



MEDICAL MINUTE

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Serving the members of Tripler Army Medical Center and Pacific Regional Medical Command

July 2001

Tripler graduates 104 healthcare providers

TAMC Public Affairs Office

More than 100 healthcare providers completed another milestone in their careers June 15 as the interns, residents and fellows received their training certificates during Tripler Army Medical Center's annual graduation ceremony.

Of the 104 graduates, nearly half will remain at Tripler to further their education or become staff while the remaining graduates will leave for assignments or training in Korea, Europe and the Mainland.

Since Tripler's first class of three physicians completed training in 1949, nearly 4,000 healthcare providers have graduated from Tripler graduate medical education programs over the years and specialized in various fields to include Child Psychiatry, Orthopedics, General Surgery and Urology.

Lt. Gen. Edwin P. Smith, commanding general of the U.S. Army Pacific Command, spoke to the graduating class as a beneficiary of military healthcare for the past 55 years.

"When I think of military medical professionals, I think of four adjectives applicable to your unique calling: competence, candor, courage and commitment," Smith said. "They are four C's (that are) easy to remember and all associated with some risk that you need to acknowledge, and that you need to manage."

Smith said there is no profession that takes more competence.

"You folks and all your medical provider colleagues must stay on a steep, arduous learning curve from career start to finish to be competent," he said. "(There is) no slack here as you medical care professionals know full well."

See **GRADUATION**, page 6



Staff Sgt. Michelle J. Rowan

RETREAT

To celebrate the Army's 226th birthday, Tripler servicemembers, civilian employees and guests took part in a Retreat ceremony June 15 following the Intern, Resident and Fellow Graduation.

Tripler needs blood donors

Emmanuelle Basset
TAMC Public Affairs Office

Tripler Army Medical Center is in constant need of blood donors so the hospital can keep a sufficient supply of the vital substance available at all times.

Tripler needs to collect about 100 units of blood every week in order to support patients' needs. This usually means that around 125 potential blood donors need to be screened to find 100 eligible donors. On average, however, the Blood Bank collects only about 60 units a week. Any shortages in blood products must be brought in from the mainland, but many times there is none to be found.

Shortages in the blood supply are being experienced nationwide. TAMC is the only government agency in the state of Hawaii to collect blood for Department of Defense beneficiaries.

"Most people don't think about donating blood until they hear about an accident or know someone who is receiving

See **DONATE**, page 4

FEEDBACK

A place to voice your opinion
How do you plan to stay cool this summer?



Renea Marshall, 14, daughter of Staff Sgt. Walter Marshall — “I plan on playing basketball in the AMR gym and reading books in my air conditioned house.”

David Castillo, radiation therapist, Radiation Therapy Service — “I will be doing various triathlons and runs throughout the summer on the island and off. Maybe I’ll learn to surf too.”



Sgt. Rachel Z. Smith-Davis, supply NCO, TAMC Dental Clinic — “I plan on staying cool with plenty of ice-tea, sun screen and swimming in cool waters.”

Pfc. Alisha Fielding, dental information management officer, TAMC Dental Clinic — “I plan on staying inside when possible or in the shade when not.”



Spc. De'Andre Holloway, dental technician, TAMC Dental Clinic — “I plan on staying hydrated and getting lots of beach time.”

COMMENTARY

Medical care begins behind wheel

Don Devaney
TAMC Provost Marshal

It has been said that medical care does not begin at the end of a stethoscope, it begins in the parking lot. We at Tripler Army Medical Center believe that medical care really begins when you get behind the wheel of your auto.

Driving is stressful in itself and driving to the hospital adds to that already higher than normal stress. A primer on some basic safety procedures may do us all a lot of good.

First let’s talk about roads. Roads are all different! Each one requires a different attitude on the driver’s part.

Roads at Tripler, like country roads, are peaceful yet so full of danger if drivers don’t exercise caution. Tripler’s roads require constant vigilance because they are regularly used by ambulances, construction vehicles, police cars, residents’ vehicles, troops jogging at all hours, or recovering patients walking to or from the ball field, gym or parking lot.

Driving at Tripler, just like any other

community, demands patience, skill, steady nerves, good defensive driving habits and adherence to the 15-25 mph posted speed limits depending on where at Tripler you are.

Drivers must be ready at any time to yield the right-of-way. Pedestrian crosswalks are dangerous and no guarantee for personal safety — especially in the area of the Department of Veteran’s Affairs

Garage and crossing the street to Building 40. The VA

Garage has a pedestrian traffic light and well-defined crosswalk.

Building 40 has the problem of cars going too fast on Jarrett White Road, and there is no traffic light. Vehicles are

supposed to yield, but don’t bet on it happening. Caution is

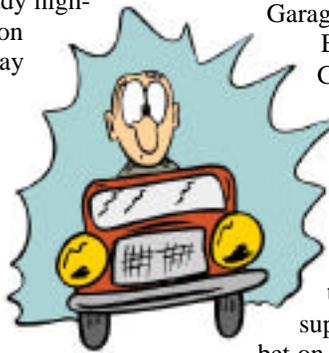
the byword for pedestrians everywhere.

And what about when you park your car? Never double park or park in front of hydrants, loading docks or any restricted area such as in front of the Emergency Room. All the “No Parking” areas are clearly marked or obvious.

