Military’s, Oahu’s first single-room NICU opens doors at Tripler Apr. 3

JAN CLARK
Pacific Regional Medical Command Public Affairs

HONOLULU — The completion of the first of a two-phased renovation project for the first in the military and first on-island single room Neonatal Intensive Care Unit at Tripler Army Medical Center was celebrated with a blessing and lei ceremony, here, April 3.

In her opening remarks, Col. Sarah Lentz-Kapua, chief, Pediatric Inpatient Services, spoke of the years-long process of making the Patient Centered-Family Centered NICU a reality.

“Ten years ago, in 2002, I made my initial request to the command at that time, for a little more space and a true renovation of our 1989 vintage NICU and was given approval to move forward.

“Having to build in two phases has proven a challenge, but babies had to be left in place during construction of phase one. Our short-term goal was to build using the then relatively new concept of Patient Centered-Family Center care,” Lentz-Kapua said. “The long-term goal was to have a brand new Neonatal Intensive Care Unit. We spent countless hours with multiple consultants, bright minds from outside and inside the hospital who worked diligently to come up with the state-of-the-art design and the state-of-the-art technology to make this NICU one of the safest patient care areas on the island.”

Patricia Wilhelm, nurse manager, NICU, echoed Lentz-Kapua’s words when she spoke of the long hours of planning.

“From the very beginning, this has been a collaboration between the physicians, the nurses, families, March 17. See page 4

CAR SEAT SAFETY

Tripler staff members, military police and local community members join forces to offer a car seat safety check for military families, March 17.

See page 4

HI MEDAL OF HONOR

Hawaii honors service members who were killed while deployed in a ceremony at the State Capital, March 28.

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Secure message system hits region, connects patients, docs, 24/7

PACIFIC REGIONAL MEDICAL COMMAND
News Release

HONOLULU – Patients at Pacific Regional Medical Command primary care clinics have a new way to keep in touch with their health care team.

Long gone are the days where you had to wait on hold to talk to a healthcare professional, or schedule an appointment to ask your doctor a question. Army Medicine’s Secure Messaging System, powered by RelayHealth, brings your health care team to you, whenever you are, any time of day, allowing you to safely send a message to your doctor or nurse from the comfort and privacy of your own home.

With RelayHealth, patients can contact their primary care clinic to request prescription renewals, receive test and laboratory results, request appointments and referrals, get guidance from your medical team by email, consult with your medical team regarding non-urgent health matters, avoid unnecessary office visits and telephone calls, and access valuable health information online.

“Our patients feel they have an increased level of access to (doctors and nurses),” explained Dr. John Marshall, Internal Medicine Clinic, Tripler Army Medical Center. “They don’t have to wait for a certain clinic or office to open in

TAMC urges patients to make wishes known 4/16

LT. COL. MATTHEW STUDER
Tripler Army Medical Center

HONOLULU -- Tripler Army Medical Center will join other healthcare facilities around the country this Monday, April 16, to recognize the fifth annual National Healthcare Decisions Day.

One may ask, “What is National Healthcare Decisions Day, and how does this pertain to my health?”

The answer is quite simple, and highlights the importance of patient-centered care and open dialogue between patients, their families, and their healthcare providers.

National Healthcare Decisions...
CG: Effort to stay resilient is continuous

BRIG. GEN. KEITH GALLAGHER
Commanding General, Pacific Regional Medical Command and Tripler Army Medical Center

Spring is here! Enjoy the wonderful springtime weather and especially the cherry blossoms in Japan. The very hectic pace that we all live causes me to reflect and ask you to continue to work towards maintaining a high level of resiliency at all times.

It is up to you to keep these levels high through access to the Comprehensive Soldier Fitness modules available online at http://csf.army.mil. Please learn to recognize that your candid responses to key stressful events can help you with post-trauma growth and greater understanding rather than spiraling in the opposite direction.

You must go forth, IMUA, and work at this—it is not automatic but a deliberate effort between you and your supervisor to keep the resiliency high. Talking to one another, a chaplain, your chain of command, a supervisor, and our health care professionals at our military medical treatment facilities or even in our community are also very helpful. I want you to take the time to do that. Just ask. Ask your supervisors or even my commanders, deputies, Command Sgt. Maj. William Franklin, or me. We are here to help.

