

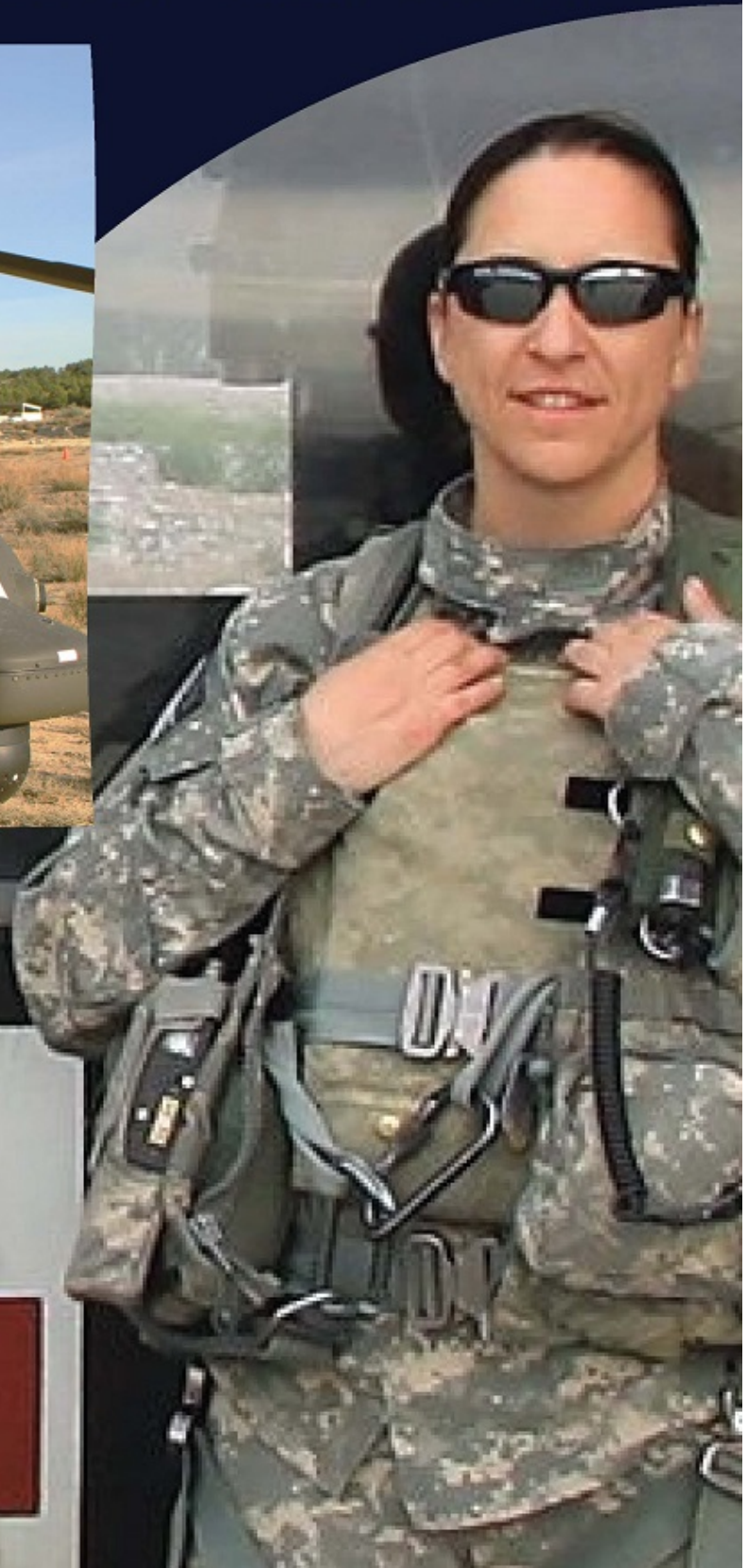
Sgt. Julia Bringloe

Sgt. Julia Bringloe

Air Ambulance Flight Medic For Operation Hammerdown

By James G. Fausone, Esq.

