



# THE AFMLL

## The Air Force Medical Logistics Letter

*Delivering Customer Focused Global Integrated Logistics*



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Air Force Medical Logistics Office  
Fort Detrick, Maryland 21702-5006  
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June 1998

### Medical Materiel

War Reserve Materiel (WRM) Adjusted Units of Issue  
Updates from the Logistics and Readiness Analysis Team at  
AFMLO  
--Assignment of Call Numbers  
--Use of Valid Project Codes When Ordering WRM Materiel  
--Requisitioning Procedures  
--Processing of Expired Items  
Medical Contract Administration Workshop  
New Air Force Medical Service Physicians Contract  
Contracting Corner  
--Best Value Contracting (Part II)  
Prime Vendor (PV) Alert from DMLSS  
--Time for a Personal Computer (PC) Cleaning  
Cleaning  
Current Status of DBPAs  
--New and Renewed Agreements  
--Agreement Modifications  
--SPO Agreements  
--VAO Agreements  
Medical Logistics in Action  
AFMLO Messages/Listings

### Engineering, Facilities, Equipment, and Procurement

Change to Device Code 96096  
--Battery, Defibrillator (AE/WRM)  
Food and Drug Administration (FDA) Recalls/Alert Notices  
Shared Procurement Equipment Items Currently Available  
"Piggyback" Contracts Currently Available

### Attachments

Engineering, Facilities, Equipment and Procurement (ATCH 1)  
Quality Assurance (ATCH 2)  
--Recalls  
Status of DBPAs (ATCH 3)  
Not Used (ATCH 4)  
Air Force Medical Service Physician Contract (ATCH 5)  
Medical Contract Administration Workshop (ATCH 6)  
Excess Materiel Available for Redistribution (ATCH 7)

## MEDICAL MATERIEL

### War Reserve Materiel (WRM) Adjusted Units of Issue

Our systems analyst came upon numerous questionable WRM levels while programming the WRM redistribution action we are presently undertaking. We found many WRM levels were incorrect because they were not loaded at the adjusted unit of issue.

It is imperative to determine whether or not an item has an adjusted unit of issue when loading WRM levels. If so, ensure the corresponding WRM levels on those items are adjusted accordingly. Stock control level changes from AFMLO will be listed on the AFMLO Load Error List when an adjusted unit of issue is loaded. It is your responsibility to compute and enter the levels in the adjusted unit of issue. Do not simply run them at the quantity shown on the edit!

When entering a WRM level on an item that has an adjusted unit of issue, it is important to understand the level has to be adjusted. MEDLOG cannot make the decision for you.

Please make every effort to review your WRM levels for which an adjusted unit of issue is applied. Ensure they are correct prior to submitting requirements for the FY 99 WRM Spend Conference in July. A good clue is that the WRM level should never be lower than the quantity in the standard unit of issue. (AFMLO/FOC-A, Mr. Dale Lyons, DSN 343-4017)

## **Updates from the Logistics and Readiness Analysis Team at AFMLO**

### ***Assignment of Call Numbers***

Did you know that when ordering materiel through the prime vendor you must assign a different call number for each inventory code and each WRM project? This ensures the financial records are updated correctly. Failure to use separate call numbers could result in discrepancies on your medical materiel management report. It will also make the financial records appear to have excessive obligations because of the way they post to the Standard Materiel Accounting System.

### ***Use of Valid Project Codes When Ordering WRM Materiel***

Did you know that you should only use valid project codes in requisitions when ordering WRM materiel? If a project code is not assigned, you may use "WRM" in those positions. Do not use invalid codes or codes beginning with "9" for replenishment of in-garrison WRM. Project codes beginning with "9" are reserved for JCS use, and are normally assigned to a specific operation. Any requisitions with a project code beginning with "9" will be rejected by DAAS. There will be no indication of the rejection in MEDLOG. You will be unaware of the rejection unless you look at the content of your incoming requisition status.

