

**BY ORDER OF THE
CHIEF, NATIONAL GUARD BUREAU**

**AIR NATIONAL GUARD INSTRUCTION
41-102**



21 APRIL 2021

Medical Command

**EARLY APPOINTMENT PROGRAM
FOR PHYSICIANS**

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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(Col Kenneth S. Egerstrom)

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This instruction governs the Early Commissioning Program (ECP) for medical students appointed in the Medical Service Corps (MSC) prior to completing requirements for reappointment in the Medical Corps (MC). This Air National Guard Instruction (ANGI) prescribes the qualifications, duties, and responsibilities for medical students, unlicensed residents, and the Guard Medical Unit (GMU) in the requirements for the ECP.

This ANGI may be supplemented at any level, but all supplements must be routed to OPR for coordination prior to certification and approval. Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using the AF Form 847, *Recommendation for Change of Publication*; route AF Forms 847 from the field through appropriate functional's chain of command. The authorities to waive wing/unit level requirements in this publication are identified with a Tier ("T-0, T-1, T-2, T-3") number following the compliance statement. See AFI 33-360, *Publications and Forms Management*, for a description of the authorities associated with the Tier numbers. Submit requests for waivers through the chain of command to the appropriate Tier waiver approval authority, or alternately, to the Publication OPR for non-tiered compliance items. Ensure that all records created as a result of processes prescribed in this publication are maintained in accordance with Air Force Instruction (AFI) 33-322, *Records Management and Information Governance Program*, and disposed of in accordance with (IAW) Air Force Records Information Management System (AFRIMS) Records Disposition Schedule (RDS) located at <https://www.my.af.mil/afirms/afirms/afirms/rims.cfm>.

SUMMARY OF CHANGES

This document has been substantially revised and must be completely reviewed. Major changes include clarification of eligibility for ECP and Regular Scheduled Drill (RSD) participation.

1. Program Participation.

1.1. The Air National Guard (ANG) ECP offers a pathway to prepare medical students for potential future physician roles in operations in peacetime, wartime, and humanitarian missions.

1.2. While enrolled in an accredited allopathic or osteopathic medical school, the participant is awarded an initial probationary appointment as Second Lieutenant in the ANG MSC. (T-2).

1.3. While enrolled in the ECP, the participant will fulfill the requirements to complete a satisfactory year towards retirement. Waivers of this provision will not be considered IAW ANGI 36-2504, *Federal Recognition of Promotion in the Air National Guard (ANG) and as a Reserve of the Air Force Below the Grade of General Officer*.

2. Eligibility.

2.1. The ECP is available to students enrolled in an accredited allopathic or osteopathic medical school located in the United States, Puerto Rico, or Canada IAW AFMAN 36-2032, *Military Recruiting and Accessions*.

2.1.1. Any medical school attended while participating in this program, including transfers for any reason, must meet the same eligibility. (T-2).

2.1.2. Participants must maintain academic good standing to remain eligible for this program. (T-2).

2.1.3. Participants may be released from this program due to poor academic standing including academic suspension or probation, see [paragraph 5.1.4](#) (T-2).

2.2. Applicants are not required to meet the eligibility criteria for appointment as an MSC IAW AFMAN 36-2032.

2.3. Program participants are exempt from the requirement to attend the Health Service Administration Course.

3. Application Guidance.

3.1. Information regarding the program and application process may be obtained from the GMU or recruiting office. Inquiries may also be directed to Directorate of Manpower and Personnel, Recruiting (NGB/A1).

3.2. Application requirements may be found in AFMAN 36-2032.

3.3. Applications will be submitted directly to the GMU concerned. (T-2).

4. Program Selection.

4.1. Participant selection will be made by the GMU/Commander (CC) and GMU/Chief, Aerospace Medicine (SGP) and concurrence of the State Air Surgeon (SAS) to which the participant will be assigned. (T-2).

4.2. Application packages will be forwarded to NGB/A1, attention: ANG Officer Programs, for final processing IAW AFMAN 36-2032, Military Recruiting and Accessions.

5. Appointment/Reappointment.

5.1. Appointments are made to the MSC in the defacto rank of Second Lieutenant. (T-2).

5.1.1. Unit Manning Document assignments are made IAW ANGI 36-2101, *Assignments Within the Air National Guard*.

5.2. Participants are assigned to a GMU. (T-2).

5.3. Reappointment from MSC to the MC is contingent on the participant meeting all of the following criteria IAW AFMAN 36-2032:

5.3.1. Possess an unrestricted medical license IAW AFI 44-119, *Medical Quality Operations*.

5.3.2. Agreement to serve in the MC, as a physician, for a period of not less than four years. This agreement is signed upon entering the ECP. (T-2).

5.4. Participants who fail to meet the above criteria or are otherwise not qualified for reappointment into the MC may assess into another Air Force Specialty Code (AFSC). Participants not qualified for another AFSC will be discharged or separated in accordance with AFI 36-3209, *Separation and Retirement Procedures for Air National Guard and Air Force Reserve Members*.

6. Role of the Medical Student in the GMU.

6.1. SGP is responsible for ensuring:

6.1.1. RSD participation during the first two (pre-clinical) years should focus on learning about public health, bioenvironmental engineering, dental services, nursing services, and optometry to provide a broad understanding of occupational and preventive medicine.

