



# TRICARE Online improves health data access

## TRICARE Management Activity

New TRICARE Online features give users access to expanded personal health data, including lab results, patient history and diagnoses, and provider visits.

The military health plan's new online features expand the website's "Blue Button" capability, which already allowed beneficiaries to safely and securely access and print or save their demographic information, allergy and medication profiles, officials said.

The level of data available depends on where treatment occurs, officials said, with the most data available to those who regularly get care at military hospitals and clinics.

"These new capabilities are a major step forward in engaging military health system patients as partners in their own health care," said Navy Rear Adm. (Dr.) Christine Hunter, TRICARE Management Activity deputy director. "Personal electronic health records can also improve care by conveying accurate patient information between providers, avoiding duplication of tests and reducing delays in treatment."

The Blue Button was fielded by TRICARE and was made generally available by other federal health care

providers last year. With more than 250,000 users, officials said, it is the result of a close inter-agency partnership among the Defense and Veterans Affairs, or VA, departments and the Centers for Medicare and Medicaid Services.

"The Blue Button efforts are just another example of how DoD and VA are working together to shape the future of health care [information technology] collaboration, interoperability and transparency for the patients and families we serve," said Dr. George Peach Taylor Jr., acting principal deputy assistant secretary of defense for health affairs. "We could not have accomplished this without the continuing strong collaboration between DoD and the VA."

TRICARE Online is the Military Health System's Internet point of entry, giving the health plan's 9.6 million beneficiaries access to available health care services and information through a secure portal. Users who receive their care at a military treatment facility can schedule appointments, order prescription refills and view their personal health data. Other users with active prescriptions at a military pharmacy also can request a refill for those prescriptions.

## Ward Road Repair

Ward Road, which goes across the front of TAMC, will have major damaged areas repaved and repaired over the upcoming holiday weekend. There will not be access to Ward Road and the BUS will be rerouted to pick up at the Mountainside entrance bus stop. Work will begin on Friday and be completed by the end of the weekend.





# SERGEANT AUDIE MURPHY CLUB

Are collecting Worn-Out **Shoes** for the **HERSHEY'S** Track & Field Games

**When:** 20 April 11 – 25 June 11

**Where:** Drop off to any **SAMC Member** or

Call 1SG Looper @ 433-1170 or SFC Trudden @ 433-1649

## SAMC MEMBERS

SGM Johnson, Leon – G3 18TH MEDCOM	MSG(P) Taylor, Amanda -18TH MEDCOM
2LT Franklin, Brandi - Troop Command	2LT Wiggins, Antonio - Troop Command
1SG Looper, Natasha - Delta Company	1SG Perez, Kim -Alpha Company WTB
MSG Day, Isaac – Product Line DOHET	MSG Johnson, Michael –Product Line Surgery
SFC English, Joe - NCOIC Logistics	SFC Henard, Willie - NCOIC DENTAC
SFC Martinez, Christine -18TH MEDCOM	SFC Navarro, Jaime - NCOIC Preventive Medicine
SFC Trudden, Erin - NCOIC Lab	SSG Schmidt-Velez, Niretty – NCOIC CMS

**Athletic Shoes ONLY > Any brand OK**

## Tripler Army Medical Center

### Strong Bonds Training

### Married Couples

**When: June 10-12, 2011**

**Where: Hale Koa Hotel**

**Waikiki Beach**

### What is included?

- **Relationship Training and Materials**
- **Hotel Stay for 2 Nights**
- **Continental Breakfast for 2 mornings**
- **Lunch and Dinner will be provided**

POC: SGT Shenea Andrews  
808-433-2933

Do you have something exciting going on in your department? Would you like to get your story out? Special event go untold in the Schofield and TAMC areas that other may find news worthy. So, if you have something to say contact Jan Clark at 808-433-2809



# E Komo Mai



Survivor Outreach Services (SOS) and Operation Military Kids (OMK) cordially invite you to the 2011 SOS/OMK Family Camp. Our camp is for Families with children and teens (infants-age 19) who have lost a parent through Active Duty military service. It provides the opportunity for Families to participate in activities that rejuvenate the mind, body, and spirit in a relaxing, fun, and supportive environment. The camp will also provide Families the opportunity to meet other children and teens who have lost a parent through military service.