Driving may look easy but if you are unfamiliar with the traffic patterns at the medical center, the situation becomes even more difficult. Many of the streets surrounding Tripler are one-way and are often filled with staff, patients, visitors, cars or emergency vehicles.

To be safe from accidents one must have knowledge of what’s happening around them, be considerate of others, obey traffic signs and rules, exercise self-control and sound judgment and always be alert.

Following these simple rules will make every road you drive on safer for everyone.



CSM’S HANDSHAKE OF CONCERN



July
“Environment of Care”

Medical Minute

<http://www.tamc.amedd.army.mil>

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“Lights, Camera, JCAHO ...”

Every staff member plays vital role in EOC goal

Environment of Care FMT

The goal of the Environment of Care (EOC) is to ensure a safe, functional, supportive, and effective environment for all patients, staff members and visitors in our facility.

Every staff member in TAMC plays a vital role in ensuring the EOC goal is achieved and with recent changes in the JCAHO survey process, surveyors will be spending more time in wards and clinics speaking with staff to assess our knowledge on the EOC. There will be no trick questions — the surveyors will focus on the knowledge that the staff member must have in ensuring the environment he or she is working in is safe and functional. Some examples of EOC focused skills and knowledge they will assess include knowledge on:

- * Medical equipment operation and operator maintenance;
- * Who maintains medical equipment and how you know your equipment was maintained;
- * Action you take if medical equipment malfunctions while being used on a patient;
- * Material Safety Data Sheets (MSDS)—their use and where are they located in your area;
- * The meaning of codes (Red, Blue, Purple/Green, Yellow, Black) and what your response should be;
- * Location of fire extinguishers and their use;
- * The meaning of R.A.C.E. and the decision authority for evacuating patients;
- * The process for evacuating patients and staff;
- * Procedures for getting a repair made to the facility;
- * Reporting of chemical spills and actions you should take;
- * The minimum distance between an obstruction and fire sprinkler head;
- * Location of compressed gas valves and who has authority to turn them on or off in your area; and
- * TAMC’s smoking policy.

Creating and maintaining a safe and functional environment requires vigilance and action. Keep on the look out for unsafe conditions or conditions where the facility or equipment is in disrepair. When you see it, and you will, take action to correct it or report it to those who are responsible for correcting it. Watch for instances of burned out light bulbs, whether in a ceiling fixture or an EXIT Light, serve similar purposes of protecting life and limb. Doors with self-closing devices are intended to contain the spread of a fire long enough for patients and staff to evacuate the area and shouldn’t be blocked or tied open. Keeping the hallway and stairwells clear of clutter enables patients and staff to evacuate the area in the event of an emergency. When you see a problem in your area take the time to call in a work request. That call just may save your life.

Fortunately, you are not alone in figuring out what to do. There is a team of staff members ready and able to assist you. The EOC functional management team encompasses seven management plan holders who work hard to serve you. They are: Stephen Switaj, Safety/Life Safety Management; Don Devaney,

Security Management; Claire Yee, Hazardous Materials and Waste Management; Rob Robinson, Emergency Preparedness; Chief Warrant Officer Raymond Sgrillo, Medical Equipment Management; and Myron Oh, Utilities Management. The holders of the EOC management plans are responsible for coaching, mentoring, and ensuring the staff is trained and meets the intent of the published EOC standards.

As part of our on going efforts to educate the staff about their role in the Environment of Care, the EOC is offering educational opportunities throughout the month of July. Topics include:

- * Executives and Supervisors Waste Management Course — July 16;
- * Waste Managers/Handler’s Course, July 17-18 and again on July 23-24.
- * Refresher Waste Management Course, July 19 and again on July 25. For more information on these courses, call Claire Yee at 433-6693.

JCAHO Staff Knowledge Training in the Kyser Auditorium is open to everyone at 10-11:30 a.m. July 18, noon to 1:30 p.m. July 19, 1-2:30 p.m. July 23, and 12:30-2 p.m. July 26.

For more information call Alan R. T. Kaopuiki at 433-5750 or e-mail alan.kaopuiki@haw.tamc.amedd.army.mil.

Take a few minutes to challenge your Environment of Care knowledge with the following JCAHO word search.



CODE BLACK	HAZMAT PLAN	UTILITY PLAN
CODE YELLOW	NO SMOKING	RACE
JCAHO	LIFE SAFETY	SAFETY
EQUIPMENT	MSDS	



TROOP COMMAND CHANGE OF COMMAND

During a change of command ceremony June 29, Col. Felipe Casso (right) turned Troop Command over to Col. Paul Wingo (left). Casso left Tripler for an assignment with the U.S. Total Army Personnel Command in Washington, D.C. Wingo joins the command after an assignment at Fort Gordon, Ga.

Staff Sgt. Michelle J. Rowan photo

DONATE: Giving blood saves lives

Continued from page 1

transfusions. But we need to be prepared before that accident occurs and must always have a blood supply ready for any contingency," said Maj. Joanne Daugirda, chief of Tripler's Transfusion Medicine Service. "Tripler receives patients from all over the Pacific Rim, many who are critically ill when they arrive and are in immediate need of blood products."

Donated blood is separated into three components — red blood cells, platelets and fresh frozen plasma. During the last six months, Tripler transfused 1,709 red blood cell units, 844 platelet units and 643 fresh frozen plasma units.

