

In September 2010, the Army Surgeon General authorized the creation of a task force to design and implement a strategic initiative to build a Culture of Trust throughout Army medicine. Army medicine has a rich and proud heritage of bringing value and inspiring trust with our patients. As the Surgeon General stated “the Culture of Trust Initiative will permeate all facets of Army medicine.”

In health care trust plays a critical and important role. What is a Culture of Trust? It is a shared set of beliefs, behaviors and skills that distinguish Army medicine’s commitment to our beneficiaries to provide the highest quality and access to health services. Through the Culture of Trust Initiative, Claudette Elliott, Ph.D., Trust Enhancement and Sustainment Task Force Director, hopes “to help create an organization where people are passionate about the organization they work for and the work they do. The trust level should be a seamless and outward extension of Army medicine personnel toward our patients, beneficiaries, stakeholders, co-workers and community.”

VISION

Madigan Healthcare System creates the premier military healthcare organization through a culture of teamwork, caring, compassion, diffusion of innovation and exceptional outcomes. Madigan is the best place to provide and receive care, to teach and learn clinical medicine and to conduct bench-to-bedside research.

MISSION

Madigan Healthcare System provides world-class military medicine and compassionate, innovative, academic health care for Warriors and Warrior Families past, present and future.

VALUES

- Compassion
- Quality
- Teamwork
- Innovation

STRATEGIC OBJECTIVES

- Readiness
- Population Health
- Patient-Centered Focus
- Quality Workforce
- Education and Research
- Community Partnerships
- Resource Management

WHAT'S INSIDE

Horoho takes oath as surgeon general.....2

TRICARE Young Adult Prime Available.....3

WTB: Healing through water.....5

Madigan exercises response to terror.....6

KUDOS.....8

New WTB CSM shares background, philosophy....8

Albuteman visits hospital.....8

Community.....12



MADIGAN HEALTHCARE SYSTEM: “VALUES-BASED, STANDARDS-DRIVEN TEAM...ALWAYS”

Storytelling, healing highlight of National American Indian Heritage Recognition

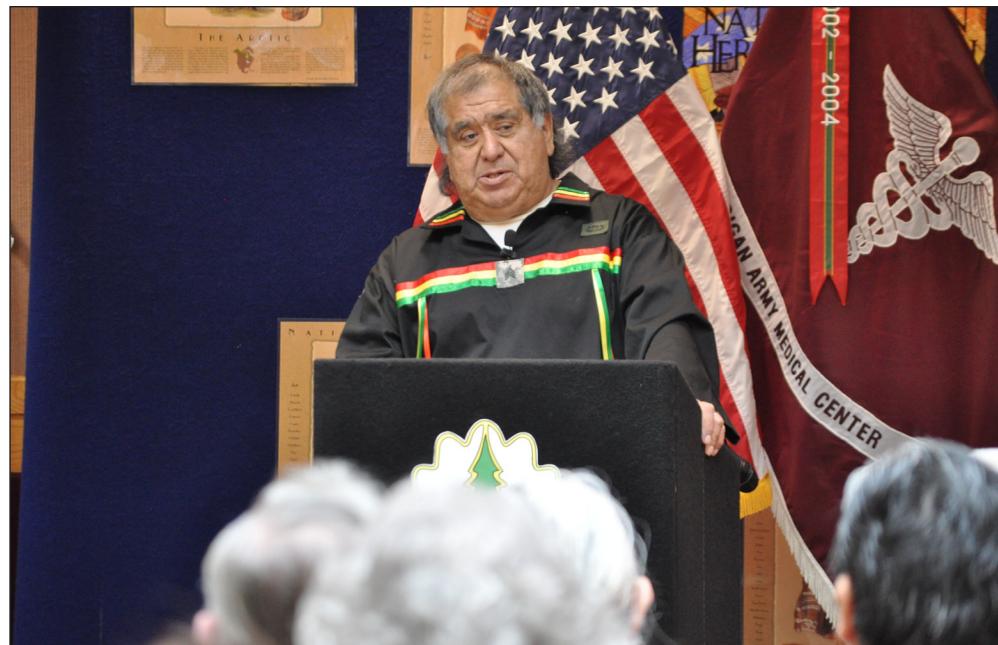
By Tawny M. Dotson
Editor

In a ceremony full of Native American stories and recounting of sacrifices, Madigan Healthcare System observed National American Indian Heritage Month in a ceremony on the ground floor of the Medical Mall Nov. 30.

In his Presidential Proclamation, President Barack Obama said, “this month, we celebrate the rich heritage and myriad contributions of American Indians and Alaska Natives, and we rededicate ourselves to supporting tribal sovereignty, tribal self-determination, and prosperity for all Native Americans.”

American Indian heritage was celebrated throughout the ceremony, which was punctuated with traditions. A blessing was offered by Ieeta and TwoBears Lees to open the event. Following the blessing Alice Dunlap led the singing of a Salish Women’s Warrior Song, which she dedicated to Staff Sgt. Misty Jackson, Equal Opportunity Leader for Madigan Healthcare System and an Ojibwe Tribe member.

Two storytellers participated in the event. The first, Cecil Cheeka, told the traditional story of how the Flatfish and



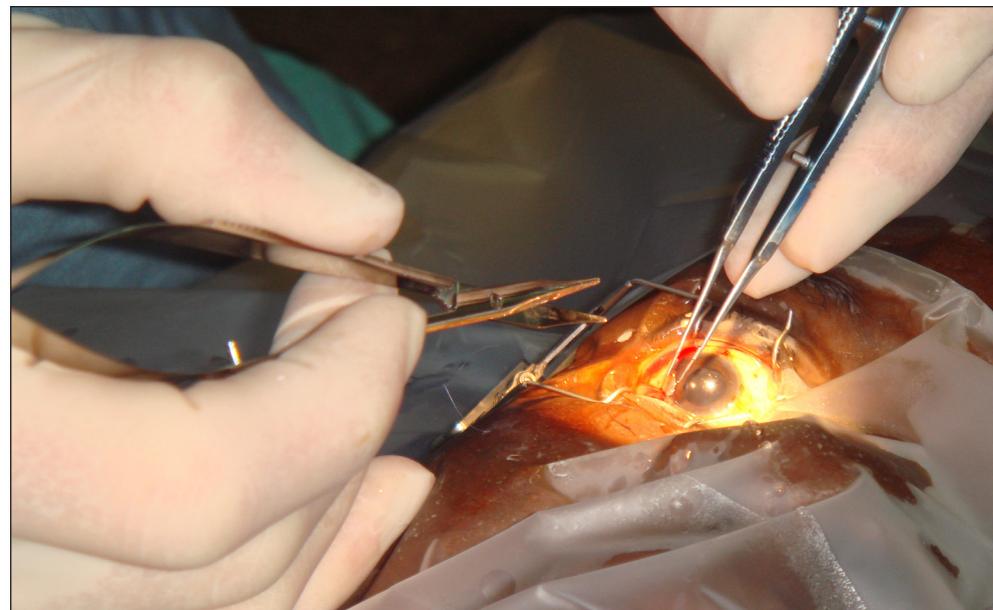
Curtis DuPuis gives the keynote address during Madigan Healthcare System’s National American Indian Heritage Month observance Nov. 30. DuPuis, a Vietnam Veteran, discussed his faith pulling him through the year-long tour.

Flounder became flat. Cheeka is a member of the Makah Tribe of Washington. The second, John Krise, told the traditional story of how the Big Dipper constellation came to be. Krise is a member of the Squaxin Island Tribe of Washington

and a retired U.S. Army Sgt. First Class. Between the stories, the audience was introduced to Curtis DuPuis, a Chehalis Tribe member and Vietnam veteran.

Please see **HERITAGE**, PAGE 8

Madigan staff reaches out through humanitarian efforts year-round



A close up of a surgeon at work during a mission in Malawi, Africa in May of 2011. The surgery removed the patient’s opacified lens (cataract) and replaced it with a new prosthetic lens.

By Tawny M. Dotson
Editor

On a recent humanitarian mission to El Salvador, a team of Madigan Healthcare System staff members provided hundreds of life-changing procedures that helped

local citizens see, sometimes for the first time in years. During that mission and the many others Madigan staff participate in, Army medicine benefitted from training and the local citizens benefitted from medical assistance they would not have been able

to afford otherwise. “To see how these people live is pretty incredible,” said Maj. (Dr.) Charles Redger, an anesthesiologist at Madigan. “They are simply happy to show up and have their eyes worked on. It makes you feel really good when you’ve been a part of a team and an effort when you have a grandma who sees her grandchildren for the first time.”

Redger is one of a number of medical professionals who are given the opportunity during the year at Madigan to provide medical assistance in countries where the assistance is requested or as a part of a military medical training exercise.

Sgt. Richard Klein, the non-commissioned officer in charge of the Ophthalmology Clinic at Madigan and an eye technician has participated in five missions with a team of Ophthalmologists. His role has been in coordination, supplies and packing and assistance during the procedures

Please see **ENGAGEMENTS**, PAGE 9

Horoho takes oath as first nurse, female surgeon general

By Rob McIlvaine
Army News Service

Lt. Gen. Patricia D. Horoho, the first nurse and first woman appointed, became the Army's 43rd surgeon general Dec. 7 in a ceremony at Joint Base Myer-Henderson Hall.