*Dates:*

*July 15-17, 2011*

*Location:*

*Camp Erdman Wailua, HI*

*Cost:* Free

*\*We kindly ask that one parent/caregiver per family attend the camp.*

For more information or to RSVP please contact,  
Jenny Koranyi, SOS Coordinator, at 808.438.9285 or  
[Jennifer.Koranyi@us.army.mil](mailto:Jennifer.Koranyi@us.army.mil)

Please RSVP by June 10, 2011



FOR MORE INFORMATION ON OPERATION  
MILITARY KIDS, PLEASE CALL 956-4125, OR EMAIL:  
[omk@ctahr.hawaii.edu](mailto:omk@ctahr.hawaii.edu)



# Public Health Nursing Evening Clinic Pilot Program



**JUNE 22 & 29  
JULY 20 & 27**

**Clinic will remain open until 2100.  
Patients will be seen by appointment only**

**Patients must complete Part I of PHA Assessment (via AKO)  
prior to coming to their appointment.**

**POC: SGT Allison Lindsay  
NCOIC Army Public Health Nursing  
433-1464**

**PURPOSE:** To better accommodate soldiers working "swing" shift and night shift hours, as well as those who cannot leave their place of duty during the day to come to their appointment.

## Interested in furthering your professional education?

Army Nurse Corps officers interested in furthering their professional education may apply for selection to attend Long Term Health Education and Training (LTHET) graduate programs.

If selected by the LTHET Board and qualified academically for admission, officers will be given the opportunity to be fully funded to attend graduate school

as full-time students.

All officers attending LTHET will receive all pay and benefits while in school, regardless of the program.

LTHET INFORMATIONAL SESSION WILL BE HELD June 16 at 8 am in room 5a026, OB/GYN Conference Room, 5th Floor, A Wing.

### **Mass School Physicals 2011**

**The Department of Pediatrics will be  
conducting school physicals as  
follows:**

**-Date: Saturdays on June 18<sup>th</sup>,  
July 16<sup>th</sup>, and  
August 6<sup>th</sup>**

**- Walk-in basis only**

**-Time: 0900-1400**

**-Location: Pediatrics  
Clinic (808-433-0000)**



## **Feds Feed Families 2011 Campaign**



**Feeding the  
Community**

**YOUR HELP IS NEEDED NOW MORE THAN EVER**

**When: June 1<sup>st</sup>, 2011 to August 31<sup>st</sup>, 2011**

**Where: All Hawaii Federal Agencies**

**What: Food Drive to collect food for the**

**Hawaii Food Bank, Oahu**

**Maui Food Bank**

**Kauai Food Bank**

**The Food Basket, Hawaii**



# Warrior Clinic reduces pain medication use

Joshua L. Wick

Walter Reed AMC Public Affairs

The pain management program offered in the Warrior Clinic at Walter Reed Army Medical Center has drastically reduced the number of Wounded Warriors receiving prescribed pain medication.

In 2008, roughly 83 percent of the Wounded Warriors assigned to Walter Reed's Warrior Transition Brigade were using prescribed narcotics. With the end of the first quarter of fiscal year 2011, that number had been reduced to 10.2 percent, according to officials.

With nearly 1,470 Wounded Warriors seen quarterly, the Warrior Clinic is taking a unique and steady approach to treating and educating Soldiers with pain.

Being the "Home of Warrior Care" has allowed Walter Reed Army Medical Center, or WRAMC, and the Warrior Clinic to establish many U.S. Army standards and even best practices for the care of Wounded Warriors throughout the military services.

"When they [Soldiers] get injured on the battlefield, and they come here as inpatients, we set them up to treat their pain," said Lt. Col. Sandra McNaughton, officer-in-charge, Warrior Clinic, WRAMC, Warrior Transition Brigade.

Often that requires heavy medication due to the nature and severity of their injuries. That medication can cause dependency and other adverse effects. Medically speaking, it's called "iatrogenic," which is describes as an illness or reaction caused by treatment from the medical profession and/or system.

