

Pulse of the Pacific



Pacific Regional Medical Command

Imua: One Team

Volume 1, Issue 10

OCTOBER 2012

From Sept. 15-Oct. 15, the Army honors and recognize the contributions of Hispanic-Americans.

Other important military and national observances in October include National Disability Employment Awareness Month, National Depression Education and Awareness Month, National Domestic Violence Awareness Month, Energy Awareness Month and Breast Cancer Awareness Month.

CFC KICKS OFF

The Combined Federal Campaign kicks off with an opening ceremony at Tripler, Oct. 1.

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TOP DOC VISITS REGION

Dr. Jonathan Woodson, Assistant Secretary of Defense for Health Affairs and Tricare director visits Tripler during tour of Pacific region.

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MASS FLU EXERCISE

All branches of service on Oahu come together for mass flu vaccination exercise.

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Smith takes command of PRMC as Gallagher retires

PACIFIC REGIONAL MEDICAL COMMAND
News Release

HONOLULU — Soldiers, staff, family members and government civilians, along with local leaders, gathered at Tripler Army Medical Center, Oct. 4, to bid “a hui hou” to Brig. Gen. Keith Gallagher, outgoing commander of Pacific Regional Medical Command and TAMC, and to welcome the incoming commander, Col. J. Anson Smith.

Gallagher has commanded PRMC and Tripler since May 25, 2010, and under his command the Pacific region has led the way for U.S. Army Medical Command in numerous initiatives.

“Brig. Gen. Gallagher’s visions recognized that the future success of military medicine and the optimal health of our force and our families



Tripler Army Medical Center Public Affairs/STEPHANIE BRYANT

Lt. Gen. Patricia Horoho (right), U.S. Army Surgeon General and commander, U.S. Army Medical Command, passes the Pacific Regional Medical Command colors to Col. J. Anson Smith as he takes command of the region and Tripler Army Medical Center, Oct. 4 at the TAMC Flag Pole. Smith is replacing Brig. Gen. Keith Gallagher as he retires after 34 years of service to the U.S. Army.

would only be assured through partnerships that improved the business and health care, the administration of health and the transformation to a

system of health,” said Lt. Gen. Patricia Horoho, U.S. Army Surgeon General

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PRMC Public Affairs/STEPHANIE RUSH

Honorable visit

SCHOFIELD BARRACKS, Hawaii — Staff Sgt. Tere Bandy, Warrior Transition Battalion, thanks Sammy L. Davis, a Medal of Honor recipient, for his service and sacrifice in a meet and greet session at the Soldier and Family Assistance Center, here, Oct. 3. Davis, along with Roger H.C. Donlon (seated), received the nation’s highest medal for valor for their actions during the Vietnam War. Of the 81 living MOH recipients, 50 were in Hawaii for the Congressional Medal of Honor Society’s annual convention, Oct. 1-6.

Schofield hosts terrain walk, educates Army leaders on behavioral health programs

PACIFIC REGIONAL MEDICAL COMMAND
News Release

SCHOFIELD BARRACKS, Hawaii — More than 90 of U.S. Army-Hawaii’s battalion-level and above command team members took part in a terrain walk at U.S. Army Health Clinic-Schofield Barracks in order to learn about behavioral health and substance abuse services available to their Soldiers and families, Sept. 27, here.

The walk was just one of the many events going on all day across Hawaii’s Army installations in support of the Armywide Suicide Prevention Stand Down Day.

According to the Army’s G1 Suicide Prevention website, www.preventsuicide.army.mil, the intent of a terrain walk for suicide prevention is to link leaders and their Soldiers with the activities and agencies that provide behavioral health services to the entire Army family.

The Embedded Behavioral Health Clinic hosted scheduled visits with all 3rd Brigade Combat Team, 25th Infantry Division, command teams in order to let commanders and enlisted leaders meet their primary,

-See TERRAIN, page 8

Tripler hosts Pacific region's first behavioral health summit

STEPHANIE BRYANT

Tripler Army Medical Center Public Affairs

HONOLULU — Tripler Army Medical Center hosted the first behavioral health summit in the Pacific region, Sept. 13-14, here.

The 2012 Pacific Region Behavioral Health Summit focused on the theme of "Answering the Call: Addressing the Challenges of Behavioral Health within the Pacific Rim."

At the summit, Air Force, Coast Guard, Marine, Navy, local hospital and university behavioral health providers gathered together to share knowledge and discuss the latest tactics, strategies, technologies, systems, treatments, processes and services for patient care.