### ***Requisitioning Procedures***

Did you know that Air Force activities are not authorized to requisition normal replacement of in-garrison WRM using Urgency of Need Designator (UND) "A" (Cannot Perform Mission). You must use UND "B" (Mission Capability Impaired) or UND "C" (Stock Replenishment for Firm Future Requirement). This means lower priorities must be used in accordance with your Force Activity Designator (FAD). See AFMAN 23-110, Volume 5, Chapter 8, Attachment 1 which shows the combinations of UND/FAC and the resulting priority.

## ***Processing of Expired Items***

Special processing is required when dated items expire and do not meet FDA Extension Program criteria or cannot be returned to manufacturers and prime vendors for credit. The process is explained in AFMAN 23-110, Volume 5, Chapter 15, paragraph 15.16.4 through 15.16.6. This process should be applied to each expired WRM item, which means it is probably a monthly process. Because it is a policy of high interest to the auditors, the Director of Medical Logistics must ensure that it is followed routinely. In addition, an annual requirement exists to review all the items retained under this policy. (AFMLO/FOC-A, Mr. Dale Lyons, DSN 343-4017)

## **Medical Contract Administration Workshop**

A Medical Contract Administration Workshop will be held 28-29 July 1998 at Lackland AFB TX. The workshop is open to anyone interested in learning more about the operational aspects of contract management. **Attachment 6** provides a copy of the action memorandum and agenda for the workshop. (AFMSA/SGSL, Mr. Tom Cook, DSN 240-8044)

## **New Air Force Medical Service Physicians Contract**

**Attachment 5** is a copy of the Air Force Medical Service Physician's Contract. For additional information or questions, contact Mr. Albert Jacob. (HQ AFMSA/SGSLC, Mr. Albert Jacob, DSN 240-3944)

## Contracting Corner

### *Best Value Contracting (Part II)*

We recently began our discussion of best-value techniques by examining two-step sealed bidding. This month, we will look at two more recent additions to the PCO's toolkit, lowest acceptable technical and performance price tradeoff.

Lowest acceptable technical is very similar to two-step sealed bidding. The lowest price technically acceptable source selection process is appropriate when best value is expected to result from selection of the technically acceptable proposal with the lowest evaluated price. What this means: if the technical evaluation team finds that all offerors are technically qualified, the lowest price gets the contract.

When using the lowest price technically acceptable proposal process, the following apply:

- (1) The evaluation factors and significant subfactors that establish the requirements of acceptability must be set forth in the solicitation. Solicitations must specify that award will be made on the basis of the *lowest evaluated price* of proposals meeting or exceeding the acceptability standards for non-cost factors. Past performance need not be an evaluation factor in lowest price technically acceptable source selections.
- (2) Tradeoffs between price and technical proposal are not permitted. In other words, we cannot pay more for a better technical proposal, as we can in a source selection.

(3) Proposals are evaluated for acceptability, but not ranked using the non-cost/price factors. Again, once a proposal meets or exceeds the technical standards, it must be considered on an equal technical footing.

(4) Exchanges may occur. Therefore, we may have discussions or clarifications with offerors. However, remember that if we have discussions, we must then request a best and final offer from all offerors. This can and frequently does change the relative price ranking of our offerors.

Lowest acceptable technical is appropriate if we want to get a look at offerors' proposals to ensure technical acceptability, and can then live with the low offeror. If done correctly, this will eliminate offerors who cannot give us good service, and prevent the "low bidder" syndrome, as in "your weapon was made by the low bidder." However, if we are not careful in our evaluation criteria, or don't do a thorough technical evaluation, we can still end up with a useless contractor.

The Past Performance Trade-off technique (PPT) is the final best value contracting tool we will describe here. The Past Performance Trade-off technique (PPT) may be used as a best value contracting tool if there is one non-price evaluation area (technical), where this area can be adequately evaluated on an "acceptable" / "not acceptable" basis. Under this process, the technical area is ranked as the most important. Performance risk is assessed as an evaluation area, ranked second to technical, and co-equal to price.

