

Ernie Colling - Episode 808

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SPEAKERS


Ernie Colling, James Geering

 James Geering 00:00

Welcome to the behind the shield podcast. As always, my name is James Geering. And this week, it is my absolute honor to welcome on the show, Army infantry veteran and the man behind transcend Ernie Colling. So in this conversation, we discuss a host of topics from earnings, early life, his journey into the military, some of the worst days in uniform, his transition, the world of contracting, the spectrum of factors that influence our hormones, testosterone replacement therapy, the importance of blood testing, mental health, the Transcend Foundation, 7x, and so much more. Now, before we get to this incredible conversation, as I say, every week, please just take a moment, go to whichever app you listen to this on, subscribe to the show, leave feedback and leave a rating. Every single five star rating truly does elevate this podcast, therefore making it easier for others to find. And this is a free library of over 800 episodes now. So all I ask in return is that you help share these incredible men and women's stories. So I can get them to every single person on planet earth who needs to hear them. So with that being said, I introduce to you, Ernie calling enjoy. Well, Ernie, I want to start by saying thank you to Brandon, for connecting us and thank you for coming on the behind the show podcast today. No,

 01:49

absolutely. Thank you for having me. And Brendan's an awesome person to be working with. And he had no praise to say about you. So you know, appreciate the opportunity.

 James Geering 01:58

Yeah, well, we got to spend a pretty interesting 10 days crammed in a plane together. So we'll we'll get to that. And then a little bit. Oh, yeah. All right. So first question, where on planet earth are we finding you this morning?

 Ernie Colling 02:10



Ernie Colling 02:10

You're finding me in the Auburn Hills, Michigan, which we're right next to the Chrysler world headquarters, you know, the office building, and this is my executive office.



James Geering 02:22

Now, you said Chrysler was close to you? Yeah, yeah.



02:25

So, you know, Chrysler Dodge Ram, the automaker, one of the big three, you know, it's big to the Detroit area, you know, born and raised here. So when I found the the office space, and it was right in proximity to it just had a great feel. So we were quick to get at least and get the team in here. And it's just good to come in every morning and to look and see an icon, you know, something of legacy, you know, within our, our culture, you know, say I wanted to be close to that.



James Geering 02:57

Well, the reason I asked and it's interesting that you were born in Detroit, you know, when you look at some of the problems and we'll get into it, but you know, mental health addiction, some of them the origin story is an industry leaving and Detroit is a perfect example. What are you seeing now you're a pretty, you know, clued in business leader, is the American car starting to come back to our grounds again, our shores?



03:20

Yeah, I think there is quite a bit, especially in this area, in the Eevee world, specifically, Chrysler and Ford and GM jam, mainly, you know, they're, they're investing in infrastructure and facilities, and that's creating a lot of jobs for construction and engineering specific types of things. You have suppliers and vendors, you know, rapid prototyping all sorts of things that tie into that. So in Oakland County, where this is all located, there's a strip called automation alley, and we're right in the heart of it. So it's great to see buildings that were empty, you know, filling up again, you know, lots that were destroyed there's construction coming in, you know, they're they're rebuilding old factories, you know, and revamping them for new lines. So I mean, in this area, it's pretty prevalent that is coming back. I can't speak for everywhere else but it's great to see that here.



James Geering 04:17

You have well I hope that kind of finds itself in Detroit because I know the the firefighters in that particular city are extremely overworked and underpaid. Yeah,



04:26

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yeah. Important note with us you know, Auburn Hills and area like people say Detroit these we just sit easiest geographical location but we're we're probably about 40 minutes north northeast of actual Detroit, the city itself. See self has also come back quite a bit and downtown areas beautiful. I'll be down there tonight with friends and family and a few others that we're hosting from company. So, you know, it's a great place to go to but there's still some problem areas. You know, six, they're still under appeared over work that kind of stuff. But yeah, we're, we're close enough to say Detroit but we're we're not necessarily exactly in Detroit.

J James Geering 05:09

Brilliant. Well, you mentioned Detroit. So I'd love to start at the very beginning of your lifeline. So tell me exactly where you were born. And tell me a little bit about your family dynamic, what your parents did, and how many siblings?

i 05:21

Okay, yeah. So see, three brothers, two sisters, two brothers. And one sister surviving mom and dad been married for just about 50 years highschool sweethearts. You know, still married to this day, I was born and raised in Fulton County, Michigan, right on the border of Oakland in Macomb, which is a real blue collar area, very blue collar, all the trades work, they're going back to the auto industry, especially in the late 70s, early 80s, even mid to early 90s The neighborhoods and the way that everything was done, it was like strategic, you know, your your line workers were here, right. And then your your managers were here and your white collar people were here there was, you know, very class division of where people lived, even in the same communities and proximity to where the plants were, and all those other things. So my dad actually didn't work in the auto industry, he was in the computer industry. He was a Harvard engineer, which basically meant that time, he was like fixing ATM machines, and, you know, anything that had to do like electrical engineering, and it morphed over time into something that was more, you know, desk job type of orientation. But, you know, in the beginning, it was more of a skilled trade, and it was, you know, a white collar kind of thing. Over time morphed into it. But the neighborhood back that was a real blue collar stick together tight knit. You know, the kids knew everybody was, if you weren't from there, we knew real quick, you know, grievances were resolved with a quick first. And then, you know, you pull that guy up, and, you know, dusted each other off. And, you know, everyone learned their lesson, and we went back to whatever we were doing, you know, sandlot football or, you know, riding bikes, on the trails, all sorts of things that Michigan kids do, you know, pond hockey, all that. Interesting enough, though, when I was really young, was about five, my brother was born at the time. And, you know, same thing we just seen as the morning sun hit, you know, we're out the door, summertime, you know, playing with friends. You know, tragedy struck, my brother was actually killed by a truck on his bike, and it was been close proximity to me very close. So, obviously, it's tragic as a, you know, a young boy to, to lose a sibling, right there in front of you, and in that manner, damn near broke my family apart. The whole neighborhood, you know, could feel it could feel the weight of it. No one felt real safe anymore, you know, and it wasn't because of, you know, criminal activity or anything like that, obviously, it was just the notion that that can happen anywhere, you know, when you're careless, and then don't pay attention to many factors in there to go back through and, and see why or how, but there was a massive impact and obviously impacted my life, you know, really young, you know, that for the next

God, seven to 10 years, you know, you know, we struggled as a family, you know, there's lawsuits, and, you know, all sorts of turmoil and pain and healing that was going on. So, growing up like that, it was a bit rough. You know, at some point in time, it started to mellow out, high school time, you know, I discovered sports, I got into the wrestling, I was pretty decent. You know, that kept me for the most part out of trouble. But I did find enough trouble, especially hanging out with some of the guys I was hanging out with. Eventually, I got in enough trouble that I actually got expelled from high school. A year later, I was allowed back and, you know, went to school and finished my time, but I'd have to go that extra year to graduate. I didn't want to do it. So I dropped out. So yeah, I'm a high school dropout. Took that time and you know, just manually ever construction, that kind of stuff. But in that timeframe, I was on the job. And my sister she was 24 I was 18 at the time. She was getting killed by a drunk driver. So you know, I lost my older sister and my younger brother. So I've been the the youngest the oldest and middle child in my family, which is you know, cannot experience all this now. But, you know, after that happens, it kind of changed my perspective on where I was in life and where I wanted to be. So I when, you know, I got my GED. I literally just picked up the book, studied it for a few weeks paid to go take the test, took the test, you know, they let you know, 30 days later whether you passed or don't pass, you know, got the mail in the parents house. Oh, cool. I have a GED. Decent. So yeah, like, I guess it works. So I'm like, Okay, what am I going to do now? So I just, you know, joined the army. They saw me crying, you know, right. They're young, you know, former athlete, you know, kind of a troublemaker trying to fix some things up. And they got me on an infantry contract. And it was all of them from there on out. But it was probably the best thing for me. I just, I enjoyed the challenge. I really enjoyed the mentorship, even though it can be harsh at times. But it was exactly what I needed. And I needed to hear it. From that type of environment, I guess, I don't know, I just that was receptive to it differently than it was throughout with parents and you know, their friends and teachers and coaches. For whatever reason, for me it stuck. It was different. You know, I was in and out, I did my, you know, one time and listening, got it as a corporal. You know, Iraq was going on, you know, at that point in time, it was late 2004 For me, and I went right over, and I got a security contract job, and was doing cowboy security up and down, and Mr. Tampa, which is, you know, central to their act. And the company I was with wasn't a very good company. But when you're, you know, 20 something years old, and they're offering you 10 grand a month in cash to go into something and you really don't have any other job skills, seemed like a really good idea at the time. It wasn't. Fortunately for me, I had a former squad leader that was on a different contract with NS calm. And we were both hit by up Baghdad International Airport. That was like a massive, like US military installation with different little installations within it. And he had kind of heard over the net that there was this civilian Congo a, you know, PTSD company, and they were getting their ass handed to them. Just north of Taji, because we got hit by it. Last our fourth vehicle, ironically, the person that died in that vehicle was a see I was supposed to be sitting sitting in we, when we went and picked up our cargo trucks. We were coming back before we actually got in the vehicles and began to SP one of the drivers a silicone packet from the Mrs. It's an Iraqi driver. So he got sick as crap. And I think he saw it was in the back of the truck and actually didn't want to drive it because they you know, always look underneath the tarp. And it was, you know, RPG rounds, grenades, you know, explosives, things for the Iraqi army of beardruff known. So he got sick. So then we had to reconfigure everything because one of our American drivers actually had a CDL and could drive a semi so, you know, he had to go on that truck. We reconfigured and I went from truck forward and truck three. And, you know, that was that. So, you know, by just one small event, it saved my life. You know, craziness. I didn't realize at the time that that was so significant. But you know, we got back out on the road, and if it was later, we're halfway back just south of the lot,

you know, just north of Taji and you know first cat was there at the time and they had everything blocked off and they kind of told us that this is a choke point you know most likely ambush you know we know about this it there's probably more