Also, you owe it to yourself, your family and your colleagues and Soldiers to maintain a strong level of resiliency. I ask that you understand that this mission never ends. You always work on post-trauma growth and resiliency-building. The military lifestyle and culture are tough, demanding, emotionally draining, and exhausting at times. It also has many rewards. It is up to you and all of us to maintain our resiliency and know when our tank is empty. Let someone know and escort them to help when you see this emptiness in any of our Soldiers, civilians or contractors.

If you are spent or exhausted, then it’s time to recharge your batteries through efforts with a chaplain, behavioral health specialists, friends, taking leave or time off and so forth. I don’t want anyone to feel that they must always be here day and night. We have a bench and I need you alert, rested, and respite for the day’s work. Talk to your supervisors immediately if you feel...-See CSF, page 5

SGM: Always aim to encourage, build up others

SGT. MAJ. TIMOTHY SLOAN
Pacific Regional Medical Command Operations

It is amazing how people respond when they know that you are rooting for them, that you are in their corner, wanting them to do well. Often, they become willing to change when they know you are not trying to condemn them, that you are not trying to put them down or make them feel bad about themselves. I have found that a true correction always inspires Soldiers to want to do better.

Your words have the power to put a spring in somebody’s step, to lift somebody out of defeat and discouragement, and to help propel them to victory.

Understand that everyone needs encouragement, no matter how successful he or she appears. Every time I receive positive feedback from Soldiers who I have helped along the way, it energizes me and encourages me to do better; it does something deep down on the inside that lets me know my life is significant and that I have been able to make a difference in this world.

The people around you need that sort of encouragement from you. Learn to give compliments and recognition freely and openly. Learn to be friendly and avoid anything that exudes the attitude that you are so important that you cannot take the time for the people around you. Instead, make everyone you come into contact with, from your coworkers, peers, subordinates, friends and family feel important.

My goal at PRMC is that no Soldier in this unit should have any doubt that they are vitally important to the organization and that I am proud of who they are and what they do every day.
Ask the Dietitian

CAPT. JOY METEVIER
Tripler Army Medical Center
Nutrition Care Division

"Are there any diet plans or recipe books you suggest?"

While there are many programs on the market that are safe and effective, I find one approach to healthy eating, the volumetrics approach, to be among the best.

This term was first applied to nutrition in the ‘90s by Dr. Barbara Rolls, former president of the Obesity Society and nutrition/behavior science researcher.

Through her years of study, she came to notice that people tend to eat the same volume or weight of food at each meal, regardless of how densely the calories are packed. It was not the amount of fat, carbohydrate or protein that dictated a person's food intake, but the amount of food.

Translating this to a meal, a person served a high-fat granola cereal (about 175 calories per half cup) will eat the same two-cup serving even if served a low carbohydrate wheat cereal (about 120 calories per half cup) and feel the same level of satisfaction. This is a 220 calorie difference!

This is not always the way humans behave with food, but rather a learned behavior over time.

Pediatric and young school children, for example, when allowed to freely graze, will eat less of a high-energy food (i.e., peanut butter crackers and cheese) innately sensing the energy these calorie-dense foods provide.

So how do these scientific principles translate into a diet plan? Simply put, choose high-volume, low-calorie dense foods. Learn to adapt your recipes and meals to include a base of fruits or vegetables and lean meats, as these foods are high in fiber, water and protein and are therefore lower in calories. Omit the calorie dense sugars and fats and find substitutions.

For further guidance, recipes and meal plans check out "The Ultimate Volumetrics Diet," by Barbara Rolls coming out this month. In my opinion it is a must have.
**April: Chance to educate masses on autism**

**CAPT. TODD HEER**
*Tripler Army Medical Center*

**HONOLULU** — April is Autism Awareness month, a time for the public to gain knowledge about autism and the autism community.

Autism spectrum disorder (ASD) is a range of complex neurodevelopmental disorders, characterized by social impairments; communication difficulties; and repetitive and stereotyped patterns of behavior.

Signs and symptoms begin to show up early in life from one to three years of age, but according to a 2006 issue of the Journal of Developmental and Behavioral Pediatrics, the average age of diagnosis is five years.

The number of reported cases of autism is currently on the rise. However, it is not clear whether this is due to better detection and reporting of autism, an actual increase in the number of cases, or a combination of both.