Red blood cells are commonly used during surgeries and traumas to replace blood lost and maintain oxygen-carrying capability. Platelets are often given to cancer and leukemia patients and to help stop bleeding, while plasma units are given to replace clotting factors.

The traditional whole blood donation is the most common donation method and can have a donor in and out of the donation center in about 45 minutes. After being collected, whole blood is then separated into the three components.

"That one donation could possibly help three different people," Daugirda said.

The most difficult product to maintain in inventory is the platelets. Platelets outdate five days after the blood is drawn.

However, there is another donation option that greatly helps with platelet needs.

The platelet apheresis program is critical in maintaining platelet inventory. Apheresis is a process that filters out a donor's platelets and cycles the remaining components back into the donor in a sterile, closed system.

"With this procedure, we can harvest more platelets without affecting the donor's circulatory system," Daugirda said. "One apheresis donation equals six to 12 times the platelets harvested from a regular blood donation."

Daugirda said the apheresis donation makes for a better product.

"A typical dose of platelets for a patient is about six units of platelets," she said. "That means in one dose, a patient would receive platelets from six different donors. Although we test for a multitude of infectious diseases, there's always the risk of exposing a patient to something. The fewer donors the patient is exposed to, the better."

While the procedure is better for the patients who receive the platelets, the time it takes to complete the apheresis procedure takes a bit longer, but it's well worth the time, Daugirda said.

Apheresis donors can expect to be occupied for two to three hours, however, a television, DVD player and personal headphones help donors pass the time watching a movie.

"The people who donate through apheresis are truly giving because that could take up half their day," she said.

To qualify to be an apheresis donor, the donor must have a sufficient amount of

platelets in his or her blood. This extra test is performed with a whole blood donation. Donors should indicate that they would like to be screened for the platelet apheresis program.

As an incentive, repeat donors can earn several small rewards and individuals who make it to the gallon level receive a gallon club T-shirt and a certificate of appreciation signed by the hospital Commander. In addition, up to the discretion of the donor's supervisor or commander, a donor can obtain compensation time for recovery.

"Giving blood saves lives; that's the best incentive we can have," said Sgt. 1st Class Rocky DeBose, NCOIC of Transfusion Medicine Service. "The soldiers and their family members as well as DoD civilians are the ones this program has been created for. The Hawaii Joint Blood Program is their program, and they should support it."

Whole blood donations can be given on a walk-in basis, but calling ahead and scheduling an appointment may provide quicker service. Platelet apheresis donations are by appointment only.

Tripler's Blood Donor Center is open Monday, Tuesday, Thursday and Friday from 8 a.m. to 3:30 p.m. and Wednesday from 8 a.m. to noon. Donors must be military ID card holders to include active duty servicemembers, their family members, retirees, and Department of Defense civilian employees. All donors must be at least 18 years old.

For more information or to schedule an appointment, call 433-6195.

HEP-C challenges staff to improve health

Staff Sgt. Michelle J. Rowan
Editor

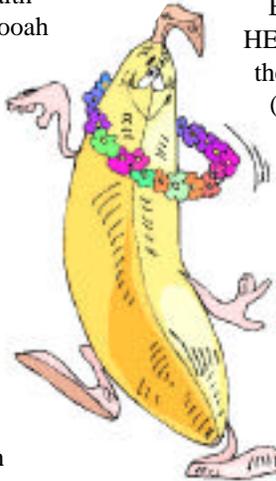
While most hospital programs focus on helping patients get well, a new program at Tripler Army Medical Center targets the health of a different group – staff.

Adapted from a Navy program by Tripler's Health Education and Promotion Center (HEP-C), the "Hooah for Health" program challenges groups of staff members to improve their health by monitoring three areas: exercise, water intake and fruit and vegetable consumption.

"This is wonderful opportunity to not only lose weight, but to also gain healthier habits for the rest of your life," said Hope Cooper Oliver, chief of the HEP-C.

To take part in the four-week program, teams comprised of four staff members are needed. Each team will choose a leader who will keep track of the team's points and progress. The next step is to weigh in and choose a target weight each would like to aim for. Over the next four weeks, the teams will compete against each other by earning points for completing three goals: exercise for 30 minutes, five days a week; drink recommended amount of water; and eat five or more servings of fruit and vegetables five days a week.

"Drinking water is very important," said Susan Howard of Community Health Nursing. She added that each person will have a different amount of water to drink based on his or her weight. To calculate how much water a person should drink per day, divide his or her weight by two. That is how much in



ounces someone needs to stay hydrated. "Most people walk around dehydrated. They feel fatigued and weak, but don't realize what's the matter," she said.

Howard also said many people misidentify hunger pains for what is really thirst.

"They eat when all they really need is water," she said.

Before offering the program to the rest of the hospital, HEP-C staff recently tested the program with teams from their center and other Department of Preventive Medicine (DPM) sections.

"We've done what we tell people to do, and can now relate better to our clients," said Oliver, who added that everyone in the trial lost their goal weight.

Rick Waffird, DPM information officer, lost seven pounds over the four weeks and said the program was a great idea.

"Drinking water was the most difficult part, and it's still difficult to continue," he said. "But it's caused me to want less sweet things. The fruits and vegetables really made an impact as well."

In addition to losing weight and improving their health, Oliver said the program also improves camaraderie between co-workers and sparks some rivalry.

"There's nothing wrong with a little healthy competition," she said, and added that it might be fun to have company versus company or ward against ward.