She was nominated to the position by President Barack Obama May 10 and was later approved by the Senate.

She succeeds Lt. Gen. Eric B. Schoomaker, who will retire in January.

"Over the past decade, Army medicine has led the joint health effort in the most austere environments," Horoho said. "As part of the most decisive and capable land force in the world, we stand ready to adapt."

A decade of this war, she said, has left a fighting force with both physical and psychological scars.

"We are dedicated to identifying and caring for those Soldiers who have sustained psychological and physical trauma associated with an Army engaged in a protracted war," she said, adding that the war fighter does not stand alone.

Army Chief of Staff Gen. Raymond T. Odierno, who passed the U.S. Army Medical Command flag to Horoho in a ceremony Dec. 5 at Fort Sam Houston, Texas, promoted her to lieutenant general and administered the oath to swear her in as the Army's top medical officer.

"The Army cannot provide trained and ready forces to the nation without our talented medical professionals and leaders. In everything we do, we rely on medical command and the surgeon general to set the vision for this community and have the courage to carry it out," Odierno said.

Horoho has commanded the Army Nurse Corps since 2008, when she received a rare two-grade promotion from colonel to major general.

As Army surgeon general, she will direct the third-largest healthcare system in the United States, behind the Department of Veterans Affairs and the Hospital Corporation of America.

With an annual budget of \$13.5 billion, the sur-

geon general manages more than 480 facilities and 29 executive agencies, many of which lead groundbreaking research efforts. She also oversees 140,000 military and civilian employees, and more than 3.5 million beneficiaries, globally.

The Army surgeon general's impact, said Odierno, extends far beyond the Army to the national and the international level, collaboration and partnership with other public and private entities on research, standards of practices, national leadership in areas such as brain injury, concussive disorders, mental health promotion and pain management.

"This position requires a special officer who can lead change and achieve unity of effort in a dynamic, joint interagency and also in a multi-national role, working with our allies and partners around the world," Odierno explained. "For these reasons, it's important to pick the right person. And we are absolutely, incredibly lucky to have Lieutenant General Patty Horoho as the 43rd Army surgeon general."

"She's earned this extremely important leadership position, not only because of her incredible past performance and achievements, but more importantly her outstanding potential, as she will lead Medical Command and lead as the Army surgeon general," Odierno said, adding that her 28 years of experience and education will prove to be "an inspiration for many others."

"Army medicine," Horoho said, "has a responsibility to all those who serve, to include Family members, and our retirees who have already answered the call to our nation. We will fully engage our patients in all aspects of their healthcare experience at each touch point, starting with the initial contact."

"We will make the right care available at the right time by demonstrating compassion to those we serve and value to our stakeholders. The collective healthcare experience is driven by a team of professionals partnering with the patient, focused on health, health promotion

and disease prevention to enhance wellness.

One of Army medicine's greatest challenges over the next three to five years, she said, is managing the escalating cost of providing world-class healthcare in a fiscally constrained environment.

"I see these challenges as windows of opportunity for us to shape the future of Army medicine and I am confident, regardless of the environment or the landscape, we will meet all challenges in true Army medicine fashion -- with innovation, dignity and strength. Together, we will usher in the new era of possibilities."

While deployed to Afghanistan, Horoho remembered asking a young medic how he would describe Army medicine.

"He replied, 'We carry healthcare on our backs.' As we sit here today there are young men and women willing to put their lives on the line to protect the freedoms we enjoy as Americans. Thank God we have young medics who are carrying innovative quality and precision healthcare on their backs, regardless of risk to personal safety. This is our privilege. This is our honor, and this is why Army medicine will face all challenges with strength, resolve and dedicated focus," she said.

As a Registered Nurse, Horoho earned her Bachelor of Science degree from the University of North Carolina, her Master of Science degree as a clinical trauma nurse specialist from the University of Pittsburgh. She is a resident graduate of the Army's Command and General Staff College and the Industrial College of the Armed Forces, where she earned a second Master of Science degree in National Resource Strategy.

Other military assignments include: Staff nurse on a multi-service specialty ward, staff and head nurse of a level III emergency department, Evans Army Community Hospital, Fort Carson, Colo.; nurse counselor, 1st Recruiting Brigade (Northeast) with duty at Harrisburg and Pittsburgh



Lt. Gen. Patricia D. Horoho is sworn in as 43rd Army surgeon general by Army Chief of Staff Gen. Raymond T. Odierno, while her husband retired Col. Ray Horoho looks on.

Recruiting Battalions; head nurse of a 22-bed emergency department, Womack Army Medical Center, Fort Bragg, N.C.; chief nurse and hospital commander of a 500-bed field hospital, 249th General Hospital, Fort Gordon, Ga.; assistant branch chief, Army Nurse Corps Branch, United States Total Army Personnel Command, Alexandria, Va.; assistant deputy for Healthcare Management Policy in the Office of the Assistant Secretary of the Army (Manpower and Reserve Affairs), Pentagon, Washington, D.C.; deputy commander for nursing and commander of the DeWitt Health Care Network, Fort Belvoir, Va.; and deputy commander for nursing, Walter Reed Army Medical Center and North Atlantic Regional Medical Command, Washington, D.C.

Recognitions include being selected in 1993 by "The Great 100" as one of the top hundred nurses in the state of North Carolina. In the same year, she was selected as Fort Bragg's supervisor of the year. She deployed to Haiti with the Army's first Health Facility Assessment Team.

After she co-authored a chapter on training field hospitals that was published by the U.S. Army Reserve Command surgeon in 1998, Horoho was honored Dec. 3, 2001, by Time Life Publications for her actions on Sept. 11, 2001, at the Pentagon.

She was among 15 nurses selected Sept. 14, 2002, by the American Red Cross and

Nursing Spectrum to receive national recognition as a "Nurse Hero." In 2007, she was honored as a University of Pittsburgh Legacy Laureate. In April 2009, she was selected as the USO's "Woman of the Year," and in May 2009, she became an affiliate faculty with Pacific Lutheran University School of Nursing, Tacoma, Wash.

"And most recently, she was deployed to Afghanistan as a special assistant to the commander of International Security Assistance Force Joint Command -- incredible, impeccable credentials," Odierno said.

"With Soldiers deployed, taking care of Families, taking care of wounded warriors -- exactly the kind of leader we want to be our surgeon general," he added.

On Aug. 29, 1898, Dr. Anita Newcomb broke new ground for the Office of the Surgeon General by becoming the first woman to hold the office of acting assistant surgeon, Department of the Army. She was assigned to the Surgeon General's Office as superintendent of the Army Nurse Corps, which she organized.

Another nurse, Maj. Gen. Gale Pollock, served as acting Army surgeon general from March through December 2007, temporarily filling the post after Lt. Gen. Kevin Kiley was relieved as a result of aging facilities at Walter Reed Army Medical Center. But Horoho is the first nurse and first woman to be nominated for the position and confirmed by Congress.

TRICARE Young Adult Prime Option Available Jan. 1

By TRICARE Management Activity

The TRICARE Young Adult Prime option is available for purchase now, with coverage beginning Jan. 1, 2012.

TYA Prime will offer young adult beneficiaries TRICARE Prime coverage for monthly premiums of \$201.

To purchase TYA Prime, dependents must be under age 26, unmarried and not eligible for their own employer-sponsored health care coverage.

TYA Prime is a managed health care option with low out-of-pocket costs.

Care is delivered through military clinics and hospitals and the TRICARE network of civilian providers.

Uniformed services dependents may qualify to purchase

TYA Prime if they live in a designated Prime Service Area and their sponsor's status makes them eligible for Prime coverage.

In addition to TYA Prime, young adult dependents may also be eligible for TYA Standard, which has been available since May 2011.

With monthly premiums of \$186, Standard offers eligible dependents the flexibility to see TRICARE-authorized network and non-network providers of their choice, wherever they live or travel. The Standard monthly premium is dropping to \$176 on Jan. 1, 2012.

Complete information and application forms are available at www.tricare.mil/tya.

Sponsors and their adult dependents are encouraged to explore both commercial and military health care plan

options and costs when choosing a plan that best meets their needs.

Young adults considering TYA should determine if they are eligible before completing and sending in an application.

Eligible dependents may drop off the application and payment of three months of premiums at a TRICARE Service Center or send them by mail or fax to their regional health care contractor.

Once the initial payment is made, monthly premiums must be paid in advance through automated electronic payment.

TYA Prime enrollment will follow the TRICARE Prime "20th of the month rule." As long as the TYA enrollment application is received by the 20th of the month, coverage can begin on the first day of the next month.

For example, if an applicant

wants TYA Prime to start Jan. 1, 2012, the application and initial three-month payment must be received by Dec. 20, 2011. If it's received after Dec. 20, TYA Prime coverage begins Feb. 1, 2012.

Dependent eligibility for TRICARE previously ended at age 21, or age 23 for full-time students.

Similar to provisions in the 2010 Patient Protection and Affordable Care Act, TYA offers eligible young adults up to age 26 the option to continue TRICARE Standard or Prime coverage, as long as their sponsor is still eligible for TRICARE. Unlike employer sponsored health plans, TYA is available only to unmarried young adult dependents.

