommates and other contacts (such as teammates) do not need to quarantine or get tested. They should monitor for symptoms and seek testing if they become symptomatic.

CONTACT US:

Cadet Medicine Clinic: 333-5187

Hours: M/T/Th/F, 0630–1800

W 0930-1800

**(*closed all Federal Holidays
and every Wednesday from
0630–0930 for training)**

**Walk-ins welcome for COVID-19
and influenza testing and
vaccines from
M/T/Th/F 0700–1600,
*W 0930-1600***

A positive home COVID-19 test is treated the same as a test performed in our clinic. Repeat testing is unnecessary.

Face masks can be helpful in reducing the spread of pathogens while indoors. The Cadet Medicine Clinic does not provide masks.

Travel Medicine

Preventive Medicine provides the following for Cadet Travel:

1. Travel Counseling
2. Immunizations
3. Travel Medications
 - a. Malaria prophylaxis
 - b. Traveler's diarrhea
 - c. Altitude sickness

Types of Travel:

1. Official Travel:
 - a. Preventive Medicine provides travel briefs for all DF-sponsored travel (FAV, CIP, CSLIP, semester exchange) – faculty sponsor should contact Preventive Medicine to book group appointment
 - b. Public Health manages requirements for Ops Air Force and PCS after graduation
2. Leave Travel:
 - a. Cadets should call the Cadet Medicine Clinic or Preventive Medicine
 - b. Preventive Medicine will arrange a travel brief
 - c. Highly encourage cadets to be seen by Preventive Medicine if they know they are going to need travel medications

Travel Medicine appointments should occur at least two weeks before departure to allow develop of antibodies following vaccination

CONTACT US:

Cadet Medicine Clinic: 333-5187

Hours: M/T/Th/F, 0630–1800

W 0930-1800

(*closed all Federal Holidays and every Wednesday from 0630–0930 for training)

Preventive Medicine: 719-333-5208

Public Health: 719-333-9443

UP-TO-DATE TRAVEL INFO:

- Centers for Disease Control and Prevention
(<https://wwwnc.cdc.gov/travel>)
- DoD Vaccine Requirements
(<https://health.mil/Military-Health-Topics/Health-Readiness/Immunization-Healthcare/Vaccine-Recommendations/Vaccine-Recommendations-by-AOR>)

Cadets that receive a first duty assignment overseas will receive a Form 422 from Cadet Standards clearing them for PCS.

Nutritional Medicine

1. We offer Personalized Nutrition Counseling that includes:

- Weight management
- Weight/muscle gain
- Performance nutrition
- Healthy eating
- Disordered eating/eating disorder
- Medical conditions
- Vegetarian/vegan diets
- Nutrient deficiencies
- Stress fractures
- Body Composition Services/Resting Metabolic Rate:
 1. Bod Pod, offered at 10MDG 333-3733
 2. DEXA (bone density) at Human Performance Lab

Book appt @

<https://outlook.office365.com/book/USAFAMHumanPerformanceLaboratory@afacademy.af.edu/>

- Supplement evaluation
- Soft diets after wisdom teeth removal

Cadet Wing Dietitians (all non-intercollegiate cadets):

Kendra Maurer

Kendra.Maurer@us.af.mil

Kendra.Maurer@afacademy.af.edu

333-9812

Claire Emery Wilhite

Emery.Wilhite@us.af.mil

Emery.Wilhite@afacademy.af.edu

Room 2017, Underground Mitch's

Hours 0800-1600

Phone 333-3663

How to book appt: Teams or Email

Intercollegiate (IC) Athlete Dietitians

Shelly Morales

Shelly.Morales@afacademy.af.edu

Phone: 333-7704

Alexandra (Lexie) Greitzer

Alexandra.Greitzer@afacademy.af.edu

Phone: 333-3002

Location: Human Performance Lab in Athletic Department

Galina Lodge

Galina.Lodge@afacademy.af.edu

Phone: 333-2416

How to book appt: Teams or Email

Frequently Asked Questions (FAQs)

Is an MFR required for underclassmen to have personal dorm fridge?

