

# Rounds

Eisenhower Army Medical Center



FEBRUARY 2018



**HEART  
HEALTH**  
telehealth  
& nutrition

**Rx**  
TRICARE PHARM  
CO-PAYS UP

**ARMY  
NURSE  
CORPS  
BIRTHDAY**

Photo by John Corley

**Feb. 1**

DTMS/Swank new managers training, Defense Collaboration System (Online), 9-10:30 a.m.

SHARP/Soldier-civilian annual training, first-floor auditorium, 9:30 a.m. to 12:30 p.m.

**Feb. 2**

Junior Enlisted Development Program, first-floor auditorium, 6-6:30 a.m.

Junior Enlisted Development Program, first-floor auditorium, 4-5 p.m.

**Feb. 6**

Junior Enlisted Development Program, first-floor auditorium, 6-7 a.m.

**Feb. 7**

Noncommissioned Officer Development Program, first-floor auditorium, 6-7 a.m.

Noncommissioned Officer Development Program, first-floor auditorium, 4-5 p.m.

**Feb. 9**

Employee Assistant Program training for civilian employees and families, ASAP training room, noon to 1 p.m., EAP Brown Bag session: Essential Presentation Skills

**Feb. 12**

Army Substance Abuse Program Training for Soldiers, Alexander Hall, 1-2 p.m.

Army Substance Abuse Program Training for Soldiers, Alexander Hall, 2:30-3:30 p.m.

**Feb. 15**

SHARP/Soldier-Civilian Annual Training, first-floor auditorium, 9:30 a.m. to 12:30 p.m.

**Feb. 16**

Training Day

**Feb. 19**

Presidents Day holiday

**Feb. 20**

Junior Enlisted Development Program, first-floor auditorium, 4-5 p.m.

**Feb. 21**

Noncommissioned Officer Professional Development, first-floor auditorium, 6-7 a.m.

Military Resilience Training for Families, Family Outreach Center, building 33512 (behind Woodworth Library) Rice Road, 9 a.m. to noon

Noncommissioned Officer Professional Development, first-floor auditorium, 4-5 p.m.

## Put your heart first this Valentine's Day

**Deanna Shade MS, RD, LD, CNSC**  
Informatics Dietitian  
Nutrition Care Division

Consider giving yourself that perfect gift this Valentine's Day: the gift of a healthy heart.

In addition to Valentine's Day, February also marks American Heart Month as a great time to pledge to a healthy lifestyle that can lead to a lifetime of heart health.

Heart disease is the leading cause of death for men and women. It affects people of all backgrounds, however African American men are at the highest risk of heart disease.

When it comes to taking care of your heart, you can never start too soon and small lifestyle changes can make a big difference over time. Here are some easy steps to take during the month of February to give your heart the ultimate Valentine's gift:

1. Increase the fiber in your diet. Increasing the fiber in your foods will help keep your cholesterol in balance which decreases your risk for heart disease. High fiber foods include whole grains like brown rice, whole wheat pasta and oatmeal, as well as fresh fruits, vegetables and legumes.
2. Start cooking at home. Cook a heart-healthy meal at home at least three nights of the week. Focus on recipes with lean meats, cook with vegetable oils instead of butter and lard, and swap salt for dried herbs and spices.
3. Get a heart check up. Schedule a visit with your doctor to see where your heart health currently stands, ask questions, and help focus your goals.
4. Give your heart some exercise. Your heart is a muscle and needs to be challenged to keep it strong. Try adding in daily walks after lunch or dinner to get your heart pumping.
5. Take steps to quit smoking. If you currently smoke, quitting can cut your chances of heart disease and stroke significantly.

In addition to putting your heart first this Valentine's Day, plan to talk to your loved ones about their heart health as well.



Talking with your family and friends about heart disease can be awkward, but it is important and could help save their life.

Have a "heart-to-heart" this Valentine's Day at the dinner table, in the car or even over the phone by sharing these tips alongside that gift of a teddy bear, fresh flowers, or a box of chocolates.



# Dedication, flexibility deliver seamless care

**Col. David E. Ristedt**  
Commander

Eisenhower Army Medical Center

As I write this, we've just begun the government shutdown and a period of uncertainty faces our nation, Fort Gordon and the EAMC team. I'm hopeful by the time this gets published, our government will be back to full operation. Regardless, I am supremely confident in your dedication and flexibility to continue to deliver seamless care to each other and our patients. As always, we remain focused on readiness, quality care and 5-star experience.

Just before the new year, Command Sgt. Maj. John Steed and I signed the EAMC Courtesy Pledge, dedicating ourselves to "create the environment where staff is

**EAMC will prove to DHA that we remain the flagship MEDCEN across the Southeastern United States**

inspired and empowered to deliver 5-Star care to fellow employees and patients with compassion, honesty and integrity."

Our expectation is that every member of the EAMC family — staff and patients alike — will work to maximize their contribution to this environment. The Patient

Experience Cell is finalizing the plans to invest in the professional development of the entire staff in support of this effort. I look forward to watching modest improvements in our staff satisfaction, patient safety, TRISS and JOES metrics over the next few years. Combined with the outstanding quality of care already delivered, EAMC will prove to DHA that we remain the flagship MEDCEN across the Southeastern United States.