Providers were offered the opportunity to build partnerships between and within the Department of Defense, Veterans Affairs and the community to assist in developing effective behavioral health prevention strategies.

Dr. David Brown, chief, Behavioral Health, Pacific Regional Medical Command, or PRMC, opened the summit by discussing the importance of knowledge sharing. Brown said as a child he learned about Hermann von Helmholtz, a German physicist, and his ideas about the creative process.

"As we learn our crafts and our skills, we saturate ourselves with knowledge," Brown explained. "The knowledge incubates and, after awhile, you have that 'eureka' moment."

Presentations and discussions were held during the two-day gathering covering areas ranging from resiliency and suicide prevention to post-traumatic stress disorder and mild traumatic brain injuries.

Brig. Gen. Keith Gallagher, commander, PRMC and Tripler Army Medical Center, or TAMC, echoed Brown's message about the importance of knowledge sharing to combat behavioral health issues.

"Because you are here signifies how important behavioral health is (as well as) your desire to effectively treat the various diseases that our ser-



Defense Media Activity-Hawaii News Bureau / U.S. AIR FORCE TECH. SGT. MICHAEL HOLZWORTH
Brig. Gen. Keith Gallagher, commander, Pacific Regional Medical Command and Tripler Army Medical Center, addresses the behavioral health providers in attendance at the 2012 Pacific Region Behavioral Health Summit, held Sept. 13-14, 2012, in Tripler's Kyser Auditorium. The summit was the first gathering of behavioral health providers in the region and created an opportunity for the providers to build relationships and to share knowledge and best practices for patient care.

vice members, our families and our veterans are going through," Gallagher said. "It also signifies your thirst for knowledge."

"The Army continues to put forth great effort, great intellect and funding in order to mitigate some of the effects of some of the challenges (our military) faces today," Gallagher added.

Due to the region's geography, the Pacific has additional challenges obstructing its efforts that other geographic areas of responsibility do not. In an effort to overcome these challenges, PRMC has embraced tele-health and it has become an important resource for providers, especially those who work in behavioral health.

"Tripler really is leading the way in tele-behavioral health," said Karl Kiyokawa, vice president, Hawaii Operations, TriWest Healthcare Alliance. "I had an opportunity to observe a pilot program (for behavioral health) and to sit behind the providers as they did the (video teleconferences). I

(also) talked to the Soldiers and the providers. The growth and evolution of (the tele-behavioral health) program is just phenomenal."

In addition to current services, treatments and technologies, the summit allowed providers to work together to identify areas for future research on the spectrum of behavioral health and its impact on service members, veterans, families, caregivers and health care providers.

As the providers looked to future initiatives, the key focus stays on reaching the beneficiaries who need them.

"When you get injured, shot or blown up, you can see those wounds, but many of our Soldiers are hiding wounds from the tragedies they have experienced and the fighting they have done," Gallagher explained. "What we have got to do is get them to come forward and talk about that with us. Once they start talking about it, the healing begins."

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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Comments or submissions for the Pulse of the Pacific should be directed to the editor at 808-433-5783 or by email at medcom.prmc.pao@us.army.mil.

— Ask the Dietitian —

1ST LT. CAROLYNN RITTERMANN
Tripler Army Medical Center
Nutrition Care Division

“What are the benefits of a plant-based diet?”

If your diet is rich in fruits, vegetables, nuts, whole grains and meat substitutes such as soy, you may have reduced risks of many diseases including heart disease, certain cancers and diabetes, as well as bone, kidney and eye diseases.

Making dietary changes now could prevent development of some of the most common lifestyle diseases, or prevent their progression if you have already been diagnosed.

Diets high in animal fats and proteins have also been linked to a higher body weight. Being overweight or obese further increases your risks of developing chronic diseases.

Reducing intake of animal-based foods while increasing plant-based foods, especially whole or minimally processed items, can contribute to sustainable weight loss and help prevent many diseases.

A 2009 comprehensive review published in the American Journal of Cardiology revealed that a primarily plant-based diet can reduce multiple disease risk factors.

The research revealed that vegans had LDL, or the “bad” cholesterol, decreases of 15-25 percent. People

who had lacto-ovo-vegetarians and other non-vegan, plant-based diets had significantly smaller decreases of 10-15 percent when compared to the typical “Western” animal-based diet.