SGT. JULIA BRINGLOE: AIR AMBULANCE FLIGHT MEDIC MEDEVAC FOR OPERATION HAMMERDOWN



BY JAMES G. FAUSONE, ESQ.

Warfare has always demanded courage, resilience, and unwavering dedication from those who step onto the battlefield. War is about breaking things – equipment, property, and people. With warfare comes injury and death; it requires people to rescue the

injured and retrieve the dead. In the midst of that chaos and peril are stories of valor and selflessness, reminding the world of the extraordinary individuals who rise above the fray to embody the best of humanity. Among these individuals, Sgt. Julia Bringloe's name shines brightly for her actions during Operation Hammerdown in the Pech River Valley of Afghanistan. As part of a medevac team, she earned the prestigious Distinguished Flying Cross and etched her name in the annals of history as a true heroine of the skies.

The origins of a hero often lie in the rich tapestry of their upbringing, where the values instilled by family, culture, and community shape their character and guide their actions. In the case of Sgt. Julia Bringloe, the remarkable heroine of Operation Hammerdown in the Pech River Valley of Afghanistan, and her Pacific Northwest upbringing played an integral role in shaping the woman she became and the extraordinary courage she displayed on the battlefield.

Forging Strength and Confidence



Sgt. Julia Bringloe

Julia Bringloe was born in Seattle and grew up in Bainbridge, Washington. Her daily family consisted of her Mother and older brother. Her father was a marine engineer working long hours and not around much. Julia was an active kid with judo classes and competitive swimming. Her life was about hard reality including facing the shotgun suicide of her mother's best friend's husband. She found herself directed to help clean up the mess. The family dynamic resulted in a period in high school when she lived on the street or coach-surfed with friends. That led to being sent to a boarding school in Hawaii. The boarding school provided the missing structure and her confidence grew into a strong young woman who became senior class president.

Hawaii, a land renowned not only for its breathtaking landscapes but also for its

unique culture and spirit, provided the nurturing environment that laid the foundation for Sgt. Bringloe's exceptional character. The concept of "Aloha," which extends far beyond its literal translation of "hello" or "goodbye," embodies a deeper essence of compassion, harmony, and unity. The principles of the Aloha spirit must have seeped into Bringloe who developed a sense of empathy and a commitment to serving others.

After returning to Washington State after high school, Bringloe tried a stint at the University of Idaho but college was not for her at that point in life. She then began working as a construction laborer to pay the bills. She worked all over the country and met her first husband and had a son. After they split she continued working as a labor foreman for a large residential construction company. She met her second husband, also a carpenter. Bringloe's work-related shoulder surgery kept her out of work for months and introduced her to the medical field. During that period, she decided her life needed a new path.

She became fascinated by the work of private helicopters operating medical evacuations. To switch to the medical flight field would take a lot of training. An Army recruiter honestly told her that she would have to be a ground medic before being selected to train as a medevac medic. She was not fazed by the prospect of hard work and signed up for basic training as a 34-year-old private.

She was at least a decade older than the other privates in basic training. It was a physically and mentally challenging career course correction. Julia had a goal and was prepared to do what it took to get there. She did tours in Germany and Iraq building experience and a reputation as a solid soldier and capable medic. That led to a billet with the 10th Combat Aviation Brigade. Bringloe achieved her goal of being a flight medic. However, more combat tours came with that billet and Afghanistan was in her future as a flight medic.

The role of a medevac medic in the United States Army during the 2000s was one that demanded a unique blend of medical expertise, combat hardness, and unwavering compassion. These skilled professionals were tasked with the critical mission of providing immediate medical care to wounded soldiers in the midst of some of the most dangerous and challenging environments, epitomizing the highest standards of care and dedication. The training they underwent was rigorous, multifaceted, and designed to prepare them for the immense responsibilities they would face in the field.

The training of medevac medics commenced with a comprehensive foundation in medical knowledge and skills. These medics were required to possess a level of proficiency that extended beyond basic first aid. Their training encompassed areas such as trauma assessment, wound management, airway management, intravenous (IV) therapy, and

administering medication under pressure. The curriculum was designed to ensure that medics were capable of providing life-saving interventions on the battlefield, effectively bridging the gap between injury and full-on medical care.

