

Dr. Samuel L Preston, DO
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Education

July 2004-June 2009	National Capital Consortium Family Medicine-Psychiatry Residency, Walter Reed AMC, Washington, DC
July 2004-June 2005	National Capital Consortium Family Medicine-Psychiatry Internship Walter Reed AMC, Washington, DC
August 2000-June 2004	Lake Erie College of Osteopathic Medicine, Doctor of Osteopathy, Erie, PA
August 1996-May 2000	Xavier University, BS Natural Sciences (Pre-Med), Cincinnati, OH

Certifications and Licensure

Diplomat, American Board of Family Medicine (Exp Date: Indefinite)
Diplomat, American Board of Psychiatry and Neurology (Exp Date: Indefinite)
State Board of Virginia License Number 0102201883 (Exp. Date 30NOV22)
DEA: FP3786158
Doctor of Osteopathic Medicine, June 2004

Medical Leadership Experience

June 2020 – Present	Primary advisor to the Army Surgeon General and other Army senior leaders on all behavioral health matters. Responsible for development of policy and the coordination and synchronization of the provision of Army Behavioral Health (BH) services consisting of over 3,200 BH providers across 23 hospitals and medical centers supporting a 1.5 million beneficiary population. Provide oversight of 20 Service Members, DA civilians and contractors as they work to innovate and improve areas of BH readiness, substance use clinical care, family advocacy, suicide prevention and risk reduction, and advancement of BH research. Army Behavioral Health representative to the Defense Health Agency (DHA) ensuring Army readiness and equities are fully supported without loss of required capabilities during phased transition of resources.
June 2018 – June 2020	Commander, Hohenfels Army Health Clinic. Commanding officer and Installation Director of Health Services within the Hohenfels Army Health Clinic. Senior Medical Advisor for the installation supporting

6,800 personnel, 3,600 beneficiaries, and over 28,000 rotational, multinational forces. Medical diplomat between the US Army and Host Nation medical service and community members. Responsible for title X authority and changed with health and welfare of 30 Soldiers and their families.

March 2020-June 2020

Task Force Surgeon, Task Force Hohenfels/Garmisch. Chief medical advisor for the Task Force Senior Responsible Officer in the response to COVID-19. Responsible for COVID-19 prevention, response, and surveillance for approximately 10,000 affiliated personnel to include Hohenfels Training Area, NATO School, and Garmisch Military reservation. Medical diplomat with Bundeswehr and German Ministry of Health.

March 2018 – Present

Psychiatric Consultant to the Army Surgeon General. Senior Psychiatrist for operational psychiatry in the US Army. Responsible for the training, allocation, and professional development of 180 psychiatrists and psychiatric residents. Definitive subject matter expert for psychiatric disposition and readiness considerations for the US Active Duty Army, an organization of 480,000 Soldiers responsible for fighting and winning America's wars.

December 2017-June 2018

Regional Health Command – Atlantic Deputy Chief of Staff. Senior staff officer within RHC-A, responsible for synchronizing and informing a staff of 400 professionals supporting the Chief of Staff and Commanding General of the largest regional medical command in the US Army, with a budget of \$5B and supporting over 500,000 beneficiaries.

December 2016 – June 2018

Regional Director of Psychological Health, Regional Health Command – Atlantic: Senior Behavioral Health Consultant for USAMEDCOM Atlantic Region Chief of Clinical Operations, providing policy and senior command guidance influencing the delivery of behavioral health services to 22 Military Treatment Facilities with over 500,000 beneficiaries.

June 2013-August 2016

Installation Director of Psychological Health (Chief, DBH)-Schofield Barracks, HI: Chief BH Officer and senior behavioral health advisor for Schofield Barracks, HI: Responsible for providing BH services to a catchment of 35,000 Soldiers and beneficiaries. Developed a system of care with an end state of 120 personnel and eight multidisciplinary, multi-functional clinics. Interfaces with community, joint, and government agencies to ensure quality, efficient, and timely behavioral

health resources for beneficiaries. Develops and implements a high reliability BH system of healthcare consisting of Office of Surgeon General approved BH programs while flexing to local needs and requirements. Senior BH advisor to the hospital, garrison, and division commanders on Schofield Barracks. Co-chairman of the Community Health Promotion Council BH Working Group, a senior commander's program. During tenure, increased outpatient encounters by 10,000 annually (33% increase) to over 60,000 encounters annually, developed the region's flagship child and family behavioral health pilot site, created an intensive outpatient program ensuring far-forward availability of the highest level of outpatient behavioral health services to the warfighters. Grew and on-boarded his provider staff by 100% while maintaining productivity and workload benchmarks above MEDCOM standard. During expansion, the department exceeded the MEDCOM BH personnel job satisfaction rating average and was #2 of 11 FORSCOM/Readiness platform departments in overall job satisfaction. Oversaw over \$80M of BH facility expansion and planning. Developed and implemented the only combined operational BH curriculum in the Army, fusing the education of Social Work (SW), Psychology, and Psychiatry disciplines. Ensured the SW internship program at Schofield Barracks received the highest accreditation score (100%) upon inspection. Promoted success within his department with 8/12 2015 Schofield Health Clinic Soldiers of the Month and 3/4 2015 Soldiers of the Quarter. Successfully recommended his NCOIC to the Audie Murphy Board. Supported his department's nominee as the Department of Defense Employee with Disability of the Year for the Army during annual award presentation in Washington, DC. Participated as working group member for the high visibility transition of Army Substance Abuse Program from IMCOM to MEDCOM impacting service delivery of all active duty Army beneficiaries. Developed an AMEDD "best practice" for in- and out-processing Soldiers with BH conditions, now considered the gold standard by the Army BHSL. Participated in MEDCOM policy working groups including VA/DoD PTSD Clinical Practice Guidelines, Army BH Profiling Standardization, Risk Assessment and Mitigation, resulting in associated MEDCOM/OTSG policy. POC: COL Richard Ruck 808-433-8500

