Ma’ams,

BLUF:  Requesting your assistance with questions 2 and 3 below (#2 ETA on availability of COMINATY branded vaccine and #3 updated DoD VAERS Dashboard data.)

The 138 Fighter Wing is the bottom of our pack, but have a very resistant population (death of a pilot from heart attack about 10 days after a Moderna dose).  The Wing/CC is engaged and working through the resistance and asked the questions below.  2) deals with when COMIRNATY branded vaccine may be available.   Any estimation would be helpful, but my read is unit members are just using this as an excuse even though OGC has clearly indicated either label branding can be used to meet the mandatory vaccination order.  However, if any branded vaccine were available for their Nov drill, I would ask if we could vector some to the 138th to remove that from the equation.

Question 3 deals with a DoD VAERS Dashboard (attached).  His community is focusing on the 23% of DoD adverse events that weren’t mild, specifically related to cardiac conditions. Also wanting to see more current data.  Do you know who put this together (slide says DHA) and if they have an updated product?

We are working answers to all the questions below and be glad to share our answers with you for your SA, but really appreciate any help you can shed on #2 and 3.

Thanks

v/r

Coupon

KENNETH EGERSTROM, Col, USAF, MC, CFS

Director, Air National Guard Medical Service (NGB/SG)

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\*\*\* Note: I migrated to CHES on 29 Jul 20.  Please update your email address for me to kenneth.egerstrom.1@us.af.mil \*\*\*

**From:** GEROCK, MICHAEL T Maj Gen USAF HAF AF/ANGRC <michael.gerock@us.af.mil>
**Sent:** Thursday, October 14, 2021 3:21 PM
**To:** DESKINS, DAWNE L Maj Gen USAF HAF AF/NGB/CF <dawne.deskins@us.af.mil>; EGERSTROM, KENNETH S Col USAF ANG ANGRC/SG <kenneth.egerstrom.1@us.af.mil>
**Cc:** LAZEAR, EMILY E Maj USAF HAF AF/AF/NGB/CF <emily.lazear@us.af.mil>
**Subject:** FW: COVID Vax Status - Main Factors - OK 138th FW

Ma’am,

Feedback from Mouse and the 138 FW.

Coupon, need some data if you can get it.

v/r,

Troy

MICHAEL "Troy" GEROCK, Maj Gen, USAF

Commander, ANGRC

240-612-8001 (O)

michael.gerock@us.af.mil

**From:** MEASON, MICHAEL B Col USAF ANG 138 FW/CC <michael.meason@us.af.mil>
**Sent:** Thursday, October 14, 2021 2:54 PM
**To:** GEROCK, MICHAEL T Maj Gen USAF HAF AF/ANGRC <michael.gerock@us.af.mil>
**Subject:** COVID Vax Status - Main Factors - OK 138th FW

MG Gerock,

­

Thank you sir for your time this morning, I regret the amount of time you and your staff are likely spending on 138FW vaccine status.  Current numbers as of 13 Oct are below, and as we discussed on the phone I do anticipate additional movement over the next 45 days.

We have two vaccine events planned over the next two weeks to help provide opportunity to meet the 28 Oct first-dose deadline.  I also anticipate­ additional religious accommodation and medical exemptions, some pending unit CC letters and MDG provider reviews that will happen through Nov drill.  Of the 490 that haven’t started, I estimate approximately 250 Airmen remain somewhere between refusal and undecided.

Fully Vaccinated: 489­­­

1st Dose Only/In Progress: 136

Medical Exemption: 6

Religious Accommodation: 5

Not Started: 490

In response to your ask about main factors and unanswered questions affecting current status, I believe the topics below are the main drivers (listed in order of impact from my perspective).  These questions and factors represent a summary of the highest level issues I’ve received from my airmen via chain of command over the past few weeks, as well as two town hall events I held here on 12 Sep.  Some are repeated/modified from my original thread farther down.  #6 hasn’t bubbled up yet, but is likely a topic in near future (or currently in the background)

1)      Hesitancy following the death of one of the units’ pilots due to a heart attack, approx. 10 days after receiving the second dose of Moderna vaccine in March 2021.

