

# It's not just a job, it's an adventure for military pediatricians

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Robert Musinski, Correspondent

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From the time she was in elementary school, Col. LoRanée Edwards Braun, M.D., FAAP, had her sights set on becoming a pediatrician. As a 24-year-old, though, she grappled with whether she wanted to be a civilian or military doctor.

The choice suddenly became clear one day when she saw a coat hanging on the back of a door. She envisioned herself putting her coat on a hook each night as she finished work as a civilian pediatrician vs. the unknown possibilities of military medicine.

“When I end up in positions that can be stressful — standing in Moldova at an orphanage where there’s no running water — I say ‘What am I doing here?’” Col. Braun said. “When I realize this is exactly where I wanted to be — impacting lives of children all over the world — it makes me look at each moment with a bit of appreciation because not everyone gets that opportunity.”

Col. Braun’s frontier spirit is common among military pediatricians, who often have several overseas stints, including some in combat, that give them leadership and medical experience they likely wouldn’t get anywhere else.

“I enjoy not doing the same thing every day,” said Capt. Gregg J. Montalto, M.D., M.P.H., FAAP, who has served the Navy in Asia and the Middle East. “That’s part of why I enjoy the military because I never know what the day is going to bring.”

## Starting out

Thanks to education funding from the government, military pediatricians don’t accrue nearly as much medical school debt as a typical physician. The trade-off is several years in the service after graduation, whether they attended a military-run medical school or not.

For some, early experiences in military life often set the stage for their careers.

Col. Nicole M. Thomas, M.D., FAAP, figured she might become a civilian pediatrician once she served her required time. However, her early experiences in Korea and Germany convinced her to stay in the Air Force. Fresh out of residency in her early 30s, she arrived at Osan Air Base in South Korea as a pediatrician in a solo practice.

“It was awesome,” she said. “I learned a lot, made great connections and it helped to have a population of pediatric patients. As a solo pediatrician, I was able to care for them, and it taught me how important it is to have that relationship with the family. I could take ownership of the patient population, and it was a really good experience for me.”

Capt. Montalto entered the Naval Academy before he realized he wanted to be a pediatrician. When he was a medical student, he appreciated the chance to do an overseas internship on a ship, taking care of active duty soldiers, before completing a residency.

“One of the benefits I’ve seen now that I’ve spent the last 15 years in residency training programs and teaching is that a lot of interns go out on an internship and come back more mature, a bit more independent and process things a little differently,” he said.

## Eclectic careers

Because the military is involved in some of the most dangerous missions on the planet, military pediatricians benefit from hands-on crisis experience that prepares them well for high-level academic and leadership positions.

For example, during one period, Col. Braun served the Army in Germany, then went on missions in Moldova and Tanzania followed by several months in Iraq during wartime.

“I can’t imagine a job as a civilian in which I would be hired and allowed to do as many things as a military pediatrician. And at a young age, too,” said Col. Braun, who is chief of the Department of Pediatrics at the Madigan Army Medical Center in Tacoma, Wash., and a member of the AAP Section on Infectious Diseases.

Col. Thomas, who oversees quality, credentialing, risk management and patient safety for 76 military treatment facilities worldwide, served in Central America and South America. She also saw the effects of war on children and soldiers while at Bagram Air Base in Afghanistan.

“It was hard,” she said. “Seeing what goes on with war is very difficult but being able to take care of people who were impacted by it made a difference to me.”

Capt. Montalto’s interests in adolescent health and natural disaster planning were sparked by early-career experiences, including assisting in the aftermath of Hurricane Katrina.

Capt. Montalto said he learned from Katrina that “without having a group of dedicated people to work with, it’s next to impossible to have an impact.” After a few more opportunities to serve in a similar way across the world, Capt. Montalto pursued a degree in global health policy. Recently, he was director of medical operations on the USNS Mercy hospital ship and helped representatives from four Asian countries prepare for natural disaster response.

Military pediatricians need to remain flexible and open-minded about missions that might come up on short notice, Capt. Montalto said. The same goes for their families.

“My wife and kids have the tougher job,” said Capt. Montalto, who is an adolescent medicine specialist at the Naval Medical Center in San Diego and has five children. “My profession is always rewarding, but it’s tough to be away from home. I can’t stress enough that military families and kids are tough. They need to be.”

That’s why military pediatricians are especially attuned to the challenges of their primary patient group — children of service members.

“Military children have special needs — their parents can be gone for long periods and put in dangerous situations,” said Col. Thomas, who shares insights about the children with the AAP Section on Uniformed Services. “I have a special place in my heart for those kids.”

*The physicians’ views are not the views of the U.S. Department of Defense or their particular branches of service.*

## Resource

- [AAP Section on Uniformed Services](#)

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