The PPT is basically a two-step negotiated acquisition that includes past performance evaluation. Technical area requirements can be as simple as compliance with the terms and conditions

The AFMLL is a specialized newsletter published by the Air Force Medical Logistics Office. The AFMLL is published monthly to provide medical materiel support data to Air Force medical activities worldwide. Our mission is to ensure all Air Force medical facilities receive the highest level of medical logistics support. In that regard, we solicit your articles for inclusion in the AFMLL to relay information for use by other activities. For additional information concerning this publication, call (301) 619-4158/DSN 343-4158 or write to the AIR FORCE MEDICAL LOGISTICS OFFICE/FOA, ATTN: Rita Miller, 1423 SULTAN DRIVE, SUITE 200, FORT DETRICK, MARYLAND 21702-5006. Articles may be data faxed to (301) 619-2557 or DSN 343-2557.

The use of a name of any specific manufacturer, commercial product, commodity, or service in this publication does not imply endorsement by the Air Force.

Matters requiring AFMLO action after normal duty hours may be referred to the AFMLO Staff Duty Officer. The Staff Duty Officer may be reached at DSN 343-2400 or (301) 619-2400 between the hours of 1630 and 0700 weekdays, and anytime on weekends and holidays.

of the RFP, or can be more complex, requiring the submission of contractor technical proposals. The PPT evaluation process includes the following steps:

(1) Issuance of an RFP which specifies and requests all technical, past performance, and cost/price informational requirements. Once proposals are received, the following evaluations are conducted.

- The PCO, or designee, is responsible for calculating the total evaluated price and identifying any pricing deficiencies by proposal.
- The Program Manager, or designee, evaluates all technical proposals, rating them acceptable or unacceptable. Unacceptable proposals shall also receive a rating of correctable/uncorrectable with the technical rationale included.
- The PCO, or designee, evaluates each offeror's past and present performance information and assigns a rating of high, moderate, low, or not applicable in this area. The PCO considers a wide variety of sources of contractor history.

(2) Once the above assessments are accomplished, a competitive range determination is made, and all offerors who clearly do not have a reasonable chance for award are excluded from further consideration. Both the technical and cost/price aspect of each offeror's proposal shall be considered in this determination.

(3) Discussions shall be held with all offerors within the competitive range if there are technical deficiencies, pricing deficiencies, or moderate, high, or not applicable performance risk ratings, or any other RFP non-compliance issues identified in the initial review.

(4) After discussions are concluded and final assessments are accomplished, the award decision shall be made based on the following criteria:

- Award to the lowest priced, technically acceptable offeror if the offeror's performance risk is rated low.

- Award based on best value, (price premium over and above the lowest proposed price), if the lowest priced offeror's performance risk rating is moderate, high, or not applicable, subject to the following approval levels:

- PCO if premium is less than or equal to 10% (or 100K).
- One level above PCO if the premium is between 10% (or 100K) and 20% or (300K).
- The Director of Contracting if the premium is 20% (or 300K) or greater.
- Awards to offerors with moderate performance risk ratings shall be approved one level above the PCO.
- Awards to offerors with high performance risk ratings shall be approved by the Director of Contracting.

PPT is an AFMC process. Since all AFMC interim guidance has been rescinded by SAF/AQ, the Instructions to Offerors (Section L of RFP), and Evaluation Criteria (Section M of RFP) must explain the PPT process entirely, as there is no regulatory guidance to reference in the RFP. For the same reason, all PCOs may not be familiar with the process, so if you want to use PPT, there may be an education and approval period. Nonetheless, it can be a valuable tool in the right circumstances. (AFMSA/SGSLC, Mr. Tom Cook, DSN 240-3944)

**Prime Vendor (PV) Alert from DMLSS -  
Time for a Personal Computer (PC)  
Cleaning**

DMLSS replaced three PCs in a recent eight-day window due to power supply failures. They believe the most likely reason for the recent high failure rate is dirty PCs. Dust slowly builds up on the internal surfaces of the PC, causing the PC to run hotter over time. Excess heat reduces the performance of the machine and shortens life expectancy. Dust also collects on the fan and the power supply module, reducing the fan cooling efficiency and causing the power supply to run hot. We recommend all PV PCs be cleaned/serviced as soon as possible and then placed on a regular cleaning schedule. We must keep these PCs alive as long as possible. Limited assets and configuration issues make replacing these PCs expensive and time consuming. If you do not have the resources within your shop to perform the cleaning, it is recommend you contact your systems office for assistance.