In fact, for every 10-gram increase in daily fiber from whole foods a 27 percent decreased risk of dying from heart disease was observed.

For those with diabetes, plant-based diets result in improved blood glucose control and insulin sensitivity.

Plant based diets were also noted to be associated with lower triglycerides, inflammatory markers, blood pressure, body weight and risk of death from many causes.

Common Plant-Based Diets

- Vegan: No meat, eggs or dairy products
- Lacto-vegetarian: No meat or eggs; dairy products are OK
- Lacto-ovo-vegetarian: No meat; dairy products and eggs are allowed
- Flexitarian: Relatively new term being used to reflect one’s choice of mostly plant foods with allowances for occasional animal products such as fish or dairy



To submit a question for “Ask the Dietitian,” send an email to mary.staudter@us.army.mil.



TAMC Public Affairs/STEPHANIE BRYANT

CFC kicks off

HONOLULU – Lt. Col. Hugh McLean, Jr., deputy commander for administration, Tripler Army Medical Center, cuts slices of cake at the Combined Federal Campaign kick off celebration, Oct. 1, in the TAMC chapel, here. Assisting McLean is 1st Lt. Wesley Albritton, CFC agency project officer for TAMC.

The CFC, which runs through Nov. 16 this year, is the only authorized solicitation of federal employees in their workplaces, raises millions of dollars annually and features more than 2,500 charities.

During the kick off celebration, attendees learned about the history of the CFC and heard from four authorized charities: the Fisher House Foundation, Junior Achievement, the Make-A-Wish Foundation and the American Red Cross.

The CFC is the world’s largest and most successful annual workplace charity campaign, with more than 200 CFC campaigns throughout the country and internationally to help to raise millions of dollars each year. Pledges made by federal civilian, postal and military donors during the campaign season support eligible non-profit organizations that provide health and human service benefits throughout the world.

Every year, the CFC strives for 100 percent contact in order to achieve maximum contributions as required by law.

For more information about the campaign or how to donate, contact your unit or section CFC representative, or visit www.opm.gov/cfc/.



Courtesy of WebEcoist

Research has shown that plant-based diets, versus diets high in animal fats and proteins, lead to reduced risks of many diseases and health issues included cancers, diabetes and obesity.

DoD's top Doc visits Pacific, prepares for strategic shift

Story and Photo by
STEPHANIE BRYANT
Tripler Army Medical
Center Public Affairs

HONOLULU — As the national security strategy shifts to focus on the Pacific region, all of the Department of Defense's organizations are preparing to support.

During his visit to the U.S. Pacific Command area of responsibility, Oct. 8-10, Dr. Jonathan Woodson, Assistant Secretary of Defense for Health Affairs and director, Tricare Management Activity, made his round to various organizations on Oahu, to include Tripler Army Medical Center.

"I needed to get out here to get greater fidelity on the health-related and health affairs-related issues that are in the region as this (area) becomes much more important," Woodson explained. "We have been trying to make some efforts to get a little bit more in harmony in terms of the inter-service policies related to health and we are doing the implementation and planning now for Defense



Dr. Jonathan Woodson, Assistant Secretary of Defense for Health Affairs and Director, Tricare Management Activity, signs the Pacific Regional Medical Command and Tripler Army Medical Center's guest book, Oct. 9, at TAMC. Woodson is touring the U.S. Pacific Command area of responsibility and received multiple briefs from staff at Tripler. He wants to ensure he understand the needs of the beneficiaries in the Pacific and that their needs are being met.

Health Agency.

"The Asia-Pacific (region) is one of our most important markets where we have multiple services operating, so there is a lot to be learned about how we should be doing business," Woodson added.

In addition to his intent of bringing the services closer together, Woodson brought important messag-

es to relay to leadership and beneficiaries in the Pacific. In April 2013, insurance shifts from TriWest Health Care Alliance to United Health Military and Veterans Services, and Woodson wanted to assure beneficiaries that there should be no disruption in care and the quality of their benefits, and their needs will be met.

"I want (beneficiaries)

to know that we remain committed to serving their needs, and that medicine and health care are constantly evolving," Woodson explained. "It is about understanding what their needs are and the size of the beneficiary population. We are committed to enhancing our ability to deliver care."

Woodson has been

working with the two companies to outline a smooth transition and said to date there have been no problems. He plans to continue to invest time in this effort to ensure there is no disruption in beneficiary care.