Medevac medics were not just medical professionals; they were being inserted into combat zones, often entering hostile areas to retrieve wounded soldiers. As a result, they had to undergo tactical training to understand the nuances of battlefield dynamics. This included learning about small-arms fire, threat assessment, and self-defense techniques. Understanding the principles of movement, cover, and concealment was crucial, enabling medics to reach injured soldiers while minimizing their own vulnerability.

One of the defining features of Army medivac medics' training was their immersion in helicopter operations. These medics had to become proficient in fast roping, rappelling, and helicopter insertions and extractions. The training simulated the unique challenges of working in a confined and often unstable aircraft while ensuring patient safety during takeoffs, landings, and in-flight care.

Training for medevac medics also encompassed psychological and emotional resilience. The realities of combat and the wounds they encountered could be emotionally taxing. Consequently, trainees underwent stress management and coping strategies to ensure their own well-being while continuing to perform their duties effectively under extreme duress.

The heart of a medevac medic's training lay in the simulation of realistic combat scenarios. These exercises provided trainees with the opportunity to apply their medical and tactical knowledge in high-pressure environments. The scenarios ranged from extracting wounded soldiers under enemy fire to stabilizing patients in challenging conditions. The goal was to expose medics to the full spectrum of challenges they might face and prepare them to adapt and excel.

The training of medevac medics in the US Army during the 2000s was a comprehensive endeavor that prepared these dedicated professionals to be at the forefront of life-saving efforts on the battlefield. Their dual role as skilled medical providers and capable combatants required a multifaceted skill set that encompassed medical expertise, tactical proficiency, and emotional resilience. Julia Bringloe took all that training, hard-knock life lessons, and ground medic experiences into her role as the flight medic in Pech River Valley as part of Dustoff 7-3 operations.

Operation Hammerdown and the Pech River Valley

The Pech River Valley in Afghanistan, characterized by its rugged terrain and challenging climate, became a focal point during the [Global War on Terror](#). Located in

northeast Afghanistan, the Pech River snakes along the Pakistan and Afghanistan borders flowing out of the mountains down past Jalalabad and winding back into Pakistan. The regional terrain is very rugged with high peaks and is part of the Nuristan National Forest Reserve. Less than 30 miles to the northeast of Jalalabad is Asadabad, a small village at the mouth of the Watapur Valley. The valley dissects the mountain range in the reserve. This area was constantly used as a training base for insurgents flowing in from Pakistan.

Operation Hammerdown was a military campaign launched to disrupt the activities of insurgents operating in the region, aiming to restore stability and provide security to the local population. This seven-day U.S.-led assault offensive in June 2011 was designed to eliminate foreign fighters and the training camps in the Watapur Valley of Kunar Province. The operation's primary objective was to destroy suspected training camps interdict the flow of insurgents through the valley and forbid the Taliban from increasing their manpower in the western Pech.

This annual operation was an effort of a joint Afghan National Army (ANA) and US Army coalition. Advantages for the ANA and US Army were helicopters and night vision gear. The advantages for the Taliban were the high elevations, rugged terrain, and weather patterns that shifted from cloudy to foggy on a regular basis. The higher ground required US and ANA soldiers to scale down the mountain. A difficult hump under any circumstance. Helicopters were the only viable means of transportation but the altitude and weather conditions were formidable. It also meant that resupplying and evacuating the wounded or killed was challenging.

Dustoff Operations

Casualty evacuation, also known as CASEVAC or by US Army call sign "Dustoff", is for emergency patient evacuation of injured from a combat zone. Casevac can be done by both ground and air. However, "Dustoff" is the callsign specific to U.S. Army Air Ambulance units. CASEVACs by air today are almost exclusively done by helicopter. Because of the medevac training and helicopter transport, Dustoffs have been reported as being critical to survival rates. The U.S. military reports a 90.6% casualty survival rate (numbers from operations in Afghanistan and Iraq, 2006). Julia Bringlee was part of Dustoff 7-3, a crew assigned to assist in Operation Hammerdown.