"We would be practicing malpractice if we gave them a few Motrin or Tylenol to relieve their pain," said Col. Lisa Black, brigade surgeon, WRAMC, WTB. "So we looked to see how we could minimize risk and reduce the drug cocktails in Soldiers."

McNaughton and Black added that the Warrior Clinic and its primary care managers, supporting nurse case managers, social workers and pain management specialist understand as part of a Wounded Warrior's comprehensive treatment plan, they have a duty to help the Soldiers and transition them off pain medication.

With the support and direction of Navy Cmdr. Ne-cia Williams, integrated anesthesia chief for National Naval Medical Center and Walter Reed, McNaughton and the Warrior Clinic staff initiated and incorporate a pain management program into the Warrior Clinic.

Pain is a continuum from acute to chronic pain. The challenge the Warrior Clinic faces is treating pain in the acute phase in the effort to prevent it from developing into chronic pain, according to Dr. Christopher Spevak, anesthesiologist and pain physician, Warrior Clinic, WRAMC. What's unique is the way this team treats pain.

Concerning pain management, the Army Medical Command and the Warrior Clinic have adopted an integrated interdisciplinary approach to the treatment of combat related injuries. They're looking at the whole person.

"It's a holistic, interdisciplinary, and multi-modal approach. Pain management is not simply giving opioids," Spevak said. Opioids are medications that fall within a class-referred to as prescription narcotics, which includes Morphine, Codeine, Oxycodone, and related drugs.

According to Spevak, in the last couple of years research has shown that if you initially treat pain effectively you can prevent the rewiring of the brain and prevent chronic pain. Treating acute pain as close to the time of injury, with the appropriate medication is just one part of this multidisciplinary approach.

However, medications play an important role in the healing of these Soldiers.

"There are many ways to treat pain initially; opioids are part of the whole pie. We have regional techniques and we have gone forward right into the battlefield and placed regional catheters to infuse local anesthetics to numb the area," Spevak explained.

Using this concept, these specialists are battling a generational perception that's not just an issue in the military but across the board of, "take a pill."

The Warrior Clinic has devoted a significant amount of resources into looking at the alternative methods for managing and minimizing pain, from establishing complementary and alternative training sessions, offered every Monday, in Bldg. 2, Heaton Pavilion, in the Radiology Conference Rm. 1X37, to developing a whole curriculum of modalities that can help Soldiers with pain other than with medications.

This dynamic and holistic approach to addressing and treating pain uses a wide variety of resources that look at the mind, body, and cognitive behaviors of the Soldier as well as incorporating and educating the Soldiers families into the treatment and overall man-

agement of pain.

“We are very active in using acupuncture. That’s a very big component of my practice, chiropractic modalities, through behavioral health we have specialized people that help with bio-feedback and even hypnosis,” Spevak said.

Accountability of the organization and of the Soldiers is key to this success.

“We have an incredibly perceptive and bright [Wounded Warrior] population here in the Warrior Clinic,” Spevak said.

However, it’s not a perfect world, he explained, and this led to the development of the U.S. Army’s Risk Mitigation Policy for the care of Wounded Warriors by the WRAMC WTB.

Key elements of the policy include appropriate tracking and monitoring of Soldiers and their medications, controlling quantities, prescribing the right medication at the right time and other aspects. Clinic staff also monitor the behavioral health of Soldiers and can identify “at risk” Soldiers, even those that have gone to the emergency room between visits to the clinic.

If necessary, they can ensure individuals enroll in the Army Substance Abuse Program and monitor Soldiers through random urine drug screens within the companies. Healthcare providers and WTB cadre are constantly reevaluating the Soldier to ensure there is continuity of care.

“The beauty of this program here that Lieutenant Colonel McNaughton has assembled is that it’s within the footprint of the Warrior Clinic,” Black said.

“It’s nice because it’s a one-stop-shop. We have the pharmacy. We have Electronic Medical Management Assist Pharmacist. We have trauma, and we have our pain management. Our nurses, primary care providers, and we’re all one with the same focus, the warrior,” McNaughton said.

This proximity allows for the providers at all levels to work and train together, creating a higher level of awareness.

