10 Things I Loved About Being A Military Doctor

Most long-term readers know I spent my first four years out of residency as a military physician. I was an Air Force officer (separated as a major), but worked shifts in both Air Force and Navy Hospitals (the Navy was much more impressed when I introduced myself as “Captain Dahle”). I took care of soldiers, airmen, sailors, and marines. I even took care of SEALs, although their descriptions of just how they got injured were always extremely vague. I practiced medicine on four continents, ran a hospital department, served on the medical executive committee, functioned as the EMS director, could direct the assembly of a tent hospital in a matter of hours, and at times knew the most about my specialty and several others (ophtho, ENT) of any military members in an entire country. Those who have read what I have written about military medicine might conclude that I am the most anti-military doctor on the planet. That is not true at all. When I am asked for my honest opinion, I tell people that the bad just barely outweighed the good such that I would not do it again, but that I had lots of great experiences and nothing really bad that could have happened to me ever actually happened.
They even let you keep the uniform when you get out

I managed to skate through all but one of the bad things that can occur in military medicine. Nobody ever took a shot at me. I managed to get exactly what I wanted out of the military match (and the civilian match.) My deployments were shorter and safer than those of any other military emergency doctor I know. One of my two kids even knew who I was when I came home. I put up with my share of bureaucratic nonsense and came home a lot more often complaining about my job than I do now, but the only really bad thing that ever happened to me was my assignment. When I came out of residency, I was told to make a rank list of the 16 or so places that the Air Force sent emergency docs. My wife and I stewed over it like a residency rank list and after much blood, sweat, and tears submitted it. Then we were given our last choice. It kind of made us wonder why we bothered making the list since it obviously had no effect on our assignment. At the last minute, we were offered a new assignment, one where there wasn’t even an emergency doc and so it wasn’t on our list at all. Given the alternative, it seemed like a good idea to take it (which we did in about 10 seconds as my wife yelled “Take it! Take it!” while I was covering the mouthpiece on the phone.) We ended up a long way from family and even further from the mountains. Oh well. I took up disc golf and gave up climbing for a while (which serendipitously allowed me to replace a very expensive term
The military and its HPSP “Scholarship” has its problems, but in today’s post, I’d like to point out some really awesome things about military medicine.

The Best of Military Medicine

# 1 Quality of the People I Served With

The best part of the military was the people, without a doubt. I served with my co-workers and I served with my patients. The vast majority of the people I worked with and the people I worked on had made a commitment to serve their country and each other and were absolutely a pleasure to be around. They were truly the salt of the earth. Now, I’m in a great partnership and have some great co-workers. I even have some great patients. But imagine an ER where all the patients are required to maintain a healthy weight, work out three times a week, work hard for a living, and get drug-screened regularly. It’s pretty cool. Except for the fact that they don’t actually get non-viral illnesses very often, which makes the medicine itself a little boring.
In the military, it not only feels like it is you against our nation’s enemies, it feels like it is you against “the man.” It isn’t that any of our commanders, right up to the commander in chief, really wanted anything bad for us, it was simply that the needs of the military did not always coincide with our personal and career desires. But that opposition really makes for a great sense of camaraderie, like we’re all in this together. You have a little bit of that in residency, but precious little of it in a community hospital.

Did I mention that everyone you see has insurance? While wait times are sometimes longer than you would like (the naval hospital I worked at scheduled MRIs 24/7, even at 2 or 3 in the morning every night of the week), nobody has to pass on needed care due to a lack of ability to pay for it. I don’t think I saw a dental pain patient in four years. Amazing!

Likewise, everybody has someone assigned to take care of them. Some patients in a civilian emergency department have literally no one they can call to come get them and take care of them. But everybody in the military has a first sergeant and a commander. They may not want me to call them, but I can! No sitting around waiting to sober up in my ED.

The military electronic medical record had its issues, without doubt. But it also had a really cool feature. When you put a prescription into it, it would tell you how much the medication cost the military on a per pill basis. Most pills were less than 10 cents and a dollar a pill was a really high price. It would be pretty awesome to have that kind of
transparency in our civilian system, not to mention those prices!

# 6 Security

One of the worst parts about practicing emergency medicine is you fear for your physical safety. Just about anyone can get into our “weapons-free” ED with a gun and wipe out the whole place because they’re mad they didn’t get a dozen percocets. So what does the hospital do? It gives you an unarmed “guard,” (who may very well qualify for Social Security benefits,) to keep the place secure. The response time for the police ranges between 3 and 4 minutes (ask me how I know.) Well, in the military I NEVER feared a patient would hurt me. Not only did they have to get past a guard armed with an M-16 to get to me, but if they started acting up (or ran off when they weren’t supposed to) I could call an entire company of heavily armed military policemen to ensure compliance with my treatment plan. Those guys loved nothing better than to run down an escapee. There was no way a patient I didn’t want to leave the ED was going to make it off base. That was the most fun Security Forces had all week.

# 7 Guaranteed Debt-Free Date

Let’s move into some of the more financial topics related to military service. I keep running into these docs who are planning to pay off their student loans over 5, 7, 10, or even 15 years. Well, my “student loans” were paid off in four years, guaranteed. Not a day less, but not a day more either. If you can’t get rid of your student loans within 4 years while living a “military doctor lifestyle,” maybe you should take a closer look at serving.
# 8 Gradually Increasing Income

I criss-cross this country preaching to students, residents, and attendings the merits of *living like a resident* and growing into your income as slowly as you can. But I confess that I had an advantage that many of them will never have. I was FORCED to grow gradually into my attending income. In the 14 years since I started getting a paycheck as a resident, my income has gone up every single year. Now we’ve always saved, and as an attending always saved a lot, but it’s a little easier not to spend $300K as a brand-new attending when you’re getting paid $120K as a brand-new attending. I sometimes wonder how much of our financial success I can attribute to the fact that we had many small raises instead of one big one like most emergency docs.

# 9 The TSP and the SDP

Military members have two really cool investment programs available to them. The first is the *Thrift Savings Plan*, which is basically the lowest cost 401(k) program in the country. It is comprised entirely of high-quality index funds with rock-bottom expense ratios. It even has a unique investment, the *G Fund*, not available anywhere else which provides one of the few “free lunches” in investing- bond yields with money market stability. The TSP is so good, I’ve kept it since separating
and actually roll more money into it when I get a chance. It’s even better now that it has a Roth option. The second really cool program is the “Savings Deposit Program.” When you deploy and for three months afterward, you can put up to $10K total into this account and earn a guaranteed annualized 10% on it. I wish I could find more guaranteed 10% returns out there.

[Note: The Department of Defense’s (DoD) new retirement system, known as the Blended Retirement System (BRS), took effect on January 1, 2018. Click here for a description of the new program.]

# 10 Allowances

The best financial advantage for military members is the fact that a large chunk of their pay is tax-free in the form of a Basic Allowance for Subsistence (BAS) and more importantly, a Basic Allowance for Housing (BAH.) In addition, many of the “special doctors pays” don’t require the payment of payroll taxes. While deployed, a big chunk of your basic pay is also completely income tax-free. But wait, there’s more. While in the military, you can usually declare your state of residency as one of the 7 states without an income tax, or at least one that doesn’t tax your military paychecks. All this adds up to a ridiculously low effective tax rate on your income. In fact, one year in which I was deployed for the last 4 months of the year, I had an effective tax rate (federal, state, and payroll) of under 5% on a six figure income. I won’t see that again in my lifetime.

There you have it, the top ten things I loved about being a military doctor.

What do you think? Have you served or are you currently serving in the military? What do you love about it? Would you do it again? Comment below!