*Hint:* Take a look at the back of the PC. As a general rule, if you see dust building up on the air inlets, it's time to clean the machine.

**Prime Vendor Program WARNINGgram**

Despite repeated warnings to the contrary, some customers are attempting to "upgrade" the operating system on their PV PCs from DOS to WIN95. In all cases, a catastrophic failure follows, totally disabling the vendor's software and the PVI! Restoration is a complicated process generally taking several days and requiring EDS assistance.

We also have customers loading unauthorized software, which sometimes results in dire consequences. Recently, a piece of unauthorized software locked up a PV PC such that it required formatting the hard disk drive and reloading both the vendor's order entry system and the PVI. Again, this took several days, even with the assistance of EDS.

***Please, leave the operating system alone and do not, under any circumstances, load unauthorized software.***

For additional information, contact Capt Albert J. Bainger. (AFMLO/FOM-P, Capt Albert Bainger, DSN 343-4168)

**Current Status of Decentralized  
Blanket Purchase Agreements  
(DBPAs)**

Pages 1 through 5 of **Attachment 3** are a list of pen and ink changes to the consolidated list provided in Attachment 3 of AFMLL 04-98.

**New and Renewed Agreements**

The DBPAs listed below have been renegotiated by DSCP. Copies have been forwarded to the Defense Logistics Information Service (DLIS) for publication in the next Universal Data Repository (UDR) and to the OPLOCs. Ordering and payment information can be accessed from the AFMLO home page.

<u>DBPA No.</u>	<u>Vendor</u>	<u>RIC</u>
<u>SP0200-98-A</u>		
8600	MBJ Enterprises	LVP
9145	Getinge/Castle, Inc.	LCD

**Agreement Modifications**

Modifications listed below pertain to DSCP DBPAs. Copies were forwarded to DLIS for inclusion in the UDR and to the OPLOCs.

(SP0200-98-A)

<u>DLA120-98-A</u>	<u>Vendor Name</u>	<u>MOD to</u>
8510	Winfield Medical	Change "remit to" address
8517	Aero Products Corp.	Change vendor's name
8520	Columbia Medical, Inc.	Change main address
8560	Hollister, Inc.	Substitute terms & conditions of DBPA
9061	Pfizer, Inc.	Substitute terms & conditions of DBPA
9073	Phamacia & Upjohn Diagnostics	Substitute terms & conditions of DBPA
9114	Coltene/Whaledent, Inc.	Substitute terms & conditions of DBPA
9166	Synthes Ltd. USA	Substitute terms & conditions of DBPA
9172	Berlex Laboratories, Inc.	Substitute terms &

9226	American Medical Systems, Inc.	conditions of DBPA Substitute terms & conditions of DBPA
9227	American Overseas Book Co., Inc.	Substitute terms & conditions of DBPA
9308	Fisher Scientific	Extend effective date of cancellation to 3/31/98
9310	Chatsworth Latex	Substitute terms & conditions of DBPA
9335	Sims Level 1, Inc.	Substitute terms & conditions of DBPA
9416	American Medical & Industrial Supply, Inc.	Cancel DBPA
9466	Implant Innovations, Inc.	Change main address & "remit to" address
9490	American Laboratory Supplies, Inc.	Substitute terms & conditions of DBPA

The modifications listed below pertain to VANAC DBPAs. Bilateral modifications were issued to increase the call limitation to \$100,000 per call and to include FAR clause 52.232-33, "Mandatory Information for Electronic Funds Transfer Payment (Aug 1996)."

