



FEBRUARY 2012

February is Black History Month. The Civil Rights Acts of the 1960s were great breakthroughs. Not only did they afford African-Americans legal rights that every American should have, they provided for enforcement of the anti-discrimination laws of the federal government.

By the early 1970s, the military had instituted directives, policies, and training on race relations and equal opportunity.

EXPLORING MEDICINE

Tripler joins forces with the Boy Scouts to launch the island's first Medical Explorer Post for high school students.

See page 3

GIVING GIFT OF LIFE

The Armed Services Blood Program hosts recognition ceremonies each year thanking those who give their blood and time.

See page 4

EXPANDING SERVICES

Tripler's Behavioral Health Team expands successful program outside the gate.

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Tripler receives low-level trauma, strives for excellence in healthcare

STEPHANIE BRYANT

*Tripler Army Medical Center
 Public Affairs*

HONOLULU — Tripler Army Medical Center started receiving low-level trauma Department of Defense beneficiary patients, Jan. 25.

Tripler, who treated 307 patients last year who were qualified to be trauma patients, was approached by the State of Hawaii to enter into their integrated trauma system.

“The driving force behind Tripler’s participation is their commitment to patient care,” said Navy Capt. Kenneth Kelly, chief of the Emergency Department, TAMC.

According to Lt. Col. Kurt Edwards, chief of Trauma/Surgical Critical Care, TAMC, up until recently,



Tripler Army Medical Center Public Affairs/STEPHANIE BRYANT
Col. Michael Miller (center right), assistant chief, Emergency Department, Tripler Army Medical Center, performs an ultrasound on the right side of the SimMan 3G, patient simulator, while he leads a trauma care assessment during a mock simulated trauma activation in the TAMC Emergency Room, Jan. 12.

Tripler did not have a systematic way of assessing trauma patients possible, but they do have unused skill.

Tripler does not have unused capacity to make additional treatment

-See TRAUMA, page 7



U.S. Pacific Command/NAVY LT. THERESA DONNELLY

Spreading aloha

SCHOFIELD BARRACKS, Hawaii — John Lynch (left), former NFL player; and Calvin Johnson (right), Detroit Lions, sign a football for Pfc. James Hunt, 3rd Brigade Combat Team, 25th Infantry Division, Jan. 27, here. Lynch and Johnson, on Oahu for the Pro Bowl game, visited wounded warriors assigned to the Warrior Transition Battalion, here.

Heart services join, improve level of care

**PACIFIC REGIONAL
 MEDICAL COMMAND**
News Release

HONOLULU — Though you may not know it, Tripler Army Medical Center is making it easier for patients to take advantage of the robust and comprehensive set of heart services available to the Pacific region.

Tripler has always offered adult cardiology, pediatric cardiology and cardiothoracic surgery services, but in October 2011, the three were linked together to help patients

and improve their access to care. Collectively, the clinics are known as Heart Services.

“Before, patients would sometimes have to call several numbers for something as simple as a transfer between hospitals,” explained Lt. Col. John Verghese, chief of Cardiac Surgery, Tripler Army Medical Center. “We now operate a single pager system. (It allows) a member of our staff to get straight back with them.”

Currently, the Heart Services team is working

-See HEART, page 8

Nurse Corps celebrate 111 years of proud service

LT. COL. NANCY CANTRELL

Army Nurse Corps Historian

FORT SAM HOUSTON, Texas

—In 1899, the Army Surgeon General set criteria for a reserve force of nurses. The Spanish-American war proved that without a reserve force, there would be a nursing shortage during wartime. On Feb. 2, 1901, the Nurse Corps (female) became a permanent corps of the Medical Department under the Army Reorganization Act passed by Congress.

Army nurses worked tirelessly during World War II, often enduring the same hardships as combat troops. Sixty-seven Army nurses were held as Japanese prisoners of war for 37 months in the Philippines after the fall of Corregidor in 1942, during which they continued to care for the wounded. Nurses played an integral role in medical advancements: access to care closer to the front lines, advanced surgical procedures and post-surgical nursing, the administration of blood products and improvements in evacuation procedures led to greatly improved survival rates.

In June of 1950, North Korean communists crossed the 38th parallel, and President Truman ordered troops into South Korea for what has been known as “The Forgotten War” of Korea. The first U.S. Army combat forces arrived from Japan on July 6, 1950 with 57 nurses, the day after Task Force Smith engaged in the Battle of Osan, the

first U.S. ground action of the war. Army nurses worked throughout the Korean Peninsula in forward deployed mobile army surgical hospitals.

On Aug. 9, 1955, President Dwight D. Eisenhower signed H.R. 2559, the bill that authorized reserve commissions to male nurses.