 14:12

but you know when you don't have air cover and dine vision you know all the other things that you did when you're in the military you know, the decisions are a lot different and they make a lot quicker and the truck leader at the time decided you know, we're going to press there because we didn't want to be on the road any longer with this kind of cargo we want to get a job so we press forward and sure shit you know we get about a half a click down the road and boom, the fourth truck is hit split in half killed the TC where I would have been sitting with the rest of the guys and then which was real. For the time they engaged us with those smaller spire and it was more of an ambush than anything else. So you know for trucks wants to On truck three, we had to turn around and you know, kind of get in between the kill zone, you know, fatal funnel where, you know, those guys were at, we had a building and a heck of a fence on either side of it, you know, it was probably about 6070 meters, you know, just, you know, in front of us, but the semis and the rest of the trucks, you know, they were getting the hell out of there. You know, they were, they were getting them out of the way. So, you know, we started covering fire and trying to move wounded behind our vehicle. And I remember two shots in my hand for and click, you know, rather inconvenient time for it to stop working. I did everything I could. And you know, finally, you know, I had no choice deadline, the weapon and there some guys creeping around, like a small utility building. We had a secondary source fortunate for that. It was a Glock 17. So use those 45 rounds really quick. And then just picked up a weapon on the ground, you know, just the same thing anyone else would do? Turns out later, there was a damn bullet lodged in the barrel of that rifle.

 James Geering 16:05

Oh, God. So if you fired, it would have exploded in your face. Yeah,

 16:09

yeah. So twice now, unbeknownst to me, you know, injured to death. And I, you escaped and you don't even realize it at the time. You know, as soon as we're getting low on ammo, and it's probably only been, you know, three minutes, you know, felt like three hours. And the two other trucks came back blazing. And we play games in the back with Kurdish Peshmerga as our you know, secondary, and they were rolling pretty heavy, and they came in guns blazing. And, you know, all of a sudden, that got them to at least break the contact with their ad and fall back into their building. And, you know, we're laying waste to it. Don't ask how civilian 784 But we had one. And, you know, we pull pins and you know, it was it was armed, hot, cocked, ready to fire. And the Kurds realized that one of their guys had been killed. And this particular group was Peshmerga. It hadn't been hit yet. You know, they had firefight experience, but they hadn't lost anybody. They hadn't had, you know, one other tribes been killed. So when they saw that, before we get fire off the 84, they ran through machine ON FIRE straight through right from the front door kicked, and kicked it down and went in there and we're getting ready to go in it was only maybe 30 seconds. And they came out with 10 Guys, you know, hands behind their head,

they took they took prisoners. So we said custom hooded on have laying on the ground. And we're still gonna blow the building just to you know, make sure. And the curious not speaking of English, you know, they're like bombs. Like don't do it. We go in there. Look, it's polish to me. It was it was a diety factory, if we would have hit that we would have been just vaporized.

 James Geering 18:04

There's a number three. Yeah.

 18:06

Number three, that day. So you know, we're waiting for medivac to come in, comes in, picks up the window picks up, you know, the case gets them out of there. You know, we take radios everything sent us to the truck. That was you know, we regroup and then push on down to Taji at that point. So, it just inside the gate, you know, that's where the trucks are gonna stay. You know, go to use the wire, take a piss. And right before I put my booth down, number four, friggin anti tank mine. That was sitting there. And I was like, Jesus Christ. This is days just getting worse. It's not like, like, I don't know, at this point. Like, what's, what's going on here? So, you know, I kind of pointed it out, like, oh, shit, yeah, we probably should do something about that. More than likely it was an earth anyways, you know, but still, just, you know, have that happened mentally, the things that go through your head there that we rolled out, went through the tip of the Sunni triangle. At this point, it's night. And we're just we just haul ass right back through and now everybody's tired. Angry that a long day. So if any potshots came off, I mean, they got more and returned fire than they would have thought for. Because we had no problem stopping and saying hi. We got back the rest of the thing and you know, no problem. It was a place called campus or out by the tower area. You know, we got back and, you know, I got to the talk, you know, turn to my gear, and my squad leader was there. The guy was referring to earlier because he had heard everything over and he's like, you're not staying. Like he's like, just resigned, and you come with me, you know? And I was hesitant, and he's like, this crap is gonna happen every day, do you want to do that? This is why they're trying to pay you 10 grand a month, you know, this isn't the same, you know? And I was like, alright, so I just think they're really there. And, and I just said, you know, for me, I'm gonna go with somebody I trust, you know, I'm not here. So, grab my bag and gotten a truck, a Hilux, and drove it to the other side of BiOp. And, you know, actually turned out to be an intelligence contract INSCOM intelligence commander for United States military, and they had a very different contracts going on at the same time in that area. But then when I met his his boss, and, you know, talked for about an hour, and okay, yeah, we're gonna, you know, send it back to the states and getting an offer letter, everything, just go home, you know, we'll actually help you out and get your ticket back to the United States. So recycled back out, back to the US two weeks later, right back down to Georgia, through CRC, right back over to Iraq. But this time, instead of doing security work, you know, it was intelligence support working. And I actually got to put in the ice international zone in the green zone, right next to the Green Zone cafe after it was blown up. So, you know, it was it was remodeled. That was kind of nice. But, you know, we're right behind the old bath party headquarters. We're fob on our was, we actually weren't in the fob, we were actually outside of that place called the golden dome, which was like a, essentially their compound. And I wasn't sure exactly what I was supposed to be doing it, no one had really mentioned it, logistics was said something about recruiting was said. But I really wasn't 100% sure what I was going to do. And they were recruiting local national linguist, for

the most part to work with US military's interpreters, they are gathering biometrics, and they were doing some other things that are going on there. And, you know, so I was one of the admins in the office going through things. And I noticed that there, there's a desperate all these files have just been thrown as like, what are these, like, Oh, those are the ones who got killed, either with your units, or in most cases, honestly, the family or raw people found out that they were working with us, and they were killed. So there was supposed to be death benefits paid to them to through US government and a few other entities. And no one was really calm contacting, at this point, they didn't know what happened to their family member and a lot of them. So talking with, you know, a few of the beleaguered leaders in the company and what was going on. You know, they just didn't have the resources at that time to investigate, you know, go through, get the paperwork, make the contact, do all the things, but they really did want to, you know, just how I grew up in what I experienced, I didn't think it was right, so I asked if I could do it, you know, as an additional duty at first. And so they let me work with one of our US hired interpreters, you know, to interpret everything, you know, get all the paperwork, documentation, you know, they were calling Iraqi police, they were calling units, we were getting everything, we could kind of get a standard thing you would need for a claim with the insurance company. In this case, it was US Department of Labor. And we know over time, you know, took care of, you know, several 100, or hundreds of them, whether it was getting the wounded out to Jordan, or whether it was, you know, notifying next to Ken and having a man give him the cash statement, and then start the Department of Labor paperwork, they quickly escalated to a full time job once they saw the, you know, the amount of work that had to be done. And at that point in time, in 2005, things were getting more chaotic, you know, they were increasing. So they needed somebody to deal with it. Because, you know, they would drop them off at the hospital. And then the US military, for the locals, they were like, yeah, they can stay at night, but then they gotta go. I was able to work with command, you know, and basically, under the loi, we had kind of get them to have a little bit more of an extended period of time. For those that weren't like severely wounded, you know, we would get them out if they were stabilized for the ones that were severely wounded. And one in particular, that was hit by an ID and have to be the interpreter for one of the battalion commanders for an MP company or battalion hire, you know, we did everything we could for this guy, but he had a TBI, he was in a coma. You know, it really wasn't looking good. He needed long term care. And there's only so much you can do in the combat or hospital. So, you know, I had to work through the Department of Labor through a company, through the US State Department through the Iraqi and interior ministry through every hoop, you could think of, to coordinate an ambulance flight from Lebanon to be allowed to land at that International Airport, to wait for us to take him there from the IC, which means I had to get permission to use medevac helicopter to take us there from an US Army. And I had to borrow their life support systems in order to get in transported. Got all that somehow worked out. And that was kind of good. He's gonna go, and, you know, Michigan was about to start, they're getting ready to do their thing. You know, I was signing paperwork, I was getting ready to leave. And you know, the leis on it was Major, she was like, Where are you going? I was like, I don't know what, I assume this is good. Oh, no, you're going with, I'm not I'm not letting you go with this equipment and everything else you're going with. So that she talks apart or whatever, you know, I've had my stuff. Guy, this point, it's, you know, for what, three, it's getting late, you know, some of those now they're pretty quick. We get in, and we can't find the, the plane that flew in from Lebanon, I have no idea where it is. So I'm on a rack, you know, piece of crap cell phone and talking to somebody in Dubai, who's talking to somebody in Lebanon, who then picks up the right to call a plane to tell them to start hitting their lights so we can see you know, who they are. And eventually we're able to identify the plane problem was the two sides of the airport, the civilian Iraqi side, where these guys landed in a military controlled side, where we were, and the pilots weren't really allowed to go there. Obviously, you know, there was no other choice. So the pilot looks mad. He's like, You have five

