

Newslines Iraq

Care

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forces American troops to watch helplessly as people suffer.

Officials defend the progress of the health care system, though even 4½ years into the war, the Iraqi army still does not have its own hospital.

Col. Mark McGuire, chief of staff for 3rd Medical Command, said: "It's getting better and better. Iraqis are growing every day in their confidence of what they're able to do."

And Maj. Gen. Ronald Silverman, who leads 3rd Medical Command, said it's not the U.S. military's responsibility to take care of the civilian population.

"I run the world's largest trauma center," he said. "I don't run a full-service hospital. We're not set up or designed to do that."

He said the Iraqi health care system is "very good, minus the technologies we have in the States."

But the stories about problems aren't isolated. At each of several forward operating bases visited by Military Times this summer, service members, interpreters and

patients told tales of woe.

"Our mission is to treat anyone who walks through the door," said Navy Lt. Wil Morales, commander of the Surgical Detachment, 2nd Maintenance Battalion, 2nd Marine Logistics Group at Forward Operating Base Taqaddum. "We don't look at the face or affiliation."

But in June, they had to look as they treated 50 Iraqi civilians — mostly for blast injuries — and moved them into the Iraqi system for long-term care, which they know the system can't support.

"They don't have chronic support systems," anesthesiologist Navy Capt. Jefferey Jernigan said. "The standard of care is different."

At FOB Apache in Adhamiya, Army medics working at the Iraqi aid station there said they watched as Iraqi troops walked right past the station to bring their injured to the U.S. medics.

"They will never take their guys" to the Iraqi army aid station, said Sgt. Robbie Flowers, of the 1-26. "They want their guys to live."

On the local civilian level, the problems seem even worse. All too often, people have no access to any care because there are no doctors, and it's too dangerous to

travel to find one. If the U.S. military does not provide care, they won't get any.

The gender gap

In Kabani, three female Navy corpsmen — medics — transform an Iraqi schoolroom into a women's clinic. At first, no one comes. An edict emerges from the local Sunni mosque during morning prayers: Women will not be seen by American doctors. It is against Islam.

But soon, about 25 women and children appear anyway. They have no other options, and they said they remember a time when it was normal for people to go to the doctor.

Before, "they went to Fallujah, when there was a city there," Hospital Corpsman 2nd Class Janine Beaufort said. "Or they went to Baghdad when it was safe, before the war."

Army Lt. Col. Ricord Torgerson, health and education chief for the Ninewa Provisional Reconstruction Team in Mosul, said Americans have worked to coach, mentor and teach health care workers in Iraq.

"We're with them as much as possible," he said. "The primary health clinics are manned by very

good people, but you have to be careful not to put U.S. standards on them."

In the 399th Combat Support Hospital in Mosul, Lt. Col. Wayne Mosley works on a 6-year-old boy caught in the crossfire. His tibular nerve is exposed, he'll need a skin graft and he has a shrapnel wound in the stomach.

"We've had 57 pediatric cases in the last six months," Mosley said. "We try to put everyone in the system where they can take care of them, but I don't think they have access to medicines to prevent infections."

Or the American doctors spend a lot of time carefully fixing a leg artery on an injured Iraqi, only to have the leg amputated when the Iraqi goes to a civilian hospital, said Maj. Michael Lake, working side-by-side with Mosley.

They must take care to ensure Sunnis go to Sunni hospitals, Kurds to Kurdish hospitals, and Shia to Shiite hospitals.

"Our job here is to stabilize them and move on," Lake said. "But there's a concern if you're the wrong religion and go to a civilian hospital in Mosul, you'll be killed."

Hassan said that in the past, 40 Iraqi soldiers were killed by doc-

tors in a hospital in Kirkuk.

"But in the last year, there have been no more 'accidents' with soldiers," he said, adding that the hospitals are secured by the Iraqi military.

But an Iraqi Army patient in a bed at the 399th thanked the doctors every day for treating him, though he lost his leg.

"He said, 'If I went to the hospital, they would kill me,'" translated Kaniah Zangana, a Kurdish interpreter who has lived in San Diego since the 1970s.

But McGuire, of 3rd Medical Command, cited the good working relationship between the 28th Combat Support Hospital in Baghdad and Medical City, the Iraqi hospital — a relationship Hassan also praised. McGuire said Iraqi case management liaison officers are embedded in the hospitals to ensure everyone is properly treated.

"Is it to our standard?" he said. "We can't look at it that way."

He talked about poor ward care and a lack of stabilization but said the focus needs to be on Iraqis helping Iraqis and sustainable projects.

"We don't want them to become dependent upon our assets. That's the basis for counterinsurgency," he said. □

PROVEN...WHERE IT MATTERS MOST



Captain Taylor Biggs has experienced first hand the deadly threat of IEDs.

He and his engineer company were stationed at the U.S. Marine Corps Headquarters for a Regimental Combat Team in Iraq. Their mission was to confirm and mark IEDs on the streets of Fallujah.

During a routine verification operation, his team came upon an IED. As they backed their vehicle away, the IED blew up within a meter of their Cougar JERRV.

After the blast, Captain Biggs called for the Marines inside the troop compartment. About two minutes later, the Vehicle Commander called back confirming everyone was all right.

Captain Biggs and his team drove the truck home—some 30 miles on the two remaining tires. No serious injuries were sustained by the Marines in the vehicle.

Captain Biggs credits the Cougar vehicle with giving his team the capability to safely approach, confirm, and, in some instances, neutralize IEDs. He says the vehicle saves lives and has earned the confidence of Marines like him.

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