Army nurses were deployed during the Vietnam War, beginning in 1965 during the rapid build-up of American forces. Trauma care specialization and an evolution of casualty care was a result of the Army Nurse Corps experience in Vietnam.

Operation Desert Shield/Storm (1990-1991) heralded a new era in trauma care, and the Army Nurse Corps led the way once again in cutting edge technology and critical care. Approximately 2,200 Army nurses served in 44 hospitals, some part of joint operations with host nations.

Since Desert Storm, Army nurses have deployed to Haiti, Bosnia, Kosovo, Iraq, Afghanistan, and for disaster relief and humanitarian efforts worldwide.

The current operations tempo requires a flexible and technologically advanced Army Nurse Corps. Army nurses serve with dignity and courage, continually striving for excellence. The Army Nurse Corps continues its transformation as a leading military health care force in the 21st century, a time of great opportunity and celebrates 111 years of proud service.



Nursing SGM explains patient ‘touch’ system

SGT. MAJ. GARNER DAUGHERTY

*Tripler Army Medical Center
Department of Nursing*

A major role of the senior non-commissioned officer is to provide mentorship to those Soldiers who follow.

Within Army Medical Command, we are required to know numerous systems and procedures that assist us in better serving our patients.

One of the many programs we need to know is the Patient Caring Touch System.

If you were stopped in hall the next time, say, Lt. Gen. Patricia Horoho, the Army’s Surgeon General, visited, could you explain to her what PCTS was?

Would you be able to explain how this helps us provide better patient care?

If any of you reading this said “yes,” I’m impressed. For those, who had to honestly answer “no,” I’m here to assist.

PCTS is a sustainable system that is being replicated for nursing care Armywide. Regardless of duty assignment, the PCTS will be the system of choice, thus promoting the same standards and increasing the same quality of care.

The system breaks down into five elements and ten components.

Enhanced Communications

Standardized documentation improves nursing efficiency and patient safety by using common language and documentation format across providers, units and facili-

ties.

Peer feedback allows the nursing team to develop through feedback from colleagues.

Patient Advocacy

Core values place our patients at the center of our care, guiding our daily nursing practice with our patients and their families.

Care teams consist of a lead registered nurse who directs care and supporting nursing team throughout the length of stay.



Daugherty

Healthy Work Environments

Shared accountability gives nursing team members a voice in their practice and the innovation of that practice through elected nursing practice councils at unit, facility, region and Army Nurse Corps levels.

Evidence Based Practices

Optimized performance includes the consistent collection and reporting of cascading metrics that track quality outcomes, business practices, satisfaction of the nursing team and patient satisfaction with their care.

Centers of nursing science and clinical inquiry promotes awareness and application of evidence-based nursing practice at the bedside.

Capability Building

Talent management develops the future cadre of Army Nursing Leadership.

—See PCTS, page 7

Pulse of the Pacific

Pacific Regional Medical Command

www.tamc.amedd.army.mil

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ARMY MEDICINE
Serving To Heal...Honored To Serve

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Robots increase patients' quality of life at ENT clinic

STEPHANIE BRYANT

*Tripler Army Medical Center
Public Affairs*

TRIPLER ARMY MEDICAL CENTER, Hawaii — In May of 2011, the da Vinci Surgical System was embraced by two of Tripler Army Medical Center's otolaryngologists. The robot, which was first purchased in 2009, has been used to support a variety of surgical specialties.

Otolaryngology is a branch of medicine and surgery that specializes in the diagnosis and treatment of ear, nose, throat, and head and neck disorders.

Lt. Col. Joseph Sniezek, chief, Otolaryngology, Department of Surgery, Tripler Army Medical Center, known as TAMC, and Lt. Col. Christopher Klem, chief, Head and Neck Surgery, Otolaryngology, Department of Surgery,

TAMC, are excited that the robot has found its way to head and neck surgery. Since last May, the specialists have performed about eight thyroidectomies and about a dozen Trans Oral Resection Surgeries, or TORS.

"These are surgeries we are familiar with, but (now) we have a new tool," Sniezek said. "It takes a little different thought process for how to approach it. It sort of is a fresh way to do a surgery that we do all the time and the patients do better, so it is exciting."

Tripler is the first Department of Defense medical treatment facility and the first hospital in the state of Hawaii to do these two types of head and neck surgeries using the robot.

One of the major advantages of using the robot to perform these surgeries is dramatically



Tripler AMC/STEPHANIE BRYANT
Lt. Col. Joseph Sniezek, chief, Otolaryngology, Department of Surgery, Tripler Army Medical Center in Hawaii, explains how to operate the controls of the da Vinci Surgical System.

better cosmetic results.

It is a very difficult area of

-See ENT, page 7

Tripler, Scouts join forces to explore medical fields

STEPHANIE BRYANT

Tripler Army Medical Center Public Affairs

TRIPLER ARMY MEDICAL CENTER, Hawaii — The first Medical Explorer Post on Oahu held its initial organizational meeting, here, Jan. 28.