2)      Q:  Any predictions on the future availability of the Comirnaty labeled vaccine products?  I have acknowledged publicly the ASD(HA) guidance on interchangeability of the use of the two products, and the 2 Dec deadline numerous times – however, the only vaccine products available at this time continues to be the Pfizer-BioNTech labeled vaccine products.

a.       This is a prolific point of friction, due to the lack of POTUS waiver IAW 10 USC 1107a for EUA labeled products, and this perceived daylight between law and policy remains with many Airmen.

b.       On 2 and 4 Oct, we scheduled two events with capacity for 400 doses, and scheduled 272 Airmen who had previously responded to a data call indicating intent to comply.   Of 272 scheduled, 178 declined due to lack of availability of the Comirnaty labeled product.

3)      Requests for additional data on DoD/DAF/ANG adverse event reporting:  The attached VAERS dashboard was current as of 23 Aug 2021, prior to publishing of the DoD and Civilian mandates.  This handout states that 77% of 5379 adverse events reported are mild.

a.       Q:  where is the additional (or more current) data on these events - Of the 23% (1200) that weren’t mild, how many deaths or cases of myocarditis/pericarditis were reported?  What other significant events were reported? – this data is considered very relevant since the demographics represented by these numbers are isolated to the military population, as opposed to CDC/FDA data across the nation.

b.       This is the most prevalent concern, along with the item 1) above, particularly among the wing’s pilots, many of whom are also airline pilots concerned about FAA Class I medical certificate impacts if a cardio condition develops.

4)      Post-service eligibility/availability for health care due to potential adverse events resulting in medical conditions that are not compatible for continued service:

a.       If adverse reactions or latent conditions such as cardio disease develop post-vax, and Airmen are eventually subject to medical discharge; Airmen that don’t qualify for retirement benefits and don’t meet VA eligible service requirements due to lack of contingency/T10 service are concerned that they would be left without a health care safety net

5)      Q:  What guidance drives the requirement for retention waivers with all COVID vaccine medical exemptions?  (even pregnancy)

a.       The only reference that we’ve found specific to vaccines is contained in DoDI 6490.07, Encl 3, a.(2) which references immunization requirements for specific deployments.

b.       If underlying conditions are discovered through this process that require waivers due to MSD retention standards, this is understood.

6)      Questions regarding future booster requirements for DoD that haven’t materialized.. not a Top 5 factor yet, but Airmen are asking these questions as well.

This is likely more info than you needed – I very much appreciate you taking the time in your schedule to reach out sir!  The wing senior leaders and I were at the front of the line in March, and we’ll continue to lead the 138th Airmen across the finish line.

Pending your questions, that’s all I have for now sir.

V/r,

-Mouse

**From:** BRADLEY, STEVE L Col USAF ANG NGB/SGX <steve.bradley@us.af.mil>
**Sent:** Friday, September 24, 2021 4:25 PM
**To:** MEASON, MICHAEL B Col USAF ANG 138 FW/CC <michael.meason@us.af.mil>
**Cc:** DESKINS, DAWNE L Maj Gen USAF HAF AF/NGB/CF <dawne.deskins@us.af.mil>; GEROCK, MICHAEL T Maj Gen USAF HAF AF/ANGRC <michael.gerock@us.af.mil>; SIEGFRIED, RAYMOND H III Brig Gen USAF ANG OKANG/AAG <raymond.siegfried@us.af.mil>; MUTCHLER, RICK L Brig Gen USAF ANG OKANG/COS <rick.mutchler@us.af.mil>; EGERSTROM, KENNETH S Col USAF ANG ANGRC/SG <kenneth.egerstrom.1@us.af.mil>
**Subject:** FW: Airmen talking points for Vax - OK 138th

Col Meason,

I have extracted the questions from your e-mail and presented them below with NGB/SG’s responses.

Q:  Will the results from last week’s non-ASIMS data call to ANG/SG be shared with the field (I’m interested to see (as we all are) what the total volume of expected admin and medical exemptions (as well as refusals) might be)?

A:  No.  Only 2/3rds of units responded and many were based on Commander’s best guess.  We don’t believe this data is a reliable prediction of how an Guardsman is likely to choose whether to become vaccinated.  As of 24 Sep, about 75% of ANG members have at least 1 dose, 0.8% have refused (either outright or are pursuing a Religious Accommodation) and 0.6% have worked an Exemption (pretty much evenly split between Medical and Administrative).

Q:  Why does 48-110, 2-6 a.(1)(b) specify that immunity based on serologic tests or documented infection qualifies as a medical exemption, yet SECAF policy memo from 3 Sep removes this exemption (This language is absent from SECDEF memo of 24 Aug as well)?