According to the Center for Disease Control, about 1 in 88 American children are diagnosed within the autism spectrum disorder. This is a 78 percent increase compared to a decade ago. The report also stated that certain population groups have higher trends, and that boys (1 in 54) are typically more affected than girls (1 in 252).

There is currently no defined cause for autism, or a specific treatment for the disorder. This is one of the most devastating aspects of autism, which often leaves the parents of autistic children with a feeling of helplessness.

However there are many support groups, and therapies (occupational, speech, early intervention services, and applied behavioral analysis intervention) with evidenced-based treatments that have been shown to increase the quality of life for the person affected by autism.

Tricare is leading the way for providing services to persons with autism through its Extended Care Health Option Autism Services Demonstration program. This program provides a specified number of ABA therapy hours per week at a cost set by the service member’s pay grade.

Additionally, the Army has a partnership with respite care providers to allow parents and caregivers of a person with autism time to recharge and take a break; something that these parents and caregivers often forget are unable to do.

Another resource available to service members and Department of Defense civilians is the Exceptional Family Member Program, a mandatory enrollment program that works with other military and civilian agencies to provide a comprehensive, coordinated, and multidisciplinary approach for medical, educational and community support services to families with special needs.

Some of the many activities this month around the world include: World Autism Awareness Day (April 2), fundraisers, and autism walks such as the Walk Now for Autism Speaks in Honolulu (April 21).

(Editor’s Note: Capt. Todd Heer works in the Nutrition Care Division at Tripler Army Medical Center.)

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**HI’s pain docs help geriatric patients relieve lumbar pain**

**STEPHANIE BRYANT**
*Tripler Army Medical Center*

**HONOLULU** — Tripler Army Medical Center’s Department of Integrative Pain Management, here, completed the first minimally invasive lumbar decompression in Hawaii, Jan. 20.

Maj. Brian McLean, chief, Pain Medicine and Interventional Pain Services, Tripler Army Medical Center, said the MILD procedure is for a very specific person; those with lumbar spinal stenosis who are not candidates for open surgery.

“(Our typical patient is) a person who either does not want an open surgery or is too sick or too old to undergo the anesthesia for an open surgery,” McLean explained.

According to McLean, lumbar spinal stenosis is a narrowing of the lower spinal canal, which may cause pain and numbness that limit a person’s ability to walk or stand. It is usually found in people over 50 years of age.

The traditional procedure to treat LSS calls for 2-4 inch incision and cut away the bone and ligaments causing the pressure. McLean said the state-of-the-art MILD procedure is done with light sedation instead of general anesthesia and does not require sutures, instead utilizing derma bond, or skin glue, to close the puncture sites.

“Patients are able to get up and walk and move the next day,” McLean said.

McLean said the safety studies on the procedure not only show that there is a lower risk of bleeding, complications and infections, but the patients feel better within a few days, reducing recovery times and hospital stays.

Tripler’s Dr. Phillip Lim, pain management physician, is one of four physicians at TAMC trained to perform the surgery and was the first doctor in Hawaii to perform the procedure.

“It’s always nice to be the first one to do something, but, more importantly, it allows us to be able to offer more (treatment options) to the patients,” Lim explained.

“We want to offer them more chances at getting better.”

Lim said the procedure is a good addition to the many treatments that the IPM department offers because it is an innovative technique that provides a minimally invasive surgical option in a population of patients who may not have had any other option before.

“At the end of the day, it’s all about function and quality of life,” Lim added. “Can you imagine something as simple as the MILD procedure to make it able for (patients) to go for a walk without pain?”

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**Mahalo nui loa**

**SCHOFIELD BARRACKS, Hawaii** — The Warrior Transition Battalion’s Lt. Col. Stanley Garcia, commander, and Command Sgt. Maj. Joshua Amano hosted the second quarter 2012 fiscal year WTB Appreciation Breakfast at the Nehelani, here, March 30. Brig. Gen. Keith Gallagher, commanding general, Pacific Regional Medical Command and Tripler Army Medical Center, who was the guest speaker at the breakfast, thanks Soldiers, families and the military and civilian staff of the WTB for their continued support and dedication toward the healing and recovery of Wounded Warriors.

Gallagher presented achievement awards to various staff members of the WTB and personally thanked everyone for their outstanding service in facilitating the care, recovery, and transition for Soldiers assigned to the WTB.
Gumi Cha unveils new ER for USFK patients

CHUCK YANG
Brian Allgood Army Community Hospital

GUMI, South Korea — Gumi Cha Medical Center held an unveiling of newly renovated emergency department ceremony, March 27, here, and reconfirmed their commitment to provide patient-friendly access to compassionate health care to United States Forces Korea Soldiers and family members.