4003	Washington-Greene Blind Association
4005	Bosma Industries
4017	Gambro Healthcare, Inc.
4018	Alphapointe Association for the Blind
4021	Work, Inc.
4023	HGM
4024	Cooperative Workshops, Inc.
4026	Arizona Industries for the Blind
4031	J.M. Murray Center, Inc.
4032	Human Technologies Corp.
4038	Dicta Labs
4049	Spectrum Label
8508	Hardy Diagnostics
8537	Rinn Corp.
8546	Pharmaceutical Associates
9002	C.R. Bard, Inc.
9014	Picker International Corp.
9035	Dentsply Int'l, Inc./Trubyte Div.
9049	Hausmann Industries, Inc.
9111	Midwest Dental Products Corp.
9132	Liebel-Flarsheim
9136	Temp-Tronix, Inc.
9170	Vermont Medical, Inc.
9211	Rhone-Poulenc Rorer Pharm., Inc.
9239	Orthopedic Technology, Inc.
9269	Valleylab, Inc.
9301	Dentsply/ASH
9311	Dentsply/Equipment Div.
9338	Schein Pharmaceuticals, Inc.
9350	Qualitest Pharmaceuticals, Inc.

9405	Krasity's Medical & Surgical Supply
9413	Oticon, Inc.
9430	Ticonium Company
9437	Ceramco, Inc.
9452	Tri-State Distribution, Inc.

### SP0 Agreements

The following agreements have been converted to SP0200-98-A.

8502	8503	8504	8505	8506	8510	8511	8512
8513	8514	8516	8517	8518	8520	8521	8522
8524	8525	8526	8527	8530	8531	8532	8533
8534	8538	8539	8540	8542	8544	8545	8547
8548	8549	8550	8551	8552	8553	8554	8555
8556	8557	8558	8559	8560	8561	8563	8564
8565	8566	8567	8568	8569	8570	8572	8573
8574	8575	8576	8577	8578	8583	8584	8587
8588	8589	8590	8591	8592	8593	8594	8595
8596	8598	8600	9013	9018	9019	9022	9026
9027	9028	9029	9030	9038	9048	9052	9056
9057	9061	9068	9073	9074	9077	9081	9084
9085	9086	9088	9094	9095	9099	9105	9107
9114	9117	9125	9127	9128	9129	9130	9131
9133	9135	9138	9139	9141	9144	9145	9146
9147	9149	9153	9154	9158	9159	9166	9169
9171	9172	9177	9184	9189	9194	9196	9209
9214	9217	9224	9226	9227	9231	9232	9233
9235	9236	9238	9242	9243	9244	9245	9246
9250	9252	9255	9259	9265	9266	9267	9270
9274	9275	9276	9281	9283	9284	9287	9288
9289	9294	9298	9299	9300	9303	9304	9310
9314	9319	9321	9322	9329	9349	9353	9360
9363	9367	9369	9370	9377	9380	9383	9385
9390	9391	9403	9406	9411	9416	9420	9425
9426	9429	9444	9463	9465	9466	9467	9468
9469	9472	9475	9476	9477	9479	9481	9482
9483	9485	9486	9487	9488	9490	9491	9497
9499	9500						

### VA0 Agreements

4000	4003	4004	4005	4006	4011	4013	4014
4017	4018	4019	4021	4022	4023	4024	4025
4026	4027	4028	4029	4030	4031	4032	4033
4034	4036	4038	4044	4049	4051	8501	8507
8508	8509	8528	8535	8536	8537	8543	8546
8562	9002	9005	9006	9009	9014	9017	9020
9021	9032	9035	9042	9049	9050	9052	9059
9072	9090	9093	9104	9108	9111	9112	9122
9132	9134	9136	9152	9155	9156	9160	9161
9162	9164	9167	9170	9175	9182	9185	9186
9187	9195	9198	9202	9204	9207	9210	9211
9212	9215	9219	9220	9221	9225	9228	9237

9239 9247 9253 9256 9269 9271 9278 9285  
 9290 9293 9296 9301 9309 9311 9316 9317  
 9318 9320 9323 9324 9325 9327 9334 9338  
 9342 9343 9350 9356 9357 9364 9378 9385  
 9388 9397 9402 9405 9409 9413 9414 9419  
 9423 9427 9430 9434 9435 9436 9437 9438  
 9439 9440 9441 9448 9452 9458 9464 9471  
 9484 9492 9493 9494 9495 9496 9498  
 (AFMLO/FOM-P, Mrs. Charlotte Christian, DSN  
 343-4164)