As always, I remain in awe of our team's performance despite the obstacles and challenges in front of us. Thank you for your persistent dedication to the mission, readiness and care. I look forward to all we are able to accomplish in 2018 and beyond. We *Are* Eisenhower.

# Increases to Tricare pharmacy copayments coming

## TRICARE

On Feb. 1, copayments for prescription drugs at TRICARE Pharmacy Home Delivery and retail pharmacies will increase. These changes are required by law and affect TRICARE beneficiaries who are not active duty service members.

While retail pharmacy and home delivery copayments will increase, prescriptions filled at military pharmacies remain available at no cost. (See *EAMC's pharmacy hours below*).

"Military pharmacies and TRICARE Pharmacy Home Delivery will remain the lowest cost pharmacy option for TRICARE beneficiaries," said U.S. Air Force Lt. Col. Ann McManis, Pharmacy Operations Division at the Defense Health Agency.

Using home delivery, the copayments for a 90-day supply of generic formulary drugs will increase from \$0 to \$7. For brand-name formulary drugs, copayments will increase from \$20 to \$24, and copayments for non-formulary drugs without a medical necessity will increase from \$49 to \$53.

At a retail network pharmacy,

copayments for a 30-day supply of generic formulary drugs will increase from \$10 to \$11 and from \$24 to \$28 for brand-name formulary drugs.

In some cases, survivors of active duty service members may be eligible for lower cost-sharing amounts.

TRICARE groups pharmacy drugs into three categories: generic formulary, brand name formulary and non-formulary. You pay the least for generic formulary drugs and the most for non-formulary drugs, regardless of whether you get them from

see **TRICARE** on page 11



February 2018 • Vol. 3, No. 5

Rounds is an official monthly publication of Eisenhower Army Medical Center at Fort Gordon, Georgia, produced by the EAMC Public Affairs Office for and about the staff of the hospital and the military members, family members and beneficiaries who choose EAMC for their Five-Star Health Care.

Editorial content is under the direction of and serves the mission of the EAMC commanding officer. Email: usarmy.gordon.medcom-eamc.mbx.pao@mail.mil.

## Eisenhower Army Medical Center pharmacy hours

### Main Outpatient Pharmacy

EAMC, Second Floor  
300 East Hospital Road  
Fort Gordon  
706-787-8033  
Mon - Fri: 7:30 a.m. to 6 p.m.  
Sat: 8 a.m. to 4 p.m.  
Closed Sundays, Federal Holidays  
Training Holiday hours:  
8 a.m. to 4 p.m. (when applicable)

### Exchange Pharmacy

Building 38200  
3rd Ave. Fort Gordon  
706-787-0115, 706-787-0116  
Mon - Fri: 8 a.m. to 6 p.m.  
Sat: 8 a.m. to 4 p.m.  
Closed Sundays, Federal Holidays  
Training Holiday hours:  
8 a.m. to 4 p.m. (when applicable)

# 1st female general, chief of Army nurses dies at 97

## Army Heritage Center

When Anna Mae McCabe Hays joined the Army in 1942 she knew she was signing up “for the duration” of the war plus six months. In all likelihood she had no idea that the Army would be her career, nor how successful that career would be. She certainly had no idea that by the time she retired she would rise to be the chief of the Army Nurses Corps and America’s first female general officer.

Retired Brig. Gen. Anna Mae Hays died Sunday, Jan. 7, at age 97, at Knollwood Military Retirement Community in Washington, D.C. She was interred at the Grandview Cemetery in Allentown, Pa, next to her father.

Hays was born Feb. 16, 1920 in Buffalo, N.Y. Graduating with honors from Allentown High School and instilled with a strong drive to help others, Hays entered Allentown General Hospital School of Nursing in 1938.

Like thousands of nurses of her generation, Hays enrolled in the American Red Cross following graduation. After Pearl Harbor, inspired by a sense of duty and patriotism, Hays joined the Army Nurse Corps.

“I joined during World War II,” she said in an undated interview. “As you know, the war was declared on Dec. 7, 1941, and from that time until I joined in May of 1942, the papers were full of stories about individuals serving their country. [B]eing a nurse, I too wanted to serve my country.”

In January 1943, she deployed to Ledo, Assam, India, with the 20th General Hospital. Stationed at the entrance to the famous Ledo Road that cut through the jungles into Burma, their mission was to provide care to the American Soldiers building the route to China. Hays was assigned to the operating room and endured primitive living and working conditions including bamboo structures, monsoon weather, dysentery and snakes.

During her 2 1/2 years there, the hospital took care of more than 49,000 patients. In April 1945, Hays was promoted to First Lieutenant. After the war she elected to remain on active duty in the Army Nurses Corps.

When war broke out in Korea, she mobilized with the 4th Field Hospital, and participated in the Inchon Landing.



