

Ms. Phyllis Hardin



6/14/15



RE: Master Sergeant William Cornett & Military Medical Negligence

Honorable Secretary of Defense

Dear Mr. Carter,

Please allow me to formally introduce myself. I am Phyllis Hardin the mother of the late Master Sergeant William Cornett. My reason for writing to you is to help ensure that our active duty military troops receive medical care by board certified medical professionals practicing within the scope of their practice during noncombat. It is my understanding that you are seeking to increase enrollment in the military. With all due respect, it does not matter how many people you recruit for the military if the military does not truly address the lack of accountability for unqualified and unlicensed medical personnel practicing outside the scope of their practice during noncombat.

My only son Master Sergeant William Cornett was stationed at the Misawa Air Base in Japan. On 9/19/2013, my son Master Sergeant William Cornett had a tonsillectomy. Three days later, he went to the base Urgent Care Center with complaints of spitting up bright red blood, a fever of 101.5 twice, and night sweats. My son was very athletic having run the Tokyo marathon 3 times and rode his bicycle 55 miles at one time 2 weeks before his death. The person that saw him in the Urgent Care Clinic (UCC) looked at his throat, called someone by telephone and then sent him home. Although, my son's heart rate and blood pressure were significantly elevated, they were not rechecked and he did not receive any blood work prior to being sent home. When my son returned to the UCC later that evening, the medical personnel at the base hospital created a real medical emergency that they were not prepared to handle! I ran the providers names through the NPI registry and find it unconscionable that the person that saw my son initially was a **student practicing independently**. The person that finally performed an emergency airway was a **general practice dentist**. My son was never connected to a cardiac monitor although he was taken to surgery when he was alert and oriented. My son was also transferred before he was medically stable. There were 3 investigations into my son's death and the Joint Commission ruled it a sentinel event. My son had already spent 13 years in the service and was intending to make a career of it with an additional 17 years. However, in less than 3 hours the medical personnel at the Misawa air base turned my son into a total invalid. He died after 18 days on life support in the same exact manner as Staff Sgt Witt in 2003. The Misawa Air Base cannot or will not produce licensures for the people that legally murdered my son. In fact, the Misawa Air Base falsified my son's medical records by claiming a doctor was on site when in fact, all of the original medical records I received do not reflect a doctor being attendance for my son.

The base had to shut down the 35th maintenance shop over the death of my son. Shutting down the maintenance shop truly posed a threat to the National Security in the event an F16 fighter jet engine was required. It's amazing that the 35th maintenance personnel can clearly articulate how the pilot's life is dependent upon them being proficient in their ability to build the engines. This is more than I can say for the people that are supposed to be medical professionals.

I was personally told by someone named Dr. [REDACTED] while in Japan that my son's vital signs were normal "according to a textbook." He also told me the reason that they did not immediately establish an emergency airway is that **"we did not want to disfigure your son!"** He also reiterated to me how much better off my family would be when my son died because of the casualty provisions. My son was not a casualty! Although he served in Operation Iraqi Freedom (OIF), Operation Enduring Freedom (OEF), and Operation New Dawn (OND), his death came at the hands of those that were supposed to be qualified to provide medical care. The arrogance and condescending nature of the Colonel's at this Air Base will only guarantee more deaths and medical disabilities of our active duty personnel that are stationed there!

Tragically, the deaths and medical disabilities of our active duty service members during non-combat at the hands of unqualified and improperly trained medical staff have become an accepted phenomenon. Imagine my disbelief to find out recently that the medical student and the General Practice Dentist is still practicing medicine at the Misawa Air Base Hospital! The Colonel's at the Misawa Air Base can only speak highly of the medical care that was provided to my son. They also keep informing me that they are highly qualified and competent to provide medical care to our active duty troops. Yet, they cannot or will not produce their licensures. To that end, I have turned each of the people that failed to care for my son into their State Department of Health and Human Services.

Recently, the military held a conference to address this issue. I supplied information regarding my son's case but was not permitted to attend. According to Colonel [REDACTED] Texas Research Investigative team, the military is aiming for a 90% reduction in events like my son's through the use of Aviation Standards. While that is certainly an admirable goal, the military plans to take 5-10 years to change the culture. According to the article *In Military Care, a Pattern of Errors but No Scrutiny*, there were 239 **NEVER** (something that should never happen in the medical field) events in military medicine during noncombat from 2011-2013 (LaFraniere & Lehran, 2014). The author reports this is a conservative figure as the "harm rate is unknown" according to the military itself. This averages out to 80 medical disabilities or deaths of our active duty service members during noncombat per year. So if the military is intending to take 5-10 years to change the culture, one can expect another 400-800 troops will become medically disabled or die at the hands of unqualified medical providers during noncombat. I have trouble comprehending how this ever became an issue in the first place! This article is only one of numerous articles in which sheds light on military medical negligence during noncombat. I have posted a link to the article below for your review.