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## Information

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### Medical Logistics in Action

Headquarters, Air Force Medical Support Agency (HQ AFMSA) and the Air Force Medical Logistics Office (AFMLO) extend sincere congratulations to the personnel named below for their outstanding achievements. (AFMLO/FOA, Ms. Rita Miller, DSN 343-4158)

### Promotion to Master Sergeant

The following individuals were selected for promotion to Master Sergeant. Col Timothy Morgan, Chief, Medical Logistics Division, HQ, AFMSA, and Col Jeffrey Cooper, Chief, AFMLO and their staffs congratulate these individuals on this significant achievement.

#### *Medical Materiel 4A1X1*

Theresa D. Black	Mark R. Blazer
Glen D. Bonney	Belinda F. Buford
Dale J. Clark	Carolyn D. Diggs
Tena M. Dominguez	Michael J. Holliday
Christopher Jicinsky	Albert L. Johnson
David W. Kimbrough	Deborah S. Lambert
Deborah S. Lewis	Jeffrey L. Malott
Allen S. Mattice	Linda S. Parker
Cheryl A. Smith	John P. Walters

#### *Biomedical Equipment Technician 4A2X1*

David V. Duenas	John A. Elder
Cornelio N. Flores	Kevin Laverty
William N. Mace Jr.	Joseph A. Schraad
Richard A. Seil	Michael H. Skidmore
Eric G. Steinberg	Jimmy T. Worthy Jr.
Stephen Zigelstein	

### Promotion to Technical Sergeant

The following individuals were selected for promotion to Technical Sergeant. Col Timothy Morgan, Chief, Medical Logistics Division, HQ, AFMSA, and Col Jeffrey Cooper, Chief, AFMLO and their staffs congratulate these individuals on this significant achievement.

#### *Medical Materiel 4A1X1*

Darin L. Adelman	Kimberly K. Baker
Catherine Blow	Christine A. Brewer
Douglas W. Brown	Robin R. Brown
Noel S. Cabacungan	Melody C. Clark
Joefred B. Devicais	James B. Duewell
Jeffrey A. Dunnam	Rebecca S. Evans
Gregory T. Failey	Philip M. Ford
Julie A. Gallegos	Gregory Galloway
Coleyn S. Graham	Larry N. Gurley
Wilson Guttierres	Connie M. Hampton
James E. Hill II	Corine A. Hizer
Scott A. Ivers	Mark D. Key
Felix D. Lawson	John R. Mangelsdorf
Pamela A. Massey	Shaun A. McEvoy
Kevin R. McGee	Peter V. Merritt
Marvin L. Neely	Sylvia Oatts
Randy W. Peterson	Jill A. Radford
Dwayne E. Russ	Jimmy D. Sauls Jr.
Grady K. Smith Jr.	Steven W. Smith
Terry D. Steele	Matthew D. Toje
Matthew J. Venchuk	Richard R. Watson
Wanita C. Williams	Jackson C. Williams
Tracy E. Wynne	Carlito L. Yambao

*Biomedical Equipment Technician 4A2X1*

**Frederick E. Brink**  
**Steven R. Couffer**  
**Nancy J. Dickinson**  
**Michael Junari**  
**Charles O. Gowens**  
**Jeffrey L. Griffith**  
**Kent R. Hall**  
**Albert Laberdesque**  
**Armando M. Oakes**  
**Robert U. Velez**

**James M. Britt**  
**Paul T. Delisle**  
**Kenneth L. Ervin**  
**Scott D. Garringer**  
**Tony A. Greer**  
**Paul E. Gutenberger**  
**Vincent J. Kratzer**  
**Ernie C. Marfa**  
**Gregory J. Pressley**

**18<sup>th</sup> Medical Support Squadron**  
**Kadena AB JA**

**Tasheka L. Morrow** was promoted to **Senior Airman**. **Florimond P. Munar** was promoted to **Technical Sergeant**. **TSgt Roger Y. Shia** graduated in the top 10 percent of his Medical Materiel Supervisor Course through the School of Health Care Sciences.