Spevak, a civilian doctor and associate professor of anesthesiology from Georgetown University Medical Center, in Washington D.C., was recruited because of his specialization in anesthesia/pain management and has been instrumental in the collaboration with PCMs. They strategically placed him so that he can have direct access between the providers at all times and they can have direct access to him.

“They [PCMs] have learned a lot about how to manage these warriors and the pain treatment plan that is involved, and he [Spevak] has branched to inpatient as well,” McNaughton said.

Black attributes their success to the closeness of the team and their focus. They’re all looking out for each other and their patients, “because the warriors are our family too,” she added.

Sharing their effort and best practices is also part of their success. The clinic frequently gets requests from across the pain management field to share and talk about their progress and they have even started to extend and integrate with the Department of Veteran Affairs and with civilian providers.

Last month, Lt. Gen. Eric B. Schoomaker, Army surgeon general and commanding general of the U.S. Army Medical Command; Brig. Gen. Richard W. Thomas, assistant surgeon general for force protection; Col. Kevin Galloway, chief of staff for the Army’s Pain Management Task Force; and Col. Chester C. Buckenmaier, chief, Army Regional Anesthesia & Pain Management Initiative, Walter Reed Army Medical Center were honored with awards March 26, 2011, during the 27th annual meeting of the American Academy of Pain Medicine.

The Academy Presidential Commendations were presented for efforts toward improving comprehensive pain management through the U.S. Army’s Pain Management Task Force - efforts that have ranged from better use of anesthesia to non-pharmacological treatments such as acupuncture, chiropractic therapy, yoga and biofeedback.

According to its charter, the Army Pain Management Task Force was established in August 2009 to make recommendations for a MEDCOM comprehensive pain management strategy to approach pain management holistically. The task force’s multidisciplinary and multimodal approach aims to provide optimal and effective care of pain, while ensuring the quality of life and education of Soldiers and other patients with acute and chronic pain.

“Our mission is to educate the Soldier and the family members. We have the honor, duty and obligation to treat them in the best possible fashion,” Spevak said.

For more information regarding the pain management program, contact the Warrior Clinic at (202) 782-9822 or 23.

# FREE ALL DAY CIRCLE ISLAND TOUR

The Army Community Service (ACS) Shafter office conducts a free all-day circle island tour the third Saturday of each month for newly assigned Soldiers, civilian employees, and Family members who have PCS'd to Hawaii within the last six months prior to the tour dates.

The tour costs at least a \$75.00 if you sign up in Waikiki! The next tour is scheduled for June 18. Call 438-9285 by June 13 to sign up and obtain more information about the tour.

If you are interested in participating in the free tour, you can also send a message to michael.tanigawa@us.army.mil to request a tour brochure and directions to the pickup point at Shafter Flats.

# Virtual Career Fair for vets

Courtesy of the FEDS HIRE FEDS, there will be a Virtual Career Fair for Veterans being held June 23, 2011 sponsored by Milcruit, the Military Officers Association of America and partners.

The fair is designed to bring veteran friendly public and private employers, veterans and spouses together as if in person, but from the comfort and convenience of their home or office. Veterans/ Jobseekers can register and enter the environment to visit employer booths,

chat with recruiters, view/apply for jobs, and chat with peers in the networking lounge. Participation is free for jobseekers. Register at: <http://www.veteranscareerfair.com/>

## *Tripler works to solve concerns by increasing employee parking*

**Terrance Bandy**  
*TAMC Public Affairs*

Morning traffic frustrations follow each of us drivers into work morning after morning. But, did notice that parking is opening up in more locations around the TAMC grounds?

One of the places that you may want to look

into is the mountain side parking structure.

Staff parking has been increased and the over head shelter allows you the driver to return to a cooler vehicle before departure for the day.

Be mindful that there's only so much space, and the early bird gets the space.

KAPUA PRODUCTIONS & INDIGO ULTRALOUGE PRESENTS

THE 1ST ANNUAL

**BIKER BUILD OFF CHALLENGE**

HAWAII

**BIKER BUILD OFF CHALLENGE AND CUSTOM BIKE GIVEAWAY**

**SATURDAY MAY 28TH 2011 12PM TO 10PM**



# Chaplain Thought of the Week: Change

Chap. (Maj.) Ibraheem Raheem  
Chaplain Clinician TAMC  
Tri-Service Addiction Recovery Facility  
Department of Psychiatry

Recently there has been much talk about the end of the world. When I hear this sort of talk, I always ask, "What is the context referred to by end"?