Like all other soldiers in Operation Hammerdown, Sgt. Julia Bringloe would say she was just doing her job. However, that job required her to go above and beyond the call of duty. As the sole flight medic, she was tasked with the critical responsibility of extracting wounded soldiers from the battlefield and treating them while being transported to medical facilities where they could receive urgent care. The role demanded not only technical expertise but also nerves of steel, as medevac operations often took place under heavy fire and in hazardous conditions. Sometimes the medevac Blackhawk helicopter could land to extract the wounded or dead. At other times, the flight medic was hoisted down to the ground from the chopper where the medic delivered aid and arranged for hoisting the wounded or dead back up to the chopper.

The Dustoff missions generally involved going into a hot landing zone (LZ) because that is where the wounded were. Medevac flights were also unarmed. The helios had no weapons to protect themselves and were high-value targets. The Dustoff chopper had red crosses painted on them for the purpose of not being part of the engagement, different from the attack helicopters that were used in battle. However, those clear markings made for perfect targets for the insurgents who still shot at the Dustoff choppers and the medics who were winched up and down from them. The Geneva Conventions are not always followed in unconventional warfare.

In late June 2011, Bringloe was part of a Dustoff crew with the call sign Dustoff 7-3. Every medevac flight is a team effort consisting of a pilot, co-pilot, flight medic, and crew chief. While the pilot and copilot are busy keeping the craft in the air, the crew chief and medic are busy rigging the hoist for a drop and recovery of the wounded if the bird cannot land. The pilots for Dustoff 7-3 were Chief Warrant

Officer Erik Sabiston and CWO Kenny Broadhead. Sabiston wrote "Dustoff 7-3 Saving Lives Under Fire in Afghanistan" to detail the team's exploits. David Capps was the final member of the crew and was the crew chief or "crew dog" responsible for working with the medic, including raising and lowering the medic from the helicopter when retrieving casualties in an area in which a ground landing was not possible or advisable. Sabiston recounts about a dozen distinct missions on June 26-27, 2011 in which Dustoff 7-3 participated .

Dustoff 7-3 had been stationed in Jalalabad (J'bad) prior to Operation Hammerdown and then shifted to Forward Operating Base (FOB) Joyce. The FOB was up in the valley area and closer to the action. However, the injured once picked up generally had to be flown back to J'bad for emergency surgery and treatment. Every time the helio needed fuel during the day, it went to a fueling FOB. Pilots and medics had to be constantly watchful of the logistics.

The first mission required two medevac units Dustoff 7-2 and 7-3. There were multiple wounded who were extracted with ground pickups. Experience had taught that multiple Dustoffs led to better success and addressed the weight, lift, and fuel issues that existed at such altitude. But as the day progressed the units would not be flying together but coordinating trips to J'bad or the FOB or into the field. It was the command's job back in J'bad to schedule the trips and coordinate in the best interests of the field troops and the flight crews.

If one mission went smoothly, it seemed the crew could count on the next one being more chaotic. The second mission was into a hot LZ and would require Capp to conduct his first battle hoist of the medic. While the pilots and medic were more experienced than the crew dog, his role in lowering Julia Bringloe and raising her and the patient was critical to success. On this mission, he got his first and second combat hoists. This was a stressful job where the crew chief literally was responsible for two lives each lift up.

One risk the medic always faced on a hoist was spinning at the end of the cable which could cause disorientation, vertigo, or worse. In this second mission, the spinning created significant static electricity, and when Bringloe, hanging 60 feet down from the copter, swung into a tall pine branch the static electricity discharged giving her a painful shock. Bringloe had to shake it off when she got to the ground, and dizzy from the spinning on the slow descent, she had a patient with a leg wound and one with a hand-wound. The most serious patient was lifted first in a stretcher which required a skilled hoist and the holding of a tag line from the ground to minimize spinning. As Bringloe was muscling the tagline, it snapped causing the stretcher to spin more and the need for a quicker hoist. A decision was made to leave Bringloe at the LZ and fly the patient to J'bad. Dustoff 7-2 would come and pick up the hand-

wound patient and Bringloe.