In addition to Tripler Army Medical Center, Woodson visited leadership and representative at Veterans Affairs-Pacific Island Health Care System; the Warrior Transition Battalion stationed at Schofield Barracks; U.S. Marine Corps Forces-Pacific; and U.S. Pacific Command.

"I am enormously impressed with the professionals out here who are working on these difficult issues and trying to move their strategy for delivering care well in to the 21st century," Woodson said. "We've got some responsibilities at the senior level of the Department of Defense and the services to assist ... by breaking down barriers that have been created over time as different services have established individual policies and individual policies have been established between departments."



U.S. Army Garrison-Japan / KIYOSHI TOKESHI

MEDDAC-Japan hosts annual conference

CAMP ZAMA, Japan — Maj. Gen. Yoshiro Oshika (right), director, Medical Department, Japan Ground Self-Defense Force, talks with Col. Vivian Hutson, commander, MEDDAC-Japan, during the 2012 Bilateral Medical Conference, held here, Aug. 27. The conference, annually hosted by MEDDAC-Japan, focused on deployable medicine this year.

The morning events at Camp Zama consisted of academic lectures, featuring speakers from both MEDDAC-Japan and the JGSDF, followed by a familiarization of combat support hospital operations at Sagami Depot in the afternoon.

The 325th CSH, a reserve unit from Independence, Mo., provided a tour and overview of their operations established at Sagami Depot as part of MEDEX 2012.

The conference was capped by a teppanyaki style dinner at a local restaurant, allowing the participants to socialize and further exchange ideas.

Troupe uses catharsis as suicide prevention

CHARLIE REED

Stars and Stripes

CAMP ZAMA, Japan — Derrick Trotter looked out into the audience and was struck by a familiar feeling: “They’re going to think I’m crazy.”

He brushed it off.

He can do that now.

There was a time that same thought stopped him from seeking mental health counseling. He had returned from his first tour in Iraq six years ago when “the change” occurred — the result of a horrific mission to retrieve 12 dead Iraqi fighters in the desert heat.

“There were many missions like that,” Trotter, 28, told the auditorium full of Soldiers who were at Camp Zama for a theatrical reading, Sept. 27, of the Greek tragedy “Ajax,” a story of a soldier so troubled by the horrors of combat that he killed himself.

“Thoughts of suicide became an everyday thing,” said the former Marine, who is now in the Army Reserves.

Limbs separated from bodies, liquefied flesh — “seeing that isn’t natural,” he said.

Earlier during that deployment, a sister unit lost nine of its 24 Marines in one day.

“Mother’s Day 2006. It was tough,” Trotter said. “It just seemed like someone was dying every day.”

He finally decided to get help when, while visiting his family, he awoke from a night terror with his hands clenched around his nephew’s throat.

“What I want people to know is that you’re not by yourself,” Trotter told the audience. “Don’t feel weird. It’s OK to hurt.”

He shared his story as part of a four-person panel after the reading of “Ajax” by Theater of War, an acting troupe that has performed more than 200 times at military bases around the world.

Camp Zama brought in the acting troupe to take part in Suicide Prevention Stand Down Day. It was one of many suicide prevention programs at Army bases worldwide as the service struggles with a growing suicide problem.

According to numbers released



Courtesy of U.S. Army Garrison-Japan

In front of an audience of Soldiers and civilians at Camp Zama, Theater of War actors read from the Greek tragedy “Ajax” by Sophocles, Sept. 27, during the Armywide Suicide Stand Down Day. Theater of War performs such classic plays to sensitize military audiences to the psychological injuries of war, and to elicit talk on the hardships unique to military families.

last week, the Army is on pace to surpass 2010 — the deadliest year for suicides in the service, when 305 Soldiers killed themselves.

“We call ourselves a public health organization,” Theater of War founder Bryan Doerries said.

Doerries and the four professional actors who read “Ajax” wore no costumes. There was no stage lighting, no set, no props.

But the drama was high as they read four scenes from the ancient play by Sophocles, an elected general in the Greek army.

Doerries got the idea for Theater of War in 2006 and 2007 — some of the bloodiest years for U.S. forces in Iraq.

“I was reading the news, and the headlines sounded like they could be ripped from the plays of Sophocles, and I started making the connection between ancient war stories and modern warfare,” he said.

His goal, he said, was to “unlock something in the plays” that would resonate with modern warriors and help them “speak the unspeakable.”

Doerries said two Soldiers approached him after the first reading Thursday, saying it had motivated them to seek therapy.