minutes from the time we had tarmac to the time that we're gone with, or without you. I don't care. But we're gone in five minutes. Yeah, he was definitely timing. So we looked off, go back, get right up as close as we can to the, you know, playing their door drops to bring out their equipment. And the doctor that was there. Oh, hi. Nice trying to follow. There's no time for this year tic tac toe, we yeah, we have five minutes. And honestly, the sun is about to go down. If this bird doesn't go off, when the sun goes down, you're not leaving. Yeah, because there are no flights, and especially civilian flights that are



27:55

barely, but barely got it done. And higher was not a small dude, he was, you know, 661, you know, 240 he was getting him crammed into that plane. And, you know, taking them off and already putting him on and doing this, you know, outside, you know, on tarmac was an interesting experience, to say the least. But it all got done NASTRAN ever, we're getting back on a helicopter. And it was it was winding up and they took off and they're taking a turn to go back to the IC and I could see the plane just taking off, you know, on the sun just about the set. I was like holy shit, we actually did. And they flew into our Amman, Jordan and got him into a hospital there that the department library pretty much designated for these types of injuries with the Iraqis. And, you know, he was there for like, six months and his family went there and was visiting. His father was a correspondent for The LA Times. So in getting a little bit of press to say the least, but something happening and getting an infection. And I remember I found out Christmas that he passed, you know, after all that, that was pretty defeating too, because that was like the one thing out of all the, you know, shit. Crap, you know, the things that had happened, it was like that was gonna be the one good thing to end that tour. But we did everything we could. So you know, it was what it was, you know, getting back to the States after that. I got lucky and the operation side in the US, pick me up for a job. So newly married, just married. Moved out of Michigan never been out of Michigan like that. Not not to like live outside of the military. And then you know, starting a new job, all those things. Realize that moved a little bit too far away for the the DC area, you know 25 Miles seem far, you know, it at least it didn't at the time, but it'd be like a two hour commute each way, because the traffic and all this other stuff was miserable. But I think, you know, for the next six years, you know, it was pretty much up tempo was just the same there as it was, you know, in theater. And, you know, same thing I was on a Mexican team NOC team, you know, we'd have casually I go to Dover, you know, and start coordinating to have them move over to a civilian more, whether they're viewable getting the personal effects, coordinating, you know, the heroes flight home, escorting the remains, you know, getting them to the local funeral there. And then at the same time, keeping everything in contact with the people that did the notifications, actually, with the family, because as soon as the notifications were made, they stayed with the family. And so, you know, we were able to get their loved one. And then usually, like I said, I stayed with the loved one until they were returned home. But, you know, that could happen at any point, anytime. So I always had a backpack, even then there's always something constantly, you know, ready to happen. Finally, a few years later, you know, I had a daughter, you know, so you Dad, all these other things. And Afghanistan was starting to warm up a little bit. And I really wanted to try again, you know, a lot had to go back, I wanted to get the contractor money and all those other things. So, you know, my wife left me. So I moved off the rack to St. Afghanistan side. And, you know, I was there for almost 20 months, you know, on that rotation, you know, I had two vacations home, like after nine months, and then after another six months after that, but it was a long, a long one. That one was a little bit different physician. You know, it was a little bit more hands on. But, you know, I was in a little girl Ward area, which is south of Kabul about, you know, I'd say 70 miles. And that battlespace was, you know, a good, good warm

one. But spent all that time there and went back, again, headquarters pick me back up. So I was an operations manager there. The whole time that was happening, my TOC I was processing and it finally came through. So that has my options that I didn't have before. And there was another agency, I wanted to go to a new agency, the joint ad to feed organization, guys that were making bombs. And, you know, I'm down to find, specifically the COVID, which was the world's at the time, the world's largest fusion intelligence area, and they had people at the location in the US, you know, doing all sorts of things, and then people downrange all over the world, you know, on the other end of that mission, so, I was lucky and fortunate enough to get into, like the J three, three, which was the current operations, and I was part of the General Staff, so all plans policy, you know, centrally, all the planning, future planning, meetings, you know, dignitaries, all that stuff, everything that came through, you know, we were part of, and new and prepared and, you know, learned a hell of a lot there, especially about leadership. And just, it was a whole different type of experience. You know, and that was pretty much the end of the military contracting piece, you know, I was there for a couple of years, did a couple of rotations with them, too. And then, you know, that was when I went into the private industry. So, so that's really life to end of civilian contractor military life.

J

James Geering 33:58

You know, so Well, I want to go back to the initial loss of your your brother. And then obviously, you have another one, you know, 20 years later. How did you and your family when you look back now, what what were the, the effective ways that you process some of this grief and whether any, you know, any negative ones now, when you look back?

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34:21

Well, at first we didn't know where to start. You know, I remember the first Christmas because it happened in June, you know, the six months was just an entire blur, you know, started school school aged kid, you know, just, you know, two months later. So, obviously, you know, they're in therapy as a kid right away, you know, to try to process the trauma. But, you know, my sister, my mom, same thing, they were processing it. Obviously, it was still miserable. My dad to shut down. I mean, he just shut down. He would He went to work and he came home. But he didn't want to talk about it, he didn't want to brought up, he didn't want to think about it, he just couldn't. It, it broke him pretty, pretty hard. So that caused a lot of tension. Because, you know, my mom wanted to see it was a family, but the family constantly do all those things was point fresh, and that's when they decided that they wanted to do, you know, a lawsuit over the company, because it was a commercial truck that actually hit them. And, you know, once that started, you know, lawsuits are expensive, and a lot of money to go around at that point, then, you know, there's even less, and when there's less than, there's not a lot that makes things very difficult. I remember for probably the next five or six years, you know, my entire time through elementary school, and even the beginning of middle school, like, there wasn't a school full shopping and that I got my cousin's handy, gotten closer, you know, I only got new shoes at like, the discount store, you know, and that was like, one pair a year, and those things were ripped apart and duct tape. It was, you know, it was what it was. So, I think that was an added stress that as a young person, I wish I wouldn't have had to experience I think it just added so much more to it and called everybody's such different directions in the family that it was damn near and spawnable. But, you know, we all made it through it came back on the other side. And during that time, my parents, you know, they had three more kids, you know,

there was almost back to back to back. So, you know, quickly it was, you know, more like being a brother again, and kind of, you know, focusing on the new siblings and all those other things. So, I would say the things that were done, right, you know, it was kind of, it was good to have that, that family, you know, aspect back to it joy, you know, playfulness, all those things. You know, as the brothers and sisters got a little older, you know, my dad started to warm up a little bit. And thank God, you know, even to this day, he's seems like he's getting softer every year, you know, he's, you know, a lot better. So, in time, everything worked out his way it was supposed to.