This mission simply proved you never knew what to expect. When supporting a combat mission like Operation Hammerdown, the medevac flights often had to return to the same area, and sometimes the same hot LZ, to pick up the dead and wounded. The third mission was of that nature. The Taliban were ready and shot an RPG at Dustoff 7-3 and other small arms bullets making the LZ too hot to pick up the KIA, which is referred to as a Hero Mission.

Since the medevac flights could not protect themselves, they often were protected and supported by armed Kiowas, Blackhawks, F15s, and F16s. This cleared the LZ allowing the pickup of three critical patients. As the daylight was diminishing, the pilots would start flying with night vision equipment. The pickup of patients in dusk and evenings was even more harrowing for the crew dog and medic.

The crew did not count missions. Their day did not end when a specific number was reached. Fuel, flight time, and equipment controlled their time on duty. On about the fifth mission, Bringloe was again hoisted up this time with a heat stroke patient to the chopper and began spinning wildly. These hire wire acts, particularly the spinning and swinging variety, tended to scare the heck out of the wounded soldiers. Bringloe would have to calm and reassure the patient while keeping her cool. Finding herself 60 feet off the ground and 150 feet from the chopper the cable began swinging more with the weight of her and the patient. They were essentially a plumb bob at the end of a big, long pendulum. The crew dog would attempt to dampen the swing by manhandling the cable but wind and chopper movement always won that contest.

As the swinging intensified it became evident Bringloe was going to crash into the tall pines around the LZ. There was nothing she could do, they were going to smack into the trees. Bringloe twisted to put her body between the tree branches, broken limbs, and trunk. As she smashed into the trunk her leg took the hit directly on the sturdy tree trunk. Her crew wondered if she had broken her leg. She gave the "I'm ok" as her leg swelled and turned purple. When they landed at the field hospital, the patient was treated and Bringloe's leg was inspected to confirm it was not broken. She limped badly back to Dustoff 7-3 and told Sabiston when he asked, "I am fine." When asked if she wanted to sit out Bringloe responded "Negative. I'm good. Let's get out of here."

The next mission was even more harrowing as the landing spot was on a mud hut. These mud-brick structures, known as qalat, which translates to fortresses, were in terrible shape after decades of war. There were three victims and it was not a good place to ground land. The hut roof had a tree growing on it so only a tire was touching the roof and the soldiers rushed their wounded to the open helio door. The

worst patient had been shot in the face and jaw with an AK47 round. He was in bad shape and might not make the flight to J'bad. Bringloe, working with a flashlight inserted IVs and nasal tubes to keep the "skinny kid" alive. He made it to the field hospital and the surgeon told Bringloe later he was going to make it and was in Germany. Without Dustoff's quick action, the surgeon was sure the skinny kid would have bleed out.

As night dragged on the missions continued and the crew was running out of energy. It had been a meat grinder on the first days of Operation Hammerdown. The weather was not cooperating. In fact, a wicked downdraft at 10,000 ft forced an Army National Guard Chinook into a downward spiral crashing the heavy lift copter into the mountainside. The subsequent fire caused chaos and more Dustoff missions. However, Bringloe and her team had run out of hours and needed food and sleep. Others would respond in the spirit of Dustoff never leaving one stranded.

After a few hours of rest, the next mission into a hot LZ came to Dustoff 7-3. At least there were no trees to worry about as the LZ was above the tree line and surrounded by huge boulders. There were multiple patients needing evacuation. Bringloe and the most urgent patient were raised by the swinging hoist wire, known as a jungle penetrator or JP. With the swinging JP, it was clear she was going to smash into an SUV-sized boulder. Bringloe positioned her legs as shock absorbers to push off the boulder and protect the patient. Having been shocked, smashed into a tree, shot at, and bounced off a boulder, Bringloe's legs and body were being put to the ultimate test. Reminding herself that her patients were worse off and needed the lift gave her strength to continue.