Official U.S. Army photo

**Brig. Gen. Anna Mae McCabe Hays, the U.S. Army's first female general officer and 13th Chief of the Army Nurse Corps in an undated photograph.**

Years later she would recall: “We were always extremely busy both in the Inchon area and later when we had to hurriedly evacuate, in February of 1951, to Taegu at the time the Chinese and North Koreans almost reached the Inchon area. I can remember traveling south from Inchon area to Taegu by train in the middle of the night — not knowing when a railroad trestle over which we traveled would be blown up.”

The 4th Field Hospital cared for more than 25,000 patients between September 1950 and July 1951, one night receiving 700 patients. In the bitter cold and with insufficient supplies, the operating rooms were in constant use. In many ways, Korea was worse than anything Hays had experienced

**“... I can remember traveling south from Inchon area to Taegu by train in the middle of the night — not knowing when a railroad trestle over which we traveled would be blown up.”**

in India, but she recognized the medical advancements that had been made since World War II: antibiotics, whole blood, and rapid evacuation, made possible by the use of helicopters.

In May 1956, Hays reported for duty as head nurse of the ER at Walter Reed Hospital in Washington, D.C. In June, President Dwight David Eisenhower was hospitalized there, and Hays was selected to serve as one of three private nurses for him. Over the 23 days of his hospitalization she formed a close bond with the president that lasted until his death in 1969.

By 1963, Hays had been promoted to lieutenant colonel, a significant achievement at a time when most nurses retired as majors, and was assigned to the office of Col. Margaret Harper, the chief of the Army Nurses Corps. In September 1963 then-Lt. Col. Hays became the assistant chief.

In July 1967 she was promoted to full colonel, and on Sept. 1, 1967, Col. Anna Mae V. McCabe Hays was sworn in as the 13th Chief of the Army Nurse Corps, as position she would hold until her retirement.

During the Vietnam War Hays travelled to Vietnam three times to assess the state of nursing there. During that time she oversaw formation of new training programs and a dramatic increase in the number of nurses deployed overseas.

Hays’ four-year tenure as ANC Chief was a time of great strides for women in the Army. In November 1967, President Lyndon Johnson signed Public Law 90-130 at the White House with Hays in attendance. The law removed barriers to promotion for female service members and opened the door for women to reach the rank of general officer.

In the years to come, Hays’ recommendations led to groundbreaking reforms in personnel policies. In January 1970, Army regulations were changed to end the practice of automatically discharging married officers who became pregnant. In July 1971, Policy AR 601-139 removed the restriction on the age of dependents of female nurses seeking appointment in the Army Nurse Corps Reserve. In addition, regulations were changed to allow for commissary and post privileges for spouses of female service members.

see **HAYS** on page 11

# Brothers in service, health care, hiking, real life

David M. White  
Public Affairs Office  
Eisenhower Army Medical Center

Along the Appalachian Trail, they're known as "Surefoot" and "Starbucks." Here at Eisenhower Army Medical Center, they're known as Maj. Joe Lister, RN, and Capt. Daniel Lister, RN, respectively.

The Lister brothers use some of their free time to hike sections of the 2,200-mile Appalachian Trail with the goal of completing the entire trek one day. But, due to their day jobs, free time is a precious commodity.

Joe, 44, is a soon-to-retire officer in the Emergency Department and Daniel, 37, recently took the reins as the company commander of Troop Command's Alpha Company.

Joe said he initially enlisted in the Army so he could eventually go to college. "Mom said, 'you go to college or go in the Army ... and I know the grades you have,'" he said.

After a two-year enlistment right after high school, Joe left and worked in law enforcement as a detention officer in western North Carolina.

"In 1998 I went back in the Army," Joe said, and I get the bug in my ear that I should go and volunteer in the E.R.

That experience interested Joe enough to work on the prerequisites for nursing school and, in 2000 through AMEDD's Enlisted Commissioning Program, he entered the University of Mary in Bismarck, N.D.

Daniel took a similar route, working full-time as a firefighter and EMT in Beaufort, S.C.

There he worked side-by-side with "bunch of ex-military ... the Navy, Air Force, Army and of course we had Marines," Daniel said.

"Working full time, I understood quite quickly that you will not get rich quick," he said. "I was looking at going to paramedic school to increase my marketability [and] increase [my] pay."

It was about this time that Joe introduced Daniel to newly commissioned 2nd Lt. Stephenie Loferski, RN. She was stationed at Fort Benning, Ga., when they started dating. With her supporting him, Daniel worked to become a nurse, starting nursing school at Columbus State, in Columbus, Ga. They married and, when she PCS'd to Fort Bragg, N.C., Daniel continued his education at the University of

North Carolina – Pembroke, just south of Fayetteville, N.C.

Daniel and Stephanie later celebrated the birth of their first child and he accepted a commission into the Army. ("No, I don't worry about saluting my big brother," he said. "I have to salute my wife.") His wife retired last August at the rank of major.

Throughout the years, a couple of deployments and various PCS moves, the brothers have never been stationed together until their time here at EAMC.

"I talked to then Chief Nursing Officer Col. Corina Barrow, Joe said, "I said I know

of a top-notch captain in the Nurse Corps who would be a big asset here. And she said, 'absolutely. We want to bring him here.' And that's how we got to EAMC together."