To receive e-alerts on TYA and other TRICARE news, sign up at www.tricare.mil/subscriptions.

Madigan awarded Joint Commission Gold Seal

By Carrie Bernard
Media Relations Officer

Madigan Healthcare System has earned The Joint Commission's Gold Seal Approval™ for accreditation by demonstrating compliance with the organization's national standards for health care quality and safety in hospitals.

The healthcare system, responsible for providing care to more than 109,000 beneficiaries through a network of health care facilities located in Washington, Oregon and California, received its accreditation letters from the Joint Commission in late November with an actual accreditation date of August 13, 2011.

The accreditation award recognizes Madigan's dedication to continuous compliance with The Joint Commission's state-of-the-art standards. The accreditation also identified several of the organization's best-practices including one in the area of actionable population health improvements in its primary care clinics.

"In achieving Joint Commission accreditation, Madigan Healthcare System staff have demonstrated their dedication to the highest level of service for those whom we are privileged to provide care," said Col. (Dr.) Dallas Homas, Madigan commander. "I am extremely proud of the professionals who work throughout the many organizations that comprise the Madigan Healthcare System. Their commitment to providing quality, safe health care cannot be over emphasized."

The Joint Commission's hospital standards address important functions relating to the care of patients and the management of hospitals. The standards are developed in consultation with health care experts, providers, measurement experts and patients. Madigan's prior accreditation was earned after an on-site survey in 2008.



A Typical Day at Madigan

As a provider of health care for more than 100,000 beneficiaries, Madigan Healthcare System provides world-class military medicine and compassionate, innovative, academic health care for Warriors and Warrior Families past, present and future. A typical day at Madigan looks a little like this:

Clinic Visits
4,456

Surgical Procedures
43

Prescriptions
3,900

Lab Procedures
4,387

Radiology Procedures
1,100

Emergency Visits
170

Births
7.5

Trauma Activations
1

Admissions
39

Meals Served
2,500



madigan
Healthcare System

Judge Advocate's Ethics Corner: Flying the friendly skies, while observing the friendly rules

By Lt. Col. Greg Mathers
Madigan Healthcare System

Being an attorney can be a blessing and a curse at the same time, especially when your critical legal eye falls upon a curious event in your otherwise placid environment. Recently I had one of these experiences while travelling TDY to a medical-legal course in California. After boarding the plane on my return flight, I noticed a Soldier in uniform seated in First Class seating. "Now, that's a rarity," I thought to myself as I climbed over baggage and avoided elbows on my way back to Coach Class seating. Of course, the Ethics rules covering air travel for military members immediately started playing in my head.

If you ever notice someone in an Army uniform in First or Business Class seating on an airplane, there should at least be some bells and whistles going off in your head too. Under the Rules of Ethics, this is referred to as "Premium Class" seating, and there are but a few narrow exceptions allowing it for official travel.

The Army standard for official air travel is Coach Class seating – period. Short of health reasons, security issues, a complete lack of non-Coach seating, lengthy and challenging international travel, or extremely urgent mission circumstances, Coach Class must be selected. The Secretary of the Army is the only approval authority for First Class, and only Three and Four-Star MACOM Commanders may approve exceptions for Business Class travel. Premium Class air travel exceptions are rare, and require advance approval and lengthy staffing. Unless you're acutely aware how the rare

except applies to you, booking Premium Class seating for yourself in DTS should probably not even cross your mind.

So, how did the Soldier I saw land himself those cozy digs, with a lovely stewardess waiting on his every need? My tapes continued to play. First, under a change that occurred about ten years ago, the Army allowed official travelers to "bank" frequent flyer miles earned as result of official travel. Under this development, if you are a member of a certain airline's frequent flyer program and you fly that airline for official travel, you can request and accrue frequent flyer miles to your personal account as result of that official travel. That can be a pretty good deal, because then frequent flyer miles can be used to "upgrade" Coach Class tickets to Premium Class during official or personal travel. Travelers can also pay out of their pocket for these upgrades even during official trips too. However, even under this rule the military traveler is not allowed to fly First Class in uniform or with any attention drawn to the fact that he/she is an Army employee. It seems a reasonable rule, because being in uniform can certainly send the message that either the Army is wasting tax dollars by putting its members in First Class, or that Soldiers

or DoD Civilians are getting extra special treatment merely because they work for the Government. But then, there is one more exception to flying First Class in uniform – the "on the spot upgrade."

In a time of war, and with the public watching, it seems many airlines have recognized the PR boost they get by bumping uniformed Soldiers into First Class seats. As the "unwashed masses" (like me) walk by, we see the airline treating combat vets like VIPs, and the warm feelings flow. In such cases, the airline spots Soldiers travelling in uniform and bumps them to unoccupied First Class seats at no extra cost. This type of on the spot perk can be accepted by Soldiers (or DoD Civilians) so long as they can prove the free upgrade was given spontaneously, and not as result of their rank or position.

So, at last my burning legal question of the day was solved. The world was once again "legally sufficient" and I had found peace. I reclined my seat and started to dose off when another troubling thought came to me. "Is it considered rude to recline your seat?" Here we go again.

Lt. Col. Greg Mathers is the Madigan Healthcare System Center Judge Advocate and Command Ethics Counselor. He can be reached at (253) 968-1525.

MAILBAG

Dear Col. Homas,

I would like to take this opportunity to commend and recognize the senior leadership staff at Madigan for their direction and commitment to excellence.

I went to the ER recently and was immediately seen. After an initial EKG determined I had a heart attack I was placed in Intensive Care Unit-West. The doctors and staff there were knowledgeable and highly professional at all times. They really imploded the true meaning of 'Care with Compassion.'

The quality of care and attention to details that was given to me sets the standard for others to emulate. After four days in the ICU I was transferred to Floor 5-South, where the professionalism continued. The entire staff was very courteous and professional at all times.

The way I was treated shows a direct reflection of the standard of care, leadership and commitment to excellence between customer relations and management. This exemplifies the true meaning of mission first, customer always.

Please recognize the entire staff of the ICU-West, Floor 5-South, Floor 6-South and Internal Medicine on my behalf. I also would like to single out a few people that went far and beyond the call of duty to ensure my quality of care. Dr. Click, Dr. Gill, Dr. Chesley, Dr. Urbon, Nurses Every, Hernandez and Katie and Nursing Assistant Maria

John, Lacey, Wash.

Dear Col. Homas,

The purpose of this letter is to thank and praise Lt. Col. Faddell for his treatment of me while I was at your hospital.

I was diagnosed with breast cancer and Dr. Faddell was my physician during chemotherapy. Dr. Faddell explained all treatment in easy to understand terms and was very instrumental in keeping my morale up during this difficult period.

I highly recommend Dr. Faddell and he is certainly knowledgeable, but the factor that really stands out is his true caring attitude. He constantly followed up with me and through his attitude and manner made me feel like I am his only patient. Without him and people like him, the medical profession would not be where it is at today.

Mere words cannot describe what he has done for me. I thank you for having such a physician on your staff.

Ingeborg, Tumwater, Wash.



Tree lighting 2011

(Left) The 'Care with Compassion Singers' opened the Madigan Healthcare System's annual Holiday Tree Lighting Ceremony with the National Anthem and then entertained the audience with Hanukkah and Christmas carols Dec. 9.

(Right) Col. (Dr.) Dallas Homas, Madigan Healthcare System commander and Marshall Brody King light Madigan's Christmas Tree during the annual lighting celebration. The holiday event celebrated a number of religious and cultural holidays during this season including Hanukkah. The tree and the menorah are on display on the first floor of the Medical Mall at Madigan Army Medical Center. (Photos by Tawny M. Dotson)



THE MOUNTAINEER

Since 1948

Madigan Healthcare System's The Mountaineer is an unofficial monthly offset newspaper for the Madigan Healthcare System, authorized under the provisions of AR 360-1.

Contents in this publication are not necessarily the official views of, or endorsed by, the Department of Defense, Department of the Army and Madigan Healthcare System.

For information about The Mountaineer or to submit a story idea, contact Madigan Healthcare System Strategic Communication Office's The Mountaineer Acting Editor Tawny M. Dotson at 253-968-3729, or tawny.m.dotson@us.army.mil. Circulation: 2,000

Commander

Col. (Dr.) Dallas W. Homas

Strategic Communication Director

Jay Ebbeson

Command Information Officer/Editor

Tawny M. Dotson

Warrior Transition Battalion Public Affairs

Suzanne Ovel

OUT OF THE FIRE, BACK INTO THE FIGHT



Soldiers recognize caregivers of the year



Courtesy Photo

Kendall Atterbury, a management analyst, receives a Caregiver of the Year award from Lt. Col. Jason Wing, Warrior Transition Battalion commander.

By Suzanne Ovel

Warrior Transition Battalion Public Affairs

Passing out burritos, salad, beans and fruit, Staff Sgt. Lawrence Armstrong carved out some time recently to help feed about 40 hungry people at the Tacoma Mission.

When Armstrong had asked Soldiers in the Warrior Transition Battalion to volunteer with him, Staff Sgt. Sean

Stephenson and three other Soldiers decided to join in.

"I thought it was a great idea; I thought it was a chance to help other people who were less fortunate," said Stephenson, a Warrior in Transition with Bravo Company.