Mechanical problems with the Blackhawk engine or with the hoist system increased as the missions mounted. Those led to inspections and confirmation the mechanics were good to go. During those short interludes, the crew was able to get chow and short rests.

The next mission was always one call away. The next few missions were only to get worse. The call was to retrieve two KIAs, drop supplies of water, and pick up the wounded. Something as simple as delivering water, in body bags, could turn deadly if the empty bag swung into the tail rotor. The more time on station for the Blackhawk simply increased the insurgent's opportunity to attack. By the time Bringloe was to lift a patient, the Taliban were shooting at the suspended medic. The pilot, Sabiston, decided the proper course of protecting the medic and patient dangling 50 feet below was to fly away from the firing. There was no communication between Sabiston and Bringloe, she just had to feel the movement and understand what the pilots were doing. The patient and medic were then hoisted into the chopper.

These high-stakes missions demonstrated Sgt. Julia Bringloe's exceptional service, bravery, and determination. These were not milk runs, make a pickup and go back to the air base and then you are done for the day. These were on-call and as-needed Dustoff missions. In the heat of the battle, when the wounded were in most need the mission was called. It could be day or night. It would be multiple missions a day until the crew was exhausted, flight time was used up and it was no longer safe to fly.

The next mission looked all too familiar. The weather had turned cloudy and foggy. Dustoff 7-3 had to pick up the wounded, water, IV fluids, and MREs. Time on station lengthened as Bringloe was working on setting up to assist a 250 lb. patient. As they were suspended 70 ft from the chopper, the Taliban began shooting at the swinging targets. The Blackhawk was at 11,000 feet and the proper course of action was "another long, dangling ride" as Dustoff 7-3 flew away according to Sabiston. The stress was wearing out everyone, not just the dangling medic who they were shooting at.

This turned out to be the last mission for Dustoff 7-3 as part of Operation Hammerdown. When they got back to FOB Joyce and radioed into mission control, it was just a fact "My crew is done, sir. We need to stand down," Sabiston reported. The command captain responded they had been following the great work being performed by Dustoff 7-3 and had been waiting for it to call for a standdown. The captain ordered, "Stand down brother." It was time for well-earned rest and recovery. In the course of three days, they had rescued 14 soldiers, made three critical supply runs, recovered two KIA, and nearly died themselves.

Recognition and Legacy

Sgt. Julia Bringloe's heroism did not go unnoticed. Her actions over those fateful days resonated beyond the battlefield, capturing the hearts and minds of people around the country. Her unwavering dedication to the principles of service and sacrifice epitomized the values that soldiers hold dear, and her exceptional bravery earned her the Distinguished Flying Cross – a symbol of valor and distinction within the military community. She was the seventh woman to receive the Distinguished Flying Cross. The Cross recognizes achievement in aerial flight.

HER DISTINGUISHED FLYING CROSS CITATION READS:

The President of the United States of America, authorized by Act of Congress, July 2, 1926, takes pleasure in presenting the Distinguished Flying Cross to Sergeant Julia A. Bringloe, United States Army, for exceptionally valorous achievement while assigned to Charlie Company, 3d Battalion, 10th Aviation Regiment, Task Force PHOENIX, during Operation ENDURING FREEDOM XI.

Her heroic actions as an air ambulance flight medic while in support of Operation HAMMER DOWN in Afghanistan's Watapur Valley from 25 June to 27 June 2011 resulted in the evacuation and treatment of eleven wounded soldiers while under constant enemy fire and contributed to the overwhelming success of the Command's mission. Her bravery is in keeping with the finest traditions of military heroism and reflects distinct credit upon herself, Task Force PHOENIX, Task Force FALCON, Combined Joint Task Force-1, and the United States Army.

NARRATIVE TO ACCOMPANY AWARD: Sergeant Julia Bringloe, United States Army, distinguished herself by conspicuous gallantry and intrepidity in action in the face of the enemy of the United States as an Air Ambulance Flight Medic with Charlie Company, Task Force PHOENIX, FOB FENTY, from 25 June to 27 June 2011 in support of OPERATION ENDURING FREEDOM (OEF) XI.