The brothers' south-to-north AT hikes have been going off and on for about three years now. Coordinating the trips — leave, permissions, travel, gear, supplies — when they were deployed to different locations was an obstacle.

"And the weather dictates how far you're going to hike," Joe said.

Now, being here in Augusta, it's a bit easier.

see **BROTHERS** on page 11



Photo by John Corley

**Maj. Joe Lister, RN, left, and Capt. Daniel Lister, RN, are known along the Appalachian Trail as "Surefoot" and "Starbucks," respectively. At Eisenhower Army Medical Center, Joe is an officer in the Emergency Department and Daniel is Troop Command's Alpha Company commander.**

## What is and how to get a 'trail name'

A popular tradition of Appalachian Trail culture is to give thoughtful nicknames to your co-hikers. These trail names are what you go by in lieu of your real name — so don't do something dumb early on, or it'll follow you for 2,000 miles.

For example, there is the tale of a hiker who was helping his wife get into trail shape through a conditioning hike. She weighed about 105 pounds and was carrying a 40-pound pack the husband

had packed to "get her into shape" for the trip. When she was digging into the pack for her food bag, right on top was a white towel. When she pulled it out, a five-pound dumbbell fell to the ground.

When questioned, her husband said he couldn't think of another way to get her pack weight up to 40 pounds for a weekend outing. She continued to carry the dumbbell for the weekend.

Her trail name from then on was "Hikes with Dumbbell."

# 6 A brief history of African-American Army Nurse Corps officers

United States Army, Office of  
Medical History

As a nation, we recognize the month of February as Black History Month. African-American contributions to the nation should be recognized not only as black history, but also as a vital part of American history. Dr. Carter G. Woodson, a black scholar who accepted the challenge of writing Black Americans into the nation's history, founded the Association for the Study of African-American Life. Woodson launched Black History Week in 1926 as an initiative to bring national attention to the contributions of black people throughout American history. The Army Nurse Corps shares in the celebration of Black History Month and honors the legacy of African-American Army Nurse Corps Officers.

African-American nurses have served throughout our nation's history. During the Civil War, black nurses such as Sojourner Truth, an emancipated slave, worked in Union hospitals caring for the sick and wounded. Similarly, Harriet Tubman, when

**“... Each of us  
contributed quietly  
and with dignity  
to the idea that  
justice demands  
professional equality  
for all qualified  
nurses.”**

— Aileen Cole Stewart

she was not serving as a laundress, cook, scout, spy or guide for the Union Army, also nursed soldiers. Like all Civil War nurses, Tubman did not receive a pension until 30 years after the end of the war. As many as 181 black nurses, both female and male,

served in convalescent and U.S. government hospitals in Maryland, Virginia and North Carolina during the Civil War.

During the Spanish-American War, African American nurses served as contract nurses. Namahyoke Curtis, wife of the superintendent of the Freedmen's Hospital in Washington, D.C., worked as a contract nurse combating yellow fever and typhoid epidemics that plagued the military during this war. Contracted by the Army, as many as 80 other black women were hired to serve as nurses. These nurses, who were often erroneously considered “immune,” handled the worst of the epidemics. Many of these nurses actually served in Santiago, Cuba, caring for patients infected during the epidemics. Two of these African-American nurses who served overseas died from typhoid fever.

The performance of nurses during the Spanish-American War led to the establishment of the Army Nurse Corps Feb. 2, 1901. However, African-Americans continued to fight for acceptance as nurses both in civilian and military venues. At the onset of World War I, administrative barriers existed within the Army Nurse Corps and the American Red Cross that prevented African-American nurses from joining the war efforts. With political and public pressure building for acceptance of African-American nurses for the war cause, plans were made to permit them to apply to the Army Nurse Corps. It was not until the last months of World War I, during the influenza epidemic of 1918, that the Army and the Red Cross began accepting these nurses who were so willing to serve.

As the nursing shortage became critical, the War Department consented to the authorization of 18 African-American nurses into the Nurse Corps. They were assigned to duty in December 1918 at Camp Sherman, Ohio, and Camp Grant, Illinois.

One of these pioneering women, Aileen Cole Stewart, served at Camp Sherman, Ohio. The difficulties these nurses experienced did not prevent them from serving with great honor.

Stewart recalled, “The story of the Negro nurse in World War I is not spectacular. We arrived after the Armistice was signed,



Photo by David M. White

Maj. Deangelo Austin, left, med-surg nurse and nurse officer in charge at Connelly Health Clinic, and Capt. Leslie Pandey, nurse practitioner and assistant OIC at TMC No. 4, devote their leadership and medical skills to the mission of the Army Nurse Corps at Fort Gordon.

# EAMC delivers cardiology care via telehealth

**Lt. Col. Mike Odle, MD**

Staff Cardiologist

Eisenhower Army Medical Center

Coughing throughout the night, headache, sore throat, no sleep, Pvt. Smith made his way to sick call prior to starting another day of rigorous basic training at Fort Benning, Ga. The health care provider diagnosed a viral infection, and treated him with hydration and acetaminophen.