(14 Oct Update from Col Meason:  I was wrong to state SECDEF memo leaves this out, original 24 Aug memo also addresses no exemption for prior infection)

A:  Our best guess of the SecAF’s decision is because this is being looked at as a Force Health Protection Measure (goal to protect the force) and not an Individual Medical Readiness Item.  From a scientific standpoint, it is difficult to predict how long and how effective someone’s antibody coverage is after they developed immunity from infection.  If they were exposed to the original COVID-19 variant, their antibody response may not be protective against current or future variants.  While that is also true for the vaccine, the difference is the current vaccines are studied for effectiveness against emerging variants.  Bottom line is the SecAF put out policy which the legal community has validated as being a legal order.

Q:  Does NGB/SG or DAF/SG have statistics on the number of COVID vaccinated Airmen/Guardians that have developed adverse reactions, whether immediate allergic reactions/anaphylaxis or more latent effects such as myocarditis/pericarditis (There are multiple post-marketing long-term studies required in the Comirnaty BLA regarding these potential effects.  This is the most prevalent concern, along with the next item, particularly among the wing’s pilots, many of whom are also airline pilots concerned about FAA Class I physical impacts if a cardio condition develops.  Compounding the hesitancy on this topic is the fact that a 138th Airman died approx. 10 days after receiving the second dose of Moderna in March 2021, and there is widespread suspicion that the vaccine might have been a contributing factor.  Reproductive health/pregnancy/fertility concerns:  I expect many Airmen to present requests for medical exemption or religious accommodation regarding concerns over women’s health & menstrual cycles, fertility treatments, efforts to become pregnant, etc.  I have read the guidance that says (to paraphrase) “the effects are uncertain, but it’s safe & effective”  - however, the uncertainty remains.)?

A:  This is not tracked at the NGB level. However, DHA tracks all VAERS reports for DoD employees: [Workbook: Breakthrough and VAERS (health.mil)](https://bitab.health.mil/views/BreakthroughandVAERS/BreakthroughandVAERSDashboard?:iid=1&:embed=y#1). It is mandatory for vaccination providers to file a report with the Vaccine Adverse Event Reporting System (VAERS) for all serious adverse events. The amount of adverse reactions in the DoD is significantly low. Of all DoD employees, 5,379 have had adverse reactions and 77% of those were mild reactions. While side effect are common after vaccination, they most commonly include; injection site soreness, fatigue, fever, achiness and completely resolve themselves within a couple days. Please refer to the Vaccine Fact Sheet for additional information and the CDC website for Myths and Facts regarding the COVID-19 vaccine: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/facts.html> Additionally, DHA has a Vaccine hesitancy toolkit available: [Allergy/Immunization (health.mil)](https://kx.health.mil/kj/kx8/AllergyImmunization/Documents/Forms/ShowFolders.aspx?RootFolder=%2Fkj%2Fkx8%2FAllergyImmunization%2FDocuments%2FCOVID%2D19%20Vaccine%2FVaccine%20Hesitancy%20Toolkit&FolderCTID=0x0120005BD1833AE744DB41A73547AAFE43C46F&View=%7B0699CC5B%2DA3F3%2D4631%2D9F91%2DC01E5DCF75FE%7D)

Q:  I understand Lt Col Markham addressed this to you yesterday - “legally distinct” Comirnaty –vs- Pfizer; I have seen the 14 Sep USecDef memo stating the two are interchangeable for vaccinating service members, and the NGB-GC info paper from 16 Sep 2021 (attached) that addresses this.  The FDA BLA documentation states the same, but goes on to say these two are “legally distinct”.  My only remaining question is:  In what way(s) are the two legally distinct?

A:  Please see the attached memo from Assistant Secretary of Defense (ASD), but bottom line is this is a legal question.  We have been told OGC has released guidance within the legal community that they are the same and the vaccine with either labeling can be used for the legal order.

I hope this helps and please, let me know if there is anything else we can assist with in your efforts to meet the 2 Dec deadline.

v/r

Steve Bradley, Col, USAF, MSC

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Air National Guard Readiness Center

3500 Fetchet Ave

Joint Base Andrews

240-612-7269 / DSN 612-7269 (Office)

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SIPR: Steve.l.Bradley.mil@mail.smil.mil

***“IMPORTANT NOTE:****I have recently migrated to the Cloud Hosted Enterprise Services. Please update your email address for me to point to**steve.bradley@us.af.mil**.”*

**From:** MEASON, MICHAEL B Col USAF ANG 138 FW/CC <michael.meason@us.af.mil>
**Sent:** Thursday, September 23, 2021 1:17 PM
**To:** BRADLEY, STEVE L Col USAF ANG NGB/SGX <steve.bradley@us.af.mil>
**Subject:** FW: 138 Wing COVID Stats

Steve,

I realized after sending this to Coupon that I should have included you.. my apologies. Any discussion or feedback you might have would be much appreciated.  Thanks for the support at ANGRC, a challenging season for us all.

