

LOCKWOOD: Welcome and thanks for tuning in. You're listening to Dot Mil Docs, the Military Health System's official podcast. I'm Elizabeth Lockwood and it's Thursday, January 28<sup>th</sup> 2010. This week's episode follows up on the latest issue of MHS Profiles, which takes a look at recreational therapy around the MHS and how these unusual forms of treatment are helping wounded warriors gain competence, strength and pride. Learn more about the people who dedicate their lives to healing wounded warriors at [health.mil/profiles](http://health.mil/profiles). Today we are joined by Mr. Ross Colquhoun, firearms training outdoor field and stream program manager at Walter Reed Army Medical Center in Washington, DC. Mr. Colquhoun oversees the firearm training simulator, or FATS, at Walter Reed and also organizes trips for wounded warriors recovering from injuries varying from amputations to traumatic brain injury. Mr. Colquhoun, welcome to Dot Mil Docs.

COLQUHOUN: Thank you very much. How are you guys doing today?

LOCKWOOD: We're doing well. Thanks for stopping by. To start us off, can you tell us what the firearms training simulator is?

COLQUHOUN: The firearms training simulator is – it's a kind of a virtual reality shooting range, whether it be in two-dimensional or three-dimensional. All your law enforcement municipalities, whether it be state or federal, and all our military uses that, whether it be the FATS system or what we call the EST training, which Engagement Skills Training 2000 – which is basically they same thing with – what the FATS system does.

LOCKWOOD: And so all soldiers at Walter Reed go through FATS?

COLQUHOUN: All my wounded warriors go through the FATS system, correct.

LOCKWOOD: Does it help them train to go back into active duty or is it something they apply to their regular life?

COLQUHOUN: It does a little bit of both. Those who want to return to full active duty, whether they're an amputee or non-amputee, they do come through here to retrain themselves to get back on their weapons systems. Can I do the things I did prior to me and my injuries? The answer is yes. Those who are going to depart the military and press on to a different life, they'll come through here – again the same thing is, how do I do the things I did before my injury when I'm missing a left hand or a right hand or an arm or a leg or something. So they all do come through here, yes.

LOCKWOOD: Does it offer any types of skills that can be used outside of shooting a shotgun?

COLQUHOUN: Absolutely.

LOCKWOOD: So I hear that you also work with outdoor sporting programs.

COLQUHOUN: I do all the outdoor sporting programs here for Walter Reed, that's correct.

LOCKWOOD: Can you tell us a little bit about what those are and what they might entail?

COLQUHOUN: Well the – my job title is basically the firearms training/the outdoor field and stream program manager for Walter Reed Army Medical Center. Which entails I get to do a lot of fun things and take these guys kind of all over the world basically – anywhere from Maine to Alaska to Texas to Georgia to Florida to Tennessee – where else – Virginia, Maryland and Pennsylvania. Matter of fact we got back – just prior to the holidays we were in Texas for a week on a deer hunt and we had a phenomenal time. Matter of fact we're headed back to a duck hunt down on the Eastern Shore this Sunday through the 13<sup>th</sup>. We get back for about three to five days of rest and then I'm taking 17 guys to Florida for a deep-sea sailfish tournament.

LOCKWOOD: Who organizes these different trips? Is it you?

COLQUHOUN: Just various organizations, whether it be Wounded Warrior Project, Paralyzed Veterans of America, individuals who call me up and kind of do cold calls what I call and say hey I've got a ranch in Texas, X, Y, Z, Hunts for Heroes – kind of all over the nation I get hunts donated to me, and everything's all given to us – it's all gratis, basically.

LOCKWOOD: So you're just partnering with various people and organizations around the country to help heal these wounded warriors.

COLQUHOUN: That is correct, yes.

LOCKWOOD: How many trips do you think you coordinate a month?

COLQUHOUN: Literally I could be out of the office probably – out of a 30-day period probably 18 to 20 days, honestly. But I do have two jobs. One is the FATS system and the other is the outdoor program. So I truly, realistically – trying to relate it to about two trips a month. And that's anywhere between five and about maybe nine days out of the office a month that we're going.

LOCKWOOD: Sounds like you've got a great job.