The new emergency department also has a private room designated only for USFK service members.

Col. Rafael De Jesus, commander, 65th Medical Brigade/MEDDAC-Korea, along with Soldiers from 168th Multifunctional Medical Battalion and 19th Sustainment Command participated in the ceremony.

Gumi Cha Medical Center is the primary medical center for Camp Carroll and Area IV that provide a variety of medical services for USFK Soldiers and beneficiaries covered under the Tricare system.

Dr. Michael Choe, director of international clinic and emergency department, Gumi Cha, and a long time partner to the USFK community, gave a brief history and capabilities of Gumi Cha prior to the ceremony.

“Gumi Cha Hospital offers outpatient and inpatients care as well as emergency service,” Choe said.

“We provide care to the USFK beneficiaries from Camp Carroll, Camp Walker, Camp Henry, and in the Gumi area.”

After the plaque hanging ceremony ended, a group of U.S. Soldiers toured the main facilities in the hospital including the emergency center and magnetic resonance imaging center while Choe explained about each center's functions and capabilities.

“It's good to know that we have a long-term relationship with our host nation partner hospitals, and Gumi Cha's expansion of services and facilities benefits our family members and service members here in Area IV, more than any other medical facility,” De Jesus said.

Gumi Cha Hospital's international clinic has assisted U.S. Soldiers and their dependents with various medical services since 2004. Gumi Cha also functions as a Wartime Host Nation Support Hospital, meaning the facility provides civilian resources and assistance for the reception, staging, onward movement, integration, and sustainment of U.S. forces in times of crisis or war.

“So far, we have had a very good relationship with the USFK as well as local foreigners,” Choe said. “I expect that in the future, there will also be a strong partnership and medical care provided to the people in this area.”

CSF

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that this is the case and we’ll craft solutions. Ensure you maintain balance in your life; however, this is never automatic but again your efforts will ensure this happens. Supervisors, check!

We want to help, but need you to ask for it and I assure you that you'll get it.

If you see a coworker, family member, or friend who is working too hard and needs help, then talk to them and execute actions delineated on the ACE card (Ask your buddy, Care for your buddy, Escort your buddy).

If you cannot do these things, then I ask that you seek help immediately and contact one of my commanders. This is our duty as Soldiers and service members and I dare say as Department of the Army civilians.

If you do not do these things, then I ask that you seek help immediately and contact one of my commanders. This is our duty as Soldiers and service members and I dare say as Department of the Army civilians.

Services are available for you here in Hawaii at Tripler Army Medical Center, U.S. Army Health Clinic-Schofield Barracks, and the Warrior Ohana Medical Home; in Korea at the Brian Allgood Army Community Hospital and its health clinics; and in Japan at the BG Crawford F. Sams U.S. Army Health Clinic. Use these services because they are great and make a tremendous difference in your resiliency.

I also ask that every one of us get to know one another at work. In both the work place and at home, the 10-12 people around you include your neighbors, superiors, subordinates, colleagues and teammates. Everyone is on the same team. Find out their strengths and challenges. We need everyone on the team day in and out and while on leave, day off, or traveling.

I sincerely need you and everyone on the team. We stand ready to help.

Help me build resiliency in our workplace— it is that important! Serving to heal... honored to serve! Imua. PRMC 6
Tripler, USAG-HI, local community join forces to offer car seat safety check

SCHOFIELD BARRACKS, Hawaii — Thirty-three of the youngest members of the military ohana on Oahu are riding a little bit more safely after their parents had their car seats checked out, here, March 17.

The car seat safety check was sponsored by Tripler Army Medical Center’s Pediatrics Department; Schofield Barracks’ Military Police, Directorate of Emergency Services, U.S. Army Garrison-Hawaii; and the Keiki Injury Prevention Coalition, or KIPC, a statewide community-based organization committed to preventing and reducing injuries to children in Hawaii.

Aimed at expectant parents and parents with young infants, toddlers, preschoolers or school-aged children, anyone attending left not only with their car seat inspected and properly installed, but also with resources and tips for keeping children safe as passengers in motor vehicles.