Although the HEP-C will give teams the necessary materials to get started, it is up to the team leader and other members to keep to the program and track their progress.

For more information about the "Hooah for Health" program or to get a team started, call Oliver at 433-2565.

Bicycle helmets reduce risk of head injuries

Capt. Thomas Sutton
Madigan Army Medical Center

Fun, freedom, adventure ...all these thoughts and more race through the mind of a child as he dreams about his first new bicycle. His excitement builds with each minute as he dreams about racing down the street, wind blowing against him, and laughing out loud. All this from a little piece of metal with two wheels and some pedals.

How can we be certain of our children's safety and still let them have fun? What can we do to let them enjoy this time to the fullest and protect them from harm? Fortunately, the answer is at your fingertips – bicycle helmets.

According to the National Safety Council, in 1991 there were 600,000 emer-

gency-department visits due to bicycle-related injuries. Eight hundred resulted in childhood deaths. Of these, head injury was the most common cause for the tragic deaths, accounting for 70-80 percent. One moment, these children were celebrating their freedom; the next, it was ripped from them – their childhood ended.

One simple item can reduce the risk of head or brain injury from bicycle accidents by 85 percent. One simple item can greatly decrease the risk of death.

That one simple item is a bicycle helmet – the protector of the innocent. Yet in some locations less than 40 percent of cyclists use bicycle helmets.

The American Academy of Pediatrics has given several recommendations about bicycle helmet use:

- * Establish the helmet habit early, as soon as the child starts to ride bikes, even as a passenger.
- * Wear a helmet yourself. Children learn by watching their parents.
- * Talk with your children about the importance of wearing a helmet and the need to protect their heads.
- * Reward your children for wearing helmets with praise or special treats.
- * Encourage your children's friends to wear helmets.
- * Abicycle helmet is the only kind of helmet a child should wear when biking.
- * When buying a bicycle helmet, look for the label that shows it has met the American National Standards Institute or the Snell Memorial Foundation standards for safety.

Graduation: Soldiers, civilians earn certificate

Continued from page 1

The second C, candor, is another important word to remember, Smith said.

“Your patients need to be as confident in your honesty as in your competency,” said Smith, who then went on to talk about courage.

“Courage, real courage, has no fixed or even probable location,” he said. “People trigger the need for courage, and the actions of those who react to this need either demonstrate courage or they don’t.”

The final C word, commitment, makes you qualified to serve in your business, Smith said. “No one else can do what we can, especially what you do.”

Commitment comes with its share of risk though, he continued. “In your commitment to others, you can easily abuse yourselves, and you can easily abuse your families,” Smith said. “Figure how to get and stay balanced in living your daily lives because the alternative is running out of steam too soon and failing in an unaffordable way.”

Before the graduation certificates were handed out, a few of the graduates were recognized for their achievements. Commander’s Awards were presented to Maj. John E. Glorioso as the Outstanding Clinician and Capt. Michael I. Cohen as the Outstanding Clinician in Training. Intern Awards were presented



Photos by Staff Sgt. Michelle J. Rowan

Capt. Stephanie Foster receives her training certificate from Maj. Gen. Nancy R. Adams during the ceremony.

to Capt. Troy M. Denunzio as the Outstanding Staff Teacher, Capt. Christopher J. Lettieri as the Outstanding Teaching Resident and Genevieve C. Boulay as the Outstanding Nurse.



Three graduates pose for a photo in front of the Tripler sign following the graduation ceremony.

Co-Op offers close, affordable child care

Staff can visit with children during work day

Emmanuelle Basset
TAMC Public Affairs Office

What would you think about seeing your kids during your breaks? It is difficult to do when the day-care facility is far away, but possible at Tripler Army Medical Center thanks to the Keiki Co-Op.

The Keiki Co-Op was created in March 1994 to offer Tripler's staff child-care at a reduced rate. In contrast to other care facilities, parents do not just drop their kids off early in the morning and pick them up in the evening. At the co-op, parents are required to help at the facility in return for the reduced rates. Parents and child-care providers sign a contract and work as a team.

Two types of contracts currently exist, depending on how much time parents are able and willing to spend at the Co-Op each month. They may choose to sign a four or six-hour contract. The executive board, exclusively composed of parents, is working on a third possibility, but more time granted to the facility, the lower the fee is.

Half the time spent at the Co-Op is aimed at relieving the providers, the other half consists of various tasks such as picking up the food, feeding the children, returning dishes and attending meetings. Out of the 12 meetings held every year, six are mandatory parents' meetings, the other six are executive board meetings open to any parent who wants to attend.

"The Keiki Co-Op is a very successful program. That we've reached the facility's maximum capacity and have a waiting list of several months proves it," said Anthony McBride, President of Keiki Co-Op.

Twenty-two children up to five-years-old are currently enrolled in the program. Five licensed and certified in-home providers take care of them. "Our providers chose to work at Tripler rather



Emmanuelle Basset

A Keiki Co-Op staff member completes some paperwork as some of the children enjoy a favorite television program.

than to open their own in-home child-care facility. They are dedicated to their job, working 10 hours a day, five days a week, and treating the children as their own," said McBride.

The Keiki Co-Op is open from 6:30 a.m. to 5 p.m. Monday through Friday. The facility consists of an infant room for up to 18 months old, and two multi-aged rooms. There is also a playroom outside where children can play when it is sunny, and another room with a TV set. The space, computer, phone system and electricity are provided by TAMC.