Actually, for every end, there is a new beginning and new beginnings are all about change. To change, we must go through a transition zone. It is not easy being in transition. Thoughts, beliefs and habits are all in flux. It can create a sense of groundlessness, of being in a void that can be quite uncomfortable. When we are in this void, our first impulse will be to revert to

old habits because they feel comfortable.

The goal becomes hanging in there until the change goes away and things are back to the way they were. Realistically things never go back to the way they were. Understanding that transitions are part of the change process helps us muster the courage to put up with the discomfort, the uneasiness, and the overall void in our lives.

Change requires a "letting go" of what we have always known and done to allow in something new. We need to trust in ourselves and allow change to unfold a new reality for us. I invite you to exchange the term end with new beginning and embrace the change in your life today.

## GRADUATE PROFESSIONAL HEALTH EDUCATION COMMENCEMENT

*Class of 2011*

US ARMY 236<sup>th</sup> BIRTHDAY  
RETREAT CEREMONY

Tripler Army Medical Center  
Main Flagpole

June 17, 2011

3:00 p.m.



*The Commanding General  
Pacific Regional Medical Command  
and Tripler Army Medical Center  
requests the pleasure of your company at the*

*Graduate Professional Health Education Commencement  
followed by a Retreat Ceremony commemorating the  
236th Birthday of the United States Army*

*on Friday, the seventeenth of June  
at three o'clock in the afternoon  
Tripler Army Medical Center Flag Pole*

*RSVP by June 10, 2011  
(808) 433-7787 or [tamc.protocol@amedd.army.mil](mailto:tamc.protocol@amedd.army.mil)*

*Military: Duty Uniform  
Civilian: Aloha Attire*



# HERSHEY'S TRACK AND FIELD GAMES OAHU STATE FINAL

THE HERSHEY YOUTH PROGRAM IS DESIGNED FOR THE BEGINNER ATHLETE



**Meet Date:** June 25, 2011 (Saturday)  
**Time:** 8:00 a.m. – 1:30 p.m. (Approximate)  
**Place:** Mililani High School Track & Field

### REGULATIONS

**ELIGIBILITY:** Open to 9-14 year old girls and boys born between 1997-2002, who reside in Hawaii. Six divisions based on gender and age as of **December 31, 2011**. All participants **must** compete in their gender and age group division.

**ENTRY DEADLINE:** **FRIDAY, JUNE 17, 2011 – 4:00 P.M.**  
Send or mail to: **HRPA HERSHEY TRACK & FIELD GAMES**  
**c/o Sharon Tomita** PHONE: 768-3007 FAX: 768-3052  
**1000 Uluohia St., Suite 309**  
**Kapolei, HI 96707** email: parks@honolulu.gov

**EQUIPMENT:** Shorts, t-shirts (Hershey), and shoes are required. Participants may not wear shoes designated for spikes.

**PROOF OF AGE:** In field events, any shoes designed for turf sports are not allowed. Starting blocks are not allowed.  
Ages and birthdates must be verified and initialed by sponsoring playground, club, school, coach or parent.  
**Age is determined by the age the youth will be on December 31, 2011**

**GENDER:** Please check the appropriate box: **GIRL**  **BOY**

**PLEASE TYPE OR PRINT IN BLACK INK**

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **PHONE NO.** \_\_\_\_\_

**DATE OF BIRTH:** MONTH \_\_\_\_\_ DAY \_\_\_\_\_ YEAR (circle one) 1997 / 1998 / 1999 / 2000 / 2001/2002

**PROGRAM:** \_\_\_\_\_ **COACH'S NAME** \_\_\_\_\_ **PHONE #** \_\_\_\_\_  
(Name of Summer Fun Program, track team, school. If none, write Unattached)

**T- Shirt Size:** Youth Med \_\_\_ Youth Large \_\_\_ Adult Small \_\_\_ Adult Med \_\_\_ Adult Large \_\_\_ Adult Xlarge \_\_\_ Adult 2Xlarge \_\_\_

Circle participant's gender. Select up to three (3) events—not more than 2 running events.