During Operation HAMMER DOWN, Sergeant Bringloe and her crew of Dustoff 73 provided direct medical evacuation (MEDEVAC) support to Task Force BRONCO in Afghanistan's forbidding Watapur Valley. Throughout the multi-day operation, Sergeant Bringloe repeatedly faced a disciplined enemy determined to engage her and her crew in the most extreme, high-altitude mountain environment in order to conduct life-saving evacuations of eleven soldiers. No matter how minor or severe the injury, each casualty was absolutely debilitating to the freedom of maneuver of the Task Force BRONCO soldiers, making them a stationary target to a lethal enemy.

Sergeant Bringloe and her Dustoff crew were the only assets that could overcome these challenges to extract the wounded soldiers. She constantly exposed herself to enemy fire by guiding her medical aircraft into the most confined spaces conducting one-wheel landings on qalat rooftops, or riding the extremely vulnerable hoist to her patients below from hover altitudes as high as 150 feet. At one location where there were several wounded soldiers located inside a qalat, her sister ship Dustoff 72 received such heavy enemy fire in attempting to evacuate, that they were forced to return to FOB BENTY for an emergency landing due to a critical loss in hydraulic components. This did not stop Sergeant Bringloe or her crew from pressing on to retrieve the wounded soldiers from Qatar.

Using the cover of darkness and suppression fires from overhead Apache support and the troops on the ground, she was able to expertly guide her crew onto the roof top surrounded by trees to evacuate three wounded soldiers. With an extremely dark, no moon night, they received constant fire from the surrounding enemy shooting to the sound of their hovering aircraft. During this tremendously demanding maneuver, the Apache aircraft provided continuous suppression fires within 100 meters of their location. Once the wounded were on board, Sergeant Bringloe immediately began treatment of the soldiers while they rushed them to FOB WRIGHT. One of the soldiers had received a life threatening gunshot wound to his face. Without the crew's daring rescue or Sergeant Bringloe's medical treatment en route to the Forward Surgical Team, the soldier would not have survived much longer on the mountain.

Sergeant Bringloe later found herself returning to the same qalat to retrieve an Afghan soldier who had been killed in action. At this point, the ground element had been stuck in the same location for almost 48 hours due to the constant enemy fire and casualties they had received. Due to the extremely confined area, Sergeant Bringloe and her crew decided to hoist the Afghan Hero out. She again exposed herself to the enemy while riding the hoist, lowering to the embattled qalat and packaging the fallen soldier into a Skedco. Once ready, she remained out in the open manning the tag line ensuring the Afghan Hero made it up to the hovering aircraft while the ground forces provided security. With the fallen soldier on board, her crew immediately returned the jungle penetrator (JP) to her for her own extraction. As soon as she began securing herself to the JP, the encircled enemy opened fire on her with a fierce determination to take her out. Despite the chaos around her, she didn't hesitate in her job, securing herself and instructing her crew to continue with her own extraction, ultimately hoisting her away giving the ground forces the freedom to move and engage the surrounding enemy.

In her final mission of Operation HAMMER DOWN, Sergeant Bringloe and her crew faced inclement weather to extract a soldier suffering from a shrapnel wound that had become infected. In addition to the casualty, the unit on the ground was critically low on food, water, and medical supplies. With cloud cover coming in all around the mountain location at 10,000 feet, she and her crew were able to navigate into the area and begin another hoist operation. Once again, she fearlessly lowered herself to the ground despite the dangerous weather situation. While she readied the patient for extraction, her crew chief lowered the vital supplies to the waiting troops below. When she was ready and secure, Sergeant Bringloe looked up and saw the clouds slowly engulfing her aircraft above. She immediately signaled her crew chief to begin raising the hoist to get them away from the ground. While Sergeant Bringloe and her patient were still 10 feet below the aircraft on the hoist line, the Dustoff aircraft was finally swallowed by the cloud cover and the crew committed to instrument flight as the crew chief continued to cable Sergeant Bringloe and her patient up, ultimately getting them safely into the aircraft. The crew successfully conducted inadvertent IMC procedures despite the surrounding mountain terrain. They eventually broke out of the clouds and were able to recover to FOB WRIGHT, delivering the patient to much needed higher care.