Volunteers ranging from police officers to health care professionals to parents who want to help educate others on car safety were on hand to answer questions and help parents understand their particular car seat and how it best works within their car.

“We just bought a new car seat because our son Aspen is getting too big for his current one,” explained new mother Kandi Farr. “We didn’t want to install it incorrectly.”

Kendi and her husband, Petty Officer 2nd Class Eric Farr, Naval Information Operations Command-Hawaii, knew just who to turn to for assistance with installing Aspen’s new car seat.

Eight months ago, shortly before Aspen was born, Cindy Sanekane, a pediatric physical therapist at Tripler Army Medical Center’s Developmental Pediatrics department, showed the Farris how to install their first car seat.

Sanekane has been a licensed child passenger safety technician for 11 years and is the primary point of contact for the car seat fitting station at Tripler, through the Department of Pediatrics.

According to NHTSA’s National Center for Statistics and Analysis, research has found child safety seats reduce fatal injuries by 71 percent for infants (younger than one year) and by 54 percent for toddlers (one-four years old) in passenger cars involved in accidents.

However, if the car seat isn’t installed correctly or parents don’t know how to use them properly, it can all be for naught.

“I thought, ‘I’m not an expert,’” Kendi said. “I’d rather have trained people showing us how to use the car seat.”

According to Cindy, approximately 72.6 percent of car seats are not installed properly or misused, which can potentially lead to critical injuries in the event of a motor vehicle crash.

“Community education is the primary purpose of the car seat check events,” Cindy explained. “We want to educate families on how to safely transport their children.”

The first mandatory child restraint use law was implemented in Tennessee in 1978. Since 1985, all 50 States and the District of Columbia have had child restraint use laws in effect.

“Military police and gate guards frequently observe child seat safety issues while at the gate and while patrolling,” said Patrick Rodrigues, community relations officer for Schofield Barracks’ Provost Marshal Office, DES, USAG-HI. “The most common issues are children not fastened in properly, children out of their car seats, or children secured in the car seat positioned in the front of the vehicle when there is a seat available in the rear.”

DES participates in these outreach events for the safety of the general public and hopefully reduce the number of injuries sustained during car accidents. Holding community events around the island makes it easier for parents to get their car seat checked out in a location that’s more convenient for them.

DES hopes to schedule a similar car seat safety check at Fort Shafter to make it more convenient for families living in the south region.

“Community events occur throughout the year, sponsored by KIPC and the various other hospitals and organizations that are also car seat fitting stations,” Cindy explained. “These community events occur all over Oahu from Waimanalo to Honolulu to Kailua/Kaneohe. Families can access the schedule through the KIPC website.”

“If families cannot access appointments at TAMC in a timely manner, they can call any of the other car seat fitting stations on the KIPC website to schedule appointments through those facilities,” she continued.

The following are courtesy of the National Highway Traffic Safety Administration:

• Select a car seat based on your child’s age and size, and choose a seat that fits in your vehicle and use it every time.

• Always refer to your specific car seat manufacturer’s instructions; read the vehicle owner’s manual on how to install the car seat using the seat belt or the Lower Anchors and Tethers for Children (LATCH) system; and check height and weight limits.

• To maximize safety, keep your child in the car seat for as long as possible, as long as the child fits within the manufacturer’s height and weight requirements.

• Keep children under 12 in the back seat.

• A rear-facing car seat is the best seat for a young child to use. It has a harness and in a crash, cradles and moves with your child to reduce the stress to the child’s fragile neck and spinal cord.

• A forward-facing car seat has a harness and tether that limits your child’s forward movement during a crash.

Visit www.nhtsa.gov/safety/CPS for more information on keeping children safe when on the road.
In Brief

ARMY COMMENDATION MEDAL
The following MEDDAC-Japan personnel were awarded the Army Commendation Medal in December 2011:
- Pvt. Marcus Foreman
- Pvt. Dylan Meyer
- Spec. Michael Robida
- Sgt. Ivan Woodard

COMMANDER’S AWARD FOR CIVILIAN SERVICE
Etsuko Kaneko, MEDDAC-Japan, was presented with the Commander's Award for Civilian Service, Dec. 15.

ACHEIVEMENT MEDAL FOR CIVILIAN SERVICE
Noriko Kosugegawa, MEDDAC-Japan, was presented with the Achievement Medal for Civilian Service, Dec. 15.