V/r,

-Mouse

Col Mike “Mouse” Meason

Commander, 138th Fighter Wing

Oklahoma Air National Guard

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michael.meason@us.af.mil

**From:**MEASON, MICHAEL B Col USAF ANG 138 FW/CC <michael.meason@us.af.mil>

**Date:**Tuesday, Sep 21, 2021, 9:24 AM

**To:**EGERSTROM, KENNETH S Col USAF ANG ANGRC/SG <kenneth.egerstrom.1@us.af.mil>

**Cc:**WHITELY, RANDOLPH R Col USAF ANG 138 MDG/SG <randolph.whitely@us.af.mil>, MARKHAM, JOSHUA S Lt Col USAF ANG 138 MDG/SGA <joshua.markham@us.af.mil>, CAVANAUGH, ROBIN M Col USAF ANG 138 FW/CV <robin.cavanaugh@us.af.mil>, DIPIAZZO, DENNIS CMSgt USAF ANG 138 FW/CCC <dennis.dipiazzo.1@us.af.mil>

**Subject:**RE: 138 Wing COVID Stats

Coupon,

Thanks for the heads up, you can always reach direct to me as well if desired.   I briefed OK state leadership on 138th’s  status 17 Sep, and met with my TAG yesterday on this topic and our plan forward.  We have a plan to achieve the 2 Dec deadline for those that choose to comply.

Of note, I’ve asked 138 MDG to hold off on inputting exemptions in ASIMS based on informal data calls, but will do that IAW the SG guidance templates as soon as members submit religious accommodation requests for admin exemption or have a provider validated medical exemption.

Q:  Will the results from last week’s non-ASIMS data call to ANG/SG be shared with the field?  I’m interested to see (as we all are) what the total volume of expected admin and medical exemptions (as well as refusals) might be.

I held two town hall sessions with the wing on 12 Sep in an effort to inform on the mandate, our plan and answer questions - of which there were many sincere and well informed questions.  The biggest help I could use to reduce vaccine hesitancy are some answers to some of those vaccine risk-related questions 138th Airmen have been asking that no one can seem to find:  (This message more about communicating the why’s..)

Why does 48-110, 2-6 a.(1)(b) specify that immunity based on serologic tests or documented infection qualifies as a medical exemption, yet SECAF policy memo from 3 Sep removes this exemption?  (This language is absent from SECDEF memo of 24 Aug as well)

Does NGB/SG or DAF/SG have statistics on the number of COVID vaccinated Airmen/Guardians that have developed adverse reactions, whether immediate allergic reactions/anaphylaxis or more latent effects such as myocarditis/pericarditis?  There are multiple post-marketing long-term studies required in the Comirnaty BLA regarding these potential effects.

This is the most prevalent concern, along with the next item, particularly among the wing’s pilots, many of whom are also airline pilots concerned about FAA Class I physical impacts if a cardio condition develops.  Compounding the hesitancy on this topic is the fact that a 138th Airman died approx. 10 days after receiving the second dose of Moderna in March 2021, and there is widespread suspicion that the vaccine might have been a contributing factor.

Reproductive health/pregnancy/fertility concerns:  I expect many Airmen to present requests for medical exemption or religious accommodation regarding concerns over women’s health & menstrual cycles, fertility treatments, efforts to become pregnant, etc.  I have read the guidance that says (to paraphrase) “the effects are uncertain, but it’s safe & effective”  - however, the uncertainty remains.

I understand Lt Col Markham addressed this to you yesterday - “legally distinct” Comirnaty –vs- Pfizer; I have seen the 14 Sep USecDef memo stating the two are interchangeable for vaccinating service members, and the NGB-GC info paper from 16 Sep 2021 (attached) that addresses this.  The FDA BLA documentation states the same, but goes on to say these two are “legally distinct”.  My only remaining question is:  In what way(s) are the two legally distinct?

I know as well as all our Airmen that there are risks with the vaccine, and risks with the virus – and everyone will make their choice.  Please understand that my leadership team and I are moving forward towards the goal set.  We were all at the front of the line in March 2021, as we all knew this season would arrive at some point.  We are doing our best to meet the requirements of the mandate while mitigating risk to end-strength in the long term.  Happy to discuss further if desired.