“It happens everywhere,” he said. “It became clear pretty quickly after starting this that I had stumbled onto a public health awareness tool.”

He asked four questions to prompt the audience to think about and comment on what the story of

Ajax means and why it was written.

“Pain shared is pain divided,” one Soldier commented after Doerries asked them to respond to a line from Ajax’s wife as she pleaded with his troops to help her delusional, suicidal husband. A great hero of the Trojan war, Ajax suffered a psychotic breakdown provoked, in part, by a devastating public embarrassment.

Questions about how survivor’s guilt differs in cases of suicide versus combat deaths and whether those who kill themselves deserve military honors also evoked frank comments from Soldiers, whose attendance was mandatory.

One noncommissioned officer said the Army should pay tribute to those who choose to commit suicide.

“As we evolve and start to learn more about the horrors of war, we’re just beginning to understand this,” he said. “We have to honor all that that Soldier did for their country.”

Doerries said Theater of War has reached 40,000 troops but that his efforts have “only scratched the surface,” considering the rising tide of military suicides.

Broken relationships and struggles with eternal questions such as “Why do bad things happen to good people and the wicked get away with it?” are at the heart of the military’s suicide problem, said Camp Zama’s chaplain, Col. Robert Nay, who served as a panel member

at the workshop.

“It’s not the wars,” he said.

Most people who kill themselves, “they aren’t really wanting to die,” said fellow panelist Capt. Peter J. Dell, a behavioral counselor at the base. “They’re just struggling with how to live.”

Programs like this are especially important as more servicemembers transition back into civilian life after more than a decade of war, Doerries said. The mental and emotional scars of battle can never be erased from a veteran’s mind, but the stigma society attaches to psychological injury can be addressed, he said.

“I think we can play a huge role in helping create a sense of community and shared experience,” Doerries said. “I think that our culture in general has lost touch with that.”

Despite the gravity of the subject at hand, Doerries kept the audience smiling in between the serious questions and responses.

“Whether there are Ajaxes in this room depends on what happens after you all leave. You’re not alone,” Doerries said. “I know this was compulsory but I hope it was better than an AFN commercial or a PowerPoint.”

(Editor’s Note: MEDDAC-Japan sponsored the “Theater of War” production at Camp Zama. This article is used with permission from Stars and Stripes. © 2012 Stars and Stripes.)

Mass flu exercise brings services together

**PACIFIC REGIONAL
MEDICAL COMMAND**
News Release

HONOLULU — Installations around the island held a mass flu vaccination exercise, Sept. 18-20, with the goal of vaccinating as many Oahu-based active duty service members and emergency-essential civilians as possible.

In previous years, each service would individually hold shot exercises where they would immunize their personnel. This year, all services coordinated together and held a mass joint immunization exercise.

“We wanted to test our capability to mass immunize against a potential pandemic,” explained Lance Golder, analyst, Military Vaccine Agency.

During the 72-hour exercise, more than 21,000 Department of Defense uniformed and civilian personnel were vaccinated across the island.

“Vaccinating over 21,000 people in three days is no small feat,” Golder said. “(We) did it at 12 different locations with multi-service staff both working and getting vaccinated. One of the comments I heard over and over as I visited (the) sites is that (the personnel) could immunize at least double the numbers with little effort.”

The mass vaccination exercise

used a closed point of dispensing system, or PODs, which is different than traditional vaccination or medication dispensing sites, because it brings the vaccine to where Soldiers and emergency-essential civilians are.

“The (point of distribution) layout at the Makai Recreation Center has been designed to accommodate approximately a 10-minute processing time for units consisting of 200 personnel,” said U.S. Air Force Staff Sgt. Aimee Braxton, noncommissioned officer-in-charge, Hickam Immunizations Clinic.

“Following a catastrophic health event, the ability to dispense medical countermeasures to affected populations quickly and efficiently is crucial,” added Thomas Bookman, emergency operations manager, Pacific Regional Medical Command and Tripler Army Medical Center.

The flu vaccine isn't important for just service members and emergency-essential civilians - everyone in Hawaii should consider getting vaccinated and take precautionary measures to avoid spreading the flu.