MEDDAC-Japan's command team wants to do so.

COMBINED FEDERAL CAMPAIGN
Congratulations to MEDDAC-Japan for earning the CFC Platinum Award.

Congratulations to MEDDAC-Japan for presenting with the AMCS, Feb. 1.

Etsu Yamanaka, MEDDAC-Japan, was presented with the Achievement Medal in December 2011:

- Army Commendation Medal
- Achievement Medal for Civilian Service

Tripler’s fallen warrior among 24 to receive HI Medal of Honor

STEPHANIE BRYANT
Tripler Army Medical Center
Public Affairs

HONOLULU — Twenty-four service members who deployed from Hawaii, who died in 2011 in Iraq or Afghanistan, were honored with a Hawaii Medal of Honor at the State Capitol during a ceremony, March 28.

Among the honorees was Staff Sgt. Christopher Newman, behavioral health specialist, Department of Psychology, Tripler Army Medical Center, who was killed when his convoy was struck by an improvised explosive device in Afghanistan, Oct. 29, 2011.

Rep. Calvin K.Y. Say, house speaker for the Hawaii House of Representatives, gave the opening remarks for the ceremony and welcomed the families and military units as they honored the fallen warriors.

“We truly mourn your loss,” Say said. "Every one of us owes you a great debt, one that we can never fully repay.”

Hawaii State Governor Neil Abercrombie, who presided over the ceremony, spoke of the great character of the warriors and encouraged our commitment to another.

"Those who we honor and acknowledge today are those who are rich in character,” Abercrombie said. "The issues with which conflicts have ensued and (an) individual commitments up to and including their very lives are large in scope, but our acknowledgment is individual and personal.

"Let our commitment to one another as human beings, our commitment to those core values that make up the very basis of our humanity our life, invulnerable,” Abercrombie added.

"As such, National Healthcare Decisions Day serves as an important day to recognize that early healthcare discussions and decisions are important and will positively impact both the care we give and the care we receive."

Want more information on National Healthcare Decisions Day or how to create an advance directive?

Representatives from Tripler Army Medical Center's hospital ethics team will be available at both of the hospital entrances, Monday, April 16, 8 a.m.-noon, to provide additional information and answer questions. An additional discussion about advance healthcare decisions is scheduled for Wednesday, April 18, noon-1 p.m. in the 10th floor oceanside conference room. Everyone is welcome.

(Editor’s Note: Lt. Col. Matthew Studer is the chief of Pediatric Cardiology and associate chair of the Ethics Committee at Tripler.)

For more on National Healthcare Decisions Day, visit www.nhdd.org.

NHDD from page 1

Day is intended to inspire, educate and empower the public and providers about the importance of advance healthcare planning. Too often, patients and their family members do not communicate their concerns, values and wishes regarding future healthcare decisions with their healthcare providers.

Admittedly, this is a very personal, potentially complex, and at times challenging discussion. At issue are considerations of what healthcare a patient would want and not want, and who they would wish to speak on their behalf if they were unable to do so.

As such, National Healthcare Decisions Day hopes to raise awareness about the importance of this dialogue between patients, families, and providers.

All patients have the right, as set forth by Congress in the 1990 Patient Self-Determination Act, to articulate their future healthcare wishes in writing in the form of an “advance directive.”

Patients should be empowered and encouraged to openly communicate their wishes regarding future healthcare and/or end-of-life care they would like to receive. In addition, they have the right to designate a family member, relative or friend to speak on their behalf if unable to do so.

These wishes may be formally documented in an advance directive, which is a legal document reflecting these advance care decisions.

Medical evidence supports this dialogue and the importance of advance healthcare planning. In a 2008 issue of the Journal of the American Medical Association and 2010 issue of BMJ, research was published that found these discussions can improve end-of-life care and patient quality of life, and reduce stress, anxiety, and depression in surviving family members.

However, according to the U.S. Agency for Healthcare Research and Quality, despite this data, less than half of severely or terminally ill patients evaluated in a study had an advance directive in their medical record and only 12 percent of patients with an advance directive had received input from their physician in its development. Additionally, between 65 and 76 percent of physicians whose patients had an existing advance directive were not aware that it existed.

We should all, patients and providers alike, be aware of the healthcare rights and choices of individuals and do all we can to promote autonomy through patient-centered care.