During the exam, the provider heard what could potentially be an abnormal heart sound known as a murmur. Smith knows any heart condition can delay his training, or potentially lead to his release from active duty.

**The telehealth era is here, and the Cardiology Service at EAMC is proud to play its role.**

He needs an echocardiogram, an ultrasound of his heart prior to returning to duty. Worry and anxiety spill from the soldier to his chain of command regarding sensitive time frames for completion of training, as there is no cardiologist at Fort Benning.

The expansion of information technology birthed a new field of medicine known as telemedicine. The cardiology service at Eisenhower Army Medical Center embraces this growth. The cardiology service at EAMC continues to find ways to remotely support soldier care through telehealth, harnessing technology to support outlying facilities and referral hubs. In turn, this leads to prompt, efficient cardiac evaluation and disposition. Many times, what providers can accomplish through telehealth avoids further referrals, cost and time consumption.

In the case of Pvt. Smith, he was referred to Martin Army Community Hospital at Fort Benning. There an echocardiogram technician performed a standard cardiac ultrasound. Within minutes, the images from this examination were transferred to EAMC for interpretation by a board-certified cardiologist.

The examination was interpreted by a cardiologist, and the results of the examination made available in the electronic



Courtesy photo

**Lynda Hilbrand performs an echocardiogram on a patient at Martin Army Community Hospital, Fort Benning, Ga., in early January. Via telehealth, she transmitted the information and images to Eisenhower Army Medical Center for analysis and diagnosis by a cardiologist.**

medical record. Armed with this information, Smith's health care team at Fort Benning cleared him to return to full duty. This evaluation would previously have taken weeks to complete, and if deferred for civilian care, added a substantial cost to the government.

The telehealth era is here, and the Cardiology Service at EAMC is proud to play its role. Scenarios like that of Smith are now daily occurrences.

Currently, EAMC cardiology remotely

interprets echocardiograms from Fort Benning and Fort Stewart, Ga. They have recently expanded to remotely interpret ambulatory EKG monitors placed at those locations as well.

The benefits of this service are easily demonstrable, highlighting delivery of prompt, effective and efficient care to soldiers and beneficiaries. Moreover, the greatest impact is the ability to maintain heightened unit medical readiness, top priority for current leadership.

# Spirituality versus religion

**Capt. William Beaver**  
Chaplain  
Eisenhower Army Medical Center

What is the difference between spirituality and religion? That is a question I ask patients in the Residential Treatment Facility and in the TBI Functional Recovery Program. The answers I get vary tremendously.

I ask that question because a chaplain is required to lead spirituality classes in these behavioral health programs. That is a valid question for the chaplain because the behavioral health class is a different setting than a chapel service or even an office or bedside one-on-one conversation with a patient. The chaplain cannot and would not ever force religion or religious practices on patients. It is unprofessional, unlawful and disrespectful on many levels. But the chaplain is free to discuss spirituality. But who defines spirituality?

The reason I ask this question is to prompt patients to ask themselves where they find hope. When life gets very difficult and it seems like the walls are caving in, what is it that motivates a person to keep getting out of bed and facing the day, without any guarantees that life will get better? What is that?

Sadly, a few folks in severe crisis succumb to suicide. So what is it that keeps a patient going and not choose suicide when the odds against them seem overwhelming?

To me, that is the seed of spirituality. When a person in the midst of crisis has some inner belief or hope that circumstances will eventually improve and life will get better; it tells me as a chaplain that the person has resiliency. They have spirituality. That spirituality may be difficult for them to define or to place within the structure of a religion or set of practices, but it is a sign of hope and an inner strength. It gives both the patient and the chaplain something to work with.

As their chaplain in these behavioral health settings, I encourage every patient — regardless of their self-identified religious preference — to cling to that hope that keeps getting them out of bed on their worst days, and keep asking tough questions of God or a Higher Power.

**“... cling to that hope that keeps getting them out of bed on their worst days, and keep asking tough questions of God ...”**

I do not believe God is afraid of honest questions, difficult complaints or even cries of distress wrapped in colorful language. It is when we are the most true to ourselves and can express our hopes, fears, joys and sorrow that we connect with God. When we feel we have to somehow clean ourselves up or earn the favor of God before approaching God, we actually are being dishonest.

Honestly is the quickest route to spiritual

healing. And when the spirit is on the road to recovery, I believe the patient begins to believe in herself and can begin to take steps to heal herself.

As a chaplain, I believe all humans were created by God. As I prepare to PCS to another post after being with EAMC for four years, I have discovered that I cannot give a patient hope.

I believe they already have an inner hope given to them by God. It is my task as chaplain to help them discover that hope which is inside them, and to bring it to the front to allow them to draw strength from it.

For some, their spirituality will lead them to identify with a particular religion or set of spiritual practices with like-minded believers. For others, it may not. But I also am reminded that the question of spirituality versus religion is a valid question for us all.

I ask myself, and I ask you, are we simply following a set of religious practices, or do we fully incorporate our beliefs into our daily lives when things get difficult. Faith in God is about living an integrated life.