“Each year in the U.S., approximately 25 million cases of influenza get reported,” Golder explained. “These cases result in about 150,000 hospitalizations due to serious complications and more than 30,000



Tripler Army Medical Center Public Affairs / STEPHANIE BRYANT
U.S. Air Force Master Sgt. Max Marquez, 25th Air Support Operations Squadron, receives his FluMist vaccine from Jana Marshall, license practical nurse, Medical Management Clinic, U.S. Army Health Clinic-Schofield Barracks, at Conroy Bowl on Schofield Barracks, Sept. 19, as part of a joint mass immunization exercise that was held Sept. 18-20.

people die from influenza annually in the U.S. alone. The seasonal influenza vaccine is one of the most beneficial tools in modern medicine for reducing sicknesses, deaths, health care costs and conserving fighting strength.”

“The influenza vaccine is particularly important for everyone living in Hawaii because we see influenza cases all year around,” Golder explained. “It is important to remember that Hawaii is a gateway to the world. We have travelers arriving

from both hemispheres where their peak influenza season may be in full bloom.”

Vaccines are now available to all Tricare beneficiaries at military medical treatment facilities in Hawaii.

Vaccines will be available at post exchanges throughout October and local schools in October and November.

(Editor's Note: U.S. Air Force 1st Lt. Kathleen Eisenbrey, 15th Medical Group, contributed to this article.)



168th MMB trains, prepares for mass casualty incidents

CAMP HUMPHREYS, Korea — Lt. Col. Robert Cornes (left), commander, 168th Multifunctional Medical Battalion, and 1st Lt. Melissa Galdo (promoted shortly after photo was taken), ambulance platoon leader, 568th Medical Company (Ground Ambulance), 168th MMB, take a break from posing as patients during a mass casualty exercise, as part of Task Force Wilson, here, recently.

The casualties in the background are being prepared for three air lifts to Camp Stanley.

At the Task Force Wilson site, Cornes reaffirmed the oath with Galdo, who was promoted to first lieutenant while in flight to Camp Stanley.

Courtesy of 168th Multifunctional Medical Battalion Public Affairs



Marine Cpl. Bryson Walker, Wounded Warrior Battalion-West catches the ball during an the Warrior Transition Battalion's adaptive water polo tournament held at Schofield Barracks' Richardson Pool, Sept. 7.

WTB beats Marine WWB in inaugural water polo match

Story and Photo by

STEPHANIE RUSH

Pacific Regional Medical
Command Public Affairs

SCHOFIELD BARRACKS, Hawaii — The Pacific Regional Medical Command's Warrior Transition Battalion sponsored a joint service adaptive water polo tournament, Sept. 7, at Richardson Pool, here.

Joining the WTB's six teams was a seventh team made up of Marines in transition from Marine Corps Base Hawaii-Kaneohe Bay's Wounded Warrior Battalion-West.

Standing water polo and inner-tube water polo are just one of the many adaptive sports programs that play a major role in the recovery and healing process of wounded, ill and injured service members.

"First and foremost the adaptive reconditioning program gives folks the opportunity to participate," said Sgt. 1st Class Norbert Fuata, platoon sergeant, Company A, WTB and team captain for the winning team. "It gives everyone the chance to play regardless of his or her injuries. It also gets them out of the office or clinics."

Getting services members in transition out of their office or medical clinics where they're seen for treatment is an important part of the importance of adaptive sports programs. Adaptive sports programs offer wounded service members the opportunity to participate in physical training while having fun in a competitive environment.

"With the WTB, everything is so focused on traditional types of treat-

ments, but this is (more of an) out-of-the-box treatment," explained Michael Esquibil, licensed clinical social worker, Company B, WTB. "You're using a different part of the brain. The whole intention of doing adaptive sports is to one, keep Soldiers physically active and two, keep Soldiers mentally healthy."

Not all service members assigned to the WTB transition back into the Army when their recovery is done. Some will transition into civilian status.

"Adaptive sports are good for morale," said Sgt. 1st Class Fetuosae Sua, who is currently assigned to Company A, WTB, but plans to leave the Army and return home to Samoa after his recover is complete. "It's one Army but there are a lot of ethnic groups here in the WTB. (Playing adaptive sports) is a bonding experience and a really good way to prepare for going home."

A Marine in transition echoed Sua's sentiments.

"For us to be able to practice and actually compete in sports like volleyball and water polo really helps boost morale and makes us want to get better quicker," said Marine Cpl. Bryson Walker from Kaneohe's Wounded Warrior Battalion-West.

Walker, who is from Hawaii, is planning to transition out of the Marine Corps after he's recovered and plans to go to school to become a psychologist.

"I want to help fellow wounded warriors," Walker said. "I understand what they're going through and can give them the best advice I can give them."