"I try to help anybody; it doesn't hurt to take 5 to 10 minutes out of the day to see how someone is doing," said Armstrong, a squad leader with B Co., who recently won the Warrior Transition Battalion's Caregiver of the Year award, squad leader category—a sort of "People's Choice" award selected by Warriors in Transition.

Other Caregiver of the Year awardees included Col. Frank Wood for battalion clinical staff; Sgt. 1st Class Jason Miller for platoon sergeants; Kendall Atterbury for civilian support staff; Mike Roos for the Soldier and Family Assistance Center; and Barb Travers for nurse case managers. Roos called winning the award "very humbling, yet (gratifying)" while Travers said she felt "very pleased and special"—both were surprised at being chosen.

For Armstrong, "It felt pretty good, considering the company you're in."

Armstrong described his work as spanning from being an unofficial life and Family counselor to an administrative supervisor, to include guiding Soldiers through the medical evaluation board,

advocating for them, and building relationships with resourceful people that will help them through a difficult time.

"Now Soldiers have to focus on their healing process and something that's not normal to them," said Armstrong.

And what Soldiers are learning to live with varies—from orthopedic injuries to behavioral issues, from viewing the world from a wheelchair to terminal illnesses.

Providing medical advocacy

Travers is one of the first caregivers that many of these Soldiers see. As a nurse case manager for Headquarters and Headquarters Company, Travers manages the health care for about one-fourth of the battalion's new Soldiers.

A nurse with 24 years of experience, Travers sees all of her Soldiers within a business day of their arrival, and for the next month or so arranges their initial appointments, explains the medical in-processing procedures, reviews plans of care, and works as a medical advocate.

She appreciates "the satisfaction of seeing Soldiers recovering from injuries and returning to their military careers... and getting back with their Families again."

Like many of her fellow caregivers, Travers encourages Family involvement with meetings with her as well as with their Soldier's medical care and overall

transition.

Helping the Family too

While Travers works primarily with the Soldiers, Roos works with Families to give them the extra resources they need. "I support the support system so they can support the service member," he said.

Through Tailored Care, Roos can do an initial caregiver assessment to determine specific resources to offer.

He also supports Families with marital and Family conflicts through crisis intervention.

"I'll try to find ways to get everybody back at the table and have them talking again," said Roos, a social services assistance coordinator who also serves as a liaison to Hero Miles and the Social Security Administration and other resources.

Roos said the Caregiver of the Year Award "validated that work we do here is recognized and I'm able to make some impact on Soldiers and Family members as they go through the transition process."

What he thinks all the caregivers here can best offer Soldiers is a sympathetic ear.

"The opportunity to just hear their story and to understand their experience—that in and of itself sometimes does more for individuals than (giving resources)—to let them know somebody just cares."

Healing on water: Soldiers learn how to row, surf, paddle board

By Suzanne Ovel

Warrior Transition Battalion Public Affairs

Coming in from the ocean after coasting atop water alive with motion and sunlight, maneuvering between a sandy shore and an endless horizon, Sgt. Paul Bobadilla said he simultaneously felt a heady rush and a feeling of relaxation.

"I love that it's such a great challenge, but it's a challenge that makes you want to keep going at it," said Bobadilla, a Warrior in Transition with the Community-Based Warrior Transition Unit-California who tried

surfing for the first time at the unit's adaptive sports day Nov. 16 in Orange County, Calif.

Bobadilla knows how to be persistent; he injured his Achilles tendon overseas, resulting in a surgery followed by months of physical therapy to regain his mobility.

"In six months of therapy, I went from not even being able to walk to being able to run two miles in 21 minutes," he said.

Gaining the ability to surf took just an afternoon, in which he practiced standing up from a prone position on dry land and learned to maintain his

balance on rocky waters.

"It helps to have good instructors... these instructors are kinda like military leaders; they guide us like we guide our Soldiers," said Bobadilla.

That may have been because their lead instructor is a veteran himself; Mike Pless, co-owner of M&M Surfing School, which donated lessons to Soldiers, served for seven years as a medic for the Navy. He easily interacted with the Soldiers, joking with them while running through practice drills.



Suzanne Ovel

Staff Sgt. Daniel Jones, a Warrior in Transition with the Community-Based Warrior Transition Unit, catches a wave at Seal Beach, Calif., Nov. 16.

Madigan exercises response to terrorist attacks

By Suzanne Ovel

Warrior Transition Battalion Public Affairs

A disgruntled patient and his supporters launched an attack against Madigan Healthcare System Dec. 6 in a mock scenario, setting off a homemade bomb near the emergency department before multiple shooters terrorized the command area and the hospital tower.

Although the situation was made up by exercise planners, Madigan's provost marshal office and emergency department reacted with full force, taking care of victims covered with moulage, clearing rooms and apprehending the shooters.

The shock of the attack was essential to creating a more realistic exercise.

"You never know what the bad guy is going to do, what the enemy is going to do in real life, so I think it's really good that we surprised them like that," said Staff Sgt. Jacob Getchell, a Soldier with the 138th Battalion, 4th Brigade, 2nd Infantry Division (Stryker) who acted as a shooter.

With this exercise, Madigan practiced how it would react to a multi-pronged terrorist threat. Madigan providers and staff had to initially respond to the mass casualties caused by the explosion and then quickly change mindsets to respond to several active shooters.

"[The attack was] created to develop

a conflict between the two scenarios," said Joseph Weston, Madigan's emergency management planner. "The reason the training was so in-depth was because the rest of our response capability depends so critically on getting it right from the beginning."

Exercise evaluators looked at how the staff reported the incidents and how the areas locked down; at the staff's ability to communicate; at the ability of the emergency department to reestablish medical operations at another location; and at the incident command response, among other areas.

"For active shooters, our primary goal was the provost marshal office... respond appropriately, neutralize the threat, and then do the appropriate clearing to make sure the environment is safe," said Weston.

Although the exercise focused on Madigan's responses, the Joint Base Lewis-McChord fire department, military police and explosive ordnance disposal units participated as well as other garrison units. Madigan staff also reached out to the Tacoma Police Department to help evaluate the effectiveness of their active shooter response team, and to Pierce County Emergency Management to look at their communications process.

"As much as possible, we try to interact with our civilian partners in order to build stronger emergency management relationships," said Weston. "During



Officers Michael Hager, Brian Cederburg, and Eric Delegard secure a hallway as part of an exercise response to mock shooters at Madigan Dec. 6. Planners created a split scenario exercise to challenge staff to respond to mass casualties from a simulated explosion and a mock active-shooters scenario.

Suzanne Ovel



Maj. Christopher Wilson with Madigan's Logistics Division coordinates responses to an exercise at the hospital's emergency operations center Dec. 6.

disaster response one of our greatest assets is having strong working relationships with our counterparts in the communities where our Families reside, and the time to forge those relationships is not when the disaster strikes."

Jorge Marciano, a communications system technician with Pierce County, paid close attention during the exercise to how Madigan staff would react after the simulated loss of their communication center.

"In the absence of a communication center, I'm looking to see if they fall back on the basics," said Marciano, who said that could be communication tactics from radios to cell phones to runners.

The lessons learned from this exercise could translate to big impacts on Madigan's emergency preparedness.

"Preliminarily, just as with most exercises, we have identified some areas for improvement in communications and some of our activation processes," said Weston.

While departments will get feedback, this exercise won't be graded; instead, it focused on training.

"It's a training environment, an opportunity to look at our plan," said Weston. "We're validating the plan... what worked well, and what do we need to change."

Suzanne Ovel

MADIGAN HEROES

DECEMBER 2011

WWW.MAMC.AMEDD.ARMY.MIL

PAGE 7

Purple Heart

Sgt. Owen Lauerman

Army Commendation Medal

Lt. Col. Darrell Small

Army Achievement Medal

Maj. Michele Soltis

Staff Sgt. Daniel Aiono

Staff Sgt. Andrew Hershey

Staff Sgt. Brian Ricard

Sgt. Ted Ni

Sgt. Aubrey Stoda

Spc. Kelli Bass

Spc. Marina McPherson

Spc. Tyree Tindall

Pvt. Aaron Bruns

Army Commander's Award for Civilian Service

Pamela Birgenheier

Marsha Bryant

Tawny Dotson

Ming Koh

Maureen Salafai

Army Achievement Medal for Civilian Service

Charles Court

Yolanda Green

Jeffrey Hebron

Julie Martin

Army Certificate of Achievement

Lt. Cdr. Tania Thorne

Capt. Wilhelm Kogler

Capt. Eugenio Llorada

Staff Sgt. Owen Loop

Milagros BorreroRuiz

Yoshio Hokama

Liah Kwak

Rosemary Royce

Madigan Commander's Coin

Fe Manandic

Catherine Reed

Dan Clouse

Lt. Col. Katherine Simonson

Maj. Shannon Cole

Katie Stoll

Juliana Whitaker

Capt. Rocio Harms

1st Lt. Jason Celestino

Brian Cederburg

Eric Delegard

Trenton Shockey

1st Lt. John Tagavilla

Moises Gallegos

Rebecca Joy

James Joiner

Debbi Fisher

Col. Louis Walker

Capt. Devon Greer

Tiffany Owens

2nd Lt. Kirsten Luffy

Marcia Cox

Renee Leach

Staff Sgt Travis Danning

Lt. Col. Tarak Patel

Joann Thigpen

Patient Safety Award :

Peggy Hunt

Service Awards

Pauline Oliver - 35 years

Special Awards:

2011 MOST Wired Award

Madigan Healthcare System

Department of Informatics

Army Medical Command 2010

Journalism Awards

First Place for Story Series: Tawny Dotson

First Place for Commentary: Tawny Dotson

First Place for Photojournalism: Tawny

Dotson

Journalist of the Year: Tawny Dotson

Please see **KUDOS**, PAGE 10

Madigan Healthcare System Clinic Holiday Hours Dec. 2011- Jan. 2012

The following is a list of holiday hours and closures at Madigan Healthcare System, by clinic.