You are Cordially Invited  
to the



## 117<sup>th</sup> Army Nurse Corps Anniversary Celebration Breakfast

Saturday,  
Feb. 3, 2018  
9:30 a.m. to noon

**DoubleTree by Hilton**  
2651 Perimeter Parkway  
Augusta, Georgia

Breakfast will be served at 10 a.m.  
Uniform will be appropriate business casual attire.

Please contact CPT Cristina Caruso for  
no-cost ticket information:  
Mariacristina.caruso.mil@mail.mil  
Office – (706) 787-7599 Cell – (845) 242-3463  
Kindly R.S.V.P. by Monday, Jan. 29, 2018

**“Keeping you in the Fight since 1901”**



# Believing is half the battle, achieving is the other

**Sgt. James Phillips**

Cytology Noncommissioned Officer  
Eisenhower Army Medical Center

Believing is half the battle when accomplishing any task given to a person in real-life scenarios. The Eisenhower Army Medical Center running group creates a community of believers through precise and accurate training, and provides support to group members to instill a lifelong enjoyment for running.

The overall goal of the running group is to create an environment for improved

running to those who struggle with running or even currently dislike running.

The running group's kick-off ceremony is Feb. 3 from 8-10:30 a.m., in the first floor auditorium.

The ceremony will highlight the importance of proper diet/nutrition, conditioning, stretching/injury prevention, and sleep tracking.

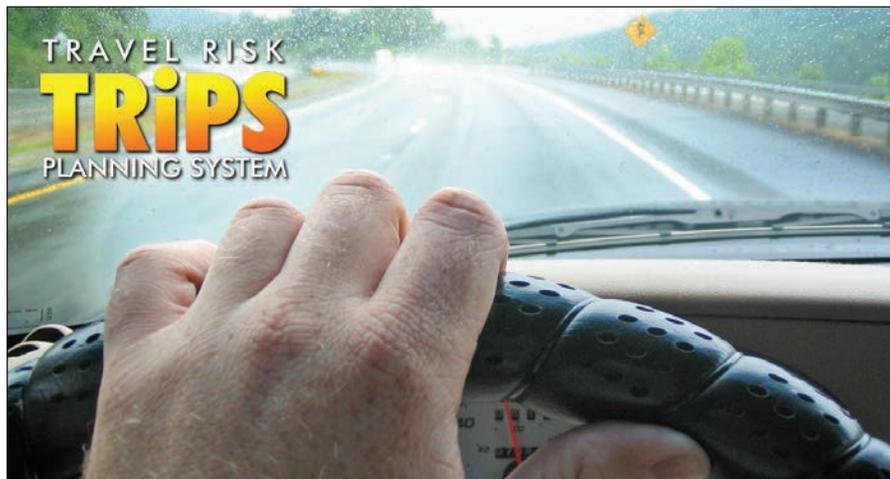
The program is sponsored by the Troop Command team — Lt. Col. Ross Davidson and Command Sgt. Maj. Omar Mascareñas — with support from several coaches

and mentors.

The running group will follow a training program to complete a 10K run March 17. The running group is open to all EAMC Soldiers, civilians and family members. Runners and runners-to-be are all welcome to participate.

Anybody willing to believe in themselves to achieve something greater, reach out and join the community.

For information on the EAMC Running Group, contact Sgt. James Phillips, 228-355-9486, or james.g.phillips84.mil@mail.mil.



## US Army's history in February

- Feb. 2, 1948 – Mexican War ends
- Feb. 2, 1901 – Army Nurse Corps established
- Feb. 3, 1943 – SS Dorchester torpedoed; four Army chaplains perish saving others
- Feb. 4, 1899 – Philippine Insurrection begins
- Feb. 6, 1962 – Military Assistance Command, Vietnam established
- Feb. 7, 1917 – Mexican Expedition ends
- Feb. 16, 1862 – Union forces capture Fort Donelson
- Feb. 19, 1943 – Battle of Kasserine Pass begins
- Feb. 20, 1944 – Operation Argument (Big Week) Air Offensive begins
- Feb. 22, 1847 – Battle of Buena Vista
- Feb. 22, 1932 – Purple Heart Medal is revived
- Feb. 22, 1967 – Operation Junction City begins
- Feb. 23, 1945 – 11th Abn Div liberates Los Banos internment camp
- Feb. 25, 1943 – Battle of Kasserine Pass ends
- Feb. 27, 1776 – Battle of Moore's Creek Bridge