All the parents have full-time jobs; however, they manage to spend time with the kids. Only one or both parents can be involved with the Co-Op, at their convenience. Four parents are needed at the facility every day. They sign up and know what they have to do. Each task has a value. For instance, the breakfast or lunch pick up is worth 30 minutes, returning dishes is worth 15 minutes. Tripler's dining facility provides the food.

As McBride noticed, the Keiki Co-Op is beneficial both to children and

parents. First, it is a learning experience.

"Each week has a theme, and we schedule learning activities for the week according to the theme," McBride said. The children draw, paint, make objects. Mothers' Day and Fathers' Day are never forgotten. They also have the opportunity to go on field trips, usually for free or for a small fee. Another advantage of the Co-Op is that parents and children have the opportunity to spend time together. If one parent works at Tripler, he or she can stop by and see how the kids are doing. "The children get to know their friends' parents and the Co-Op acts as an extended family, which is even more valuable for military children here in Hawaii. Most often, grandparents, aunts and uncles, and cousins are on the Mainland. Children miss this kind of family relationships, but they can have them at the facility."

The Keiki Co-Op facility is a secure, fun, friendly, and educational place. If you have any question, please call 433-1770.

SETS agreement to aid mobile teens

Joe Burlas
Army News Service

Transferring between high schools among school districts surrounding or on nine Army installations may be getting a little easier — thanks to an Army-sponsored study of mobile Army teens.

Results of the Secondary Education Transition Study, which were released to the public today, led school officials who participated in the study to develop and implement a memorandum of agreement which lays out guiding principles for assisting transitioning military students. The MOA was signed last May.

Current participating school systems are: Muscogee County Public Schools by Fort Benning, Ga.; El Paso Independent School District by Fort Bliss, Texas; Cumberland County Public Schools by Fort Bragg, N.C.; Killeen Independent School District by Fort Hood, Texas; Clover Park School District No. 400 by Fort Lewis, Wash.; Lawton Public Schools by Fort Sill, Okla.; and Department of Defense school systems at Fort Campbell, Ky.; Baumholder, Germany; and Korea School District.

“The Army is committed to reducing turbulence in the lives of our soldiers and their family members and to doing the things that enhance their well-being and quality of life,” said Army Chief of Staff Gen. Eric K. Shinseki. “The agreement between these nine school systems will improve predictability and enhance the quality of life for our soldiers and our families. We want to ensure no military child is left behind.”

An Army education team began collecting anecdotal experiences of transiting Army students to help senior leaders better understand the effects of turbulence in 1997. Based upon the team’s findings, the Army partnered with the Military Child Education Coalition, a non-profit organization, in 1997 to conduct an intensive two-year qualitative research project into the challenges Army teens face in transiting from school to school and to provide recommendations to ease those challenges.

Specific SETS findings includes:

- * Military-connected students move

“The agreement between these nine school systems will improve predictability and enhance the quality of life for our soldiers and our families. We want to ensure no military child is left behind.”

— **Gen. Eric Shinseki**
Army Chief of Staff

from school system to school system about three times as often as other students.

- * Records transfer and interpretation systems are neither consistently efficient nor effective.

- * Variations in school calendars and class schedules add to the challenges of transition.

- * Problems with clear and timely information exchange, understanding/interpretation, coherent articulation of courses and credits, redundancy, and the lack of formalized reciprocity have compounded to produce frustrations for parents, schools and youth.

- * Vigorous and dynamic partnerships make a real and additive difference for both military and school organizations.

- * Professional development and adequate staffing are an on-going need to provide students the caring and sensitive adult educators they deserve.

- * Army installations, parents and school systems need to work together in effective partnerships to keep each other informed and ease students' transitions. Fixes to the majority of these problems are identified in the MOA. These include:

- * Allowing parents to hand carry student records from one school system to another.

- * Developing virtual orientation tours of schools for posting on school and installation web pages.

- * Posting current and accurate extracurricular activities on school and installation web pages.

- * Communicating high school requirements for enhanced or alternate diplomas, options and opportunities for earning graduation credit, information about required state testing and opportunities available to

senior students in transition to graduate from the sending high school through reciprocity.

- * Modeling what should be in a student portfolio.

- * Including senior-level military representation from the supported installation as an ex-officio member or adviser to the district school board/advisory council. SETS examined 39 high schools in nine school districts on or surrounding selected Army bases, according to the study’s executive summary. More than 420 military students who had transitioned at least once during high school and more than 230 educators participated in structure interviews to gather research data.

The MOA is likely to include many more school districts in the near future, according to Maj. Becky Porter, a special assistant to the chief of staff of the Army for education.

“The agreement has enormous potential for growth to hundreds of other school districts,” Porter said, “not only to those by Army and other military installations but to ones without a military connection, because the research it is based upon speaks in a language educators readily understand. Another reason it will grow is because it makes sense to society at large which has become increasing mobile over the past 20 to 30 years.”

One thing to note, the memorandum of agreement is not between the Army and the school districts; it is an agreement between the districts themselves, Porter pointed out. Other school districts may join the agreement on a voluntary basis, she added, as long as they join without requirements to change the basic MOA.

While the SETS agreement establishes a framework for the successful transfer of mobile youth, it does not guarantee it, said Dr. Mary M. Keller, MCEC executive director and the study’s primary researcher.