GENDER	BIRTH YEAR	Select no more than 2 running events.					St. Long Jump*	Softball Throw*
GIRL	2001/2002	50M DASH	100M DASH	200M DASH	400M DASH	4X100 RELAY**	G: 4', B:4'6"	G: 50', B: 65'
BOY								

GENDER	BIRTH YEAR	Select no more than 2 running events					St. Long Jump*	Softball Throw*
GIRL	1999/2000	100M DASH	200M DASH	400M DASH	800M RUN	4X100 RELAY**	G: 4'6", B: 5'	G: 75', B: 90'
BOY								

GENDER	BIRTH YEAR	Select no more than 2 running events (the relay is a running event)					St. Long Jump*	Softball Throw*
GIRL	1997/1998	100M DASH	200M DASH	800M RUN	1600M RUN	4X100 RELAY	G: 5', B:6'	G: 100', B: 110'
BOY								

\* Note: Qualifying distances must be met to compete in the STANDING LONG JUMP AND SOFTBALL THROW EVENTS! \*\* Does not advance to North American Final

**4x100M RELAY** – Limited to 2 teams per division per organization. If you are a member of a relay team, you must list the other members of your relay team. 1998/1999 and 2000/2001 relay teams do not advance to the North American Final.

TEAM NAME:			
1	2	3	4
ALT 1	ALT 2	ALT 3	

The above named participant, the participant's parent/legal guardian has requested registration of the participant in the Hershey's Track & Field Games. In consideration of such registration, the right of the participant to compete in the Hershey's Track & Field Games and the use by the participant of sponsoring agency's facilities, and equipment, both the participant and the parent/guardian each acknowledge that the participant will be competing in the Hershey's Track & Field Games and sponsoring agency's facilities at the participant's sole risk. The participant in his/her own behalf and on behalf of his or her heirs, executors, administrators and assigns, and parent/guardian shall indemnify, save and hold harmless the Hershey Company, National Recreation and Park Association, Mililani High School, Hawaii Recreation and Park Association, Hawaii Association of USA Track and Field, and Departments of Parks and Recreation, City and County of Honolulu, Hawaii County, Maui County, Kauai County, from all liabilities arising from property damage and bodily injury which may be sustained by participating in the above activity. We also agree to allow the advertising agency for the Hershey's Track & Field Games to use and reproduce the participant's name and/or likeness and /or information concerning the participant and to circulate the same for any and all purpose in this manner. We understand that those participants who advance to the state level and are winners at this level do not automatically advance to the regional level for the North American Final Meet. WE CERTIFY THAT THE INFORMATION IS CORRECT.

Signed by Parent/Legal Guardian \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

In case of Emergency, Contact \_\_\_\_\_ Relationship \_\_\_\_\_

Or \_\_\_\_\_ Relationship \_\_\_\_\_

I have checked this application and confirm its accuracy (coach/parent/guardian's signature) \_\_\_\_\_

**ENTRY DEADLINE: FRIDAY, JUNE 17, 2011 - 4:00 P.M.**



**Farewell Party  
for SGM Klein  
Dept. of Nursing  
Chief, Clinical NCO**

**26 May, 2011 1130-1300 @ Soldiers Pavillion; Company Area**



**\$12 Taco Del Mar Lunch Buffet**  
Buy tickets thru MSG Feliciano or SSG Smith  
(3-1921/5030) or Mrs. Barbosa in DON.  
or thru your product line NCO.  
**MUST BUY by May 24th.**



## Traffic update:

“With the heightened security measures at the entrance to Tripler Army Medical Center, staff and patients have endured long lines. In an effort to shorten entry wait time, from approximately 6 to 8 a.m., those in the left hand lane will be directed to turn left after passing the guardhouse. Once on Krukowski Street, ID cards will be checked and directions to either the Oceanside or Mountainside parking lots will be provided.”