J James Geering 37:27

Now, we kind of touched on this right before we hit record, you know, when you're able to process trauma, somewhat, it can actually drive you towards certain careers. And there's so many people on this show, who wore a uniform for their professional for their career, that actually had quite significant trauma in their early life. Now, you know, you could argue address that I think that becomes almost a superpower. unaddressed, obviously, it still leaves that kind of fractured foundation that without, you know, piling other stuff on as we actually do our job. When you look back now, how did that loss, so early factor into your journey into the military?

i 38:07

Oh, it's definitely a superpower, because it was addressed, it took a lot of time. I mean, basically, my childhood and adolescence, you know, in and out of therapy the whole time, because as your brain develops, and emotions and hormones, and all those things change. And that leads me into something we talked about transcend it, you know, it was just restarting all over again, you know, getting back to being able to process what had happened, because it was so bad. To this day, you know, there are things that happen overseas and things that I dealt with, that actually registered less of an impact than that did. You know, I think part of that was because my age and part of it, because actually the ultramatic it was, but yeah, I think going through all that just made it so I could focus on what was important at that moment in time, and I was able to block out the actual event that had happened, you know, the emotions that were going along with it, it allowed me to kind of process things a little faster, a little quicker, and be able to be there for other people. Especially, you know, having that empathy to see the things that I was saying, you know, with not being able to get people or benefits and things like that. So I, you know, between the empathy and the capability, you know, definitely set me up a path.

J James Geering 39:29

Yeah, and I can tell the empathy side, not only what I know now about, you know, how you help with seven acts, for example, but also just in this journey and caring enough about, you know, the Iraqi allies to take care of their families and you know, some of the other things that you've done. I've said this a lot as a medic. I think the thing that haunts us firefighters and medics and police officers is not so much the grotesque scene of someone being killed. It's the wails of the people left behind. So you had your ring elicited a near death experience times four. But then you have, you know, these death notifications, you literally are going to see these grieving

widows and widowers that is now compounding on to some of the trauma. You know, as you said, even though it was addressed, it was still there as well. What were the highs and the lows of your own mental health as you progress through adulthood.



40:24

highs and lows, euphoria, just to get back from those deployments, with a sense of accomplishment, regardless of how arduous it was, and mentally taxing, I felt like it feels something that last because, you know, when I was there, that that position didn't exist, and somebody wasn't taking care of those people. But when I left, you know, somebody was coming in to replace me to continue that on, and make sure that it continued that as long as we were there that was happening, that somebody was going to be on watch, and making sure that, you know, the loose ends were tied, the families were contacted, taken care of the right things were being done. So that meant a lot to me. And then, you know, like I said, getting married, you know, the woman I love, I'm still with her 17 years later, you know, and be able to start our life together and have that excitement and actually have a job, you know, behind the desk, instead of, you know, to some of the other things that were going on. It was, it was important, it gave me hope that I could do something in the future. So it's a good way to put the lowest common story for everybody, you know, I think is the self medication, right. And then, you know, wanting to keep it private, not wanting to complain, knowing that I was alive, and many others weren't. It gave me that sense of I shouldn't speak on any of these things, I should just kind of keep this to myself. And it didn't work out. So well. Drinking got heavier, heavier, heavier, heavier, started to affect relationships. And, you know, that went on for years, it wasn't like it was like, I realized was something good. And then all of a sudden, you know, it stopped, you know, I pulled back for a while. And it was when my daughter was born, and then you know, when did another appointment, which is basically to and then came back, same thing, right back to self medicating going into the cycle, you know, that, you know, over again, and I was gonna rotation at this point with the Kulluk, you know, Task Force palette and downrange, just back and forth. And that just continued to add, you know, stress and everything else. So I found myself in my early 30s, you know, at this point, I was really going on the wrong path. Once I walked away from the private industry with, you know, paramilitary or contracting government contracting, intelligence, all that crap, you know, I didn't have that weight sitting on there. Yet, I realized at that point, like, Okay, I need any help, I gotta do something. So we got through a process called EMDR. And I, you know, I swear by it, you know, this was back in 2014 2015. So it's, you know, a while ago, you know, before, some of the, you know, psychedelics, micro dosing, and all these other things, you know, were out there, this was, you know, kind of the top of line. And honestly, I've gone back once or twice, since just to kind of get a tune up, so to speak. And for me, it worked. You know, it really calmed me down. anxiety, you know, the fears, you know, that fight or flight response, that you're kind of stuck in anger, all those things. It's not that they just went away overnight. But it allowed me to be able to deal with it allowed me to, you know, recognize when it was starting to happen, or what was triggering, you know, maybe self aware, and then I honestly didn't want to be that way. So it took a lot of effort to, but, you know, I think eventually, I was able to really put my demons where they belonged, and, you know, go on and live a normal life, at least for the most part.



James Geering 44:23

I've heard a lot of success stories about EMDR, especially when it's specific events that are, you know, beneath the thing, the thing beneath the thing. And this is, I think, an important

conversation, as you mentioned psychedelics, obviously, a lot of people are having success with that a lot of people that are on the plane with us, we're having success with that. But it's understanding as a toolbox and I think this is a message is not really relate very well to military and first responders is, you know, you have counseling, you have psychiatric meds, and there might be an application for those meds for bridging a gap or someone who's got extreme schizophrenia or something. Maybe they do need medication as well. But you've also or equine therapy, and these these retreats and psychedelics and EMDR, and, you know, all these other things. And so I think that gives a lot of people hope, because they were like, Well, I tried counseling EAP. And that person fucking sucks, and I'm never going back. Versus Okay, well, there's a lot of other different types of counselors, there's some that have worked with military and first responders that you need to be seeing. But then there's also this toolbox of other things. And it might be EMDR for this one thing, but then it might be meditation for another thing, and you start kind of layering and together to find your own version of therapy.



45:35

Yeah, I think that's absolutely true. And I think the most important part about that is having somebody that knows you, that is checking up on you, and continuing to push you to get into one of those therapies, right to break the loop, for the most important addition to that is just having somebody that knows you, buddy, check system, whatever it is, kind of pushing that person who's suffering to go and find their tools and, and start to utilize, you know, and to keep encouraging them even when they're not necessarily working very well. That way, you know, you do find what that combination of things that are that works, because there are so many different things out there that hell, not everybody's the same. And yeah, you might fail on first one might not help as much. But if you have that support, and you're continuing to be pushed, you know, your chances are you're going to end up in the right place.



James Geering 46:30

Well, we're going to talk about transcend in a moment, but Brandon was also telling me about, you know, hitting some bullet points to help me you know, understand the things because obviously, you've got, you know, things online, you got interviews, but then I'm always intrigued from people that are close to someone, you know, what, what are the, what's the, between the lines as it was, and he mentioned that in the journey to transcend, transcend, as you transitioned out into, you know, the corporate world, you'd had some other companies, you know, that hadn't succeeded. So, which I think is a very important part of the business journey. So talk to me about that you've been very successful in the contracting space, you transition out, what's that journey to transcend that line.



47:09

So it was like trenches, transition, just, I can't say that, as I left that space, and went into the private industry, I ended up becoming like an IT program management, software development, implementations a Europe, that kind of stuff. But, you know, it was just planning just like a done in the past, you know, taking complex pieces that were integrated and plugging them in the right places, and then making sure that people need to be doing those things. We're doing them but I was learning a lot about e commerce and social media, and how that would drive

revenue, and you know, how to basically run a business. So I was intrigued by it. At the same time, I was trying to get back in fighting shape, so to speak, and, you know, my wife was competing, you know, she was a figure competitor, which is, you know, like bodybuilding. She looks amazing. still does. But I couldn't, could not keep up with her. There's just no way I tried everything. And I was getting pissed that I had a coach, you know, I'm on a diet, kill myself in the gym, and nothing is happening. Finally, he's like, oh, man, I think you need to go to a clinic and, you know, I have some blood work done, get some things checked, you know, so I go to my primary care, talked to him about it, you do bloodwork, you know, but they don't do it at home, I would say just do your standard panel, like okay, well, everything looks normal here. Like, well, I'm still feeling the symptoms, right? I'm tired, lethargic, this won't happen, you know, little Butoh, you know, all the low testosterone, you know, symptoms. And, you know, either will, how about, I send you to an endocrinologist, and you know, they can look and see if there's something that's not on this panel on one of their panels. Okay. So, you know, I get to the Endo, and this female doctor, she looked at me and she's like, You were probably a long term steroid user, you probably crashed your test. I don't help those people. I don't, I don't work with like, Okay, I've never touched a steroid. You know, it wasn't my thing. I'm not into bodybuilding. I was trying to get back in shape and want to lose weight. But she wasn't happening. So I was stuck. I went back to the coach, and I'm like, This is what happened, you know, this took two months, by the way to get through now suffering the whole time. He'd say, oh, no, I meant to go to this other private pay clinic down the road. You know, that specializes the mess. Maybe you should have told me that first. But you know, so I go in there and Doc takes one look gives me this lab panel, go through and get everything done. And turns out my test is like 90, you know, and it should be, you know, the four or five 600 range. And my estrogen was like 80, which is more than double what it should have been, you know, which explains why I was crying at Disney movies. But, you know, got all that straightened around, and all of a sudden, the work that I had been putting in, it just so quickly changed. I mean, within probably two weeks, you know, my sleep was better cognitive ability was there, I didn't have the brain fog, my real was back, that was dropping weight. I just, I felt great. And that was continuing, and then COVID hit, and that clinic shut down. One of the guys that were there, actually talked to the doc and essentially, was gonna buy their book of business. And, you know, they were good at the clinical side of things, you know, they're kind of like a patient advocate, where they walk them through the process and help them determine what was probably right for them. And because everything was private pay can be expensive. So we found a different physician and a financial backer, and like a business development guy, and they were all getting to certain areas, but no one really was like, the one that knew how to file the articles of incorporation, you know, put a financial system together business processes, contracts, you know, all the fun stuff. So that was me. You know, and I wasn't even supposed to be a partner. At first, I was just like a consultant, they were gonna pay. And they already said, now we'll, you know, split it four ways. And we kicked it off. I don't want to say the name of the company. But, you know, we did kick it off. And I always wanted to use E commerce, I wanted to do telemedicine, I didn't want to do the brick and mortar thing, especially with COVID. So they agreed to start in that space because of everything that was going on. And then, you know, I wanted to bring in social media for marketing. And, you know, it was a uphill battle, they didn't believe in it. So eventually, we found an influencer, that we really liked. And, you know, we were able to work a deal. So once they started promoting for us, it took off very quickly. The person that was financially backing it, once they saw that it was turning the corner making money profitable into the millions, essentially just locked in. And, you know, gave everybody the opportunity to to sue him for, you know, shareholder oppression, and then, you know, take their bio, is essentially what everybody did, you know, that process took months. And, you know, that point, I was still working a full time job. And, you know, I was fairly depressed, you know, I kind of was going back into that self loathing area, in my life just kind of