Tripler Army Medical Center has partnered with the Boy Scouts of America using a Learning for Life Health Career Exploring program to bring real-world medical and health career experiences to young men and women on island.

Lt. Col. Lozay Fouts, director, Medicine Nursing Services, TAMC, is the principal advisor for Post 1948. He said two high schools near TAMC were chosen to test out the program; Radford and Moanalua High Schools.

Fouts and two representatives from BSA, Ryan Blangiardi and Keao Miller, went to both high schools and spoke with students about what the program has to offer.

"(The post mission) is about helping them explore their career paths and choices," Fouts said. "We want to put them in and provide them (medical and health) activities so they can see

-See EXPLORER, page 6

Ask the Dietician

CAPT. JOY METEVIER

*Tripler Army Medical Center
Nutrition Care Division*

"What is all the hype about whole grains?"

There is no question about it – whole grains are better for us than refined grains.

From the Surgeon General down to the front of your favorite cereal box, Americans are urged to eat whole grains. This leads to some questions: What does the research say about whole grains? How is a whole grain defined? What do all the food labels mean?

What is a "whole grain?"

According to the Whole Grain Council, whole grains or foods made from them contain all the essential parts and naturally-occurring nutrients of the entire grain seed.

Barley, buckwheat, corn (including whole cornmeal and popcorn), oats (including oatmeal), rice (including brown, colored and wild

rice), rye and wheat are the most common whole grains available to US consumers.

Refined grains differ from whole grains in that the refining process removes the germ and the bran, crucial components of the grain.

This leaves only the endosperm or starchy component of the grain.

The endosperm is then ground into a flour that can be up to 90 percent less nutritious than the whole grain alternative.

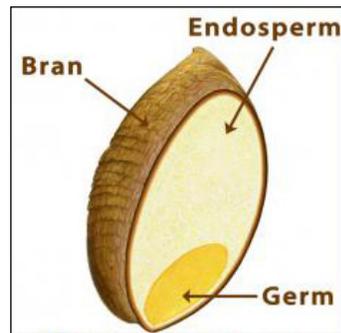
How do whole grains benefit my health?

The fiber, vitamin and mineral content of whole grains has an effect upon the development of many chronic diseases. Risk for stroke, type 2 diabetes, gastrointestinal disease, heart disease and hypertension can be reduced by eating at least three servings of whole grain per day.

Aim for at least 48 grams of whole grains per day for balanced health.

Whole grain food claims

Figuring out the best whole grain



Whole Grains Council

Anatomy of a whole grain.

products can be tricky. Label packaging claims such as "Made with whole grains" or "Contains whole grains" do not mean that the product is a good choice.

Whole wheat Ritz crackers, for example, list whole wheat flour as the fourth item on the label, after enriched flour, its primary ingredient.

According to the Food & Drug Administration, the use of the "whole wheat" label only indicates that whole grain flour was used in part of the product.

When shopping, look for "whole grain _____" as the first ingredient listed on the back of the package. Also look for front of package labeling that states "100% whole grain" to ensure that you are getting a complete serving.

Taking it to the commissary

Eating hot or cold cereal is one of the best ways to include whole grains in your diet. To choose the best cereals, memorize these five guidelines and be sure that it is made with 100% whole grain.

- At least three grams fiber/serving
- No more than six grams sugar/serving
- No trans fats (no "partially hydrogenated oil" should appear in the ingredients list)
- No more than 175 milligrams sodium/serving
- At least 3 grams protein/serving



To submit a question for "Ask the Dietician," send an email to joy.metevier@us.army.mil.

SBHC's own recognized for outstanding support to Reserve, Guard Component

STEPHANIE RUSH

Pacific Regional Medical
Command Public Affairs

SCHOFIELD BARRACKS, Hawaii — For his unwavering support of Guard and Reserve employees, Maj. Todd Jackson, clinical nurse officer-in-charge at Schofield Barracks Health Clinic's Acute Care Clinic, earned the Patriot Award, Feb. 8.

Surrounded by his supervisors, coworkers and employees, Jackson was presented the Employer Support of the Guard and Reserve award by P. Pasha Baker, U.S. Army Reserve Ambassador.

Designed to recognize employers who support a National Guard and Reserve Soldiers, recipients of the Patriot Award are nominated by employees.

Employers winning the award demonstrate support for service in the National Guard and Reserve, publicly acknowledges the contributions of Reserve component employees to the nation's defense, and support Guard and Reserve employees above and beyond the Uniformed Services Employment and Reemployment Rights Act (USERRA) requirements.