National Healthcare Decisions Day serves as an important day to recognize that early healthcare discussions and decisions are important and will positively impact both the care we give and the care we receive.

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For more on National Healthcare Decisions Day, visit www.nhdd.org.
NICU
from page 1

the respiratory therapists, the pharmacists, (and) the social workers. Everybody has had a say in how we designed it, from the very beginning in 2007 to where we are at today.

"Every one of my nurses has trained on every piece of equipment, every device and participated in an eight-hour simulation training, which was phenomenal," Wilhelm said. "It allowed us time to work out all of the kinks, learn the equipment, how to work it together as a team, so that the Team-STEPPS concept played out very well. I know that when we open these doors today and move patients, we are ready."

In part, what makes this NICU unique is the noise reduction/sound proofing that has been installed in the ceiling and floor. Because most of the babies here would under ideal conditions still be in mother's womb, sound levels are kept to neonatal standards. With dimmer light capabilities and a device to monitor sound level, the rooms provide the optimal environment for babies' hearing, growth and overall development.

Another key element allowing for private rooms for baby and parents is the technology that allows nurses to monitor rooms from other locations on the ward.

"With the new monitor system, our nurses can be comfortable being in one room knowing that they have another baby in another room that they are responsible for," Wilhelm said. "We have built in the technology that allows the alarm system from the monitors to reach the devices our nurses carry that will tell them when there is an alarm and a baby needs them."

Directing his words to the NICU staff, TMC Commanding General, Brig. Gen. Keith Gallagher emphasized that "what we want to take away is that this was built with the patient in mind, with the patient at the center of everything we do. And, as we migrate to a Patient Centered Medical Home model throughout the entire Army and Department of Defense, this certainly sets the tone."

"Lastly, it is all about saving lives," Gallagher said. "You do that better than anyone else, I think, on the island, in the country and the world. You save lives and you do it very well."

RELAY
from page 1

The Army began implementing RelayHealth in its medical treatment facilities across the globe in 2011 and currently, every region has at least one clinic already using the system.

RelayHealth is already in place at several PRMC primary care clinics to include the Internal Medicine and the Warrior Ohana Medical Home in Kapolei.

Tripler's Family Medicine clinic has started the roll-out with a few providers initially.

The Pediatric clinics and the U.S. Army Health Clinic-Schofield Barracks' Aviation Medicine, Family Practice, Pediatric and Troop Medical clinics are expected to complete the roll out of the system by early August.

In just a few short months, every Army primary care clinic in the Pacific will have RelayHealth fully implemented.

The Brian Allgood Army Community Hospital, Seoul, Korea; and Korea's USAHC-Camp Casey, USAHC-Camp Humphreys, USAHC-Camp Walker, and USAHC-Yongsan along with Japan's BG Crawford F. Sams U.S. Army Health Clinic are scheduled to begin implementing RelayHealth in the near future.

RelayHealth is a completely secure portal that is compliant with the Federal Health Insurance Portability and Accountability Act, or HIPAA. Encryption technology and a stringent privacy policy protect your personal information more securely than either the telephone or regular email.

Your information is only accessible by you and your health care team.

BRIEFS
from page 7

to especially recognize the outstanding contributions of Sgt. Marcus Foreman, who served as the campaign's coordinator.

HEALTH OBSERVANCES
Check out information on upcoming health observances for April online:

• Alcohol Awareness Month, www.ncadd.org
• National Donate Life Month, www.organdonor.gov
• National Minority Health Month, minorityhealth.hhs.gov
• Occupational Therapy Month, www.promotec.org
• STI Awareness Month, www.ashastd.org

NAME CHANGE
Effective Dec. 13, 2011, the Schofield Barracks Health Clinic's name changed to U.S. Army Health Clinic-Schofield Barracks. All services, programs and phone numbers have remained unchanged.

PRMC SOLDIER/NCO OF THE YEAR
The Pacific Regional Medical Command named Sgt. Gary Horne as the Noncommissioned Officer of the Year and Sgt. Terence Siemon as the Soldier of the Year for 2011 in a ceremony, March 23. Both Horne and Simon work at U.S. Army Health Clinic-Schofield Barracks.

SUBMISSION GUIDELINES
Do you know of a Pacific Regional Medical Command employee who recently received an Army Commendation Medal or higher level award or a Commander’s Award for Civilian Service? Send submissions to medcom.prmc.pao@us.army.mil.