looked at me and my day kitchen, and she's like, you're gonna do it again. So just do it again, just go and do it. She's like this time call a transplant. Okay, joking, because it was a play on the other company. And I was like, I went down, right, right, that right there and then went right down to the basement to my office area, file articles of incorporation. First thing I did was talk to one of my business colleagues, and I said, Hey, you know, I'd like to trade you percentage of equity to go in and compete with me, if you'll build a website, do all the technical stuff in the background theory developer and did all this stuff. And they agreed. And I went to the other two business partners that were kind of, you know, had the same experience. And I'm like, hey, you know, what do you think about this, I'm gonna do it again, I'm gonna do it the way I wanted to do it, you know, I'm looking for a little bit of seed money. You're one of the best and, and all this other stuff? Yes, right away. So I found a gentleman that was a competitor of mine, and, you know, worked out with him, got him brought over. And at that point, you know, he had a small book of business. So that kind of got the company started, got all those things established. And then we started looking for influencers. And we ended up getting a call with Jason post. And, you know, he, he had spoken to one of our employees that reached out to him, and, you know, for whatever reason, he just said, Okay, I'll, you know, I'll give him a shot. I'll listen to him, which was odd, because he has so many people contacting him, you know, throughout his career that just to take us randomly, you know, it wasn't normal. But, um, you know, I told him this story, I told him what happened? And, you know, he asked me, Well, why are you doing this? And I said, Well, for a multitude of reasons, but we break it down, one that changed my life, and I know I can change others, and I know I can do something good with it. I know at some point, if the business girls walling off, I'll be able to build a legacy hand something down, you know, be there for, you know, the families of people that were in their shareholders, you know, start a charity, all that kind of stuff. But mostly, it'll give me roots instability, and I don't have to deploy Travel, do all these other things I can actually see my family hadn't seen them and, you know, forever. This, my career has been essentially leaving. And that's, it really did. So I was shocked. Because the way in the structure that we did the contract was kind of like pay to play. Like, if you had more he did a better he did better company did you know, it was based on kind of like a commission kind of thing. At the end of it, you know, you basically become one of our partners, you know, he helped us find other connections, and grow the company. You know, shortly after meeting with him, we met with Steve Weatherford, he was a foreign partner for the New York Giants, you know, as a NFLs, businessman, you know, two times mean guys in his 40s, and just still to this day is absolutely yoked, it's ridiculous. I don't know how he does it. But I do, but



55:59

you know, so they were all about that kind of lifestyle to like the health optimization and wellness and, you know, taking control of your health and putting it in the patient's hands, versus working within the traditional means of things, which is more reactive, you know, you're not, you're not necessarily stopping things from happening, you're just taking another medication to stop one thing, but then you get a different problem. You know, a lot of people think that's by design, you know, I'm not gonna share my opinion on it. But obviously, I liked the product, proactive and preventative approach, personally. So, you know, once we started having patients come in, we were, you know, just focusing on education. But, you know, I think with Jason and Steve telling their stories and explaining just how it helped them, and why it was better for, you know, people in the industry, especially the bodybuilding industry, where we really cut our teeth, you know, because so many competitors were dying, so young, from abusing steroids, to know that one, you could do it legally with bloodwork. And you could do it in a manner in a way where you were just optimizing your levels, but you weren't necessarily

you know, you weren't taking tons and tons of gear, you know, we get an acne and roid rage on with other things people don't understand is over a certain dose, it's not doing anything anyways, it's just giving you side effects, it's just hurting you, it's not helping, it's not going to do anything. If you bring those down to the levels are predisposed to be or slightly above, you know, where the high average is at, it's going to do basically the same thing, it just takes a little longer time, but it's still going to happen, you're still going to be at your peak. So they liked the idea of being able to promote something that was going to stop people from hiring, harming themselves, and then obviously help them feel better and put things in their control. So they agreed and once they did, you know, it just it grew, you know, then another influencer would hear their story and say, Hey, I kind of like to do that, too. And then another one, you know, now, I believe we're at about 40 athletes that we're working with. And you know, the company grew from four people in my basement to 70 people, as of today, and we just signed lease for 3000 square feet here. So

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James Geering 58:19

they're amazing, absolutely amazing. Well, I want to kind of walk through the kind of genesis of this therapy first becoming, you know, available and then and then carry on forward to all the kind of pillars of health that you guys address. My exposure to this was actually with an interview with Kurt Parsley as a Navy SEAL term physician. Sleep Medicine is a big area that he focuses on, but he was talking about the the kind of creation of the spectrum where your testosterone should be. And I always forget where it is, I think it was an Ivy League school area in the Northeast. But where they got that range from was the you know, 950 was the 18 year old high school football player dripping, you know, testosterone to the semen. And then you had the you know, the whatever it was to 250 was the eight year old century dude in the same town. So, up until very recently, a lot of you know, myself a lot of peers, if we did get bloodwork done that showed test, they will be told, Oh, you're 300 you're fine. Well, this would be a 25 year old firefighter that shouldn't be at 250 or 300. So for the longest time, and I was having this conversation that look, you know, figure out where you should actually be, you know, if you're, if you're in your 30s you know, then I would argue if a 950 as an 18 year old, you know, start then in your 30s you should at least be in the five sixes at least you know so if it's way below that, but then the pendulum swung all the way the other way. And now all of a sudden men's clinics and I'm doing air quote, showed up everywhere. And now I was having 25 year old firefighters Friends immediately walk in there and boom, they're on testosterone. Now, it's not the same one that maybe had the low ones or if they did, but there was no discussion on, on nutrition, on sleep on on weight training and all these things that can naturally stimulate that you would do before then saying, Okay, you're a good fit for TRT, these are the options, and this is how you can do it. So talk to me about that first, just just the the industry that you've seen through your eyes at you know, that obviously, we're going to talk about transcend, there's a reason why we're having this discussion, because I think people should know the good companies. But what what have you seen as far as that predatorial element as well?