Thanks for all you and your team are doing to keep the 90 informed and equipped to get after this rapidly changing & very challenging situation.

V/r,

-Mouse

V/r,

Col Mike “Mouse” Meason

Commander, 138th Fighter Wing

918-833-7208

DSN 894-7208

michael.meason@us.af.mil

**From:** MEASON, MICHAEL B Col USAF ANG 138 FW/CC <michael.meason@us.af.mil>
**Sent:** Friday, September 24, 2021 2:57 PM
**To:** BRADLEY, STEVE L Col USAF ANG NGB/SGX <steve.bradley@us.af.mil>; DESKINS, DAWNE L Maj Gen USAF HAF AF/NGB/CF <dawne.deskins@us.af.mil>; SIEGFRIED, RAYMOND H III Brig Gen USAF ANG OKANG/AAG <raymond.siegfried@us.af.mil>
**Cc:** MUTCHLER, RICK L Brig Gen USAF ANG OKANG/COS <rick.mutchler@us.af.mil>; EGERSTROM, KENNETH S Col USAF ANG ANGRC/SG <kenneth.egerstrom.1@us.af.mil>; GEROCK, MICHAEL T Maj Gen USAF HAF AF/ANGRC <michael.gerock@us.af.mil>
**Subject:** RE: Airmen talking points for Vax - OK 138th

Thank you Steve for your time and effort on the assist - as Tulsa leadership team continues to educate and lead our way through this challenge.

And thank you Maj Gen Deskins, appreciate your support.  I sent Maj Gen Gerock just now the background data and questions, believe I was on the phone with Steve about same time Brig Gen Siegfried reached out to you.

V/r,

-Mouse

Col Mike “Mouse” Meason

Commander, 138th Fighter Wing

Oklahoma Air National Guard

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**From:** DESKINS, DAWNE L Maj Gen USAF HAF AF/NGB/CF <dawne.deskins@us.af.mil>
**Sent:** Friday, September 24, 2021 2:48 PM
**To:** BRADLEY, STEVE L Col USAF ANG NGB/SGX <steve.bradley@us.af.mil>; SIEGFRIED, RAYMOND H III Brig Gen USAF ANG OKANG/AAG <raymond.siegfried@us.af.mil>
**Cc:** MUTCHLER, RICK L Brig Gen USAF ANG OKANG/COS <rick.mutchler@us.af.mil>; EGERSTROM, KENNETH S Col USAF ANG ANGRC/SG <kenneth.egerstrom.1@us.af.mil>; GEROCK, MICHAEL T Maj Gen USAF HAF AF/ANGRC <michael.gerock@us.af.mil>; MEASON, MICHAEL B Col USAF ANG 138 FW/CC <michael.meason@us.af.mil>
**Subject:** RE: Airmen talking points for Vax - OK 138th

Thank you Steve.

Thanks,

Dawne

DAWNE L. DESKINS, Maj Gen, USAF

Deputy Director, Air National Guard

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Smil:  dawne.l.deskins.mil@mail.smil.mil

\*\*\*IMPORTANT NOTE:  I have recently migrated to Cloud Hosted Enterprise Services.  Please update your email address for me to point to dawne.deskins@us.af.mil\*\*

**From:** EGERSTROM, KENNETH S Col USAF ANG ANGRC/SG <kenneth.egerstrom.1@us.af.mil>
**Sent:** Friday, September 24, 2021 2:36 PM
**To:** DESKINS, DAWNE L Maj Gen USAF HAF AF/NGB/CF <dawne.deskins@us.af.mil>; SIEGFRIED, RAYMOND H III Brig Gen USAF ANG OKANG/AAG <raymond.siegfried@us.af.mil>
**Cc:** MUTCHLER, RICK L Brig Gen USAF ANG OKANG/COS <rick.mutchler@us.af.mil>; BRADLEY, STEVE L Col USAF ANG NGB/SGX <steve.bradley@us.af.mil>; GEROCK, MICHAEL T Maj Gen USAF HAF AF/ANGRC <michael.gerock@us.af.mil>
**Subject:** RE: Airmen talking points for Vax