Yes. Per AFCWI-36-3501 Cadet Standards and Duties. ALL cadets benefit from access to store perishable foods based on their schedules.

Are there recommendations for Squad Weigh ins? Yes. Use discretion for tracking weights (i.e. don't shout out weights in front of the whole squad)

What is the Weight Management Program (WMP) / Weight Gain

Program (WGP)? Reference USAFAI 36-2002 Cadet Body Composition and Fitness Programs, cadets placed on WMP/WGP should make appointment with the dietitian via teams or email.

Can Sq/CCs eat with their Sq? Yes. Dining with your squadron at lunch is encouraged. Pay for your meal on the staff tower.

Where can I view the Mitchell Hall menu? The Mitchell Hall Instagram page (@usafa_mitchellhall) or join the Mitchell Hall Teams Page on Teams (Mitchell Hall Menu and Nutrition Information)

Optometry

1. Graduation (GRAD) Eye Exams:

- During Sophomore year.
- No-shows will be reported to Sq/CCs/AMTs monthly.

2. Refractive Surgery (provided by Refractive Surgery Clinic):

- Eligible Cadets are identified at their Grad Eye Exam.
- Cadets contacted May/June of Sophomore year.
- Surgeries are Junior year (Aug – Mar).
- PRK, LASIK, SMILE and in some cases ICL.
- 7-days of bedrest from the date of surgery, DNIF for 90 days, placed on Cadet Illness/Injury report.
- Follow-up appts are 1 & 5 day: 1, 3, 6 & 12 months.
- Requests for refractive surgery, call 719-333-5958.

3. Contact Lenses Exams:

- Completed at 10 MDG Optometry Clinic.
- Call 719-524-2273 to schedule a routine eye exam.
- Previous contact lens wearers should wear CLs & bring a copy of their last year's prescription to have it renewed.
- Purchasing of contacts is out of pocket.
- We also offer cadets initial contact lens fittings for first-time wearers.
- **Routine eye exams will not be completed at the cadet clinic unless access to care allows.**

Frequently Asked Questions (FAQs)

Can I get an updated prescription for contacts and glasses? YES, at the 10 MDG Optometry clinic. Call 719-524-2273 or 333-5765

Can I order contacts through the clinic? NO. Tricare does not cover contact lens supplies for patients. You will have to order at local eye center or online and pay out of pocket.

Can I order glasses using a prescription written by my civilian eye doctor? YES, within 1 year of prescription date. Bring it to our clinic so we can add it to your medical records and order new eyeglasses.

Contact Information

Phone: 719-333-5189 or
719-524-2273

Location: 2355 Faculty Dr. (Cadet Med Clinic)

Hours: 0700-1600

Services: Graduation Eye Exams, Acute Care, Glasses Orders, Contact Lenses Exam

EMERGENCY – DIAL 911 or go to nearest Emergency Room

Important Information

How do I book an exam?

[MHS Genesis Patient Portal](#) @

patientportal.mhsgenesis.health.mil

Detailed instructions found here:



<https://airforceacademy.tricare.mil/Health-Services/Vision/Cadet-Optometry>

What is the best way to communicate with the Optometry Clinic?

MHS GENESIS Patient Portal

Message Location

USAF Academy Optometry

Physical Medicine

(Physical Therapy & Occupational Therapy)

Important Information:

- Cadets must be seen in our clinic by a Physical Therapist prior to being issued a profile/AF469.
- Profiles will be completed in ASIMS and Cadets can access via their IMR (see pg 4). The Profiles are available 24-48 hrs after input in the system. It is the cadet's responsibility to keep track of their profile.
- Cadets must be in PT Gear and sneakers for every visit
- This is a cadet only clinic. All other active duty, permanent party are seen at the main clinic.
- Once seen in physical therapy, especially if given a profile at any point, cadets will need to be seen again to be cleared for return to fly, PE classes, AFT/PFT, summer programs, etc.
- The clinic is very busy the week before & after breaks and the two weeks before the AFT/PFT. Do not wait until the last minute to schedule if needing any type of profile.