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1:00:40

Well, the predatory element is, is pretty clear, right there SEC cells are gonna use that, you know, the glory days, all those things, and they're gonna make it very easy for you to get on testosterone. Easy is never a good way to accomplish a goal. And in my opinion, you know, there should be a little bit more thought put in something, especially when it comes to

hormones, but they don't understand is when they go on hormone, you're going on hormone for life, if you're replacing your body's natural ability to create testosterone, and you're replacing it with something synthetic. You know, that's, that's what your body's used to at this point. And that's what it's going to carry on to do. Sometimes you can enter certain level, you know, reignite natural test. And there's methods of doing it, but it's only going to be to a certain extent, and it's probably going to be around a little bit here. Whereas before, it's probably it's most likely not going to increase where you were at. But once you're on testosterone, essentially, you should be able to, you need to stay on. And that's one thing, I think that's a real difference in the good clinics. And the ones that are a little bit more predatory is explain to everybody what these things really mean and what they do, and the dosage and levels and everything in our approach is a little different, you know, 958 5650 1000, it depends on a few things. First, let's talk about the symptoms, before we talk the numbers, you know, my number, your number might be different. And it can be based on age, it can be based on metabolism, it can be based on body weight, it can be based on how I want to feel versus how you want to feel. And the bloodwork helps us find that number where that is where you're feeling good. And also we're not affecting other issues where a human will consider roof, you know, your ASD levels, or you know, kidney functionality, liver functionalities is starting to have, you know, other problems, you're losing heritage, some of those things are, are are going to happen, and there's times when you have to titrate down, you know, if you end up taking too much, but the thing that is if you're monitoring the blood, like a good clinic would tell you to, then you'll see those things happening. And before it becomes a problem, you're lowering that dose, and you're you know, backing away down, and I'll tell you this, our physician, you know, he's never gonna authorize a dose that is considered more than therapeutic. And that's where you need to be about 200 milligrams a week, you know, on a split dose, or, you know, you know, multiple split doses is about the max, you know, a male of most ages is going to be able to handle without a side effect. And any more than that, I would, I would have to argue against. And, you know, that's not even where most clinics start, that are doing this, you know, in the right way. And they're also talking again, about nutrition and lifestyle, those are the things, giving the patient all the information to understand, you know, what their options are, you know, they talk about ECG, they'll talk about Clomiphene, they'll talk about their sleep, and, you know, mood and diet patterns, and, you know, other comorbidities, you know, things that could be going on that, you know, people aren't looking at the head to look at the entire body, you know, all of the systems, everything affects everything, essentially. So, you go in and just to get testosterone, you get it and you leave, you're probably not one of the better companies. If they're charging you per shot, you're not a good company. You know, if you don't see the physician, like as an on a zoom and talk to them. Here, you're not at, you know, a good clinic, you need to be able to at least see their PA, you know, nurse, nurse practitioner, there should be a major blood panel workout with all of your hormones, plus all based testing. Usually, we do like a new patient form, just like you would in any other physician's office, you get that 10 page back and you got to fill out your health, medical history, you know, and then go into your goals and other things that you're trying to accomplish. And, you know, take all that information, interview the patient, and then I'll definitely walk them through the process and see what they want to do where their priorities are. And that's essentially what we do. That's how we you know, take it from the intake document where somebody makes coffee. They're with us until they get the medication, you know, they have to go through all those wickets, you know, they're going to talk to one of our patient care advocates, they're going to talk to, you know, physician or physician's assistant, the bloodwork should have been done, you know, we're going to have done a review. And then we're going to make a recommendation, by all the options to because there's so many options between peptides, and some of the bio denticles, you know, you could have four options, we're not saying you should do 40 of them, we're saying these medications do certain things. And these are all the things that you could do,

depending on what you think would be best for you and your budget. Because it's private pay, we don't accept insurance. And we do that for a reason. Medicare and Medicaid guidelines are very stringent. And when you are taking insurance, you need to fall on us with certain regulations and laws. And it takes away from the ability for a patient for the care in their hands. So you know, in this case, private pay was the right way for us to approach it. But once they've made the decision, you know, that's, that's what we're going to support. Now we're going to take that order. And we have several compounding pharmacies in the US that we work with, we have a couple of weeks of really closely partnered with us for the main source, but if they're, you know, their medication, or you know, they're going through inspections, or things like that, sometimes we have to shift. There's different regulatory restrictions and states. So sometimes we need to go to a specific pharmacy to ship a medication to a specific city. So there's a lot of logistics that are tied in this too. So that's the other thing to be worried about. And understand, you know, when you're going to the clinic, you know, where are they sourcing their medications that are going to be sent to you? And how are they going to be sent? Or the overnight colpack? Are they you know, going USPS, you know, there's, there's a few things there to look at good questions to ask. All our stuff is, you know, sent overnight kolpak Unless it's life alized, which is powder form, it has to be reconstituted, most of the peptides are like that. So they're heat tolerant, and they're not necessarily is, you know, construction on the time. So we don't have to overnight them. But there's a lot of medications that do need to be done that way. But we made sure to go through and find the pharmacies that are compounding and sending to the patients, you know, as we've ordered for him, so the medications basically made at the time the patient is ordering, versus, you know, sitting on a shelf, you know, just waiting to go out at a standard pharmacy, you know, we've gone through, and we've seen their FDA inspections, you know, we've seen their, you know, proof that they got their raw materials from an FDA approved source, you know, we've seen the facilities where the filtration systems are up and running, they're clean rooms, you know, we still go back and ask them to send sample products and to third party independent testing and make sure that Bodensee, the, you know, bioavailability, the, you know, stableness of the medication, all those things are being looked at and gone randomly. So we can't just tell them on next Tuesday to have a battery for us. Because we do care, because these are medications, myself and my staff use just the same. So obviously, we want them to be just as good for us as they are for patients. But those are all things that good clinics do. And those are the those are the ones who want to go to the ones that are doing it. Right.

J James Geering 1:08:26

So Brendan was telling me as well, when you've done this question there, there is an element of, of counseling when it comes to your nutrition, your sleep, etc. Because I think this is a big sticking point in the fire service. If we get the firefighters work week to where it should be in the US, they would have a lot more time to recover. And I think some of them would self regulate at least when they were younger with their hormones. So you know, but the problem is that they don't they don't like the the county that protects where I live now. They are on 56 hours a week and a lot of times getting mandatory forced to stay and other ones. So there are sometimes 80 hour work weeks. So to tell those men and women Oh, you just need more sleep. Well, yeah, but sometimes they're not able to get it the TBI is obviously the combat athletes, the military, the law enforcement, that's another area where it seems that the self regulation starts to kind of fall away. But having that diagnosis element first of all, you know Have you have you changed your diet Have you done this? Have you done that? It's still not working or I just not able to because of my work schedule? Well then for that especially the younger male or female now you've given them a tool okay I'm not I'm just going to be in this this chaos you

know for another 510 years Okay, now I can make a decision I understand ideally I'd be able to do X y&z But I'm not in this work environment. So now here's the tool I can use in them in the interim.



1:09:50

Yeah, spot on, especially in those fields. There's no opportunity really to try anything else. So this is really is the only option. So obviously going to the right place is what's important. But the interview aspect of that, and the guidance, those questions are obviously going to be asked first, you know, and even more questions to, you know, for men, we're going to ask them about their fertility and their family planning where they want to do, because there's an element there, too, that's a risk. And, you know, they need to know and understand and have full informed consent on the impacts of things. Other things we can do, and medications we can use in tandem to protect, you know, fertility, and, you know, even in some cases, increase the potential fertility. We can do some things in that area, we can assist males. Now, so much of the female arena, but there's, you know, things that we have to ask, you know, it, it's beyond even just the diet, nutrition, and lifestyle, it's, like I said, Before, you realize that this is a medication, you're going to need to be on, essentially, for the rest of your life. Are you okay with that? Do you understand and know that by taking this, you're shutting down any ash production that you have, and this could affect your fertility, and it will affect your fertility. So as much of the benefits as it's going to have, and the situation they're in, they still need to know whose other potential effects that are going to happen regardless?



James Geering 1:11:18

Absolutely, I think that's what you know, most people would appreciate, it's just an informed decision, you know, now you have all the tools, because as you said, when you get atrophy of the testes, and MS, that's a one way street, then your your test is only going to get worse and worse and worse. But you know, you can plan Alright, well, I'm not going to do it for another six months, we're going to try and try and get pregnant. But sadly, I see a lot of infertility in my profession, for example, because of the shift work because of sleep deprivation. So again, you know, maybe they've been trying for five years, maybe as you said, this with a combination of something else might actually work this time. So it's it's but again, you give a family, all these tools, so they can make an informed decision. Now, you know, they've got all the information they need, versus as you said, walking into a clinic, being told to choose from the board. Yeah, that's 600 bucks. Pleased to see see you next week.



1:12:06

Exactly. And that's, that's the whole point, too. That's why we asked questions. So you do want to have children, okay, well, then I'm going to recommend to you, even though it's going to be, you know, a few \$100 More, and I understand that's expensive, but this is going to protect your fertility, you know, so we're recommending you take this along with this, or no, and understand the risk that maybe that's not an opportunity for you now, but you know, when you are able to, we should add this, you know, those kinds of things. And obviously, for you know, firefighters, first responders, veterans, that kind of thing, you know, we discount the bets. And when it comes down to, you know, those that were wounded or have other issues, you know, significant

issues and need real help. You know, that's where our charity transcend foundation comes in, you know, the FBI will see three, and we're able to, you know, essentially donate what we can in order to support those individuals to get through whatever they need to. And I know you mentioned TBI, and that's an important, important, you know, systemic issue, especially in the military, you know, we're, you know, a lot of stuff, guys, you know, just through even training and everything else they've done, you know, that that exposure to you know, detonations, you know, weekly, and those things are like a concussion every time and it's gonna add up, let alone anybody's been in an ad or any other type of traumatic event like a rollover, or, you know, God only knows. But we have some medications that are showing real promise and helping reverse to repair some of the damage is way too early to tell. And I will never say that it's a miracle drug, and it's gonna do anything. But there is a drug to hexa and it is a peptide, it's a oral medication. And it is initially created for Alzheimer's and dementia, but as to improve the cognitive functionality, it repairs, damaged brain cells, and essentially, you know, there's limitations to everything. So we can't say again, that it's gonna heal and fix anyone. But for those that had low to mild TBI issues that have come to us, and I've taken the medication long term, more than six months, close to a year, you know, they're we're starting to see that they're, they're seeing improvement in their, you know, their day to day life and quality of life. And at the end of the day, what we're trying to do is improve people's quality of life. You know, like I said, you can't reverse age, we can't cure disease, but you know, in a lot of the cases we can optimize health and we can reverse some of the symptoms that people are you know, are feeling so we focus on that.