“Parents need to be intimately involved throughout the transition process from one school to another,” Keller said. “They need to be academic advocates for their children. Basically that means being the best guidance counselor their children can have, coming up with a well thought out plan and following through.”



Spc. Naomi Miller

Spc. Dassita Dixon tests a water sample at Tripler Army Medical Center's Environmental Health Water Laboratory.

Tripler's water lab passes inspection

Margaret Tippy
TAMC Public Affairs Officer

Water – it's such an important and irreplaceable substance, and military families have good news about the water that is available to them. When Tripler Army Medical Center's Environmental Health Water Laboratory was inspected by Mike Kihara of the State Department of Health May 24, he found the least number of deficiencies he has seen at a lab in 15 years.

The lab was re-certified with the smallest number of deficiencies –one minor one – during a six-hour inspection that included observing the staff perform microbiological analysis of drinking water, reviewing paperwork and documented equipment calibrations. The inspector also reviewed the Quality Assurance Program finding only one deviation out of approximately 200 quality control items.

The inspection means that the water analyzed meets not only the standards of the Hawaii Department of Health but also the U.S. Environmental Protection Agency.

"I am very proud of our staff," said Lt. Col. William E. Oliver, Tripler Army Medical Center's Preventive Medicine Laboratory director. "The credit for this achievement goes mainly to 1st Lt. Jacqueline R. Smalls, Laboratory supervisor, Sgt. Steven K.

O'Neill, primary water analyst, Spc. Naomi Miller, water analyst, and Spc. Dassita Dixon, water analyst. I'm listed as the lab director but they do all the work."

Sgt. Marcus Williams, alternate supervisor, and Sgt. William Coello-Sanchez, water analyst, are also a part of the team, Oliver said.

"We are proud to conduct surveillance on all Army regulated water systems on the island of Oahu to include Schofield Barracks, Helemano Military Reservation, Tripler Army Medical Center, Fort Shafter and Aliamanu Military Reservation. We also inspect PTA on the Big Island," Smalls said. "The soldiers in the lab work hard collecting over 70 water samples a month and analyzing over 1,000 a year. We also do analysis for fluoride in the water to ensure the levels are maintained properly as well as bacteriological analysis of water at all Army swimming pools."

"The drinking water surveillance program is a very important part of our job," Oliver said, "but we also inspect all food service facilities at Army installations in Hawaii. In addition, in our section we have Claire Yee, our environmental protection specialist, and her environmental protection people who ensure we meet at the local, state and federal environmental regulations. We're a small section but have a very important mission when it comes to public health."

Tripler lieutenant wins medals

Emmanuelle Basset

TAMC Public Affairs Office

1st Lt. James Halstead surprised himself on June 16. For his first participation in the Aloha State Games, Halstead, the assistant operations officer for the Pacific Regional Medical Command, won four gold medals and a silver medal in swimming events.

Competing in the 30-34 year-old age category, Halstead placed in the following events:

1st place — 50 Long Course Meter Breaststroke

1st place — 100 LC Meter Breaststroke

1st place — 50 LC Meter Freestyle

1st place — 100 LC Meter Freestyle

2nd place — 50 LC Meter Backstroke

Halstead used to compete in high school, but stopped at age 18 and has not trained for the past 16 years. However, when he saw the ad in the newspaper, he decided to sign up.

About 350 people, in different age categories, participated in the competition that took place in Kailua.



Emmanuelle Basset

1st Lt. James Halstead took away four medals in swimming events from the Aloha State Games.

THE WINNER'S CIRCLE

Re-enlistments

Sgt. Amberly Betsill

Sgt. Harry Cleveland Jr.

Spc. Mary Deugaw

Sgt. 1st Class Charles Paige

Sgt. Deila Lee

Spc. Laura Miller

Sgt. 1st Class Monique Washington

Spc. Stephanie McCleod

Sgt. Jerome Thinner

Sgt. Mark Dearlove

Promotions

Maj. Nathan Hoeldtke

Awards

Lt. Col. Scott Arnold, Meritorious Service Medal

Maj. Jan Dunn, MSM

Sgt. 1st Class Philip Sloss, MSM

Sgt. 1st Class David Dissinger, MSM

Mary MacMillan, Commander's Award for Civilian Service

Calvin Devera, 30-year service pin

Robert Morris, 30-year service pin

Darlene Hansen, 25-year service pin

Joe Sullivan, 25-year service pin

Wendy Tsurumaki, 20-year service pin

Bellaflor Ramirez, 20-year service pin

Gail Kaminaka, 20-year service pin

Nunilon Delrosia, 20-year service pin

Raelene Combs, 20-year service pin

Eric Cassera, 20-year service pin

Alicia Bulosan, 20-year service pin

Frank Bednar, 20-year service pin

Nanette Trent, 10-year service pin

Eduardo Sabada, 10-year service pin

Hsiu Lan McGue, 10-year service pin

Edwynn Johnson, 10-year service pin

June Higuchi, 10-year service pin

Brenda Edmonds, 10-year service pin

Jamie DeLeon, 10-year service pin

Red Cross Service Awards

Christina Johnson, Adult volunteer with most hours for May

Emmanuelle Basset, Young adult volunteer with most hours for May

Elizabeth French, Teen volunteer with the

most hours for May

RE-UP REPORT



PRMC Retention Office

Check out the new selective reenlistment bonus (SRB) list and In and Out Call list at www.stayarmy.com.