In Brief

ARMY COMMENDATION MEDAL

Col. John Glorioso, director, Integrated Disability Evaluation System, Tripler Army Medical Center, received an Army Commendation Medal, Oct. 4, for his contributions to streamlining the IDES processes at TAMC.

ASSOCIATION OF MILITARY SURGEONS OF THE UNITED STATES

Lt. Col. Michael Schlicher, Army Nurse Corps, Tripler Army Medical Center, was named the recipient of the 2012 Association of Military Surgeons of the United States, or AMSUS, Federal Nursing Award, Oct. 9, for his contributions as a nursing scientist, clinician, educator and federal health care leader.

9A PROFICIENCY DESIGNATION

For their significant contributions to the advancement of knowledge in their particular field through extensive publication and active national professional organization membership, the Office of the Chief, Medical Service Corps, congratulates the following awardees:

- Lt. Col. Jude Abadie, chief, Core Lab, Department of Pathology, Tripler Army Medical Center
- Col. Derrick Arincorayan, chief, Department of Social Work, TAMC
- Lt. Col. Eric McClung, chief information officer, Information Management Division, Pacific Regional Medical Command and TAMC

The purpose of the "A" Proficiency Designator is to recognize the highest level of professional achievement within each AMEDD Corps' specialty or sub-specialty.

HEALTH OBSERVANCES

Check out information on upcoming health observances for October online:

- Eye Injury Prevention Month, www.geteyesmart.org
- Home Eye Safety Month, www.preventblindness.org
- National Bullying Prevention Month, www.pacer.org/bullying/nbpm/
- National Medical Librarians Month, www.mlanet.org
- Stop America's Violence Everywhere Today, www.amaalliance.org
- Sudden Infant Death Syndrome Awareness Month, www.first-candle.org
- National Physical Therapy Month, www.moveforwardpt.com
- National Down Syndrome Awareness Month, www.ndss.org
- National Breast Cancer Awareness Month, www.nbcam.org
- Health Literacy Month, www.healthliteracymonth.org
- Bone and Joint Health National Awareness Week (Oct. 12-20), www.usbji.org
- International Infection Prevention Week (Oct. 14-20), www.apic.org/education-and-events/iipw

SUBMISSION GUIDELINES

Do you know of a Pacific Regional Medical Command employee who recently received a promotion (military only), 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.

SMITH

from page 1

and commander, U.S. Army Medical Command. "Few leaders have taken on as many difficult positions and critical leadership roles as (Brig. Gen.) Gallagher ... (his) dedication and leadership skills have improved the lives of our Soldiers, civilians, patients and families."

He ensured the delivery of world class primary and specialty care for thousands of service members, their families and veterans and Pacific Islanders in the Pacific region's area of responsibility.

Gallagher has been recognized by senior government officials for the efficiency of the Integrative Disability Evaluation System processes at Tripler, which is a single set of disability medical examinations appropriate for determining both fitness and disability.

During his tenure, the interdisciplinary pain management center has expanded its role inte-

grating Eastern and Western medicine, thus decreasing the use of controlled substances.

Gallagher is also responsible for establishing the Warrior Ohana Medical Home, an outpatient clinic in Kapolei (responsible) for decreasing traffic from the leeward side of the island.

In addition, supporting the Army Surgeon General's wellness initiative, Gallagher urged his staff to focus on a system of health versus a health care system.

As Gallagher and his wife retire after 34 years of service to the Army, Gallagher said he is confident that Smith is a great choice for the command because they have spent the last two years side-by-side.

"I have been honored to serve you here in the Pacific and at Tripler Army Medical Center," Gallagher said. "(Col. Smith), welcome to the fast lane. You are indeed the right leader for this job. You are a hard working colonel who has been at my side the entire time I have been here. I know you will continue the momentum that has

brought many successes to this region."

Smith, who has more than 25 years of experience in the Army, is no newcomer to Hawaii. He served in the 25th Infantry Division at Schofield Barracks from 2002-2005 as the division's medical operations chief.

Smith said he was happy about the opportunity to return to Hawaii, but never imagined he would have the honor of commanding the region. He pledged his commitment to the missions in the region and promised to continue the numerous health care initiatives taking place here.

"This great command will continue to be the tip of the spear for Army Medicine and the Pacific," Smith said. "Brig. Gen. Gallagher, I pledge to continue your great legacy in PRMC and Tripler. Your legacy will live on here in the form of discipline, mentally tough, technically competent, fiscally sound, caring medical professions with a reputation for service and excellence."