Gen Mutchler,

I missed Col Meason’s Tues AM email asking for some data points, and I’m currently working responses to all of his questions.  It seems the largest concern is the “legal distinction” issue, which was also raised by Lt Col Markham (138 MDG/SGA) on Monday, and I thought was answered when we sent info to the field that was shaped by the legal community.  In short, OGC pushed guidance within legal channels that I’m told essentially says that it is legally sound for a Commander to order a member to take the Pfizer/COMIRNATY vaccine.  However, the Lawyers and Doctors have an agreement that we won’t practice each other’s craft.  Col Meason should have our best answers to his Tue email within the hour.

v/r

Coupon

KENNETH EGERSTROM, Col, USAF, MC, CFS

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\*\*\* Note: I migrated to CHES on 29 Jul 20.  Please update your email address for me to kenneth.egerstrom.1@us.af.mil \*\*\*

**From:**BRADLEY, STEVE L Col USAF ANG NGB/SGX <steve.bradley@us.af.mil>

**Date:**Friday, Sep 24, 2021, 2:34 PM

**To:**DESKINS, DAWNE L Maj Gen USAF HAF AF/NGB/CF <dawne.deskins@us.af.mil>, SIEGFRIED, RAYMOND H III Brig Gen USAF ANG OKANG/AAG <raymond.siegfried@us.af.mil>

**Cc:**MUTCHLER, RICK L Brig Gen USAF ANG OKANG/COS <rick.mutchler@us.af.mil>, EGERSTROM, KENNETH S Col USAF ANG ANGRC/SG <kenneth.egerstrom.1@us.af.mil>, GEROCK, MICHAEL T Maj Gen USAF HAF AF/ANGRC <michael.gerock@us.af.mil>, MEASON, MICHAEL B Col USAF ANG 138 FW/CC <michael.meason@us.af.mil>

**Subject:**RE: Airmen talking points for Vax - OK 138th

Ma’am,

I talked with Col Meason this morning and I am currently having our SG COVID Team review my answers to their questions before responding to all.

v/r

Steve Bradley, Col, USAF, MSC

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***“IMPORTANT NOTE:****I have recently migrated to the Cloud Hosted Enterprise Services. Please update your email address for me to point to**steve.bradley@us.af.mil**.”*

**From:** DESKINS, DAWNE L Maj Gen USAF HAF AF/NGB/CF <dawne.deskins@us.af.mil>
**Sent:** Friday, September 24, 2021 12:35 PM
**To:** SIEGFRIED, RAYMOND H III Brig Gen USAF ANG OKANG/AAG <raymond.siegfried@us.af.mil>
**Cc:** MUTCHLER, RICK L Brig Gen USAF ANG OKANG/COS <rick.mutchler@us.af.mil>; EGERSTROM, KENNETH S Col USAF ANG ANGRC/SG <kenneth.egerstrom.1@us.af.mil>; BRADLEY, STEVE L Col USAF ANG NGB/SGX <steve.bradley@us.af.mil>; GEROCK, MICHAEL T Maj Gen USAF HAF AF/ANGRC <michael.gerock@us.af.mil>
**Subject:** RE: Airmen talking points for Vax

Tray,

We want to help in any way we can to get you the info needed to increase confidence in the vaccine so people get the shot.  Including Col Egerstrom and Col Bradley for awareness.

R,

Dawne

DAWNE L. DESKINS, Maj Gen, USAF

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**From:** SIEGFRIED, RAYMOND H III Brig Gen USAF ANG OKANG/AAG <raymond.siegfried@us.af.mil>
**Sent:** Friday, September 24, 2021 11:34 AM
**To:** DESKINS, DAWNE L Maj Gen USAF HAF AF/NGB/CF <dawne.deskins@us.af.mil>
**Cc:** MUTCHLER, RICK L Brig Gen USAF ANG OKANG/COS <rick.mutchler@us.af.mil>
**Subject:** Airmen talking points for Vax

Maj Gen Deskins-

Thank you for meeting with us earlier this week. We are working on our COVID and recruiting and retention numbers w A1.

Our 138th WingCC Col Mouse Meason has been reaching out to SG Col Egerstom and CZAR Col Bradley and hasn’t heard back at this time.

Biggest things we are asking for are some answers to Airmen on safety of the vaccine, adverse action steps should members refuse, and generally anything to help get people over the line to get on board with taking the vaccine .

There is a lot of misinformation out there far variances around the mean of what states are doing right now in terms of adverse action. We’re trying to get a read on effective messaging to Airman as well as go forward steps.

Thank you for you assistance.

Tray

Sent with BlackBerry Work
([www.blackberry.com](http://www.blackberry.com/))