Bonuses are currently listed for the following MOSs: 91B/Wwith P3 or Y6 designators, 91C, 91D, 91K, 91P, 91Q, 91S, 91V, 91X among others. To see if you're eligible, check out www.stayarmy.com or contact your unit retention NCO. The PRMC/TAMC Retention Office is located in G1A202 and is open Monday thru Friday 8:30 to 11:30 a.m. and 1 to 4 p.m.

Unit Retention NCOs

PRMC — Master Sgt. Michael Thompson, 433-9136.

TAMC — Sgt. 1st Class Elva Sanborn, 433-1451

A Co. — Staff Sgt. Michelle Rowan, 433-5785

B Co. — Staff Sgt. Arnie Cobos, 433-1743/
Staff Sgt. Darryl Suarez, 433-5232

C Co. — Sgt. Trent Roberson, 433-8032

DENTAC — Staff Sgt. Michael Ball, 433-5303

VETCOM — Sgt. Perla-Michelle Hughes, 671-0843

Tripler remembers former staff member, friend

Lt. Col. (Dr.) Charles Callahan
Department of Pediatrics chief

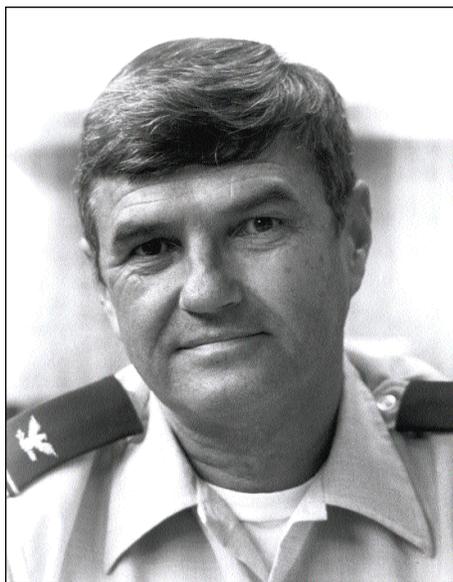
Ralph Waldo Emerson said that an institution is, "The lengthening shadow of a man." Tripler Army Medical Center is in many ways, the shadow of Retired Col. (Dr.) James W. Bass. Dr. Jim Bass, "the Chief," a longtime resident of Honolulu, died peacefully in the early morning hours of Tuesday, June 12, 2001 after a long illness.

He was a physician, soldier and scholar, as well as a world-renowned expert in pediatrics and pediatric infectious diseases. Dr. Bass served the military and civilian community of Hawaii for more than 30 years. He is survived by his wife Bev, daughters, Paulet M. Wingers, of Grand Junction, Colo., and Brian C. Ho of Haleiwa, Hawaii, son-in-law, Michael Ho and brother, Jerry.

James Willis Bass was born May 25, 1930 in Shreveport, La. Jim and Bev (Mary Beverley Smith) were married in 1951 while he was a premedical student at Centenary College in Shreveport. He graduated from Louisiana State University School of Medicine in New Orleans in 1957. He was commissioned in the Army the previous year, in the Senior Student's Program. He served a rotating internship and pediatric residency at Brooke Army Medical Center in Texas (1957-1960).

After his training in pediatrics, he was staff pediatrician at the Medical Research Unit of the Walter Reed Army Institute of Research at Fort Detrick, Maryland (1960-1963). He was then assigned as assistant chief, Department of Pediatrics and director of Intern and Resident Training, Madigan Army Medical Center in Tacoma, Wash. (1963-1966). From 1966-1968 he served in NIH sponsored Fellowship in Pediatric Infectious Diseases at Tulane University School of Medicine and was granted a Masters in Public Health degree from Tulane University School of Public Health and Tropical Medicine in 1968.

He was first assigned to Hawaii as assistant chief, Department of Pediatrics (1968-1969) and then Chief, Department of Pediatrics, Tripler Army Medical Center (1969-1975). In 1975, Dr. Bass departed for the mainland to serve what he considered his "overseas" or "hardship" tour.



Retired Col. (Dr.) James W. Bass
May 25, 1930 - June 12, 2001

From 1975 to 1981 Dr. Bass was chief, Department of Pediatrics, Walter Reed Army Medical Center in Washington, D.C. He also served as Consultant in Pediatrics to the Surgeon General of the U.S. Army, and he was the Founding Chairman and Professor, Department of Pediatrics, Uniformed Services University of the Health Sciences, Bethesda (1976-1981).

In 1981, Dr. Bass returned home to Honolulu where he served as chief, Department of Pediatrics at Tripler Army Medical Center from 1981-1994. Since 1994, he has been the Senior Medical Consultant to Pediatrics at Tripler. And within a few short months of his death, he was still seeing children in the pediatric clinic at Tripler. Dr. Bass held professorships at a number of medical schools throughout the United States. He was a Professor of Pediatrics at the Uniformed Services University of the Health Sciences in Bethesda, Md., as well as the John Burns School of Medicine, University of Hawaii at Manoa. Dr. Bass was a consultant to a number of important national programs, committees, and commissions. He served on the prestigious committee on Infectious Diseases with the American Academy of Pediatrics; the Editorial Board of the medical journal, Pediatrics Infectious Disease and the Executive Committee, Hawaii Chapter of the American Academy of Pediatrics.