The most current list of Holiday Hours is available at: www.facebook.com/#!/MadiganHealth

Allergy-Immunology Clinic:

Open regular clinic hours 7:30 a.m.-
4:30 p.m. Mon. - Fri.

Closed Dec. 23-26 and 30 - Jan. 2

Cardiology Clinic:

Open regular clinic hours 7:30 a.m.-
4:30 p.m. Mon. - Fri.

Closed Dec. 23-26 and 30 - Jan. 2

Dermatology Clinic:

Open regular clinic hours 7:30 a.m.-
4:30 p.m. Mon. - Fri.

Closed Dec. 23-26 and 30 - Jan. 2

Endocrine Clinic:

Open regular clinic hours 7:30 a.m.-
4:30 p.m. Mon. - Fri.

Closed Dec. 23-26 and 30 - Jan. 2

GI Clinic:

Open regular clinic hours 7:30 a.m.-
4:30 p.m. Mon. - Fri.

Closed Dec. 23-26 and 30 - Jan. 2

Hematology Oncology Clinic:

Open regular clinic hours 7:30 a.m.-
4:30 p.m. Mon. - Fri.

Closed Dec. 23-26 and 30 - Jan. 2

Infectious Disease Clinic:

Open regular clinic hours 7:30 a.m.-
4:30 p.m. Mon. - Fri.

Closed Dec. 23-26 and 30 - Jan. 2

Nutrition Clinic:

Open regular clinic hours 8 a.m. - 4

p.m. Dec 20-22; 27-29

Dec 23: open 8:00 a.m. - noon

Dec 26: closed

Dec 30: closed

Jan 2: closed

Integrated Pain Management Clinic:

Open regular clinic hours 7:30 a.m. -
4:30 p.m.

Internal Medicine Clinic:

Open regular clinic hours 7:30 a.m.-
4:30 p.m. Mon. - Fri.

Closed Dec. 23-26 and 30 - Jan. 2

Nephrology Clinic:

Open regular clinic hours 7:30 a.m.-
4:30 p.m. Mon. - Fri.

Closed Dec. 23-26 and 30 - Jan. 2

Neurology Clinic:

Open regular clinic hours 7:30 a.m.-
4:30 p.m. Mon. - Fri.

Closed Dec. 23-26 and 30 - Jan. 2

Pulmonary/Critical Care/Sleep Clinic:

Open regular clinic hours 7:30 a.m.-
4:30 p.m. Mon. - Fri.

Closed Dec. 23-26 and 30 - Jan. 2

Preventive Medicine Clinic:

Open regular clinic hours Dec 19 - 22
7:30 a.m. - 4:00 p.m. Mon. - Fri.

Closed Dec 23 - 26

Open to walk-in patients from 7:30

a.m. -10:30 a.m., Dec. 27 -29

Closed Dec. 30 - Jan. 2

Environmental Health:

Open regular clinic hours 7:30 a.m. -
4:00 p.m.

Closed Dec. 26 and Jan. 2

Health Promotions:

Open regular clinic hours 7:30 a.m. -
4:00 p.m.

Closed Dec. 26 and Jan. 2

Occupational Health:

Open regular clinic hours 7:30 a.m. -
4:00 p.m.

Closed Dec. 23-26 and 30 - Jan. 2

Industrial Hygiene:

Open regular clinic hours 7:30 a.m. -
4:00 p.m.

Closed Dec. 26 and Jan. 2

Hearing Conservation:

Open regular clinic hours 7:30 a.m. -
4:00 p.m.

Closed Dec. 23-26 and 30 - Jan. 2

Army Public Health Nursing:

Open regular clinic hours 7:30 a.m. -
4:00 p.m.

Closed Dec. 23 - 26 and 30 - Jan. 2

Rheumatology Clinic:

Open regular clinic hours 7:30 a.m.-
4:30 p.m. Mon. - Fri.

Closed Dec. 23-26 and 30 - Jan. 2

Health Physics:

Open regular clinic hours 7:30 a.m. -
4:00 p.m.

Closed Dec. 23-26 and 30 - Jan. 2

TBI Clinic:

Open regular clinic hours, 8 a.m. - 4
p.m.

Closed Dec. 23 and 30

Winder Clinic:

Open regular clinic hours, 8 a.m. - 4
p.m.

Closed Dec. 23 and 30

PHARMACIES:

Madigan Army Medical Center Pharmacy:

Dec. 19-22 open 7 a.m.-7 p.m.

Dec. 23 open 8 a.m. - 4:30 p.m.

Dec. 24 open 9 a.m. - 5 p.m.

Dec. 25-26 closed

Dec. 27-29 open 7 a.m. - 7 p.m.

Dec. 30 open 8 a.m. - 4:30 p.m.

Dec. 31 open 9 a.m. to 5 p.m.

Jan. 1-2 closed

Jan. 3 open 7 a.m. - 7 p.m.

Winder Clinic Pharmacy and Okubo Clinic Pharmacy:

Open 7:30 a.m. - 4 p.m.

Closed Dec. 24-26, 31 and Jan. 1, 2

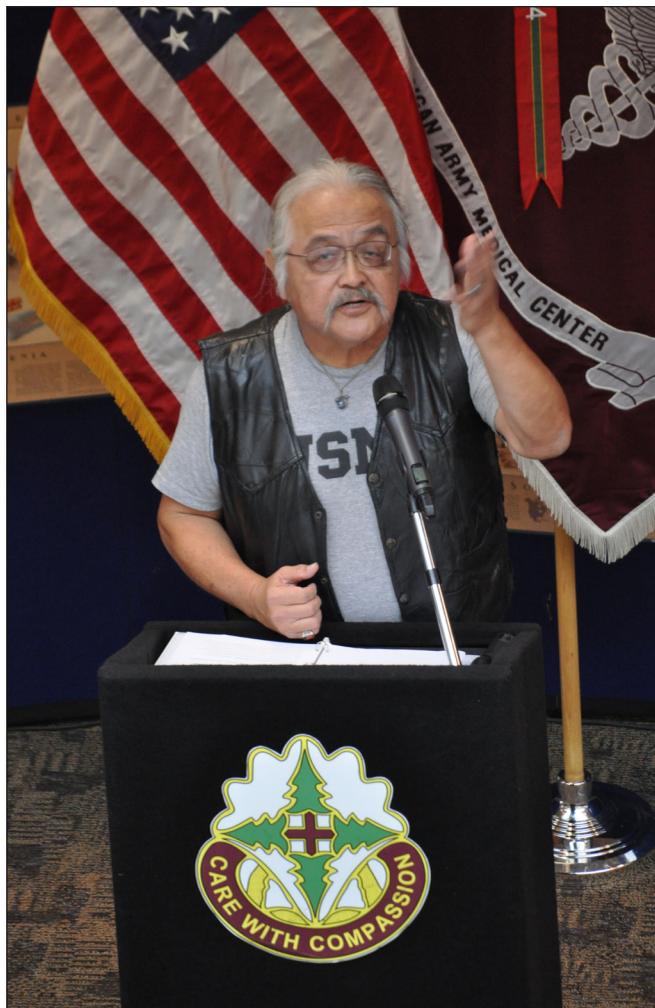
Mini Mall Pharmacy:

Open daily 9 a.m. - 4 p.m.

Closed Dec. 24-26, 31 and Jan. 1, 2

HERITAGE

CONTINUED FROM PAGE 1



Tawny M. Dotson

Cecil Cheeka tells the American Indian story of how the Flatfish and the Flounder became flat. In the story a skunk tricks the animal people into trampling the two under a door making them flat forever. Cheeka was one of two storytellers who participated in Madigan Healthcare System's National American Indian Heritage Month observance Nov. 30.

DuPuis recounted his time serving in the U.S. Army and how his faith helped him through his year-long service.

"If we didn't have the American military we would not have the freedoms we enjoy today," said DuPuis.

DuPuis was a member of the 5th Special Forces Group during Vietnam and served at two Special Forces camps; Mai Linh, in the Phu Yen Province, and Trai Mai Linh, in the Pleiku Province. He served in Vietnam from May of 1966 to May of 1967.

Col. (Dr.) Dallas Homas, Madigan's commander closed the event. "Thank you for your words and your service," Homas said. "I think it resonates with everyone here."

Following the ceremony, those in attendance had the opportunity to sample traditional native foods. This month's recognition event was hosted by Bravo Company from the Warrior Transition Battalion. The theme for the event was 'Service, Honor, Respect: Strengthening Our Cultures and Communities.'