## JOIN US

*We Are*

# THE ARMED SERVICES BLOOD PROGRAM

## GIVE BLOOD TODAY



**ASBP**  
Armed Services Blood Program

*militaryblood.dod.mil*

Oceanside 2<sup>nd</sup> Floor,  
Room 2A207

TRIPLER BLOOD DONOR CENTER | 808.433.6148



## We love our fans!

To celebrate reaching 5,000 fans in May, we'd like to honor you by hosting giveaways over the next five weeks. United Concordia will feature a different U.S. Branch of Service each week on our Facebook page and will give away service-specific teddy bears.

We'll salute each branch alphabetically, starting with the Air Force on May 23, inviting any of our fans to register for prizes during these weeks.

To enter, visit United Concordia's Facebook page at [facebook.com/TDP.ADDP](https://facebook.com/TDP.ADDP) between 9:00 a.m. Monday and midnight on Wednesday of the following weeks:

- May 30
- June 6
- June 13
- June 20

Only one entry per person will be accepted.

This is a random drawing, so spread the word to your military family and friends!



**Air Force**



**Army**



**Coast Guard**



**Marine Corps**



**Navy**

Note: Employees of Highmark and its subsidiaries (to include United Concordia) are not eligible for this drawing.

**TAMC  
Department  
of Psychology**

# Integrative Pain Management Center

**Volume 1, Issue 1**

**Spring 2011**

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### Points of Interest:

- Description of Pain Management Program
- Introduction of department team members
- Description of CAM services



## DoD Pain Management Best Practice: TAMC Integrative Pain Center

The TAMC Integrative Pain Management Center was noted as a best practice in the DoD Pain Management Task Force findings (2010). This is a TATRC funded program delivering integrative pain management services for active duty service members and veterans with persistent musculoskeletal pain.

The integrative pain program incorporates both traditional and complementary care practitioners, including acupunc-

ture, chiropractics and massage therapists. Our integrative pain team targets improvements in pain, mood, functioning, and quality of life, while also addressing work productivity and retention of military active duty members with musculoskeletal problems.

The management of persistent pain is one of medicine's greatest challenges. Persistent pain is often severe and unresponsive to medications or surgery and de-

bilitating for patients and their families.

Pain is complex and requires a multi-modal approach to reduce its frequency and severity. This integrative model moves treatment beyond a simple bio-mechanical or inflammatory concept of pain, supports the "whole person" model in treating pain, and provides patho-physiologic links between pain disorders and associated pain conditions, such as post-traumatic stress.

## Interdisciplinary Pain Management

Interdisciplinary pain management uses a team approach, with a variety of health care professionals working together to provide a full range of therapies for patients suffering from chronic and/or acute pain. The team's goals are to:

1. Relieve, reduce, or manage pain.
2. Improve a patient's overall quality of life through minimally invasive techniques.
3. Help patients return to their everyday activities quickly, without relying heavily on medications.

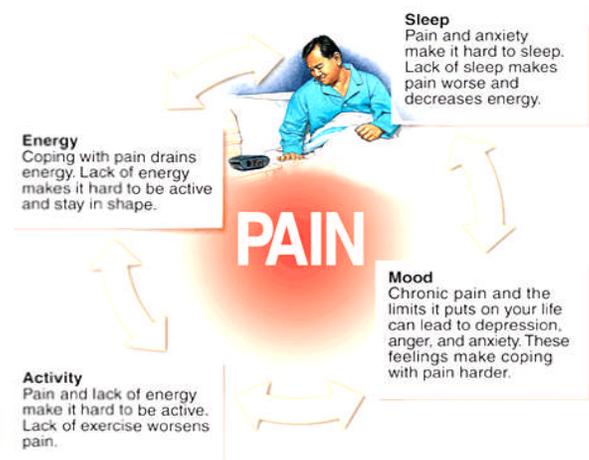
# Mind-Body Approaches to Pain Management

Chronic or persistent pain is treated very differently than acute pain. The experience of pain is affected by moods, beliefs about pain, coping styles and relationships, along with the sensations that are transmitted up through the various pain sensation nerve pathways. The feeling of pain always involves the whole body. So, lack of sleep makes pain worse, stress makes pain worse, and depression and anger make pain worse. Persons with chronic pain may avoid doing routine activities, fearing further injury or increased pain. As they become less active, their general physical condition may decline.