"We talk about Soldiers and families sacrificing, but when it comes to members of the Guard and Reserve, bosses also sacrifice," said Howard Sugai, military outreach coordinator, Hawaii ESGR. "When (an employee) has to leave his or her job for military duties, whether it's for a deployment or training, someone else has to pick up his or her load.

"That sacrifice among you folks and your organization; we're here to tell you it has not gone

-See PATRIOT, page 8



Pacific Regional Medical Command/STEPHANIE RUSH

Howard Sugai (right), military outreach coordinator, Hawaii Employer Support of the Guard and Reserve, presents Maj. Todd Jackson, clinical nurse officer-in-charge, Schofield Barracks Health Clinic Acute Care Clinic, with a Patriot Award lapel pin, Feb. 8. Jackson was nominated for the award by one of his employees, Nicole Moorecherry, emergency care technician, SBHC ACC.

Recognition ceremony highlights contributions

PACIFIC REGIONAL
MEDICAL COMMAND
News Release

HONOLULU — Deployed as a combat medic, Sgt. 1st Class James Lee was well aware how important having a reliable supply of blood is.

During a deployment to Iraq in October 2006, he found out just how important firsthand, when a grenade was thrown into the vehicle he was driving.

Lee, now the 18th Medical Deployment Support Command's medical operations noncommissioned officer, was the guest speaker at Tripler's Armed Services Blood Program's 8th Annual Donor Appreciation Luncheon, held Feb. 3, at the Tradewinds Enlisted Club on Joint Base Pearl



Lee

Harbor-Hickam.

"It was a humbling experience to receive blood. One minute you're okay and the next minute, you're fighting for your life," Lee explained. "Everyone in this room is saving lives every day. It's a domino effect."

Lee returned to Iraq a year later. Less than a week after arriving in theater, a mortar round landed inside his forward operating base. Four people were injured.

"I was one of the medics on scene, patching people up," he recalled. "Imagine if I wasn't there, if I didn't make it. I just happened to be around the corner when that mortar round landed. I was at the right place at the right time. It's a domino effect."

In his current job, Lee travels around the Pacific working with first responders. He stresses the importance of medicine and sustainable blood programs.

"I wouldn't be able to do

that if someone didn't donate and that blood wasn't there for me," Lee said.

Each year, the Blood Donor Center hosts an appreciation luncheon to recognize the people who have donated blood and time recruiting donors, hosting blood drives in their units.

Awards were given for the Top Whole Blood Donor, Top Platelet Donor, Top Blood Drive Coordinators, Community Support, Top Unit, TAMC Blood Battle, Phlebotomist of the Year and Red Cross Volunteer.

Blood and blood products are used for patients of all ages for many reasons. From cancer patients or surgical patients, to those with battlefield injuries—military members depend on blood donors every day. By giving blood to the ASBP, you ensure life-saving blood products are available whenever and wherever service members and their families are in need.



Tripler Army Medical Center Visual Information/SORAYA ROBELLO

Col. Karen Burmeister (left), Chief, Department of Pathology, Tripler Army Medical Center, presents Bernice Oshita with the Red Cross Volunteer of the Year award at the Armed Services Blood Program's 8th Annual Donor Appreciation Ceremony.

"Tripler's Blood Donor Center program collects about 7,000 to 7,500 units of blood each year," explained Michelle Lele, blood donor recruiter and coordinator, Tripler Blood Donor Center. "Blood collected stays here at Tripler Army Medical Center as well as weekly shipments to Afghanistan."

Donors from all services, government employees, retirees, military family

members, and civilians can donate to the ASBP. Though travel to certain areas, some medications, and medical conditions may temporarily, indefinitely, or permanently restrict donation, most healthy adults are eligible to give blood.

"Blood is like a parachute," said Navy Lt. Cmdr. David Koch, Joint Blood

-See ASBP, page 7



Brian Allgood Army Community Hospital/CHUCK YANG

Chaplain (Capt.) Christian Bang, 121st Combat Support Hospital, gives the benediction during a remembrance service for Col. Brian Allgood, Jan. 20, at the Brian Allgood Army Community Hospital chapel.

Allgood remembered by friends and family

CHUCK YANG

*Brian Allgood Army
Community Hospital*

U.S. ARMY GARRISON-YONGSAN, Korea — The Brian Allgood Army Community Hospital/121st Combat Support Hospital held a remembrance service for Col. Brian Allgood, Jan. 20, at the chapel, here.

Allgood commanded the 121st Combat Support Hospital and 18th Medical Command from July 2004-June 2006. While serving as the command surgeon for the Multi-National Forces-Iraq, he, along with 11 others, were killed when his helicopter was shot down January 20, 2007 in Iraq.

Allgood graduated from the United States Military Academy and received a Doctor of Medicine degree from the University of Oklahoma. He completed his residency in orthopedic surgery at Brooke Army Medical Center, San Antonio, and subsequently became board certified in orthopedic surgery.