New WTB CSM shares background, philosophy

By Command Sgt. Maj. Sans Gilmore
Warrior Transition Battalion

What follows is a little bit about me so that you know at least something about me as I assume the role as the Task Force Phoenix command sergeant major. Here goes. . .

I was born in Portland, Ore., and I grew up in Oregon and Washington. I graduated from Weatherwax High School in Aberdeen in 1975. I am an Army Reserve Soldier, and I have a bachelor's degree from the Evergreen State College and a Juris Doctorate degree from the Seattle University School of Law.

I joined the Army in August 1977 to become an Airborne Ranger. My initial contract assigned me to the 1st Ranger Battalion, 75th Ranger Regiment, which, at that time, was located at Fort Stewart, Ga. I graduated from advanced individual training, Airborne School and the Ranger Indoctrination Program, spent three months in the Fort Stewart swamps, spent three weeks in Panama taking the Jungle Operations Training Course, spent three weeks at 29 Palms, Calif., for desert training, got promoted to private first class, attended Ranger School Class 1-79, and then I was promoted to specialist. Oh yeah, I did the happy dance when I graduated from Ranger School.

I joined the 2nd Ranger Battalion at Fort Lewis in October 1979. In 1980 I enlisted to be a drill sergeant with the 104th Division. I worked as a drill sergeant from 1981 until 1991 when I was promoted to first sergeant. I was a first sergeant in three different drill sergeant companies until 1997 when I was selected to be a command sergeant major.

Yes, I've been a command sergeant major since 1997. Yes, that makes me the senior command sergeant major on post. No, I'm not the oldest command sergeant major on post. My command sergeant major assignments have included 3rd Battalion, 414th Regiment; 1st Brigade, 104th Division (Training Support); 70th Regional Readiness Command (nom-inative); 1st Battalion, 356th Regiment (Logistical Support); and now the Warrior Transition Battalion. I'm very proud to have been selected to be the WTB's command sergeant major.

On a more personal note, I got married in the middle of 1978 when I was gearing up for Ranger School. Yes, I'm still married to her (Tamela) — 33 years last July. Yes, I believe I've been married longer than any other command sergeant major on this post. Yes, I attribute almost all of my personal and professional success to her supporting me.

Tam and I live in Olympia. We have one daughter, Megan, and we like to travel in our free time.

Well, now you know a little bit about me and I am looking forward to getting to know you all. My plan is



Courtesy Photo

Command Sgt. Maj. Sans Gilmore is the new Warrior Transition Battalion senior enlisted leader.

to get to know you one layer at a time starting with the first sergeants and working my way through the staff while, at the same time, working my way toward meeting every Soldier in the unit.

Some of you may be wondering in the meantime what to expect from me, and what I expect from you. I believe in managing by walking around, so you will see me as much out of my office as in it. I will praise you for good work, and give you constructive criticism when you need it, and I expect you to take responsibility for your actions either way. Likewise, I expect everyone to plan ahead and work toward achieving success, whether that means a successful recovery and transition for our Warriors or managing your own careers and obtaining professional education for our cadre and staff.

I also expect all Soldiers, whether cadre or WT's, to know and exemplify the Army Values and Warrior Ethos. All cadre and staff should display superior competency, humanity, and compassion toward the Soldiers that depend on us for their care and daily needs.

We are only as good as our Soldiers and staff. We are responsible for important, on-going missions. Let's make sure to work together to help each other safely and compassionately take care of Soldiers. Hooah!

Albuteman visits hospital to educate adolescent patients on life with asthma

Story and photos By Tom Bradbury Jr.
Community Relations Officer

Albuteman is the asthma superhero named for the important asthma medication, Albuterol. He was created in 1993 by an Army pediatrician who was looking for ways to help young patients with asthma get excited about caring for their asthma, including learning about triggers, taking the appropriate preventive measures to stay healthy and understanding what an asthma action plan is and how to best implement it in their lives.

"As asthma continues to be a primary cause of

morbidity and mortality in the pediatric population, affecting approximately 7 percent of children younger than 17 years of age, understanding those triggering causes of an asthma attack and learning how best to act to avoid worsening asthmatic disease has become a crucial educational milestone for children diagnosed with asthma and their parents," said Col. Frank Wood, a pediatrician at Madigan.

For more information on pediatric asthma, parents are encouraged to visit the Pediatric Clinic at Madigan or make an appointment with their child's provider. For more information on Albuteman and his many adventures, please contact the Pediatric Inpatient Ward.



Tom Bradbury Jr.

Albuteman poses with Marshall King a patient in the Pediatric Inpatient Ward at Madigan Healthcare System during a visit Nov. 29.

CBWTU: CONTINUED FROM PAGE 1

“There’s a camaraderie there, I think,” he said.

Pless was joined by an expert paddle boarding instructor and 30 to 40 volunteers. They worked with Soldiers of all different capability levels and medical conditions to provide basic instruction, support and adaptations as needed, such as modifying less strenuous ways to stand up on a board.

For some of the students, though, the obstacle to surfing was a mental one. “One Soldier told me ‘I’m not going to make it; I can’t do this,’ and (then) I couldn’t get her out of the water,” he said.

While Pless and his volunteers were opening up Soldiers’ worlds to the thrill of riding waves in Seal Beach, Calif., community members across Orange County in Long Beach taught them to row. All 80 Soldiers at the muster got to try out both sports throughout the day.

“Given the chance to do this is incredible; they worked with us quite a bit,” said Spc. Gary Gritswold, a Warrior in Transition who was injured in a Humvee accident in Afghanistan in 2009. “I just like being on the water and feeling the power of the boat.”

He joined seven other Soldiers in a shell, or a racing rowboat. Volunteers from the California Adaptive Rowing Program started them out on rowing machines before coaching them in shells and a dragon boat.

“For those who have been injured, I wanted them to know that life doesn’t stop; it only changes. Rowing



Volunteers teach Staff Sgt. Roberto Torresvargas, a Warrior in Transition with the Community-Based Warrior Transition Unit, to row in Long Beach, Calif., on Nov. 16.

is a perfect way to rehabilitate the mind and the body. It is a no-impact sport that can be modified to fit any injury or disability,” said Cathleen Yampolsky, CARP project coordinator.

CBWTU leadership hoped that by offering Soldiers the chance to try out adaptive sports, they will find physical activities they can still enjoy and thrive in.

Suzanne Ovel

ENGAGEMENTS: CONTINUED FROM PAGE 1

Lt. Col. (Dr.) Steven Brady, Staff Ophthalmologist at Madigan Army Medical Center, working on a cataract surgery during a May 2011 mission in Malawi, Africa.

on-site. He has fond memories of some of the opportunities he has had participating in the efforts.

“We did surgery on a tiny woman on my first mission and when we went back several months later we were going to do the surgery on her husband and she remembered me, which was kind of nice,” said Klein.

Lt. Col. (Dr.) Adam Buchanan, an oculoplastic surgeon at Madigan has participated in a number of missions himself, both as a resident and then as a staff officer planning the trip.

“There’s months of planning going into it ahead

of time. We work with a number of commands and order a number of supplies,” said Buchanan.

Despite all of the work, the end result is memorable for most of the medical professionals.

“Children there can get an eye injury that causes a cataract to form and they may be blind in one or both eyes for the rest of their lives. Where in the United States we might get good care and good follow up and the child would recover from that no problem,” said Redger. “To be able to correct that occasionally is a wonderful feeling.”

Redger has been on two humanitarian missions; one to El Salvador and one to Malawi in Africa.

“I’ve been deployed a number of times, I’ve seen these types of living conditions, but when the plane lands back in the States I’m incredibly relieved to be back home with all of our conveniences,” said Redger.

All three of the Soldiers spoke of the opportunity to pay the experience and the training forward. Buchanan spoke of being able to use the experience to hone skills working in a more austere environment than the established setting of a hospital. In addition, Buchanan has shared his experience through speaking engagements and school career days.

“A lot of it is using it as a tool to teach residents,” said Buchanan. “There are a lot of lessons that they gather on the missions. Our department uses it as a part of the resident’s education and we try to make sure every resident gets to go on at least one mission.”

“It’s probably the proudest thing I’ve been able to participate in,” said Klein. “I feel like I made a difference.”

During December the Military Health System recognizes the year-round efforts that assist in the delivery of quality health care in cities, villages and remote regions that span the globe.

The type of services MHS provides also covers a lot of territory, including; responding to the scene of disasters, providing direct health care in underdeveloped nations, mentoring host country military medical personnel, rebuilding critical health infrastructure and supporting research to fight disease.

As part of the Department of Defense’s commitment to supporting global health initiatives, MHS carries out its work in partnership with federal agencies, allied governments and international organizations.

The results not only improve the quality of lives but build bridges of understanding.

Mej. (Dr.) Charles Redger

“0-0-1-3” - A different approach to responsible drinking

By **BethAnn Cameron**
U.S. Army Public Health Command

A program called “0-0-1-3” is an alcohol abuse prevention program that promotes making responsible choices with regard to alcohol use. It supports the National Prevention Strategy to have a healthy and fit nation, by improving linkages between substance abuse, mental health, juvenile and criminal justice agencies to develop and disseminate effective models of prevention.