J

James Geering 1:14:46

Well, I want to get to the foundation because it's a very evident altruistic you know, arm to not only your company but you yourself as a human being. But just before we do 2020 Obviously, this all happens when COVID When Because through the COVID pandemic, some interesting things that come out of that one of them that I've talked about in here before is integrating e med with 911. And allowing some of these patients to interact directly with an ER physician, which then negates the need for an ambulance if it's a lower acuity call, what impact did the the pandemic have on E medicine, when it comes to transcend and the ability for people all over the country to be able to access you as a company,



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they had a tremendous impact. And I think it's true, all of our growth be quite weak. Because we were giving people health care options in a manner where they could do it from their home, mostly, really, the only time you have to go outside of the home is to actually go to a LabCorp Quest Diagnostics facility that we are partnered with in order to get the blood drawn. But beyond that, it's done through zoom and phone call, and you know, the medications are shipped to the home directly. And they're self administered. That was a very attractive option for a lot of people. But even more so and, you know, I don't have an opinion on it one way or other, but a lot of people become skeptical with traditional medicine, especially with the shots, and the vaccines and all those other things. So they don't trust the medications, you know, traditional medicine as much as it used to in the past. And a lot of them are looking for other options, they're looking for an alternative. And we came in at the time we were we were talking about preventative health care. And, you know, in a way, we were trying to focus on education. And you know, the less is more approach, and you know, how to improve body life. And that's

what a lot of people are looking for, you know, they don't want to get sick, especially when, you know, they see people dying and things that are getting, you know, getting them sick, they want to improve their immunity, that kind of thing. So we were just there at the right time, and we're available or others weren't. Yeah, I think that had a massive impact.

J

James Geering 1:16:56

So talk to me about the foundation by met Brendan out on 7x, which was the incredible round the world, let's see if we can completely destroy human beings and rebuild them. project that we were on Ryan power, and again, that the genesis of that was his sniper partners suicide, David Metcalf. And so you know, we're we're making the book now we're making a documentary about this. And ultimately, not only is it going to raise some money for nonprofits, more importantly, it's going to share a lot of information on all the different holistic elements to a lot of the dark places that people find themselves. And the way to find yourself out through nutrition, exercise, mindfulness, and all these other areas. But you and I'll pull it out of the shadows, you were absolutely imperative in that going ahead, it was a very last minute thing. And you were extremely generous and made a massive donation to make sure that that 7x project went ahead. So talk to me about you know, the importance of altruism, your kind of social, but business model, and then let's talk about the foundation, as you touched on, you know, who you're trying to help through that.

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1:18:05

Well, talking about the the social aspects of the company, I mean, that's just the way we're able to get out to, you know, a larger mass of people that, you know, are listening to people they trust. And, and that was the attractiveness to it was to find a way to focus on education, and in an area that we knew people were suffering. And honestly, that was bodybuilding and fitness for people that were, you know, abusing medications to start. So I took the approach of if we're going to help people improve their quality of life, we need to first stop people from screwing it up. So, let's, let's start where the problem might begin in this area. And, you know, obviously, you know, my wife being a competitor and other things, it was just kind of a natural place to start. And that's just really where we grew up appeared from, but the military and everything around it, obviously, and all the tragedies and, you know, 22 day and mental health, all of it, you know, it's always, you know, in the back of my mind, it's always sitting there, it's, you know, it's just something I hate to hear about hate to see. So when I met Brandon, you know, and I had found out his story, and he's got his own story, a hell of a story. That's a one thing that really drove me quickly to wine to start the foundation, because I didn't want to go to have to go back overseas again. I really didn't. I saw a family man who really wanted to get something done and do some good. And I was right at that point in time where we could have started a foundation. So instead of going back, I wandered off from a job. And, you know, that's that's really how it started, you know, we were aligned like minded, had the very same outlook and how to approach these things. And, you know, it was kind of one of those things where I knew if I didn't, you know, do it now. If I did it even two weeks, you know, you'll probably be back contractor off to something. And I just didn't want to see that happen again. So we started. And, you know, he had known Ryan or were met him through all his connections, because he's he's got a massive network. But when I found out about seven acts, it took me about 10 seconds to say that we were that we were in. And I loved the idea of raising the awareness and what it was for what it represented, and why Ryan was doing it importantly. And

I like the fact that there's gonna be science behind it. And the idea would be to prevent things like this from happening in the future. Why, why wouldn't you help there? Why would you jump on that? You know, so for me, it was instant decision. And, you know, I felt very strongly about it. So when I found out that, you know, Ryan needed some help. Thank God, we were able to, and being able to, and knowing what I knew, but it was felt like a duty and a responsibility. And I just wanted to make sure that that went forward. And, you know, to me, personally, I felt like it was an important project, and the world would be a better place with that being completed. So

J

James Geering 1:21:13

yeah, well, again, for people listening, it was a very substantial amount of money, we won't put figures out there. But it was a extremely generous donation, that was really the difference between seven exco. And ahead or not. So I just want to add that. So talk to me about the foundation, then now now, you're you're basically almost done setting it up. You touched on it before, you know, how is it funded? And then who are you helping with that foundation specifically?

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1:21:39

So the plan to fund it is the same we we actually agree the company, we want to work with our social media partners, and our athletes and those sports military, I'd like to, you know, talk to a few more in the military community that have a platform where they're able to reach out to people. And, you know, again, bring awareness, but the, the idea behind the Transcend Foundation, mostly is to utilize your medications, and to make sure that we're able to help as many veterans and first responders, firefighters, law enforcement that we can. You know, in addition to that, we want to take the approach a little differently than, you know, others in the past, there's 1000s of charities out there that focus in one specific area, they do it really well. Problem is, people humans have multiple issues, and one affects the other. So one share you own isn't really going to, you know, cure the person and their ailments and everything they need. We want to develop a mesh network, we're partnered with other charities that are focused in areas that we can't touch on specifically, but can support each other. So transcend foundation originally was self funded through transcend company. And then we've had some private donors. And, you know, we were working towards getting into the electronic donation, you know, more small donor types of donation. So we're getting ready to launch that. But as we've been kind of building the process and building thing, and we've taken on, you know, a certain number of patients that the company can afford to, you know, essentially carry and take care of, we wanted to fund other partners, charities, as much as occur to keep those organizations going and doing the good and establish those relationships. So that's what we're doing up to this point. And I believe, since last September till now, we've donated almost a million, you know, through those efforts.

J

James Geering 1:23:33

Now, we kind of didn't get into all the positive side effects of testosterone replacement therapy, if that's the route that you know, is the right fit for you. So just talk to me about some of the success stories because I know in this conversation on this the screen me this podcast, some of

the conversations, it really like you said it wasn't the only thing but it was one of the tools that took people from some very dark places mentally back to feeling good. Again,

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the most important thing that transcend can do on the mental health side is going through and finding out where hormones are with that veteran, or that patient. So we can get imbalanced out again, therapies are amazing, but they're only effective if you're in the right space in the right mind. And if you're not able to be receptive to any sort of treatment, it's going to be hard for the treatments to take effect going through and like I said, getting the bloodwork finding out their levels and getting them back to a base number where they feel good again, it gives them hope. The first thing you can do to help somebody is give them hope. And that has a dramatic effect on you know, somebody's outlook and somebody's receptiveness to change, where especially they were feeling in a spot where they didn't have that before. So, you know, from us, the greatest thing we can do is provide that and then we have a lot of healing medications peptides, things like that, like I said with the cognitive ability hexa. BPC 157 You know, skin To help with, you know, damaged tissues, and you know, ligaments, tendons, that kind of thing, you combine a couple of those things together with testosterone. And you've really made a significant impact on somebody's life and quality of life. And now you are turning that patient over to one of your partner Charities is gonna go ahead and do the EMDR, or do the psychedelic type of treatments for mental health. And it works, it actually works. So, you know, that's, that's how we've been able to, you know, kind of approach things, we're kind of the start the triage, so to speak in the ER, and then we're handing it off to, wherever, from that point, they would need the most help.