During his command in Korea, Allgood masterfully guided the transformation of medical units containing more than 2,500 personnel, orchestrated the closure of two medical and two dental treatment facilities, redeployed one air ambulance company to the continental U.S., transferred a second air ambulance company to the 2nd Infantry Division's 2nd Combat Aviation Brigade, and guided the

renovation of the U.S. Army military treatment facility located here.

Allgood was responsible for improving the quality of care for Department of Defense beneficiaries in Korea, strengthening the Republic of Korea and U.S. alliance through the addition of six Korean Affiliated Hospitals to Korea's Tri-care healthcare network.

He made a marked and lasting impact on the provision of healthcare in the Korean Theater of Operations.

Many staff members, who served with Allgood during his command, attended the service. Chaplain (Maj.) Christopher Degn, Brian Allgood Army Community Hospital, asked the staff of BAACH to consider the first reframing of "symbolic mortality."

In response, he received kind words, warm reflections and thoughtful compliments on Allgood's legacy.

Allgood's former coworkers, friends and family described him as an incredible husband, father, doctor, Soldier, and leader.

He was a people person who knew many of the hospital staff on a first-name basis, a caring leader who always had time to listen to his staff, and a quiet man who walked softly but had a quick wit, an easy smile and a very good, dry sense of humor.

"What has touched my heart is that, Brian Allgood's spirit does live on," Degn said. "He lives on in us by the way we serve."



Pacific Regional Medical Command Public Affairs/STEPHANIE RUSH

Giving back

TRIPLER ARMY MEDICAL CENTER, Hawaii — First through fourth grade students from the Navy Hale Keiki School, in Honolulu, came by Tripler's Fisher House II, Feb. 7, to donate items for the families staying there.

Each year, to celebrate the 100th day of school, the students aim to collect at least 100 items per grade level. They surpassed their goal and brought more than 1,000 items. This is the first time the students took a field trip to see where their donations go and learn about the Fisher House.

Read more about the Fisher House and its annual recognition ceremony and luncheon, held Feb. 3, on page 6.

Behavioral Health Team expands, offers services in community

STEPHANIE BRYANT

*Tripler Army Medical Center
Public Affairs*

TRIPLER ARMY MEDICAL CENTER, Hawaii — Since 2008, the School Behavioral Health Team from the Child and Adolescent Psychiatry Services, here, has been providing a comprehensive array of school-based behavioral health programs and services to support military students, families, and community.

From its establishment, the team has supported five on-post schools on island; two on Schofield Barracks, two on Wheeler Army Airfield, and one on Marine Corps Base Hawaii, Kaneohe.

The SBHT is comprised of a multidisciplinary team that consists of two child and adolescent psychiatrists, five social workers, and two psychologists.

"(The SBHT clinicians) try to promote a social emotional health at the school," said Dr. Stan Whitsett, SBHT clinical director. "We figure that if the climate a child is spending 6-8 hours a day in is healthy, then the child has a better chance of thriving."

Whitsett said since the teams' integration at the middle school on WAAF and the elementary school on MCBH, there has been a 50 percent reduction in behavioral reports at those schools, which are used to document behavior issues in school.

"The last few years that we have been there, the mentality and the feeling of the school have changed dramatically," said Mindy Delmonico, SBHT administrative officer.

Recently, the diverse team has started supporting five of the

-See SBHT, page 8



Tripler Army Medical Center Public Affairs/STEPHANIE BRYANT

Rick Cruz (right), resident of Tripler Fisher House, speaks at the Tripler Fisher House Recognition Luncheon, Feb. 3. Cruz spoke about his experiences while staying at the Fisher House.

Fisher House recognizes contributors, supporters

STEPHANIE BRYANT

Tripler Army Medical Center Public Affairs

HONOLULU — Tripler Fisher House held a recognition ceremony and luncheon for its donors and contributors, Feb. 3, here.

A Fisher House is a comfort home for families of patients receiving medical care at major military and Veterans Affairs medical centers. They are given to the U.S. government as gifts and are built by the Fisher House Foundation, a nonprofit organization that builds the houses and assists in the coordination of private and public support for the homes.

Tripler Army Medical Center is home to two Fisher Houses and provides lodging to service members, retirees and their families from all over the Pacific Region.

“We want to say thank you,” said Theresa Johnson, Tripler Fisher House manager. “We want to recognize (everyone) who does so much that enables us to be able to provide to these service members and their families at the level that we do.” Johnson said she printed off nearly 150 recognition certificates for the ceremony to recognize supporters from all over the island, both military and civilian organizations.

During the recognition ceremony, Rick Cruz, a current resident of the Tripler Fisher House, spoke to the audience about his experience at Fisher House and

how their contributions have affected him and other residents. Cruz, a retired Marine, brought his wife from Guam to be treated at TAMC.