In 2004, F.E. Warren Air Force Base developed the 0-0-1-3 program to address alcohol misuse as a result of a base-wide survey that found that the average airman thought “unsafe” drinking began with eight drinks or more.

Within the first year of implementing 0-0-1-3, alcohol-related incidents declined by 74 percent; there were 81 percent fewer cases of underage

drinking and 45 percent fewer cases of drunk driving. The United States Naval Academy also implemented the program in 2006. The 0-0-1-3 program has expanded from the Air Force to schools, colleges and communities nationwide with a goal of decreasing alcohol-related incidents. Several states have implemented 0-0-1-3 in order to curb underage drinking.

The 0-0-1-3 program emphasizes personal responsibility and is a way to also help change the drinking culture in the military. Think of 0-0-1-3 more as a way of life. It gives people a tool that they can use when they do consume alcohol.

So, what does 0-0-1-3 actually stand for?

- 0 - Zero drinks, if you're under the age of 21.
- 0 - Zero DUIs (driving while under the influence)
- 1 - One drink per hour (amount of alcohol that the liver can process in

one hour)

- 3 - No more than three drinks of alcohol per outing

0-0-1-3 is based on science and is defined as “responsible, periodic drinking” by the National Institute of Alcohol Abuse and Alcoholism, and the National Academy of Sciences. 0-0-1-3 became a community standard for underage drinking and for responsible use of alcohol among adults. People might not follow this standard, but they will at least start counting their drinks and comparing their habits to the standard.

In order to follow 0-0-1-3 and be able to compare one's drinking habits to the standard, we need to know the size of a drink based on alcohol content.

What defines a drink?

A standard drink is equal to 13.7 grams (0.6 ounces) of pure alcohol or:

- 12 ounces of beer
- Eight ounces of malt liquor

- Five ounces of wine
- 1.5-ounces or a “shot” of 80-proof distilled spirits or liquor (e.g., gin, rum, vodka or whiskey).

Most people know that drinking alcohol can be harmful. It can affect a person's health and well-being by causing illness and injury. It can also affect a military person's career by causing them to be passed over for promotion or cause loss of time from duty.

The 0-0-1-3 program is about making responsible choices about drinking alcohol. It is not an excuse to drink every day. If you're underage or driving, don't drink; if you are of legal age to consume alcohol, be responsible. Think 0-0-1-3 before you drink.

- 0 - Zero drinks, if you're under the age of 21
- 0 - Zero DUIs (driving while under the influence)
- 1 - One drink per hour
- 3 - No more than three drinks per event.

Zinc can help you! Prevent colds with this natural mineral

By **Shari Lopatin**
TriWest Healthcare Alliance

Feel yourself developing the sniffles? Better take some zinc.

Zinc is an element in the earth's crust—one of the most common, in fact. And while too much zinc is dangerous, the human body needs zinc for certain functions. One of the most important is to keep your immune system strong, according to the Centers for Disease

Control and Prevention.

By boosting your intake of zinc, you could help ward off colds.

Just make sure you're getting your recommended intake of zinc. Remember, too much could prove harmful to your body.

Recommended Dietary Allowances for Zinc are as follows:

- Children aged 0-6 months: 2 mg
- Children aged 7-12 months: 3 mg
- Children aged 1-3 years: 3 mg

Children aged 4-8 years: 5 mg

Children aged 9-13 years: 8 mg

Children aged 14-18 years: 11 mg (males), and 9 mg (females); If you're pregnant: 12 mg; If you're breastfeeding: 13 mg

Adults aged 19 years and older: 11 mg (males), 8 mg (females); if you're pregnant: 11 mg; If you're breastfeeding: 12 mg. * Source: National Institutes of Health, Office of Dietary Supplements

Which foods contain zinc?

Try eating some of these foods listed from the National Institutes of Health, which are naturally high in zinc:

- Oysters or crab
- Baked beans, canned
- Raisin bran cereal
- Cashews
- Lowfat yogurt and fruit
- Chicken leg
- Red meats, such as beef or pork

For more information on healthy eating, visit TriWest.com/eathealthy.

KUDOS: CONTINUED FROM PAGE 7

United States Army Keith L. Ware Awards

Second Place Commentary: Tawny Dotson

Third Place Story Series: Tawny Dotson

NCO Promotions

The following sergeants first class from Madigan Healthcare System who have been selected for promotion to master sergeant:

William Hall

Luis Reyes

Briant Wiggins

These exceptional non commissioned officers not only have accomplished much, but also have demonstrated potential for future positions of greater responsibility.

Certification Received

The following Madigan Healthcare System Soldiers and Civilian Employees for passing the International Certification Commission for Clinical Engineering and Biomedical Technology

examination and gaining the prestigious ICC Certified Biomedical Equipment Technician credential.

Spc. Tony Allen

Sgt. William Eskridge

Spc. Dustan Korte

Sgt. Aleksandr Manuylydi

Staff Sgt. Luis Mezquia

Staff Sgt. Christopher O'Connell

Chief Warrant Officer 2 Ramone Pagan

Sgt. Zachariah Serna

German Aguilar

Christopher Brewer

Helena Digby

Kevin Eaves

Henry Johnson

Gerry McKay

Matthias Czubek

Glen Wilson

Officer Promotions

Please congratulate the following captains from Madigan Healthcare System who have been selected for promotion to major:

Freida Bradshaw

David Brooks

Richelle Demotica

Susan Fisher

Alison Fransioli

Randolph Knox

Mariano Mesngon

Chadwick Milligan

Tina Ortiz

Ulu Porter

Mary Renkiewicz

Angela Tague

Gabriel Wander

Duane Zaricor

Accreditation

The Department of Preventive Medicine's Environmental Health Service for recently becoming an accredited drinking water laboratory under the authority of the Washington State Department of Ecology.

This allows Environmental Health to perform Quality Assurance testing on-site, which improves responsiveness and reduces cost for Joint Base Lewis-McChord. This drinking water certification is the first of its kind for Madigan.

International Accreditation

Madigan Healthcare System's Austere

and Wilderness Medicine Fellowship has now been designated as a training program that can confer the International Diploma of Mountain Medicine on successful graduates of the extended Military Mountain Medicine Course.

The medical committees of the International Mountaineering and Climbing Federation and the International Committee on Alpine Rescue notified Madigan that the course was granted approval to confer the degree. Prior to this news, one could only obtain the DiMM by attending school at a location in the United Kingdom or Europe, according to Col. (Dr.) Ian Wedmore, director of Madigan's Austere and Wilderness Medicine Fellowship. As of Oct. 21, there are now two programs in the United States approved to confer the diploma. A joint program run by the University of Utah, the University of Colorado and the Wilderness Medical Society also received their approval to confer the degree on the same date as Madigan's. For more detail on the DiMM visit: www.theuiaa.org/upload_area/files/1/DIMMreg_20101-3.pdf.

USAPHC deploys air monitoring vehicle called MAAMS

By Jane Gervasoni
U.S. Army Public Health Command

The U.S. Army Public Health Command has a new weapon in its arsenal to keep Soldiers and retirees, their Families, and Army civilians safe from airborne environmental hazards. Environmental health experts at the USAPHC have equipped a Mobile Ambient Air Monitoring System capable of rapid deployments to locations affected by air quality hazards such as Arizona, which experienced heavy smoke from recent wild fires.

"We deployed the MAAMS at the request of the Raymond W. Bliss Army Health Center Preventive Medicine Department to monitor air quality for the Fort Huachuca community," explained Terry Meade, MAAMS project manager in USAPHC's Deployment Environment Surveillance Program.

"Our job was to determine if the air quality in the Fort Huachuca community was affected by the particulate matter and gasses produced by the wild fires," he said.

Contaminants like sulfur dioxide, nitrogen oxides, ozone and carbon monoxide are found in the air we breathe, but high concentrations of these compounds along with high amounts of particulate matter (dust) can cause breathing prob-

lems. The equipment in the MAAMS monitors meteorological conditions including temperature, air pressure, wind speed and wind direction, as well as these contaminants.

"People on the installation were fortunate the winds were in their favor and kept most of the smoke to the south," Meade explained.

The equipment is designed to support environmental assessments like this. The USAPHC also has three trailer-mounted MAAMS, but the Fort Huachuca deployment was the first for the truck-enclosed system. The system is a self-contained, environmentally-controlled vehicle housing a suite of instruments that continuously monitors for pollutants. USAPHC uses Environmental Protection Agency criteria in determining air quality.

"Our work at Fort Huachuca provided us with a better overall picture of the community's air quality. From a public health standpoint, having a complete picture during a situation like this enables us to identify potential health effects and give information to commanders so they can provide necessary warnings appropriate for the conditions," explained Lt. Col. Sheryl Kennedy, DESP program manager.

"We learned a lot on this deployment," said Meade. "We learned to be aware of logistical considerations including loca-



The USAPHC Mobile Ambient Air Monitoring System vehicle is capable of rapid deployments and is often used to monitor air quality.

Courtesy Photo

tions of power sources and Internet connections to ensure data transfer back to our headquarters. It gave us the oppor-

tunity to anticipate problems so we can prepare in advance for contingencies to ensure mission success."