Frequently Asked Questions (FAQs):

How do I book an appointment?

- Call the physical medicine clinic at 333-5055 or stop by the clinic.

Do I need a referral?

- No, you can schedule directly with the clinic.

Do you accept walk-ins?

- Yes, for acute, urgent injuries, however you may have to wait to be seen. For non-urgent injuries, we may be able to see the cadet same day, but otherwise will schedule an appointment.

CONTACT US:

Physical Medicine Clinic: 333-5055

Location: 1st Floor, Gregory Hall,
Cadet Medicine Clinic

Hours: 0715-1600

Closed 1145-1300 for lunch

Occupational Therapy in clinic
Mondays & Wednesdays

Dental

Dental Services:

- Cadet Dental Clinic (located on Cadet side)
 - General Dentistry exams, fillings, root canals, crowns, mouth guards
 - Specialty care Periodontics (gum specialist, surgeries to correct bone and gum defects) Prosthodontics (crowns, bridges, and removeable appliances)
 - Orthodontics (braces)
 - Endodontics (root canal therapy)
- 10th MDG OMFS Clinic (located in main MTF)
 - Oral Surgery (removal of teeth, biopsies)

What AOCs should know:

Short notice cancellations (within 24 hrs.) or no-show appointments by a cadet will result in direct contact with the Sq/CC or AMT in accordance with 10 DS broken appointment policy that each cadet signs.

The Dental Squadron understands cadet availability is limited. Cadets should take care of their teeth daily and to reach out to the Cadet Dental Clinic if they have any concerns. Cadets are encouraged to seek elective care such as cleanings during their time at home. We ask that copies of all treatments completed outside of an Air Force clinic be brought to the Cadet Dental Clinic for inclusion in their dental record.

If a member is placed on quarters due to surgery or other dental treatment as deemed necessary by a dental provider, it is the Cadet's responsibility to present the quarters recommendation (form 18) to their Sq/CC and AMT and to manage their schedules accordingly. Quarters is a recommendation to you as the Sq/CC and AMT. We understand this may affect their class schedule attendance, and any soaring time for our future pilots. It will be the responsibility of the Cadet to coordinate attendance based on provider recommendations.

Cadet Dental Clinic: 333-5192

Hours: M-F, 0730-1630

After Hours Dental EMERGENCY 24/7:
333-5192 opt 4

* Dental Emergency - significant pain, pain disrupting sleep, fever, swelling, uncontrolled bleeding, trauma to teeth or facial bones, difficulty breathing or swallowing*

Orgbox: usaf.usafa.10-mdg.mbx.10-ds-dental-clinic@health.mil

Sick Call: M-F walk-in, Patients are triaged and prioritized for same day treatment based on severity. Best to arrive between 0800 -1000 or 1230-1430.

OMFS (Oral Surgery), wisdom teeth or post-surgery follow-up call 333-5591/5466.

Cadets complete:

- 1. Screening at I-day**
- 2. Annual exam**
Sophomore year
- 3. Annual exam**
Senior year

To book an appointment call
Cadet Dental Front Desk at 333-5192, opt 1

Referrals

Emergent Care: Dial 911 or go to nearest ER

- Check in with Cadet Medicine within 24 hrs after discharge
- Only use TRICARE PRIME insurance, do not use parents/private insurance for care

Non-Emergent Care: Cadets must have referral to receive care

1. **During duty hours** – contact Cadet Medicine, book appointment and provider will determine the need for a referral
 - a. If you know a referral has been placed (provider confirmed) and you have not been contacted within 7 days contact Cadet Case Management by:
(719) 333-5979/3767
OR
Send MHSg message to:
USAF Academy case management messaging
2. **After duty Hours** – contact the Nurse Advice Line (NAL)
719-524-2273 option 3 or 1-800-TRICARE (874-2273)

Squadron/CC should provide all Cadets with Attach 1 – 10th Medical Group Digital Healthcare Quick-Guide

CONTACT US:

Cadet Case Management

Phone: 333-5979 OR 3767

Hours: 0730-1630

MHSg Messaging: USAF Academy case management messaging

Referral Management

Phone: 333-5752

Hours: 0730-1630

MHSg Messaging: USAF Academy case management messaging

Requests for civilian care/surgery

There is no policy that precludes an active duty member from seeking civilian healthcare at their own expense or using other health insurance (OHI), even if such care is not an authorized benefit. Active Duty Service Members (ADSMs)/Cadets are authorized medical and dental care at his/her own expense or using OHI within the guidelines set in AFMAN 41-210, Section 2.18.4 and TRICARE Reimbursement Manual 6010.61-M.