COLQUHOUN: I got to tell you, this is an unbelievable position and I'm working with some unbelievable guys. To see this guys walk in at first light from being downranged (sp.?) to an inpatient to an outpatient, and then all of a sudden they walk in my office and – hate to use an ugly word but they're beat up from you-know-what. And all of a sudden a bond is made between the family and I and the individual, be it male or female. And then I start them on the firearms training system or I get them interested in the outdoor programs. And that's not to say that you have to be an avid outdoorsman to do this. You could be a city guy or a city gal and never be hunting or fishing in your life, you can still do this. I will take you in the outdoors and I will teach you and train you on stuff.

LOCKWOOD: How do you think – I mean talk a little bit more about how beat up they are when they come in and then how they exit.

COLQUHOUN: I've got individuals who walk in here who we call bilat AK so they're bilat, bilateral meaning both, and then above-the-knee amputees and they're sitting in a chair. It's like OK how do you expect me to – how do I get in a boat now? I'm a big fisherman. How do I get from my wheelchair to a boat? Well I teach this. How do I put my prosthetic legs on and walk through the uneven terrain and put a weapon in my hand and fire it without being – fire the weapon without falling over. Well that's the stuff that we get to teach. Whether the individual has lost a leg, an arm, a hand – he's lost a left or right eye and now he's got to change his eye dominance because he only has one eye or she has one eye. And so it's an amazing thing to see, these guys and gals.

LOCKWOOD: Do these warriors, are they all people who were hunting or fishing before they came through the program?

COLQUHOUN: Some hunted and some never hunted a day in their life.

LOCKWOOD: We're going to take a quick break for the Dot Mil Docs HealthBeat, news and information from the Military Health System. When we come back we'll talk to Mr. Colquhoun about recreational therapy and how it benefits wounded warriors, as well as the positive impact it has on their lives outside of Walter Reed.

LOCKWOOD: Dot Mil Docs HealthBeat.

CARLSON: The 2010 MHS conference was held this week just outside Washington, DC in National Harbor, Maryland. More than 3,000 military medical professionals attended to share knowledge and discuss the future of the MHS. For more in-depth conference coverage, visit [health.mil](http://health.mil), which has been updated all week long with stories from the conference. To view video of the conference's plenary sessions, visit [health.mil/mhsconference](http://health.mil/mhsconference).

At the conference, Rear Admiral Elizabeth Niemyer, director of TRICARE Regional Office – West, addressed a small group about TRIAP, which is TRICARE's Web-based behavioral health counseling program. The program is available to service members, spouses and other beneficiaries who have a computer and a Web cam. Niemyer said that the use of TRIAP is unlimited so that beneficiaries can access it as many times as they'd like to. If TRIAP counseling suggests that more specialized care is required, a beneficiary will be referred to a behavioral health provider. Niemyer said that most users have sought counseling for relationship issues and stress.

And finally the Military Health System has launched the beta version of a new updated [health.mil](http://health.mil). You can access it at [beta.health.mil](http://beta.health.mil) or just use the link on the current [health.mil](http://health.mil) home page. There is a short user questionnaire at [beta.health.mil](http://beta.health.mil). Please fill it out. Tell us what you think. These stories and more are available, as always, at [health.mil](http://health.mil).

Log on to stay up to date. This has been your Dot Mil Docs HealthBeat. For the Military Health System, I'm Russell Carlson.

LOCKWOOD: And welcome back to Dot Mil Docs. Today Mr. Ross Colquhoun, firearms training and outdoor field and stream program manager at Walter Reed Army Medical Center, is talking to us about recreational therapy opportunities in the MHS. How do you think you got involved with the sports program? What really drew you to it?

COLQUHOUN: I'm an avid outdoorsman myself. I am retired military. I spent almost 21 years in the Navy. And I was working a job down in Fort Eustace, Virginia. I was one of the range control officers down there. And this position came open. My background in the firearms training system and an outdoor guy, I put in for the job, I was interviewed, and I understand there's about 23 to 24 other individuals. And I was picked and – to kind of run the program. And I've been here for two-and-a-half years now, and this is an absolutely unbelievable place, an unbelievable job to do and work with these guys and gals.

LOCKWOOD: So over two-and-a-half years I imagine you've met a lot of different types of people coming through.