When estimating how much it would have cost him and his wife to stay downtown for the 10 months of treatment she requires, the hotel alone would have cost \$30,000.

“Fisher House stands out and provides a comfortable home environment,” Cruz said. “We appreciate every gift and personal contribution. I can’t stress enough our appreciation for all you do.”



Following Cruz, Johnson invited all the groups, one-by-one, to be recognized and have their photograph taken with two vice chairs of the Fisher House Foundation, Audrey Fisher and Nancy Edelman, who were visiting as Fisher House Ambassadors.

dors.

James Weisskopf, vice president of the Fisher House Foundation, also attended the event with Fisher and Edelman. He said he always enjoys Tripler’s Fisher Houses because they are the only houses where the residents act as volunteers and cook for each other.

“Even the smallest gestures we make (for the residents) ... it all really does make a difference,” Johnson said.



Learn more about the Fisher House Foundation and how you can help at www.fisherhouse.org.

EXPLORER

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that they can aspire to be whatever they want to be.”

Participating students elected a student committee of leaders that will help the Adult Leader Explorers manage the post.

More than 40 students attended the meeting and Foots, who was a boy scout during his youth, said he has about a dozen members of Tripler’s staff have volunteered to act as Adult Leader Explorers.

One of those volunteers is Lt. Col. Todd Briere, chief, Patient Administration Division, TAMC.

“(The post is an) excellent opportunity for these students to participate in,” said Briere, who also was a boy scout. “Explorer scouts make decisions on what they want to explore and we (volunteers) just guide them.”

Briere said when people initially think of PAD, paperwork and medical records come to mind, but he hopes the department will be able to offer more.

“In combat, (PAD) deals with movement of patients

and evacuation for patients,” Briere said. “We hope to organize two-man carry and litter (collapsible stretcher) training and an obstacle course for the students.”

Foots agreed and said the explorer leaders hope to “encapsulate the hospital environment” for the students. The post plans take the students to explore Tripler and other military clinics on island to observe a variety of health care providers in their work environments.

The idea for the post came from Brig. Gen. Keith Gallagher, commanding general, Pacific Regional Medical Command and TAMC, who had started an explorers’ post when he was stationed at Fort Campbell, Ky.

“The sky is the limit,” Fooks said. “(The commanding general’s) vision is that (in future years) it will be open to all the high schools on island and that we will eventually be able to partner with all the different medical communities on the island.”

The Post meets the second and fourth Saturday of each month at 10 a.m. in Kyser Auditorium and the application fee is \$10.



Tripler Army Medical Center Public Affairs/STEPHANIE BRYANT

Lt. Col. Lozay Fooks, director, Medicine Nursing Services, Tripler Army Medical Center, addresses high school students from Moanalua High School, Jan. 19, in the school’s library. Students, grade 9-12, were invited to be a part of Hawaii’s first Medical Explorers Post, which is a program designed to bring real-world medical and health career experiences to young men and women on island. The post is result of a partnership between TAMC and the Boy Scout of America.

TRAUMA

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"We have a certain amount of expertise and if you were really to look on (Army Medicine), Tricare, and Military Health System mission statements, their missions are to provide care and promote health of the military person," Edwards said. "One of the biggest things that kills and injures our Soldiers is trauma."

When entering the state's trauma system, Tripler will become part of their Trauma Registry and be able to share trauma data.

"As a part of the Trauma Registry we will share data and outcomes to improve the overall trauma system in Hawaii," said Brig. Gen. Keith Gallagher, commanding general, Pacific Regional Medical Command and TAMC. "We are honored to be part of this system and to help improve the trauma system and to

share our experiences and insights gathered from multiple combat tours of our providers and nurses."

A hospital's capability to care for trauma within the state is currently based on four level systems with Level IV being the lowest capability and Level I being the highest.

"A State of Hawaii Level III trauma center does not require instant presence of a trauma surgeon, anesthesiologist, or operating theater personnel," Edwards explained. "There are no requirements to have a sub-specialty, surgical services, other than orthopedics, available.

"The most likely reason to bypass a Level III facility and proceed to a Level II would be a person sustaining an injury severe enough to cause them to not be normally responsive," Edwards added.

Tripler, just like any other military organization, has prepared for

their new trauma duties by training. Prior to Jan. 25, they held multiple trauma assessment simulations using their simulation center's SimMan 3G patient simulator.

Edwards said they learned two valuable lessons from the mock activations; the physicians must be trained to answer the radio calls from Emergency Medical Services and TAMC needed to create a system of group paging to notify trauma teams when a trauma patient is en route.

Edwards said when it comes to trauma activations, everyone involved, no matter what the level, all play a vital role.

