



November 10, 2009

**FOR IMMEDIATE RELEASE**

**Oral and Maxillofacial Surgeons among first responders to Fort Hood shootings**

[Rosemont, IL] - Before news of the November 12, Fort Hood shootings reached the public, oral and maxillofacial surgeons Major Mark E. Ranschaert, DMD and Major Joseph Dylan Bowles, DDS were in Fort Hood's Carl R. Darnall Army Medical Center emergency room working to save the lives of the shooter's victims.

Arriving in the ER to help treat the influx of patients, Majors Ranschaert and Bowles found 30 injured soldiers awaiting treatment and the operating rooms already full. They immediately turned their attention to a patient with a penetrating neck wound. Assisted by two staff members, the surgeons intubated the patient, inserted an IV and a central line, and gave him two units of blood.

"The patient was bleeding constantly," says Bowles. "We were concerned he wasn't going to make it. Without care, he definitely would have expired."

Ranchaert and Bowles were able to stabilize the patient and accompanied him to the helipad where he was transferred to Scott and White University Medical Hospital for further treatment. He is now in stable condition.

"It was pretty chaotic," Dr. Bowles recalls. "It was like being in the middle of a combat zone," he continues. "You didn't know if somebody would walk into the ER and start shooting at you. We reverted to our training and did what we do best: taking care of patients. I'm thankful the decisions we made were the right decisions and we saved a soldier's life."

Thirteen people were killed and more than 30 people were injured in the attack at the Fort Hood Soldier Readiness Center. Sixteen of the victims remain hospitalized.

Oral and maxillofacial surgeons are trained to manage all aspects of treatment of the hard and soft tissues of the face, head and neck (maxillofacial region). They complete an intensive four-year degree program in dentistry followed by a minimum of four years in a hospital surgical residency program in oral and maxillofacial surgery, where they train alongside residents in general surgery, trauma surgery, anesthesia, plastic surgery and otolaryngology.

OMSs are indispensable in the hospital ER when it comes to repairing facial trauma caused by car crashes and street violence. The American College of Surgeons requires all level one trauma centers, those emergency centers that treat the most serious and complex facial trauma patients, to have oral and maxillofacial surgeons on call at all times.

**Saving Faces, Changing Lives®** — The American Association of Oral and Maxillofacial Surgeons (AAOMS), the professional organization representing more than 9,000 oral and maxillofacial surgeons in the United States, supports its fellows' and members' ability to practice their specialty through education, research and advocacy. AAOMS fellows and members comply with rigorous continuing education requirements and submit to periodic office examinations, ensuring the public that all office procedures and personnel meet stringent national standards.

For more information visit the American Association of Oral and Maxillofacial Surgeons Web site at [www.aaoms.org](http://www.aaoms.org)

**Contact:**

Janice Teplitz  
847-678-6200, ext. 4336  
[jteplitz@aaoms.org](mailto:jteplitz@aaoms.org)