Negative thoughts, such as *I'm broken* or *I'm never going to get better* or *I can't do my job*, along with withdrawal from physical activities can cause a cycle of pain-distress-disability.

## Mind-body strategies include:

- Relaxation Training
- Restructuring of Beliefs & Attitudes
- Stress and Anger Management
- Sleep Hygiene
- Activity Pacing
- Biofeedback training
- Mindfulness



## Acupuncture

For more than 2,000 years, the Chinese have viewed the human body as an intricate system of organs connected by pathways known as meridians. Good health depends on the smooth and harmonious flow of Qi, or vital energy, through these meridians. Pain and illnesses occur when the flow of Qi is blocked.

Acupuncture involves stimulating specific points along the meridians of the human body, to restore the flow of Qi throughout the body. Acupuncture uses various methods, including acupuncture needles, cupping, moxibustion (Chinese method of applying heat along meridian points) and electro-stimulation.

Removing blockages along the meridians strengthens the body's protective or immune energy, and corrects imbalances of deficiency or excess to restore the body's homeostasis.

# Chiropractics

Chiropractors approach health issues with the belief that mechanical disorders of the musculoskeletal system, especially the spine, affect the overall health of a person.

Chiropractors focus on the relationship between an individual's functioning and body

*A review of studies on the results of chiropractic therapies suggests that the addition of chiropractics to medical care may lower overall medical costs (Lawrence & Meeker, 2007)*

structure, and use physical manipulation, also called chiropractic adjustment, to restore joint and related soft tissue function to increase functioning.

Chiropractors also use modalities such as heat and cold modalities, light, electrical stimulation, hydrotherapy and ultrasound therapy.



## Medical Massage

Medical massage therapists manipulate soft body tissues for physical, mechanical, medical/therapeutic, and in some cases, psychological, purposes and goals. Soft body tissues include muscles, tendons, ligaments, skin, joints, or other connective tissue, as well as lymphatic vessels, and/or organs of the gastrointestinal system.

Medical massage begins with a thorough assessment of a patient's musculoskeletal system, pain and/or lack of range of motion related to ischemia (restriction in blood supply), biomechanical dysfunction,

nerve compression or entrapment, injury or rehabilitation needs from surgery or disease conditions. The assessment determines the treatment plan to reduce or eliminate pain, increase the range of motion, improve biomechanics and/or improve circulatory responses.

Medical Massage therapists choose from a wide array of medical massage therapies to determine the specific massage protocol for a patient, depending on the medical cause of the problem and the skill set and certification of the practitioner.

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ARMY MEDICINE,  
ARMY STRONG.

## Test your pain awareness:

Chronic pain and addiction can reinforce one another, because:

- A. Individuals may continue or intensify drug abuse to try to cope with pain;
- B. Alternating periods of intoxication and withdrawal can increase pain;
- C. Both addiction and chronic pain can result in non-restorative sleep, anxiety, depression, or stress;
- D. All of the above.

Find the answer in the next issue of the Pain Management newsletter!

## Employee Spotlight:

### Dr. Kate Brown

Dr. Brown is the Chief of the Integrative Pain Management Center. She has been practicing rehabilitation psychology for 25 years and was initially drawn to the field while working as an Oncology nurse.

She currently serves as the Director of TAMC's Integrative Pain Management Center. This position entails clinical and administrative responsibilities for the integrative chronic pain management and rehabilitation program which serves both DoD and VA beneficiaries. Her multidisciplinary team of complimentary and alternative medicine (CAM) provid-

ers includes acupuncturists, chiropractors, medical massage therapists, nurses, and health psychologists.

Dr. Brown is also a faculty member of TAMC's Clinical Psychology Internship Program and Health Psychology Post-Doctoral Fellowship Program, both of which are fully accredited by the American Psychological Association. Outside of her professional duties, she enjoys kayaking, travel and film.

Her professional vision has been to provide integrative and interdisciplinary treatment for the relief and man-



agement of chronic pain and patient suffering. Multidisciplinary team members collaborate and consult with one another to inform patient assessment and treatment planning. The result is a robust and multifaceted approach to patient care. The integrative nature of the center informs allopathic foundations in psychology and medicine with complementary and alternative treatment modalities.