Prior to activating the trauma team, the physician must take the radio call from the EMS first responders.

Edwards said this is important because it helps determine the facility the patient will actually be transported to.

As TAMC settles into its new role, the next step for the hospital is to expand their trauma personnel by hiring two additional trauma surgeons.

This is not a requirement to join Hawaii's trauma system, but Tripler's command wants to ensure they can provide excellent coverage for the hospital and its patrons prior to accepting civilian patients, explained Edwards.

Since Jan. 25, Tripler's trauma program has responded to seven trauma activations.

"(Our goal is to ensure) that trauma care is better today than it was yesterday," Edwards said.



ENT

from page 3

the body to access, Sniezek explained.

"We would have to do pretty radical procedures like big incisions to open the face or split the jaw in half," Sniezek explained. "The robot allows us to just use the robot's arms and a camera placed through the mouth, a natural orifice, and then we can resect the tumor without having to split the mandible or do facial incisions."

Sniezek added that this applies to the thyroidectomies as well because instead of removing the thyroid through the neck, in certain cases they can enter through the arm pit.

For TORS, Klem said the recovery time is much quicker for the patient and typically less chemotherapy and radiation are required.

"When we talk about recovery, we talk about speech and swallowing," Klem said. "So far, since this is a relatively new procedure, studies are showing that speech and swallowing is much better than for open surgery for this type of resection."

"The quality of life and overall function has been much, much better with this type of minimally-invasive surgery followed by lower dose radiation therapy," he added.

Sniezek and Klem are excited about the possibilities that this technology gives surgical specialties.

Sniezek said after the technology was created in the early 1990s, the Defense Advanced Research Projects Agency became very interested in supporting it because of its potential to allow surgeons to operate remotely on Soldiers



Tripler AMC/STEPHANIE BRYANT

A simulation tool is set up on the da Vinci Surgical System table for surgeons and residents to use.

wounded on the battlefield.

"You don't have to be in the same room to control the robot," Sniezek said. "You can be on another continent. It would allow a surgical specialist here at Tripler to operate on a wounded warrior in Afghanistan."

In December 2011, Klem and Sniezek started doing head and neck surgeries at Queens Medical Center in Honolulu and one of the surgeries involved the robot.

"This is a great resource sharing agreement between Tripler and Queens, that I think is a great example of the partnership between military and civilian medical resources," Sniezek said.

Tripler and Queens use the same kind of robot to perform the surgeries.

"I think it is important to get the word out that military medicine has the same cutting edge treatment for these difficult cancers as anyone does," Klem said.

"We are committed to staying on the cutting edge of advancements in surgical treatments, particularly for cancer therapies," Sniezek added. "Tripler is offering the very latest in techniques and technologies that are available."

ASBP

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Program officer, U.S. Pacific Command, and the ceremony's opening speaker. "You can't jump without it. Whether you donate blood or your time to organize blood drives, we thank you and we applaud your efforts. Without you, we couldn't do all the great things to assist the doctors with savings lives."



Visit www.militaryblood.dod.mil to find a blood donor center, dates for upcoming blood drives or for more information.

PCTS

from page 2

Leader development enables our nursing team members to develop as leaders and prepares them to succeed in contingency-based operations.

Skill building provides consistent, relevant opportunities for nursing team members to refresh their knowledge and patient-care abilities.

Now you know and you'll be able to answer the question. But more importantly, you'll be a part of a team that builds a relationship with its patients. With this team effort we improve efficiency and patient safety, while personal interaction with our patient and each other enables us to provide the best quality care to our patients.

HEART

from page 1

on reaching out to their beneficiaries who may not be aware of what services are available to them. Eligible patients include all Veterans' Affairs beneficiaries, active duty service members and their families, and retired service members and their families.

"Retirees oftentimes have other insurance and Tricare is secondary for them," Verghese said. "We're finding) they just don't know about the level and quality of services available here at Tripler."

In addition to reaching out to beneficiaries who may not know what services are available, the Heart Services team has also been working on making it easier for prospective and current patients to understand how the Heart Services team works and what their experience will be.

"We started the website so we (could provide a comprehensive) heart education for patients," Verghese said. "We wanted to help patients know what to expect when they get here, and what resources are available for them, for everything from post-surgery nutrition to the phone num-

ber of the Tripler Trolley."

Heart Services at Tripler are not available only to eligible beneficiaries in Hawaii. Approximately half of the patients seen are from across the region, to include American Samoa, Guam, Japan, Korea and civilian patients admitted through the Pacific Island Health Care Program, which is a federally funded grant that provides care for a diverse patient population from various Pacific Basin countries.

"We are very proud of the host of services we offer here at Tripler," said Lt. Col. Matthew Studer, chief, pediatric cardiology, TAMC. "We are always looking to advance the care and service we offer to patients and military dependents."