— Source: U.S. Army Historical Foundation



**SHARP**  
SEXUAL HARASSMENT/ASSAULT RESPONSE & PREVENTION

**Restricted vs. Unrestricted Reporting**

Restricted Report	Unrestricted Report
<p><b>Who can accept a report:</b></p> <ul style="list-style-type: none"> <li>Sexual Assault Response Coordinator (SARC)</li> <li>SAPR Victim Advocate (VA)</li> <li>Healthcare Personnel</li> </ul> <p style="color: red; font-weight: bold;">***Do NOT CALL CID or Law Enforcement</p> <p><b>Limitations</b></p> <ul style="list-style-type: none"> <li>Chaplains – can not file a report, but remains confidential</li> </ul>	<p><b>Who can accept a report:</b></p> <ul style="list-style-type: none"> <li><b>Commander</b></li> <li>CID</li> <li>JAG</li> <li>IG</li> <li>SARC</li> <li>VA</li> <li>Healthcare Personnel</li> </ul> <p><b>Limitations</b></p> <ul style="list-style-type: none"> <li>More people will know about the sexual assault</li> <li>Investigation may be intrusive and difficult</li> <li><b>Cannot change to Restricted Report</b></li> </ul>

**SHARP Program: I AM THE FORCE BEHIND THE FIGHT** v10

# 10 Spring is just around the corner

**Bob Meloche**  
Safety Manager  
Eisenhower Army Medical Center

With the coming of spring, many folks undertake outdoor projects. While getting back out into the fresh air is a great tonic for shaking off the winter, safety has to be part of your game plan.

Wear safety goggles, sturdy shoes and long pants when using lawnmowers and other machinery. You should also protect your hearing.

when operating machinery. If you have to raise your voice to talk to someone who is an arm's length away, the noise can be potentially harmful to your hearing.

Prior to firing up your lawnmower/weedeater/edger, et al, inspect the equipment and ensure it is safe to operate. A good pair of gardening or work gloves are always a sound investment. They help protect you from skin irritations, cuts and contaminants.

Using insect repellent containing DEET is a good way to avoid insect bites and ticks. Reduce the risk of sunburn and skin cancer by wearing long sleeves, a wide-brimmed hat and sunshades.

Also, you should be using

sunscreen with an SPF of 15 or higher.

Follow instructions and warning labels on chemical, and lawn and garden equipment.

Keep an eye on the thermometer and take adequate precautions in the heat. Drink plenty of liquids, but not those that contain alcohol or large amounts of sugar, as they can cause you to lose body fluid.

Watch for signs of heat-related illness, including high body temperature, headache, dizziness, rapid pulse, nausea, confusion or unconsciousness. If you observe someone exhibiting these symptoms, get them into a shady/cooler area and have them hydrate as they rest.



## FOR PEAK PERFORMANCE, REACH ALL TARGETS AND + GOALS



## January

### Patient Safety Employee of the Month

#### Patient Safety Division

When 911 dispatchers received a call that a pregnant mother living on post was in labor, the Eisenhower Army Medical Center Emergency Department sprang into action, preparing the Trauma Room to receive mother and baby. The receiving physician requested the help of two nurses from the Family Medicine Clinic to assist in the delivery. They remained calm, cool and collected, maintaining a level, straight-forward attitude while they set up the room for the arrival of the baby and provided exceptional care for the baby and mom while in the ED. "Their assistance is a great reflection on them and the clinic as a whole," reads their nomination for Patient Safety recognition in January.



Photo by John Corley

**Sherice Patton, left, and Zenna Foster, both nurses in the Family Medicine Clinic, are recognized as Eisenhower Army Medical Center's Patient Safety Employees of the Month for December Dec. 22 for their help in delivering a baby in EAMC's Emergency Department.**

Zenna Foster, an Army wife for 21 years, is originally from North Carolina and has been a nurse for 24 years. She is married, with three children and two grandchildren.

Before joining the EAMC Family Medicine Clinic two years ago she previously worked at Atlanta Medical Center, Duke University's Neonatal Intensive Care Unit, Augusta University, and Doctors Hospital in the adult ICU. She has 15 years Neonatal Intensive Care Nurse experience and is a lactation consultant.

Sherice Patton is originally from Chicago and has been in the medical field for 24 years. She has a Master's in Nursing Education and is a critical care nurse in the Army Reserves. She is married with three daughters and two grandchildren.

## TRICARE from page 3

home delivery or a retail pharmacy.

To see the new TRICARE pharmacy copayments, visit [www.tricare.mil/pharmacycosts](http://www.tricare.mil/pharmacycosts). To learn more about the TRICARE Pharmacy Program, or move your prescriptions to home delivery, visit [www.tricare.mil/pharmacy](http://www.tricare.mil/pharmacy).

## NURSE from page 6

which alone was anticlimactic. But each of us contributed quietly and with dignity to the idea that justice demands professional equality for all qualified nurses."

More than 1,800 African-American nurses were certified by the American Red Cross to serve with the Army Nurse Corps during World War I, yet only a handful were allowed to actually serve. None of those who serve received benefits or pensions as they did not serve in wartime.

## BROTHERS from page 5

"We do our Masters week [hike]," Daniel said, "because that's when the weather is still not too hot. And the views are nice because the foliage hasn't really closed in on you."

Now, as Joe tilts toward retirement and continuing to work as a nurse, and Daniel assumes Alpha Company command, "Surefoot" and "Starbucks" still look forward to the next section of the AT. It's just that, despite having the same duty station, the free time to put trail miles under their belts still is a precious and hard-to-come-by commodity.