February-August 2015

Medical Review Officer (MRO), USARHAW: Principal medical review officer for COMPO 1, 2, and 3 units within the USARHAW AO. Provided medical review and consultation for all Hawai'i Army units. Developed a protocol reducing assessment time of (+) UAs to under seven days, half

of the Army standard while incorporating the BHSL and garrison services for all Soldiers providing 100% referral to substance abuse treatment.

September 7-11, 2015

Medical Officer Diplomat, SMEE Kathmandu, Nepal:

Upon request from the Nepali Ministry of Health, a five-member USARPAC BH team met with a 20-member Nepalese team consisting of behavioral health, emergency department, pharmacy and other medical professionals IOT share BH best practices in the wake of disaster.

Provided disaster response and operational behavioral health presentations to senior Nepalese uniformed medical officers. Offered medical diplomacy to partner nation psychiatrists IOT combat rising BH issues surrounding large-scale disaster.

POC: Dr. David Brown 808-780-8976

February 2012-June 2013

Chief, Embedded Behavioral Health Service, Fort Carson, CO:

Responsible for the outpatient BH needs of over 20,000 active duty service members at Fort Carson. Senior leader for a staff of 70 BH personnel including psychiatrists, psychologists, social workers, nurse case managers, and technicians. Charged with development and implementing systems and standard operating procedures improving access, quality of care, and common understanding within the BH system. Developed and implemented an Army Best practice for triaging Soldiers and offering full-spectrum services resulting in reduction of BH no-shows to <5% and maximizing available resources. POC: LTC (ret.) Charles Webber 719-526-7155

February 2012-May 2012

Psychiatry SME, Integrated Disability Evaluation System (IDES) Fusion Cell, Madigan Army Medical Center, WA:

National-level/OTSG task force consisting of members hand-picked for MEDCOM mission to assess and disposition thousands of complicated behavioral health IDES cases IOT ensure quality, standardized dispositions for Soldiers with behavioral health needs. Reviewed complex charts, conducted individual assessment, and communicated with command when appropriate ensuring comprehensive assessment and timely disposition.

December 2010-October 2011

Operation New Dawn (OND) Theater Psychiatric Consultant: Senior Psychiatric Officer and the Behavioral Health SME for the OND Combatant Command Surgeon responsible for BH policy and programmatic recommendations for the largest troop withdrawal from a theater of military operations since the Vietnam War. Developed BH support plans and made recommendations to USF-I Surgeon and 4ID

Surgeon regarding BH service support allocations and withdrawal of services resulting in BH operation plan to mitigate BH risk during transition from stability phase operations to redeployment.

POC: BG Ronald Stevens (910) 907-7148

July 2009-February 2012

4th Infantry Division Psychiatrist: Senior Command BH consultant responsible for operational and tactical policy development directly impacting over 20,000 active duty Soldiers at Fort Carson. Developed systematic processes to assess brigade-sized troop movements in- and out-of theater at a large FORSCOM installation. Developed a community approach to suicide prevention resulting in Annual Senior Leader Suicide Prevention Forum, consisting of military, medical, and community senior leaders from the Pikes Peak Region. Fort Carson had a 20% reduction in completed suicides with leader and community focused interventions as a contributing force. Actively participated in the implementation of embedded behavioral health at Fort Carson, now considered the standard platform for operational behavioral health within the Department of the Army.

POC: COL Mary Krueger (910) 644-3217

Military Education and Experience

May 2018	US Army Medical Command Pre-command course, JBSA, TX
April 2018	US Army Medical Command Executive Skills Course – JBSA, TX
February 2018	LTC/COL Pre-command Course – Ft. Leavenworth, KS
August-December 2016	Commanding General Staff College – ILE, Ft. Belvoir, VA; <i>Honor Graduate</i>
March-August 2016	Medical Review Officer, All-Army Hawaii
January 2015-August 2016	Assistant Faculty: Tripler Army Medical Center (TAMC) Psychology Residency
August 2013-August 2016	Assistant Faculty: Tripler Army Medical Center (TAMC) Psychiatry Residency
June 2015	DA Provider Course: Traumatic Brain Injury
February 2013	DA Supervisory Development Course
December 2012	AMEDD Captain's Career Course
October 2010-October 2011	Deployment, Operation New Dawn, COB Speicher, Iraq
August 2010	AMEDD Medical Review Officer's Course
July 2010	AMEDD Tactical Combat Medical Care Course

