



DEPARTMENT OF THE ARMY
HEADQUARTERS, ARMY FIELD SUPPORT BRIGADE EUCOM
UNIT 29704
APO AE 09227-9704

ASEU-APO

17 December 2025

MEMORANDUM FOR RECORD

SUBJECT: PMK Recommendation (Non-Endorsement)

1. Purpose: I am writing this memorandum to provide a personal recommendation regarding the Preventive Medicine Kit (PMK) and its applicability to Soldiers, trainees, and warfighters operating in austere, high-risk, or hygiene-limited environments. This correspondence is offered solely for the purpose of informing of capability assessment and does not constitute endorsement of any commercial product or vendor, per DoD Directive 5500.07 (Standards of Conduct).

2. Operational Context. In my capacity as a Senior Accountable Property Officer and former Logistics Sergeant with 21 months of combat experience in Iraq (OIF II & IX), I have managed equipment and personnel readiness in temperatures exceeding 125 degrees. Experience shows that Disease and Non-Battle Injuries (DNBI), specifically heat exhaustion, UV overexposure, vector-borne illnesses, and fungal infections remain the primary threats to combat power. These injuries frequently outpace kinetic casualties in volume and directly degrade unit lethality.

3. Capability Assessment. Current operational profiles for light infantry, Special Operations Forces (SOF), and Initial Entry Training (IET) require a compact, standardized "Preventive Medicine Kit" (PMK) capability. A kit integrating broad-spectrum sunscreen, high-efficacy insect repellent, antifungal treatments, and waterless hygiene solutions is essential for:

- A. Force Health Maintenance: Reducing lost duty time during high-tempo field training.
- B. Logistical Self-Sustainment: Decreasing the medical footprint required for minor environmental ailments.
- C. Training Throughput: Minimizing trainee attrition caused by preventable environmental injuries.

4. Requirement Alignment. The capability represented by a PMK directly supports Army Medicine's focus on prolonged field care and force preservation. Providing Soldiers with the tools for self-directed preventive care is a low-cost, high-impact method of maintaining operational endurance in resource-constrained regions.

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5. Ethics Disclaimer. This observation is based on 26 years of logistics and operational experience. It is intended to highlight a capability gap and does not advocate for the procurement of a specific brand. Any future acquisition should follow standard Army Contracting Command procedures to ensure fair competition and technical compliance.

6. I appreciate the opportunity to provide this recommendation with the interest of enhancing our Soldier well-being and supporting informed decision-making. Please feel free to contact me for clarification regarding the operational conditions.

7. The point of contact for this memorandum is the undersigned at Phone: (49) 15-122361404 or at javier.a.santolalla.mil@army.mil.

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