ADSMs/Cadets must be counseled by their military Medical Treatment Facility (MTF) Benefits Counselor (BCAC) prior to civilian care/surgery (DoDI 6015.23). This is to ensure the member understands that civilian care obtained at their own expense or using OHI, could adversely affect their military status and disability benefits in the event of an undesirable outcome. Medical procedures may directly, or through a series of complications, impact fitness for duty and worldwide duty qualifications.

Civilian Surgery Package Forms will be provided by Beneficiary Counseling.

CONTACT US:

Beneficiary Counseling

Phone: 719-333-7978

Hours: 0730-1630

MHSG Messaging: USAF
Academy Beneficiary Services
messaging

Mold and Indoor Air Quality

What is mold?

- Molds are fungi that are found in both indoor and outdoor environments. Mold can grow on almost any organic substance with the presence of moisture and oxygen. Molds are transported indoors through natural or mechanical ventilation. The species of mold found indoors will vary based on the building materials, water availability, and location as well as on the existing physical and chemical conditions. Mold growth will often occur when excessive moisture accumulates in buildings or on building materials, particularly if the moisture problem remains undiscovered or unaddressed.

How do molds affect people?

- Exposure to damp and moldy environments may cause a variety of health effects, or none at all. Some people are sensitive to molds. For these people, exposure to molds can lead to symptoms such as stuffy nose, wheezing, and red or itchy eyes, or skin. Some people, such as those with allergies to molds or with asthma, may have more intense reactions.

What should be done if mold suspected?

- The source of the mold should be found and remediated. This should include stopping the source of moisture that is supporting the mold growth. Plumbing leaks, envelope leaks, wet spots, and/or excessive condensation should be reported and repaired as soon as possible. If mold is colonizing an area, clean it. Non-porous, hard surfaces can be vacuumed and/or wiped down with water and detergent. Some porous materials can be dried, cleaned and/or laundered, while other materials should be discarded. 1 part bleach to 10 parts water cleaning solution is recommended to be used to remove mold.

Most Up-to-Date Info:

The Occupational Safety and Health Administration: Internet (<https://www.osha.gov/SLTC/molds/>)

The US EPA Indoor Air Quality Branch: (<https://www.epa.gov/mold/mold-and-health>)

National Institute for Occupational Safety and Health (NIOSH): (https://www.cdc.gov/niosh/mold/about/?CDC_A_Aref_Val=https://www.cdc.gov/niosh/topics/indoorenv/)

HOW CAN SQ/CCs HELP:

- Encourage cadets to vacuum carpets and clean all surfaces at least once a week to reduce dust buildup.
- Encourage cadets to steam clean or launder curtains at least once per month to reduce dust buildup.
- Encourage cadets to immediately report any water leaks immediately.
- Encourage cadets to wipe down the inside of the windows and curtains if condensation is present.



10TH MEDICAL GROUP DIGITAL HEALTHCARE REQUIREMENTS

PATIENT PORTAL, ID CARD ONLINE,
NURSE ADVICE LINE & TRICARE-WEST

The 10th Medical Group requires that you utilize several websites to manage your healthcare. The [MHS GENESIS Patient Portal](#) is how you will communicate with your medical providers for all of your healthcare needs. For most things (non-symptom/non acute issues), we will **NOT CALL YOU**. We will use this tool which works much like e-mail but with increased security. In addition to this, it is essential that you utilize the [TRICARE-West website secure login](#) to manage your referrals to specialty care and ensure your profile/contact information is current via ID Card Office Online. The [Nurse Advice Line](#) will be important to directing you to the appropriate care after normal business hours. When establishing your care at the 10th Medical Group and within the Colorado Military Health System, you will need to accomplish some key tasks related to all of these platforms:



Patient Portal

- REVIEW HEALTH RECORDS
- SECURE MESSAGING
- REQUEST APPOINTMENTS
- VIEW LAB RESULTS
- REPLACES RELAYHEALTH & TOL

1 Establish a DS Logon to Enable Mobile Access to All of the Required Platforms Listed On This Document

- Go to <https://patientportal.mhsgenesis.health.mil>
- Although you may have a common access card, it is also important that you establish a DS Logon to access the MHS GENESIS Patient Portal, TRICARE-West and Nurse Advice Line from any mobile device
- To ensure the platform can confirm your identity and provide the highest levels of cyber security and safeguards of your health information, you will be required to complete a brief verification process. You will be provided 3 minutes to complete a 4-question quiz to verify your identity. Responses may include providing your DoD ID number (found on your military ID Card), and some personal information including financial questions, past addresses, etc.
- You will create your MHS GENESIS Patient Portal password in the online registration process. A new password will need to be created every 180 days
- Once you have successfully created your DS Logon, click on "Upgrade To Premium Account" to upgrade your account to Premium Access to view your health information.



For questions about the DS Logon

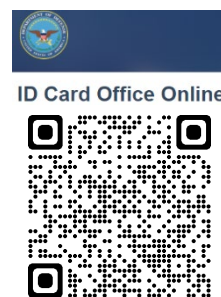
- Visit the MilConnect Website at <http://www.dmdc.osd.mil/milconnect>
- Contact the Defense Manpower Data Center 1-800-538-9552

Note: When using a non-Department of Defense (DoD) computer, you may receive an error message. Click "Proceed" or "Continue" to access the MHS GENESIS Patient Portal. Although you receive the error message, your MHS GENESIS Patient Portal is secure.



2 Update your Profile with Correct Address, Phone Numbers and Emails

- Go to: <https://idco-pki.dmdc.osd.mil/idco>
- Go the My Profile option on the right side and click continue – you will be asked to log in using the DS Logon or CAC authentication
- In the Email Addresses Section, provide the best email that you want to receive updates for messages and appointments booked in the MHS GENESIS Patient Portal and referrals accessible in www.tricare-west.com – ensure that you select Yes to receive the email notifications



3 Go to the MHS GENESIS Patient Portal to View Your Health Record, Message Your Provider, Schedule Appointments, Renew Medication, Activate Medication

- <https://patientportal.mhsgenesis.health.mil>
- We expect you to use this to view lab results, test results, send health questions to your provider, send and receive paperwork, request appointments, schedule appointments and manage your medications
- You will also receive notifications about booking referrals with specialty clinics via this platform



4 Go to www.tricare-west.com to Manage Any Referrals That You Receive Which are Deferred to a Provider Off-Base

- Log in with DS Logon using the Beneficiary Portal option
- To download authorizations to off-base providers, click to navigate to the “Authorization Status” option. See our [Referral Guide](#) for instructions.
- From here, you will be able to search a date range and download the PDF documents pertaining to the relevant authorization – many network providers require that you provide this document when booking an appointment
- Visit our [Referral Support](#) webpage for additional information



5 Go to <https://mhsnurseadvice.com/> to Initiate Online Chat or Video Chat with a Nurse 24/7/365 or call 800-874-2273

- Use this after normal business hours when you are concerned with health symptoms and think you may need to go to urgent care or the emergency room – you must have a referral to do so which would be obtained by using this service
- Sign in with DS Logon using the Beneficiary Portal option
- You will be asked to provide information to verify your eligibility such as DoD ID and given options of text chat or video chat and a call may be initiated shortly thereafter
- After the nurse evaluates your symptoms, you will be given instructions for how to seek care which may include a referral to urgent care