## HAYS from page 4

As chief of the ANC, Hays led efforts to strengthen the organization. Her tireless efforts to increase educational opportunities, recruit qualified nurses, and enforce stronger standards coupled with her work to include more nurses in the Army's decision making process. These efforts to increase the prestige and professionalism of the ANC contributed to a growing respect for nurses and women in the Army and the country as a whole.

On June 11, 1970, Hays was promoted to brigadier general and became the first woman in the United States Armed Forces to wear the stars of a general officer. Immediately following her promotion, Elizabeth P. Hoisington, director of the Women's Army Corps was also promoted to brigadier general.

In her remarks after her promotion, Hays expressed the view that the stars that signified her new rank "reflect the dedicated, selfless, and often heroic efforts of Army nurses throughout the world since 1901 in time of peace and war."

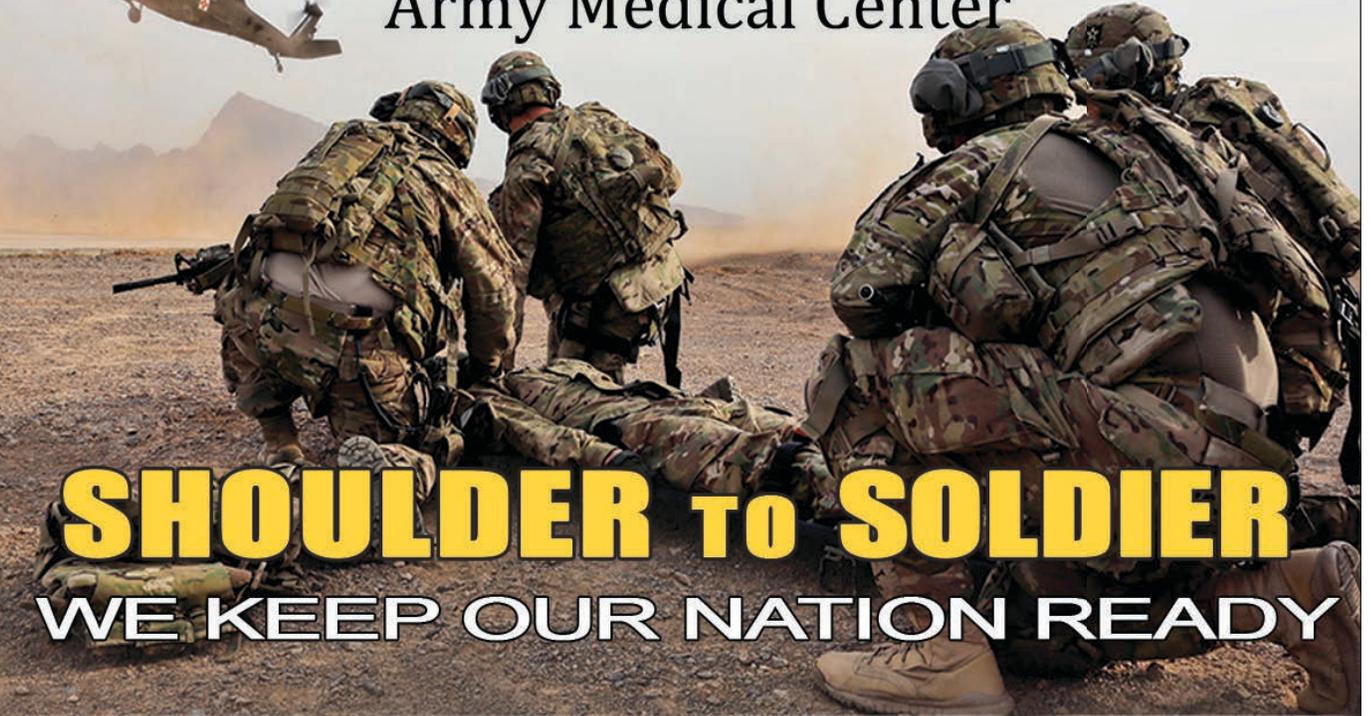
— Sources:

*Adapted from: "Embracing the Past: First Chief, Army Nurse Corps Turns 90!" Courtesy of the U.S. Army Medical Department Office of Medical History. <http://history.amedd.army.mil/HaysBio/HayesBio.html>*

*Hays, Anna Mae McCabe. Anna Mae McCabe Hays Papers. US Army Heritage and Education Center, Carlisle, PA. Sarnecky, Mary T. "Anna Mae Hays." The Army Nurse Corps Association (ANCA). The Army Nurse Corps Association, Inc. Web. April 12, 2011. <http://e-anca.org/bios/Hay.htm>.*



# Eisenhower Army Medical Center



## SHOULDER TO SOLDIER

WE KEEP OUR NATION READY



2nd Lt. Cathy A. Ionescu, RN, 11 West, Telemetry At EAMC and Soldier for about one year



Evan Wright, 2017 Red Cross Summer Volunteer



Kaylee Klosson, 2017 Red Cross Summer Volunteer



Lillian Young, LPN, Connelly Clinic for seven months, with MEDCOM for 10 years (recently from Fort Bragg, N.C.)