Throughout Operation HAMMER DOWN, Sergeant Bringloe and her Dustoff crew conducted continuous turns into the Watahpor Valley, evacuating a total of 11 wounded American Soldiers. Despite an unwavering and lethal enemy, challenging night operations in confined areas, and a constant deteriorating weather situation, she provided desperately needed food, water, and medical re-supply and extracted two Afghan soldiers killed in action (KIA).

Her determination to perform in such exhausting conditions over three days was nothing short of remarkable. These contributions gave the ground force commanders freedom of maneuver which unquestionably

contributed to the overwhelming success of the command's mission. Sergeant Bringloe's heroic actions were a critical part in the success of Task Force BRONCO and Operation HAMMER DOWN. As a result of her abilities as an Air Ambulance Flight Medic and courageous disregard for her own safety, Sergeant Bringloe demonstrated her superior skills and bravery as a flight medic few others could replicate, all while under the most extreme of situations. Her selfless courage demonstrated by putting the lives of others above her own are beyond reproach. Sergeant Bringloe's actions are in keeping with the finest traditions of military heroism and reflect distinct credit upon herself, this Command, and the United States Army.

Conclusion

While the accolades and recognition were well-deserved, Sgt. Bringloe's legacy extends far beyond the awards she received. Her story serves as an inspiration to countless individuals, reminding us all of the boundless capacity for compassion and courage that resides within the human spirit. Her willingness to put her own life on the line to save others highlights the true essence of heroism – a willingness to go above and beyond, regardless of the personal cost.

As life continued on for Julia Bringloe, she married one of the patients she saved. Julia Stalker received promotions as her military career progressed and became a medivac instructor for the U.S. Army. The U.S. Army Women's Foundation recognized Bringloe by induction in 2015.

Sgt Julia Bringloe's story stands as a testament to the extraordinary courage displayed by individuals who rise to the occasion in times of great adversity. Her actions during Operation Hammerdown in the Pech River Valley of Afghanistan exemplify the qualities that define true heroism – selflessness, resilience, and an unyielding commitment to the greater good. As her name continues to echo through the annals of history, may we always remember and honor the remarkable legacy of Sgt. Julia Bringloe is a heroine in the skies who soared above the challenges of war to embody the finest ideals of humanity.

About the Author

***Jim Fausone** is a partner with **Legal Help For Veterans, PLLC**, with over twenty years of experience helping veterans apply for service-connected disability benefits and starting their claims, appealing VA decisions, and filing claims for an increased disability rating so veterans can receive a higher level of benefits.*

If you were denied service connection or benefits for any service-connected disease, our firm can help. We can also put you and your family in touch with other critical resources to ensure you receive the treatment that you deserve.

Give us a call at [\(800\) 693-4800](tel:8006934800) or visit us online at www.LegalHelpForVeterans.com

This electronic book is available for free download and printing from www.homeofheroes.com. You may print and distribute in quantity for all non-profit, educational purposes.

Copyright © 2018 by [Legal Help for Veterans, PLLC](#)

ALL RIGHTS RESERVED

Heroes Stories Index

[Global War on Terror](#)

[Vietnam War](#)

[Korean War](#)

[World War II](#)

[World War I](#)

[Civil War](#)

[Spanish American War](#)

[Mexican-American War](#)

[War of 1812](#)

[American Indian Wars](#)

[Revolutionary War](#)

[Other Conflicts](#)

[All Major Military Award Recipients \(PDF\)](#)

Our Sponsors



LEGAL HELP FOR VETERANS, PLLC
(800) 693-4800

New Claims

Appeals at VA

Increased Ratings

Appeals to Court



**The Voice of America's Veterans
Since 2003**

www.veteransradio.org