**30<sup>th</sup> Medical Group**  
**Vandenberg AFB CA**

**Candice Boykin** was promoted to **Airman First Class**. **Ebben Jones** was promoted to **Senior Airman** below the zone.

**60<sup>th</sup> Medical Support Squadron**  
**Travis AFB CA**

**MSgt Travis R. Whiting** was awarded the Air Force Meritorious Service Medal upon his retirement from the United States Air Force with 20 years of faithful service. We thank him for his many contributions to Biomedical Engineering and our nation. **A1C Myrthel S. Maneja** was selected as the Travis AFB Chief's Group "Sharp" Award winner for the month of April 1998.

**51<sup>st</sup> Medical Support Squadron**  
**Osan AB KO**

**Capt D. Troy Molnar** was awarded the Meritorious Service Medal for outstanding duty performance while assigned to the 51<sup>st</sup> Medical Group, Osan AB KO. **SrA Alicia Price** was awarded the Air Force Achievement Medal for outstanding duty while assigned to the 74<sup>th</sup> Medical Group, Wright Patterson AFB OH. **MSgt Ed Grantham** was awarded the Air Force Achievement Medal (2<sup>nd</sup> OLC) for manning assistance to Kwang Ju ROK. **SrA Parrish Shaw** was selected as the Medical Support Squadron Airman of the Quarter for the period Jan – Mar 98. **SMSgt Randall Kirkpatrick** was selected as the Medical Support Squadron Senior Noncommissioned Officer of the Quarter for the period Jan – Mar 98.

**469<sup>th</sup> Contingency Hospital**  
**Frankfurt GE**

**Jenie Stamford** was promoted to **Staff Sergeant**. **Capt Randy Ashmore** was awarded the Air Force Meritorious Service Medal for duty performance at Kadena AB JA. **SSgt Tony Nanes** received a Commendation Medal for duty performance at Andersen AB GU.

**366<sup>th</sup> Medical Support Squadron**  
**Mountain Home AFB ID**

**Alan D. Takilsky** was promoted to **Master Sergeant**. **MSgt Cladis Houston** was awarded the Air Force Achievement Medal (2<sup>nd</sup> OLC) for outstanding duty performance while assigned to the 366<sup>th</sup> Medical Support Squadron. **SrA Derek T. Whitaker** was awarded the Air Force Commendation Medal for duty performance while assigned to MCLB Albany GA. **SrA Larissa K. Widdifield** was awarded the Air Force Commendation Medal for meritorious service while assigned to RAF Lakenheath UK. **Ann Takisha N. Ruffin** was selected as the 366<sup>th</sup> Medical Group's Top-4 Performer of the Month for April 1998. **A1C Jason R. Bills** was selected as the 366<sup>th</sup> Medical Group's Top-4 Performer of the Month for November 1997.

**384<sup>th</sup> Training Squadron  
Sheppard AFB TX**

The following personnel graduated from the Biomedical Equipment Apprentice Course, J3ABR4A231.001, Class Number 970911.

<b>A1C Joel Anthony</b>	Scott AFB IL
<b>SSgt David Olson</b>	ANG MN
<b>A1C Jeremiah Schell</b>	ANG IL
<b>SrA Carl Vogelzang</b>	ANG WI

## **AFMLO Messages/Listings**

<u>Category</u>	<u>Last Published</u>	<u>Date</u>	<u>AFMLO OPR</u>
DoDMMQC	98-1138	3 Jun 98	FOM-P
Last 1997 DoDMMQC Message	97-1178		FOM-P
SLEP MMQC	98-5090	3 Jun 98	FOM-P
Last 1997 SLEP MMQC	97-5058	22 Dec 97	FOM-P
QA Message	8132-0002	14 May 98	FOM-P
Last 1996 QA Message	7273-0008	Oct 97	FOM-P
DBPA Consolidated List	AFMLL 07-97	July 1997	FOM-P
DBPA Message	R081245Z	8 Sep 1997	FOM-P
Shared Procurement List	AFMLL 04-97	April 1997	FOM-P