Professional Presentations (National, DA, MEDCOM, or Regional)

July 2019	Clinical Leadership, USAEUR PA Symposium
May 2019	SUSP Consultant Update, APA
June 2018	SUSP Consultant Update, APA

April 2015	<i>Making Policy into Practice</i> , MEDCOM BHSL Installation Director of Psychological Health Training, San Antonio, TX
March 2015	<i>VA and DoD Clinical Practice Guidelines for the Treatment of Posttraumatic Stress Disorder</i> , Institute on Violence, Abuse & Trauma, 12th Hawai'i International Training Summit on Preventing, Assessing & Treating Trauma Across the Lifespan, Honolulu, HI
September 2014	<i>Embedded Behavioral Health System of Care</i> , Pacific Regional Medical Command BH Summit
March 2014	<i>Operational Behavioral Health Strategies During Withdrawal of Operation New Dawn (Iraqi) Forces: A Command-Centered Approach</i> , American Psychiatric Association Annual Conference, New York, NY
September 2013	<i>Behavioral Health System of Care through the Army Force Generation Cycle</i> , Pacific Regional Medical Command BH Summit
June 2012	<i>Command-centered Behavioral Health Risk Mitigation Strategies</i> , OND BH Summit

Working Group/Special Responsibilities and Activities

November 2016	Reviewer and Contributor, OTSG Policy 16-096: <i>Behavioral Health At-Risk Management Policy</i> : Standardized assessment, surveillance, and reporting of Soldiers' risk as it pertains to behavioral health diagnosis. Improved common language amongst BH professionals and set minimum standards to ensure quality, safe treatment of the most vulnerable Soldiers.
June 2014-August 2016	Behavioral Health Working Group Co-Chair, USARHAW Community Health Promotion Council (CHPC): Led a working group consisting of military, garrison, and community organization leaders designed to gather, assess, and synthesize community and public health metrics (including behavioral health, domestic violence, substance use disorder, suicide related behavior, and community integration surveillance) for streamlining Schofield installation and community BH resourcing. A direct report to USARHAW Commander within the CHPC and POC for community, sister service, and regional BH leaders for integration of BH services.
February-July 2016	Contributor and Working Group Member, MEDCOM OPORD 16-33, <i>Transfer of US Army Substance Abuse Treatment Program to MEDCOM</i> : Key stakeholder in one of four pilot sites across MEDCOM MTFs to develop and implement transition plan for ASAP to move to MEDCOM BHSL. Developed and implemented successful plan integrating available, limited resources ensuring minimal disruption in services and incremental, phased adoption of processes maximizing available

resources. Contributed to OPORD effecting all-Army personnel and service care delivery for substance use disorders.

August 2015 Reviewer and Contributor, OTSG Policy 15-045: *Behavioral Health Profiling Standardization Policy*: Provided all-Army profiling providers standardized protocol for effectively communicating readiness while maintaining maximal privacy for Soldiers engaged in services.

July 2015 Reviewer and Contributor, OTSG Policy 15-039: *Guidance for Management of Polypharmacy...*: Provided standardized treatment requirements for managing polypharmacy, this policy directly impacted all prescribing providers and Army profiling officers and improved medication surveillance across the force.

December 2015 Reviewer and Contributor, OTSG Policy 14-094: *Policy Guidance on the Treatment of Posttraumatic Stress Disorder*: Provided enterprise-wide standards for treatment of PTSD, provided training to over 100 military behavioral health staff regarding the treatment standards, ensured 100% of Schofield BH staff was trained to understanding and complied with evidence-based treatment protocols.

August 2014 Reviewer, OTSG Policy 14-064: *Transferring Family Advocacy and Behavioral Health Care During PCS and ETS*: Provided a standardizes process for ensuring BH/FAP continuity for most vulnerable Soldiers and families during at-risk periods of transition.

June 2014 Reviewer, OTSG Policy 14-049: *Administrative Separations of Soldiers for Personality Disorders...*: Instituted policy for Army Enterprise-wide assessment and disposition of Soldiers with Personality Disorders and/or Adjustment Disorders to ensure comprehensive assessment and consistent disposition.

October 2013 Reviewer, OTSG Policy 13-059: *BHSL Policy, Consolidated Behavioral Health*: Standardizing BH Service Line, developed leadership structure for US Army BH

Publications: <https://icns.mydigitalpublication.com/publication/?m=54679&l=1>

Springer...

Pending: APHC Suicide paper

Pending Submission: IRB submission with NYU

Completed: OCT and April IDPH symposiums ; DST presentation

On-going: Department of the Army Spirituality Readiness Program

DHA Chronic Opiate Treatment Product

SME DoD/VA Chronic Opioid CPG

PFTF

FORSCOM CR2C

ALWL

Extracurricular Activities

Outdoor enthusiast, enjoys running; completed four marathons (1x Honolulu Marathon, 2x Marine Corps Marathons, 1x Austin Marathon), Avid snowboarder, aspires to eventually complete a triathlon, enjoys home renovation and real estate