 James Geering 1:25:43

Beautiful, I mean, it makes sense, you know, it's not just psychology, it's physiology as well. And if your hormones are completely crashed, then if you're not addressing that, it doesn't matter how much meditation you do, you're not going to be able to change your physiology,

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you're too tired to meditate. And, you know, at the end of the day, if you don't have that hope, if you don't have that physical energy, you don't feel like you can make a change. It's hard to mentally work through that. But I mean, when you talk about testosterone, you're improving your sleep, you know, you're improving their energy libido soon, just for the most things alone, you know, and hoping to regulate some of the mood swings, all of that right there that can impact not only that person's quality of life, but you know, married families of the whole family dynamic, you know, you've just improved everyone's quality of life, by helping that person, you know, improve their quality of life, you know, then if you had, like I said, some of the things that heal some of the injuries physically, you know, where they didn't think maybe they would be able to before, because these are medications that are not being used to the VA, or even traditional medicine, and they're helping, you know, inflammation is going down, pain is going away, mobility is coming back tissues are being repaired, cognitive functionality is being restored, you know, sleep cycles are resetting, you know, that's about as good as you get, at

least within our capabilities, and then adding in the mental health stability piece of that and getting to the right, you know, Team afterwards, you know, obviously continue to our troops out there. And, you know, it's I, I believe that's the only way to go,

J James Geering 1:27:16

ya know, like you said, I think hope is the exact word, you know, you're addressing all the things at the same time. He was a family, so to win Exactly, yeah. Because they're the ones that deal with us.

 1:27:27

Yeah, and that's a good term to they do deal with us.

J James Geering 1:27:30

So I want to be mindful of your time, I just wanna throw some quick closing questions at you. The first one is, is there a book or other books that you love to recommend? It can be related to our discussion today? Or completely unrelated?

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There's so many out there. Honestly, I wish I had just one that I could. But not at this point.

J James Geering 1:27:52

Yeah, no problem. What about films and documentaries?

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Ah, so it's a documentary. And it's one that kind of hit home for me. Restrepo, you know, talks about, you know, an actual Army medic, as a, you know, test you on infantry company, and, you know, their their time through, you know, an Afghanistan deployment. And you know, he's killed in the, you know, that in that deployment. But you can see the Brotherhood, you can see the camaraderie you understand, see what people are going through, but the mental anguish that the soldiers go through at that point in time, exactly. It really gets you front and center as to what they experience and what they come home with and what that way looks like. So that will be one I would recommend that you watch and, you know, understand that there'll be a heavy impact.

J James Geering 1:28:51

Sebastian, youngsters been on here, I think is three times now he's coming back on in a couple of

months. But speaking of books, have you read tribe that he wrote?

 1:29:00

I have it on my read list.

 James Geering 1:29:02

You gotta read it. Absolutely.

 1:29:04

Yeah, no, it's on my it's on my read list.

 James Geering 1:29:08

Yeah. Now I've been when you take that the observation from Restrepo. But then you add in, he goes into kind of tribalism in a positive way and some of the stories from the Native American communities, but then, you know, you've got that cohesion during combat. And then when it's the loss of tribe, when people are going to go home, that's when they see a lot of the unraveling. So it's a really interesting perspective, not only for the military, but first responders to

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Yeah, Brennan, you know, when we were talking about this, you know, I say mesh network, but the first thing he said was tribe, you know, to we're rebuilding a tribe. So, different approach to the term but, you know, definitely the same kind of mentality where, you know, we have to band together to get to the same kind of result.

 James Geering 1:29:53

Well, the next question, is there a person that you'd recommend to come on this podcast as a guest to speak to the first responder As military and associated professionals of the world

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I've met so many people in the last few years. Yeah, absolutely. Robert Wilkins. I would, I would, I would. Rob is just a man among men. And I mean that in the most heartfelt way I can possibly put is empathetic, compassionate, intelligent. And he's worked in multiple administrations on the President's Council for nutrition and fitness, to better the lives of, you know, soldiers, airmen, Marines in any way he can, you know, they look at everything from

what the military is doing to you know, how they're feeling, you name it. But he's a big proponent of things that we could do better. I think he would be amazing, in addition to the people we've interviewed,

 James Geering 1:30:53

beautiful, yeah, Brendan actually suggested him before and with the military side, and like you said, the wellness side combined, I think it'd be an amazing conversation. So a few guys are able to help we'll definitely make that happen.

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We absolutely will. He's on the board of directors for our foundation. So I'll be reaching out to enter.

 James Geering 1:31:12

Beautiful, thank you. All right. Well, then the last question before everyone knows where to find transcending yourself online. What do you do to decompress?

 1:31:23

I spend time with my kids and my wife, I do like to ride four wheelers around her property and just see my eight year old son, you know, try to figure it all out and just be there. I like to play video games, stupid as it sounds like guitar, you know, just the things that I did were younger, that just helped me take my mind off of things. But the most important thing is just taking that 10 second pause. And the Day when it's nice and quiet in the morning, before the day starts, you know, I just kind of sit out and grab my coffee. And Deborah, I've been blessed to have some property to look at that was calming. And, you know, I do that every day.

 James Geering 1:32:05

Total tangent? Right? Before we close out as a parent, now you lost a brother, when you were a very small child, how did that influence your parenting? And how were you able to, to not put steel apron strings on your own children, because of the fear of the tragedy you experienced as a child?

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Honestly, I probably put steel strings on to a certain extent to the as much as my wife is, you know, she she has a different upbringing and, you know, as a much softer touch. And, you know, I think after that, if it wasn't for her soft touch with me, I don't know that I would have ever been able to be where I am today. In fact, no, I wouldn't. But, you know, as time has gone on, and I've had a little time to be a dad, you know, have also realized that the world, you

know, is always going to be a dangerous place. And there's only so much you can do to protect your kids. But the best thing you can do to protect your kids is sometimes you gotta let them fail. Yeah, let him fall, if you gotta let them play, you got to let them do those things to learn the lessons, you know, to be safe. So, you know, I've kind of had to try to balance those things out and, you know, then build a moat. But

 James Geering 1:33:19

yeah, it's a hard thing. As a mother, people listening to this, you know, we see that at work, you know, we see the horrific accidents. And, you know, it does kind of play into your mind when you're with your own child. And is that kind of tug of war between being responsible and educating them on risks and everything, but also, as you said, allowing them to be their own child and not this puppet that you're taking through 18 years of their life.

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Yeah, absolutely. Yeah, I've like I said, I try to involve them. So you know, being able to spend time with them is great, but you know, can't be there all the time. So they have to be able to figure it out for themselves.

 James Geering 1:33:55

Absolutely. Well, I'm sure people are really wanting to listen, learn a lot more about transgender obviously, access it and maybe do a do an initial interview themselves, see what's what's available for them what might be a good fit. So firstly, where are the best places to find transcend online.

 1:34:11

So one of the easiest places to go is to our Instagram account, and that's a transcend HRT, you'll find us big blue T is the envelope that you'll see right there, there's a link to the intake document, the intake form only takes about 15 to 20 seconds to fill out. And usually the same day, sometimes within 10 minutes, but definitely within the same day. You'll have one of our wellness specialists, which is our patient advocate, and they're going to contact you back. If you don't have social media, you can find us at you know, transcend company.com. And you know, that's same thing very easy. You're going to find the link right under the webpage. And right there. You can look us up as well. And if you just want to talk to a human being you call the main line, tell them you're interested, and they'll transfer you over to wellness specialist and they'll fill everything with you on the phone. So whatever's most convenient and easy. Just for you know, we're easy to find

 James Geering 1:35:02

you. And then what about yourself individually any faces on social media?



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Instagram, that's just ew calling. That's, you know, first, first middle initial and last name. Wasn't that creative, you know, but if you want to follow it, you know, people have to have you



James Geering 1:35:19

Beautiful we're early, I want to say thank you so, so much. I mean, the conversation, the vulnerability, and we talked to him before we hit record, this is something that people especially men need to hear. I mean, I've had so many people that have been courageous in their service, whether it's first responders, military or other professions, but have been so courageously vulnerable as well, and talking about, you know, the struggles and some of the things that happened when they were younger, for example, I think it's important, but then what you've done with transcend bringing these products in a way that they're trustworthy and people can be educated and as you said, be told, okay, these are the pros. These are the cons, you know, and allow people to make an educated decision with a veteran owned company that I can put my hand on my heart and say is an altruistic social business as well. It's been an honor talking to you today. So thank you so much for coming on the show.



1:36:15

Thank you, James. It was an absolute pleasure. Appreciate