<http://www.nytimes.com/2014/06/29/us/in-military-care-a-pattern-of-errors-but-not-scrutiny.html? r=1>

While it is an expectation when one signs up for active duty military, they have a real potential to lose their life or become medically disabled in active duty combat. However, I do not expect anyone that signs up to defend my freedom to give their life or become medically disabled (e.g. Master Sergeant William Cornett, Staff Sgt. Witt, Tech Sgt. Cindy Wilson, Sgt. Carmello Rodriquez, and Airman Colton Reed, to name a few) at the hands of unlicensed and unqualified medical people. To that end, I really do know how to fix this issue and to make military medicine safe for active duty troops. I would be willing to share my expertise with you in regards to this matter. The abuse of casualty provisions has to stop! For me, this is about stopping the deaths and medical disabilities of our troops when seeking medical treatment during noncombat. While the Feres Doctrine effectively prevents families in my situation from suing for wrongful death and medical disabilities of our troops, it also guarantees that these types of events will continue at ever increasing rates due to a real lack of accountability.

I have recently formed a non-profit titled Stop Military Medical Negligence (SMMN). My platform is to educate the public regarding the blatantly substandard medical care provided to our active duty service members during non-combat. I have listed my contact information above and pray that you will express a real desire to correct this situation with military medical negligence. I have special POA over my son's military medical records. I will enclose a copy of the POA for your review. Also, I have posted the information regarding the licensures of my son's medical providers below for your review. Although they claim to be doctors, they are **NOT** according to the NPI registry. I sincerely look forward to partnering up with you to **STOP MILITARY MEDICAL NEGLIGENCE!**

Sincerely,

Phyllis Hardin

Phyllis Hardin Masters of Science Nursing (MSN), Board Certified (B.C.)

International Published Author: Implications of Resource Constraint on Patient Satisfaction

President: Stop Military Medical Negligence (SMMN)

Proud mother: Master Sergeant William Cornett (32 years) Served 13 years Air Force and served in 3 wars



Awarded the Meritorious Medal of Honor October, 2013: Died seeking medical care during non-combat!

STUDENT (PRACTICING INDEPENDENTLY): This is the person that saw my son and sent him home initially without even a baseline workup.

The information for the Provider you selected is displayed. The NPI Registry data was last updated on 06/13/2015.

NOTE: Some health care providers reported their SSNs or IRS ITINs in sections of the NPI application that contain information that is required to be disclosed under FOIA. For example, a provider may have reported an SSN or an IRS ITIN as an "Other Provider Identification Number" or as a "License Number". To protect the privacy of these individuals, we have made every attempt to locate and remove those SSNs and IRS ITINs from being displayed in the information provided below.

Provider Information:

Name: [REDACTED]
Gender: MALE
Sole Proprietor: NO

NPI Information:

NPI: [REDACTED]
Entity Type: 1-INDIVIDUAL
Enumeration Date: 06/14/2010
Last Update Date: 06/14/2010
Replacement NPI:
Deactivation Date:
Reactivation Date:

Provider Business Mailing Address:

Address: [REDACTED]
EGLIN AFB, FL 32542-1302
Phone Number: [REDACTED]
Fax Number:

Provider Business Practice Location Address:

Address: [REDACTED]
EGLIN AFB, FL 32542-1302
Phone Number: [REDACTED]
Fax Number:

Provider Taxonomy:

| Primary Taxonomy | Selected Taxonomy | State | License Number |
|------------------|---|-------|----------------|
| YES | [REDACTED] - STUDENT IN AN ORGANIZED HEALTH CARE EDUCATION/TRAINING PROGRAM | | |

Other Provider Identifier:

| Issuer | Number | State | Issuer |
|--------|--------|-------|--------|
| | | | |

GENERAL PRACTICE DENTIST: This is the person that finally performed an emergency airway after allowing someone to practice placing an airway.

The information for the Provider you selected is displayed. The NPI Registry data was last updated on 06/13/2015.

NOTE: Some health care providers reported their SSNs or IRS ITINs in sections of the NPI application that contain information that is required to be disclosed under FOIA. For example, a provider may have reported an SSN or an IRS ITIN as an "Other Provider Identification Number" or as a "License Number". To protect the privacy of these individuals, we have made every attempt to locate and remove those SSNs and IRS ITINs from being displayed in the information provided below.