Get fit in 2012: First step check out new shoes for proper fit and wear

By Christian Kurty
Joint Base Lewis-McChord Army Wellness Center

Wondering how to take the first step in a list of fitness goals? Check out the shoes! Injuries occur if shoes aren't properly fitted or right for the chosen activity. Remember, as people get older their feet become longer and wider. The proper size and type makes a big difference in how the mechanics of the shoe works with the foot.

When picking a shoe from the hundreds available consider these factors:

- Details of the chosen activity. What types of terrain will running occur on? Will training be mainly on a treadmill or hard asphalt? A shoe store which caters to runners will be staffed with knowledgeable employees, many are avid runners themselves. They will be educated about body mechanics and which shoe will be right for the wearer.

- What types of arch does the wearer have; high, normal or low to flat? It is important for a shoe to support the unique foot structure; however not all injuries were prevented when placed

into shoes designed for the arch type. Again, this is where a knowledgeable salesman can help select the best fit.

- Research different shoes on the internet before making a purchase! The internet has extensive information and reviews to assist in avoiding a costly mistake.

Tips for Buying:

- To ensure a proper fit make, sure there is enough room for toes to move and a recommended quarter inch from the longest toe to the tip of the shoe. Proper measurement will assist in

ensuring an appropriate fit.

- The shoe shouldn't cause any discomfort. If it feels loose check lacing techniques. A properly tied shoe makes a world of difference. Online running magazine sites have a number of tips available for ways to lace shoes for the best fit.

- Make sure the store has a 30 day return policy. What feels good in the store doesn't always work out in activity. It is important to have the option of trading for a different style.

Now get out there and enjoy.

Healthy holidays: How to reduce calories and keep physically active during the season

By Lynn Larson
Joint Base Lewis-McChord Army Wellness Center

This holiday season treat the Family to health. Simple changes can put the Family onto a healthier path. Improve favorite recipes with a healthier version, be more physically active, and explore the great Northwest. Here are a few tips on how to make that happen:

Reducing Calories

- Replace up to ¼ of the fat in recipes with fruit puree, such as mashed bananas or apple sauce. Don't replace all of the fat or cakes and muffins will be gummy. Cut

down the sugar to balance the sweetness from the fruit.

- Use reduced fat margarines for crumbled toppings and graham cracker crusts. Reduced fat margarines contain water which will splatter with frying, or make food soggy when baked.

- Use buttermilk or nonfat yogurt to replace fat. Add one tablespoon of flour to half a cup of nonfat yogurt to prevent separating when heated.

- Replace cream with evaporated skim milk or fat-free half-and-half.

- Replace one ounce baking chocolate with three tablespoons of baking cocoa.

- One egg is the equivalent of Two egg whites.

- Saccharin and asesulfame K do not lose their flavor when heated, although they can be bitter. Aspartame does not work with baking or slow cooking. Sucralose can be used just like sugar. Fruit juice or fruit puree can replace sugar, but if diabetic, fruit will raise blood sugar.

- Add vanilla extract, cinnamon, all-spice, or grated orange zest for flavor without the calories!

Getting Physical

- Bundle up the kids and walk the

neighborhood to view the Christmas lights.

- Check out downhill skiing and boarding, cross country skiing, sledding and snow shoeing. Not that physically fit? Take a trip to Mt. Rainier and enjoy a walk in the snow. Everyone can have a white Christmas in the mountains!

- Make a commitment to workout. Exercise buddies help us stick to workout routines even with holiday demands. Get up early on the weekends and meet a friend for a quick walk around the neighborhood or aerobics class at the gym. Play active games with the kids.

Post-Partum Depression Group

Do you feel like you haven't been yourself since your baby was born? If you are feeling down, have had changes in sleep, are anxious, crying and tearful, or just overwhelmed; you may be experiencing post-partum depression. Please come to our group to learn about post-partum depression, get support, resources and ways to cope. The group meets on the fourth Wednesday of every month from 2:30 to 3:30 p.m. in the Sullivan Conference Room on the 7th Floor of the Hospital Tower at Madigan Army Medical Center.

How To Survive Through The Holidays - Sign up for the Civilian Fitness Program

December's Civilian Fitness Program fitness assessment will take place on Dec. 13 at Wilson Gym on North Joint Base Lewis-McChord. Appointments start at 8 a.m. that day. Please call (253) 967-5122 to make an appointment.

The mandatory Wellness/Injury Prevention Class will be at Bldg. 2166 on JBLM-Main Dec. 14 from 3 to 4 p.m. Participants need to attend both sessions to participate in the Civilian Fitness Program. Links to register and sign up for this program through your supervisor are available on Madigan's Sharepoint site in the Daily Bulletin.

Clinical Psychology Residency and Intern Program receives Seven-Year Accreditation

Madigan's Clinical Psychology Residency and Intern Programs have both just received the highest possible quality accreditation for seven years from the American Psychology Association!

This is significant, in that the possibilities for credentialing are 3, 5 or 7 years.

Got Stress?

"Finding Your Calm, Managing Stress in a Busy World," is a new presentation available from the Care Provider Support Program for Madigan staff members.

The one hour training explains stress and its effects on the body and mind, as well as exploring relaxation techniques and practices. Call Dian Hathaway at (253) 968-2299 to schedule your department!

Become a Hometown Hero

Staff members are encouraged to submit a Hometown News Release and share your accomplishments and achievements with Family members and friends back home. From the Madigan main SharePoint page, select Hometown News Release and fill out the electronic form. All DoD civilians and military members are invited to participate. For more information, contact Carrie Bernard at carrie.bernard@us.army.mil.

Medical Social Work parenting resource class

Are you a new or expecting parent? Unsure of what resources are available to you or where you can turn to for help?

Now there is a place you can go and find answers to your questions and get assistance with any troubles you have been facing.

The new and expecting parent resource class offers helpful information to parents that are expecting a child, are new parents, may have recently moved to the area and need help learning what resources are available to them, or are facing a particular situation and need extra assistance working through it with a

knowledgeable individual. This class will be held the second Monday of every month, from 9 to 10 a.m., in the Sakakini Conference room, near the Labor and Delivery ward of the Hospital Tower.

This class is for all parents in need of extra help and education on area resources and information.

Please stop by for an informative session on community resources available to parents and Families and how to connect with appropriate agencies for assistance. For additional information, please call Medical Social Work at (253)968-2303.

Do You Have a Good Idea?

Would your idea make access to care better? Or streamline work productivity?

An e-mail account has been established that gives you the opportunity to share ideas and communicate with the hospital commander.

Just e-mail to MAMC.Suggestion@amedd.army.mil. All referred e-mails will be addressed.

This is your opportunity to communicate with the commander. For more information, contact Hylie Jan Pressey at HylieJan.Pressey@us.army.mil or call (253) 968-3086.

Interested in Receiving The Mountaineer Via E-mail?

The Mountaineer is available electronically. If you are interested in receiving our monthly newspaper, please e-mail Tawny Dotson at tawny.m.dotson@us.army.mil and let her know the e-mail address to send the latest edition. For more information, call Dotson at (253) 968-3279.

Inpatient Medical Social Work Caregiver Fatigue Prevention

Have you ever felt isolated, frustrated and overwhelmed?

Please take this opportunity while your loved one is an inpatient at Madigan Healthcare System to meet

with others to obtain information on coping strategies, stress management and other ways to manage caring for self and a loved one.

This group will meet from 2 to 3 p.m. on the third Thursday of each month, in the 2 South conference room. This group is open to all inpatient Family members of who are caring for a loved one with a chronic health condition.

For additional information, please call Medical Social Work at (253) 968-2303.

Mountaineer Editorial Policy

Madigan Healthcare Systems has an officially published policy concerning content published in The Mountaineer. The policy is available on Madigan's Internal SharePoint for staff and on Madigan's Public website at www.mamc.amedd.army.mil.

If you would like to provide story submissions to The Mountaineer or have a story idea, you can contact Tawny Dotson at (253) 968-3279 or e-mail her at tawny.m.dotson@us.army.mil.

Provider Fatigue?

Are you suffering from employee burnout or Provider Fatigue?

The staff at the Care Provider Support Program can help. Located in the Social Work Department on the 7th floor of the Madigan Nursing Tower, Room 7-93-9, (253) 968-2299.

Fibromyalgia Education Course

The Rheumatology service at Madigan Healthcare System will be holding their monthly Fibromyalgia education course.

It is generally held the third Thursday of each month for one hour and is designed for patients diagnosed with Fibromyalgia.

To ensure the course is being held or to register please call the TRICARE Appointment Line at (800) 404-4506.

Madigan Hosts Chemical, Biological, Radiological and Nuclear training

Jan. 23-27

Madigan Army Medical Center in the Letterman Auditorium

All staff members are encouraged to attend these face-to-face training opportunities for their CBRNE Training Requirement completion.

Courses are available at the following times:

Monday, Jan. 23, from 8-10 a.m. or 1-3 p.m.

Tuesday, Jan. 24, for Clinician's from 8 a.m. to 4:30 p.m.

Wednesday, Jan. 25, from 8-10 a.m. or 1-3 p.m.

Thursday, Jan. 26, for Clinicians' from 8 a.m. to 4:30 p.m.

Friday, Jan. 27, from 8-10 a.m.

To register contact Staff Sgt. Jeffrey Anello by e-mail at jeffrey.w.anello@us.army.mil. In your e-mail please provide full name, phone number and the preferred date and time to attend.