Services Available

Tripler's adult cardiology clinic provides a wide spectrum of cardiovascular care to include evaluation, diagnosis and treatment of cardiovascular disorders to include coronary artery disease, rhythm disturbances, chronic heart failure, adult congenital heart disease and a variety of other medical conditions affecting the cardiovascular system.

The pediatric cardiology clinic provides a wide range of cardiac care for infants and chil-

dren with congenital and acquired heart disease along with services for adult patients born with congenital heart disease. The clinic also manages an extensive fetal heart program that is focused primarily on the evaluation of the fetal heart through ultrasonography. Pregnant mothers are seen during their second and/or third trimester. Diagnostic and interventional heart catheterizations are also performed, which includes hemodynamic assessments of patients with congenital heart disease and percutaneous closures of selective defects.

The cardiothoracic surgery clinic provides the following surgeries: coronary artery bypass (CABG), valve, aortic, cardiac tumor removal, thoracic and atrial fibrillation. To the extent possible, minimally invasive techniques are used and patients and their families are educated on how to manage during the postoperative period and briefed on the different agencies available for additional support.



View more on the Heart Services available at Tripler at <http://go.usa.gov/Q8o>.

SBHT

from page 3

island's child development centers, but more uniquely, a public school off-post; Wahiawa Elementary.

The SBHT has wanted to support the public, off-post schools since its origin, but because of federal regulation they had not been able to make the move.

Delmonico said the reason the expansion is possible is because Queens Medical Center, who offered their support for

collaboration.

Queens built a parallel team to the SBHT and the SBHT trained them on their model of community behavioral health. With TAMC covering Department of Defense beneficiaries and Queens supporting the non-DoD children, Whitsett said they will be able to "provide blanket behavioral health services to any child who needs it at this elementary school."

"Wahiawa is a trial for us," Whitsett explained. "We are testing a clinical model of service delivery

that is dependent on a partnership that has, as far as we know, never been achieved anywhere else."

Since the beginning of the current school year, the SBHT has been building its case load at Wahiawa Elementary and currently each team supports about 10 children.

"I have been a clinician for close to 30 years now," Whitsett said. "I have practiced in virtually every setting that a psychologist can practice in and I have never seen services work as well as these do. The model works, and works well."

The SBHT falls under the leadership of Child, Adolescent and Family Behavioral Health Offices of the U.S. Army. The model originated in Hawaii at TAMC by Dr. Michael Faran, the current director of CAF-BHO, back in the early 90s.

In addition to the schools on island, the SBHT community model of care is currently being used at Joint Base Lewis McChord, Wash.; Fort Campbell, Ky.; Fort Carson, Colo.; Fort Meade, Md.; as well as Landstuhl and Bavaria Medical Department Activity, Germany.

PATRIOT

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unnoticed or unappreciated," Sugai continued.

Jackson says supporting Reserve component employees is made easier with his staff. Everyone at the clinic works together to plan their personal leave around others' military training and cover down for any employees who are out of the office for an extended period of time.

"(Receiving this award) is a huge honor. It's humbling to be recognized by your staff," Jackson said. "My philosophy has always been you take care of your staff and your staff will take care of the mission, and everything else will fall into place."

Jackson's philosophy is working, and his employees have taken notice.

"I feel that as a Soldier, he's always been there for us," said Nicole Moorecherry, Jackson's employee who nominated him for the award. "Every

time I have to leave as a Reservist, I'm never given an issue about it. I'm asked what days I need to take off, and the schedule is adjusted. Everyone just watch over my position until I get back."

Moorecherry, an emergency care technician in the Acute Care Clinic, spends one weekend a month and at least two weeks a year as a medic with the 1984th U.S. Army Reserve Hospital Detachment 2.

"The military training and reserve training is the first thing we (put on the schedule). That's priority. It's their job," Jackson said. "It's their way to help serve the nation. They're double hit as citizen Soldiers. Here, these guys are working for the government as civilians already and then they're also Soldiers."

Employer Support of the Guard and Reserve is a Department of Defense organization within the Office of the Assistant Secretary of Defense for Reserve Affairs.

Established in 1972, ESGR promotes coopera-

tion and understanding between Reserve component members and their civilian employers, and assists in resolving any conflicts that arise from an employee's military commitment. ESGR operates through a network of thousands of volunteers throughout the nation and American territories to include American Samoa, Guam, Puerto Rico and Saipan.

Reserve components (the total of all National Guard members and Reserve forces from all branches of the military) make up approximately 48 percent of the nation's military manpower. In the current operating environment, civilian employers play a critical role in the defense of the nation by complying with the employment laws that protect the rights of employees who serve in the Reserve component.



For more information on Employer Support of the Guard and Reserve, visit www.esgr.org.