The Characteristics of Physician Assistants in the National Guard and Reserves

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Abstract
To understand the dual role of civilian military PA roles, a census of the armed forces was undertaken. As of 2020, there were 1,944 PAs in the five military reserve components with the majority (1,539) in the Army. Most National Guard, Air National Guard, and Reserve PAs fill medical officer roles, drill with units, and are subject to active duty. As soldiers, sailors, and airmen, military PAs are trained in health, safety, warfare readiness, casualty trauma, and crisis response. The tenure of a reserve component PA’s military service ranges between 10.2 and 17.8 years. In their civilian roles, most PAs are licensed and clinically active; the majority report they work in family/general medicine, emergency medicine, general surgery, or orthopedic medicine and surgery. This dual-career role and responsibility suggests the utility and flexibility of the US PA is broader than previously reported.

Methods
We contacted an active-duty senior PA officer in each of the military branches of the Armed Forces. The intra-PA officer was:
- The medical director of an NPA or PA site
- The senior PA officer in the reserve component of the Air Force Reserves
- The senior PA officer in the reserve component of the Army National Guard

We also reviewed the PA Professional Profile compiled by the National Commission on Certification of Physician Assistants (NCCPA).

Introduction
Most physician assistant in the reserve components hold a full-time civilian job while serving part-time as commissioned officers. In this capacity, they bring a broad array of skills and experiences to their assigned unit, especially in medical service delivery. The organization and delivery of civilian healthcare are enhanced by the PA’s experience with battlefield trauma, medical and surgical care of diverse populations such as refugees, and medical asset management during natural disasters. We set out to understand the characteristics of PAs in the National Guard and the reserves of the Navy, Coast Guard, Army and Air Force.

Conclusion
The US military draws on-PAs to provide healthcare to diverse populations, and the reserve components of the Armed Forces mirror this active-duty mission. PAs have become a critical element of reserve components as medical officers by providing a flexible and adaptable resource for military missions, both in domestic and international settings. The difficulty of recruiting board-certified physicians and surgeons has compelled the uniformed services to adapt and use PAs in unprecedented ways.