6.1.2. After completion of the second year of medical school, participants should learn about physical examination requirements, aeromedical disposition, trauma management, public health, and occupational medicine.

6.1.3. Third and fourth year medical students, as well as, unlicensed residents may, at the discretion of the GMU/SGP, observe in routine evaluations. Unlicensed providers may not perform histories or exams, even if co-signed by a licensed provider.

6.2. Participants will be appointed into the MC after being credentialed by the Air Force Central Credentialing Verification Office (AFCCVO). Once the member is appointed then the ANG Credentialing and Privileging Board will review a request for privileges.

6.3. Unlicensed providers will not write prescriptions, order laboratory or ancillary studies, including those for deployments.

6.4. Additional information may be found in AFI 44-119 and AFI 44-102, *Medical Care Management*.

7. Annual Training (AT) Programs.

7.1. AT programs must offer schedule flexibility to accommodate civilian training rotations. Medical students may use AT at the discretion of the GMU/CC to advance their military and

medical knowledge, including attendance at formal military medicine courses for which they can receive medical school credit.

7.2. Program participants should be scheduled to attend Commissioned Officer Training (COT) Course or Reserve Commissioned Officer Orientation (RCOO) Course (IAW AFI 36-2013) as soon as possible without interfering with the participant's medical school training, but no later than the start of the participant's third year in the ECP. (T-2)

7.3. Participants who desire to be trained as a Flight Surgeon are encouraged to attend the Aerospace Medicine Primary (AMP) course following the completion of the third year of medical school.

7.4. AT days may be granted for use by the GMU/CC for medical school training in direct casualty management or formal medical courses.

8. Mobilization.

8.1. Participants are in a pipeline training program, therefore, they will not be involuntarily mobilized for state or federal operations. They may volunteer at the discretion of the GMU/SGP for brief (30 days or less) Continental United States (CONUS) state or federal relief operations with the written agreement of the medical school training director to provide elective credit or authorized academic leave for such service.

9. Promotion and Retirement Credit.

9.1. A participant is initially commissioned as Second Lieutenant. (T-2).

9.2. A participant is eligible for promotion upon meeting eligibility IAW ANGI 36-2504.

9.3. Participants commissioned under the ECP, who are not the sole occupant of the MSC position, do not count against the position for promotion of the primary incumbent.

9.4. Service points in the ECP as an MSC officer apply toward retirement.

10. Military Service Obligation.

10.1. All officers without prior military service accrue an eight year military service obligation IAW *AFMAN 36-2032, Military Recruiting and Accessions*. This commitment begins with date of entry into the ANG.

10.2. Participants with any prior service (active duty or reserve) will meet with the Force Support Squadron to determine any service obligation before entering the ECP IAW *AFMAN 36-2032*.

10.3. Participants incur four years of MSO upon assignment to the MC. (T-2).

11. Incentives.

11.1. No financial incentives (bonuses) are offered to participants by the ECP program, but state bonus programs for participants is allowable, applicable to state law and eligibility.

11.2. Participants should be given a current copy of the approved Reserve Component Critical

Shortage Specialties list and briefed on current financial incentives available to residents in training by the local base recruiter at the time of initial commissioning.

MICHAEL GEROCK, Brigadier General, USAF
Commander, ANGRC

Attachment 1**GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION*****References***

AFMAN 36-2032, *Military Recruiting and Accessions*, 27 September 2019

AFI 36-2101, *Classifying Military Personnel (Officer and Enlisted)*, 9 March 2012 w/IC 2

AFI 36-3209, *Separation and Retirement Procedures for Air National Guard and Air Force Reserve Members*, 20 September 2011 w/IC 3

AFI 44-102, *Medical Care Management*, 17 March 2015

AFI 44-119, *Medical Quality Operations*, 16 August 2011

AFMAN 33-322, *Records Management and Information Governance Program*, 23 March 2020

ANGI 36-2504, *Federal Recognition of Promotion in the Air National Guard (ANG) and as a Reserve of the Air Force Below the Grade of General Officer*, 19 August 2013

Adopted Forms

DD Form 2807-1, *Report of Medical History*

DD Form 2808, *Report of Medical Examination*

SF 600, *Chronological Record of Medical Care*

AF Form 847, *Recommendation for Change of Publication*

Abbreviations and Acronyms

AFMAN—Air Force Manual

AFRIMS—Air Force Records Information Management System

AFSC—Air Force Specialty Code

ANG—Air National Guard

ANGI—Air National Guard Instruction

AMP—Aerospace Medicine Primary

AT—Annual Training

BEE—Bioenvironmental Engineer

CC—Commander

CONUS—Continental United States

COT—Commissioned Officer Training

DDS—Doctor of Dental Surgery

ECP—Early Commissioning Program

GMU—Guard Medical Unit

IAW—In Accordance With

MC—Medical Corps

MSC—Medical Service Corps

MSO—Military Service Obligation

NGB/A1—Directorate of Manpower and Personnel, Recruiting

OD—Optometry Department

OPR—Office of Primary Responsibility

PH—Public Health

RCO—Reserve Commissioned Officer Orientation

RDS—Records Disposition Schedule

RN—Registered Nurse

RSD—Regular Scheduled Drill

SF—Standard Form

SGP—Chief, Aerospace Medicine