DEPARTMENT OF THE AIR FORCE
10TH MEDICAL GROUP
USAF ACADEMY COLORADO

ATTACHMENT 2

INSTRUCTION ON COMPLETING SEPARATION HISTORY AND PHYSICAL EXAM

1. On a CAC-enabled computer, navigate to <https://asimsimr.health.mil/imr/myimr.aspx>
2. Once logged on, click **“My Individual Medical Readiness Status”**
3. Click on the **“SHPE”** tab
4. Click **“Start New SHPE”**
5. *DD2807-1 Pre-Screening Questions*
 - a. Purpose is **“Separation from AD career”**
 - b. Resigning is **NOT** an Administrative Discharge
 - c. **DO NOT** check that you are filing for VA claim. You can still file a claim later, but the SHPE must be completed at USAFA due to the short suspense.
6. *Demographics*
 - a. If PASCODE is blank, enter **“cadet”**
 - b. If separation date is unknown, put in estimated date of separation
7. **In the following screens, answer the questions only as they pertain to your time in military service**
8. **Once complete, call 719-333-5187 to schedule the “separation physical exam” portion**

If you experience any difficulties, please call 719-333-5187 or email Quaci-Dayne.D.Allen.civ@health.mil

New Commander's Checklist

New Commanders should complete the following checklist within 30 days of taking command.

- ☐ Update ASIMS HIPAA appointment letter if your name and/or your AMTs were not listed on the Commandant's annual appointment letter (details found on pg 4).
- ☐ Ensure that all Squadron members have the most up-to-date Cadet Guide to Care. The guide is updated annually.
- ☐ Review existing CE work orders to ensure completion (ie ensure screens on windows to prevent bats and bug entry and leaks fixed to prevent mold)
- ☐ Ensure all cadets make an MHS Genesis Patient Portal account in order to make appointments, view lab results, etc. (see Attachment 1).
- ☐ Cadet Medicine Clinic is not authorized to provide transportation for cadets that need care off-base. Each Squadron should have a plan to transport cadets when they need care off-base.
- ☐ Stop by the Mental Health Clinic Front Desk in the Community Center (or have staff stop by) to receive Guidebook "Mental Health, An Overview for Service Members" (this guide is crucial to help you navigate your members mental health concerns).

I NEED HELP...WHERE SHOULD I GO AT USAFA?

Stress/
Anxiety,
Relationships,
Marriage,
Children,
Work Problems,
Sleep, Mood,
Suicidal
Thoughts, and
more...

Alcohol/
Substance
Abuse,
Other Addictions

MILITARY ONE SOURCE
800-342-9647
www.militaryonesource.mil

CHAPLAIN
1D ABW 719-333-3300
HQ USAFA 719-333-2636

**MILITARY & FAMILY LIFE
COUNSELORS (MFLCs)**

Preparatory School
Stephen Axford
719-466-0453

Cadet Area
Kenneth Calhoun
719-360-4896
John Emmons
719-757-8088
Karen House
719-246-6802
Louise Williams
719-329-6386

Military & Family Readiness Center
Jasmine Moore
719-895-0170
Lacy Utterback
719-360-2870

**PRIMARY CARE BEHAVIORAL*
HEALTH**
719-333-5421

PEAK PERFORMANCE CENTER (PPC)
719-333-2107
Mon – Fri 4 embedded locations

USAFA MENTAL HEALTH CLINIC*
719-333-5177

FAMILY ADVOCACY PROGRAM*
719-333-5270

ADAPT*
719-333-5177

Non-medical counseling offered many ways including face-to-face, online, telephonic including international calling. A variety of different counseling topics like financial, health and wellness.

All discussions with a Chaplain or a Religious Affairs Airman are confidential (UCMJ privileged communication) and cover a wide variety of issues including individual counseling, relationship and family concerns, work issues, stress and anger management, suicidal ideations, spiritual concerns and ethical issues.

Experienced, licensed mental health professionals, Master's or Ph.D. level, provide non-medical counseling services, education and trainings to military service members, couples, families, groups and cadets. MFLCs can meet you anywhere (except for your home).

