With the completion of this fourth and final issue focusing on medical support for the Gulf War, it is time to express the gratitude of my command and the Army Medical Department to the many contributors. From all services and many nations, the personal experiences poured forth a consistency of dedication and pride in service. The largest debt of thanks goes to Ms. Ingeborg Sosa, the heart and soul of The Journal of the Army Medical Department.

To say that the medical aspects of deployment went smoothly would be inaccurate. Given the size of the force and the significant potential threat of a recently bloodied Army with recent experience in utilizing chemical weapons and a biological capability, there was no expectation of immediacy by those knowledgeable in medical logistics. Our force was clearly supported in measured steps with the incremental buildup and sustainable at the point of commitment. The Air Transportable Hospitals, the hospitals afloat and the deployable ground units were all vital to the mission and reinforce the long standing principal that diversity enhances our medical readiness. The personal ingenuity and plain hard work of many thousands of medical personnel from the sands of Southwest Asia to the military medical centers and their networks of civilians and veterans facilities enabled the coalition forces to engage with audacity. Our ability to care for tens of thousands of casualties substantially contributed to the paucity of killed and wounded.

While the contributions were edited with the permission of the authors, the thrust and personal poignancy were not blunted. Those that gather up the "lessons learned" will find their list reflective of the observations made by those that have proceeded us, with particular reference to the diaries of Johnathan Letterman. The clearest message is that medical units composed of individuals who are unfamiliar with their colleagues, their facility, their equipment and their tasks are not combat ready. Our willingness to invest the time and capital necessary to preclude that unfamiliarity is what defines military medicine.

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