Provider Information:

Name: [REDACTED]

Gender: MALE

Sole Proprietor: NOT ANSWERED

NPI Information:

NPI: [REDACTED]

Entity Type: 1-INDIVIDUAL

Enumeration Date: 10/26/2005

Last Update Date: 07/08/2007

Replacement NPI:

Deactivation Date:

Reactivation Date:

Provider Business Mailing Address:

Address: [REDACTED]
APO, AP 96326-0069 JAPAN

Phone Number:

Fax Number:

Provider Business Practice Location Address:

Address: [REDACTED]
APO, AP 96326-0069 JAPAN
Phone Number: [REDACTED]
Fax Number:

Provider Taxonomy:

| Primary Taxonomy | Selected Taxonomy | State | License Number |
|------------------|---|-------|----------------|
| YES | [REDACTED] - DENTIST - GENERAL PRACTICE | WA | [REDACTED] |

Other Provider Identifier:

| Issuer | Number | State | Issuer |
|--------|--------|-------|--------|
|--------|--------|-------|--------|

[Back to Results](#)

RADIOLOGIST: This is the person that informed me that my son's vital signs were "normal according to the textbook. The reason we didn't immediately establish an emergency airway is that we didn't want to disfigure your son." Also, "you will be better off when your son dies and your family receives the casualty provisions!"

The information for the Provider you selected is displayed. The NPI Registry data was last updated on 06/13/2015.

NOTE: Some health care providers reported their SSNs or IRS ITINs in sections of the NPI application that contain information that is required to be disclosed under FOIA. For example, a provider may have reported an SSN or an IRS ITIN as an "Other Provider Identification Number" or as a "License Number". To protect the privacy of these individuals, we have made every attempt to locate and remove those SSNs and IRS ITINs from being displayed in the information provided below.

Provider Information:

Name: [REDACTED]
Gender: MALE
Sole Proprietor: NO

NPI Information:

NPI: [REDACTED]

SPECIAL POWER OF ATTORNEY

THIS IS A MILITARY POWER OF ATTORNEY PREPARED AND EXECUTED PURSUANT TO TITLE 10, UNITED STATES CODE, SECTION 1044B, BY A PERSON AUTHORIZED TO RECEIVE LEGAL ASSISTANCE FROM THE MILITARY SERVICES. FEDERAL LAW EXEMPTS A MILITARY POWER OF ATTORNEY FROM ANY REQUIREMENT OF FORM, SUBSTANCE, FORMALITY OR RECORDING THAT IS PROVIDED FOR POWERS OF ATTORNEY BY THE LAW OF ANY STATE, COMMONWEALTH, TERRITORY, DISTRICT, OR POSSESSION OF THE UNITED STATES. FEDERAL LAW SPECIFIES THAT A MILITARY POWER OF ATTORNEY SHALL BE GIVEN THE SAME LEGAL EFFECT AS A POWER OF ATTORNEY PREPARED AND EXECUTED IN ACCORDANCE WITH THE LAWS OF THE JURISDICTION WHERE IT IS PRESENTED.

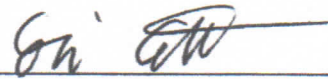
KNOW ALL PERSONS, that I, ERI CORNETT, SSAN: [REDACTED], a legal resident of and presently residing at [REDACTED] desiring to execute a SPECIAL POWER OF ATTORNEY, do hereby appoint Phyllis J. Hardin whose address [REDACTED] as my Attorney-in-Fact to act as follows, GRANTING unto said Attorney full power to:

I, Eri Cornett (widow of MSgt William Cornett) give Phyllis Hardin (mother of MSgt William Cornett) Special Power of Attorney to sign any and all documents necessary to obtain copies of all his (MSgt William Cornett) medical records, to include those from the base hospital, base medical clinic, and the base dental clinic.

TERMINATION: This Power of Attorney shall remain in effect until revoked by me.

Notwithstanding my insertion of a specific expiration date herein, if on the above specified expiration date I shall be, or have been, carried in a military status of "missing," "missing-in-action," or "prisoner of war," then this power of attorney shall automatically remain valid and in full effect until sixty (60) days after I have returned to United States Military control following termination of such status.

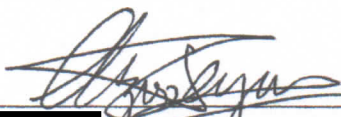
IN WITNESS WHEREOF, I have here unto set my hand on this 14th day of April 2014.



ERI CORNETT

With the Armed Forces at Yokota AB

On this 14th day of April 2014, I, an officer, authorized the general powers of a Notary Public under the provisions of Title 10, United States Code, Section 1044a, certify that the person whose name is signed to this instrument is within the class defined by Title 10, United States Code, Section 1044, did personally appear before me and, after the contents of this instrument had been read and explained, did sign this instrument and acknowledge doing so freely and voluntarily for the uses, purposes, and considerations set forth above.



CAPT, YOKOTA AB, USAF