Dr. Bass left a significant mark on the

field of infectious diseases of childhood. He was the first to demonstrate the usefulness of erythromycin in the treatment of pertussis ("whooping cough"). He also demonstrated that strep throat could be treated with penicillin twice a day, instead of four times a day. He showed that the cat-scratch disease organism was commonly found in kittens in Hawaii and proved the usefulness of the antibiotic, clarithromycin for the treatment of cat-scratch disease. He also developed the protocol used nation-wide for the treatment of infants with fever and suspected infection.

Bass was a highly sought after lecturer and visiting professor worldwide. He presented countless lectures and conferences around the globe. He was awarded the "A" prefix by the Surgeon General of the Army in 1971 in recognition of academic excellence, and was the 1990 recipient of the "Lewis Aspey Malogne Award for Academic Excellence" from the Surgeon General of the Army. In 1992 he was awarded the "Outstanding Service Award" from the Section on Uniformed Services of the American Academy of Pediatrics. In 1999, he received the very first, "Burtis Burr Breese Award" for outstanding research, teaching and practice in pediatric infectious diseases. And he received the Pediatric Infectious Diseases Society Distinguished Physician Award in 2000.

In his three decades at Tripler, Dr. Bass trained 22 fellows in Pediatric Infectious Diseases, 146 pediatricians (73% of all the pediatricians who ever trained at Tripler) and countless students, nurses and other health professionals, both military and civilian. He was author or co-author of more than 200 abstracts, book chapters, clinical articles and scientific papers. Many of the physicians he trained serve currently nationwide, as leaders in pediatrics and medicine. He will be missed by his family, students and friends.

An inurnment ceremony will be held at 10:30 a.m. July 17 at Punchbowl Memorial Cemetery of the Pacific. In lieu of flowers, donations can be made to the family at 469 Ena Road, Apt # 1901, Honolulu Hawaii 96815. It is Mrs. Bass' hope that she will be able to establish a memorial scholarship for a deserving student in Dr. Bass' name.

For more information, contact Tripler's Department of Pediatrics at 433-6407.

NEWS BRIEFS

Red Cross needs volunteers —

Interested in gaining new administrative job skills and experiencing job satisfaction? Tripler Army Medical Center is looking for American Red Cross volunteers to assist in office work and support military healthcare beneficiaries. Full or part-time applicants are welcome.

Tripler's Red Cross Station may be reached at 433-6631. Office hours are weekdays 9 a.m. to 1 p.m., and her office is in Room 1B109, first floor Oceanside across the hallway from the Dining Facility.

Separating soldiers should file disability claims early —

Servicemembers who incurred an injury, sickness or disease as a result of military service must file a disability claim between 60 to 120 days prior to their separation date in order to expedite delivery of compensation benefits.

To file a claim, servicemembers must complete the following:

- * Submit a complete application (VA Form 21-526);
- * Attach a complete copy of medical records;
- * Be on Oahu and available for any necessary VA medical exam for at least 60 days prior to departing Hawaii;
- * Must attach orders and other proof of date of separation;
- * Send VA a copy of DD 214, Report of Separation, and keep VA apprised of current address.

For more information, call 433-1000 or (800) 827-1000.

Fort Shafter Vet Clinic to hold Saturday clinic —

The Fort Shafter Veterinary Treatment Facility will hold a vaccine and microchip clinic Saturday, July 21 from 8 a.m. to 1 p.m.

Pet owners may call 433-2271 to set up an appointment. Walk-ins are also welcome, but will be seen on a first come, first serve basis. Sick calls will not be seen on this day.

The following is a price list of the services, which will be provided during the Saturday clinic:

Dog/cat annual booster - \$10



Staff Sgt. Michelle J. Rowan

LONG DISTANCE LEARNING

During the virtual ribbon-cutting ceremony via teleconference for Project Thailand-Hawaii (THAI-HI), Col. Benjamin Berg (upper left) introduces Tripler staff to their Thai counterparts who are projected on the screen. Project THAI-HI allows medical staff, residents and students from both Thailand and Tripler to engage in community and soldier-based clinical rounds together. The project is supported by a grant from the Pacific e-Health Innovation Center.

- Rabies booster - \$5
- Heartworm test - \$15
- Fecal exam - \$5
- Microchip - \$20
- Nail trim - \$10

Customers will also be charged a \$2 Department of Defense users fee. It is recommended that pet owners bring their pet's prior medical records if possible.

The clinic is open to military ID card-holders to include active duty servicemembers, family members, retirees and Reservists/ National Guard personnel on active orders.

For more information on the clinic, call 433-2271.

Tripler schedules Organizational Day — Tripler Army Medical Center will conduct its annual Organizational Day

Aug. 3 from 12:30-3:30 p.m. at the TAMC ball field. The O-Day is open to all Tripler military and civilian employees, their families as well as Veterans Administration employees and family members.

The day's festivities will include a musical performance by the Ka'ala Boys, an air assault demonstration, static displays and games.

Diamond Head Theatre presents production of Cinderella — The Diamond Head Theatre will present Rodgers and Hammerstein's Cinderella July 6-22.

The show, a musical based on the popular fairy tale, is filled with wonderful tunes and colorful characters.

For more information or for discounted tickets, call J. Flores at 836-8786.