Many units, to include the Cadet Wing, Prep School, Military & Family Readiness, and Child Youth Behavioral have embedded MFLCs located in their sections who are available to that unit, and their respective family members.

Offers early identification of behavioral health needs and counseling for individuals experiencing problems such as sleep, stress, grief, anxiety, and depression. Services are provided by a Mental Health Provider within the Primary Care setting.

Offers services for cadets only. They provide evidence-based education for managing life stressors including (but not limited to) anxiety, sleep, depression, and school stress. They also focus on the full spectrum of performance optimization.

Specialty behavioral health care providing a full range of psychological evaluations, Psychiatry services and evidence-based psychotherapy for Active Duty and cadets. As this is the highest level of mental health care, visits are documented in military medical records. Confidential with special exceptions.

Addresses the prevention and treatment of domestic violence (DV) and child abuse. Provides direct services that include crisis intervention and safety planning, counseling, risk assessment, and training in the field of DV and child abuse. The program includes prevention and educational services, clinical counseling, case management, victim advocacy, parenting classes, new parent support programs, anger management, healthy relationship & effective communication seminars.

Assesses services members for substance related disorders, based on self, medical, or command referral. Provides prevention briefings for First Term Airmen Course and to duty sections upon request. Provides counseling to active-duty member for substance related concerns.

* Medical treatment is documented.

Discrimination & Harassment

EQUAL OPPORTUNITY HOTLINE
1-888-231-4058
*not direct number to USAFA EO

Provides assistance, receiving and responding to complaints of discrimination based on race, color, religion, national origin, sex (including pregnancy, gender identity, and sexual orientation), age, genetic information, disability, or prior EO activity (reprisal).

Finances

PERSONAL FINANCE COUNSELORS
Military & Family Readiness Center
719-333-3444

Financial counseling services to equip individuals with knowledge and tools about budgeting, saving, retirement planning, investing, and more.

MILITARY ONE SOURCE
800-342-9647
www.militaryonesource.mil

Work on personal finances, like how to pay down debt, choose good investments, and create a family budget. Read up on different military pay and compensation benefits, consumer rights, and military savings programs. Discover how to create a financial plan for every phase of your life.

Sexual Assault

SEXUAL ASSAULT RESPONSE HOTLINE
719-333-7272 (SARC)

The SARC serves as the installation's primary point of contact for coordination sexual assault victim care services for eligible recipients. Services may begin at the initial report of sexual assault and continue through disposition and resolution of issues related to the victim's health and well-being. This office provides 24/7 confidential care.

Personal Fitness & Weight Management

HEALTH PROMOTION & WELLNESS
719-333-3733

The 10th MDG Health Promotion Clinic specializes in exercise and wellness campaigns and programs to assist in the effort to make Service Members fit and healthy to accomplish the mission. The clinic also offers stress and sleep classes. The clinic serves TRICARE Prime and Plus Enrollees at 10 MDG.

FITNESS & SPORTS CENTER
719-333-4522

The USAFA Fitness Center is the one-stop place to meet all your daily fitness needs with state-of-the-art equipment, group classes, intramural sports and a swimming pool. Regardless of your fitness goals, we have the facilities and services that can help you meet them. Call the Fitness Center for information about personal trainers and massage services.

Additional Self-Help Resources Available

CBT-I Coach – VA-developed phone app for helping with sleep concerns, designed to augment face-to-face care with a healthcare professional, this app will guide users through the process of learning about sleep, developing positive routines and improving the sleep environment.

Feeling Good by David Burns, MD – One of the few books research has shown to be as helpful for some with depression and anxiety as 12 weeks of CBT w/ a trained therapist (*highly recommended by USAFA providers; also available as an audiobook!)

Struggle Well: Thriving in the Aftermath of Trauma by Ken Falke and Josh Goldberg – Co-authored by veterans with PTSD, provides techniques for people who have experienced trauma to help them make peace with their past experiences, live in the present, and build a better future.

7 Habits of Highly Effective People by Stephen R Covey – provides helpful tips for adapting to change and maximizing opportunities presented by change