COLQUHOUN: I've met just tons and tons of personnel. From never hunted to hunted to guys from different backgrounds and all walks of life, basically – all shapes, all sizes, eye colors, all creeds, everything. And it's unbelievable.

LOCKWOOD: What do you see – what do you take away at the end of the day? What's the point of – like how do you see that they're really changing and that makes everybody feel like it's all worth it at the end?

COLQUHOUN: Well the individual opens a door and says I've been shooting since I was a year old or two years old or whatever I was. And I used to do this and I used to do that and I'm like well you can still do that. And they'll look at me like what are you, crazy? How am I supposed to do this? I don't have an eye. I've got to change eye dominance. I have to change my hand. I don't have a left hand or a right hand or a right shoulder or a left leg or a right leg. I'm like before – I said – I had one individual. Here's a story for you. A young man come in, a single BK, which is a below-the-knee amputee. And right leg ex-fix.

And he said I've been hunting and fishing all my life but how do you expect me to get out and do this now? I'm missing this and I can't do it. And I looked at his mom and dad and I basically said you know, son – I said don't let that chair be your crutch. You control your destiny from here on out. And what I told him, I said I can get you back on a weapons system. I can you back in the outdoors in a tree stand, on a boat, wherever you want to do. But you've got to give me 100 percent of your effort to be able to come in and everything.

LOCKWOOD: Well doing something like that must really motivate them again to do – try other things.

COLQUHOUN: It's truly an amazing thing.

LOCKWOOD: Definitely. Well what other kinds of skills do you think that it teaches them – besides confidence and physical ability to fight?

COLQUHOUN: The biggest thing it really, truly teaches them, it's can I do the things I did prior to me being injured. I can still get down with my weapons system. I can now get in the outdoors once I leave the military and I want to go hunting and fishing on my property back in state X and with all my buddies and all my best friends I grew up in high school and I can transfer from my truck to a wheelchair or with my prosthetic devices I can walk through uneven terrain. I can climb up in a tree stand, I can hop on a four-wheeler, I can hop on a – on my boat and go fishing.

So it really teaches them a whole bunch of everything. And amongst just what I do here we have all the physical therapists or occupational therapists, they get them in the core strength and they get them rocking and rolling with their brand-new prosthetic and prosthesis to be able to get up from not having legs to now I'm walking again and it's like wow. Another story, I had a young man, multiple, multiple surgeries – a mid-foot and both left and right legs were beat up pretty bad from shrap metal. Well he elected to take one of his legs because of limb salvage and six to nine weeks later he said hey Ross I want to ride a bicycle. Do you think I can? I said absolutely.

So we went upstairs into our physical therapy room and we got a couple spin bikes up there. He hopped on it and I said no problem. He kind of looked at me like you must be crazy. From there we actually got on a bicycle and went outside. From the date of his surgery until the day of our ride – he basically rode from Walter Reed Army Medical Center all the way to Charlotte Motor Speedway, which is about 375, 380 miles. And so there's absolutely no stopping these guys, their sheer determination, saying I'm going to do what I used to do or if I cannot do what I did, I'm going to try something completely different.

LOCKWOOD: And these – so you work really in tandem with the rest of the therapy team at Walter Reed.

COLQUHOUN: That is correct, yes.

LOCKWOOD: Excellent. Well Mr. Colquhoun, I want to thank you so much for stopping by and chatting with us today.

COLQUHOUN: You're very welcome. And if guys would like to stop by the Military Advanced Training Center at Walter Reed, please do so. And I'd love to show you around a little bit.

LOCKWOOD: That does it for us this week on Dot Mil Docs. Join us next week when Dot Mil Doc returns with a visit from Lieutenant Commander Steve Steffensen, who will be

discussing the nationwide health information network's creation and its importance to the MHS, DoD and physicians. Until then, see you on health.mil.

COLQUHOUN: This program is a product of the Office of the Assistant Secretary of Defense for Health Affairs, Military Health System. Dot Mil Docs features the most relevant military health topics important to you and your family. If you have questions or topics you'd like to see on an upcoming episode, send us an email at [DotMilDocs@tma.osd.mil](mailto:DotMilDocs@tma.osd.mil). That's D-O-T-M-I-L-D-O-C-S at [tma.osd.mil](mailto:tma.osd.mil). Visit [health.mil](http://health.mil) for more episodes.

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