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secondary and tertiary behavioral health providers assigned to their particular unit.

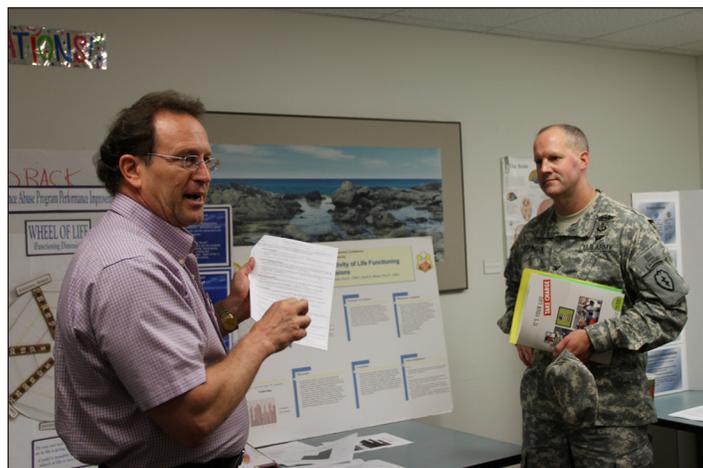
"This helps 'put a name to a face' and further build trust between to the two parties," explained Lt. Col. Wendi Waits, chief, behavioral health services, USAHC-SB.

Embedded behavioral health is a key component of the Behavioral Health System of Care Campaign Plan that is intended to further standardize and optimize the vast array of behavioral health policies and procedures across Army Medical Command.

The campaign aims to ensure seamless continuity of care to better identify, prevent, treat and track behavioral health issues that affect Soldiers and families during every phase of the Army Force Generation cycle.

The Warrior Behavioral Health Clinic provided information on services available and had a special display set up outside their clinic to quantifiable display the number of Soldiers who took their own life in July. Chairs were draped with brown T-shirts and were annotated with demographic information for each Soldier, visually showing that Soldiers in need come from all ranks and areas of the Army.

The Child and Family Assistance Center briefed visitors on the infor-



Pacific Regional Medical Command Public Affairs / STEPHANIE RUSH

More than 90 of U.S. Army-Hawaii's battalion-level and above command teams took part in a terrain walk at U.S. Army Health Clinic-Schofield Barracks in order to learn about behavioral health and substance abuse services available to their Soldiers and families, Sept. 27. The walk was just one of the many events going on all day across Hawaii's Army installations in support of the Armywide Suicide Prevention Stand Down Day.

mation and services they provide for families to include between spouses, between parents and children and children and teen-specific services.

The Army Substance Abuse Program was available to brief visitors on their outreach programs and services to include the Confidential Alcohol Treatment and Education Program, or CATEP, which is for Soldiers, as well as the different services and support programs they offer family members. ASAP's programs aim to meet the challenges of military readiness while supporting Soldier and family well-being.

About the Army's Suicide Prevention Stand Down Day

Army Vice Chief of Staff Gen. Lloyd J. Austin III ordered the global stand down day in response to the release of July's suicide figures. As of Sept. 25, 120 active-duty Soldiers are confirmed to have taken their lives while another 67 deaths are under investigation in 2012.

"Suicide is the toughest enemy I have faced in my 37 years in the Army," Austin said, adding that he believes it is preventable through solutions aimed at helping individuals build resiliency to help strengthen their life-coping skills.

Austin said the Army must continue to address the stigma associated with asking for help.

"Ultimately, we want the mindset across our force and society at large to be that behavioral health is a routine part of what we do and who we are as we strive to maintain our own physical and mental wellness," Austin said.

The last Armywide suicide prevention stand down was in 2009 and followed the train-the-trainer concept and how to recognize potential suicides, but this year's program brings a more holistic approach to beating the epidemic, said Walter Morales, chief of the Army Suicide Prevention Program. Morales said Army suicides have more than doubled since 2004.

"This is absolutely a battle that we have to engage in every single day," said Lt. Gen. Howard Bromberg, Army G1. "I'm asking all Soldiers this entire month and moving forward to just to think about that as military members, family members, teammates, civilians, neighbors and friends to look out for each other in our community."

(Editor's Note: Army News Service also contributed to the content of this article.)



View more photos from Suicide Prevention Stand Down online at www.flickr.com/TriplerAMC.