

Rounds

Eisenhower Army Medical Center

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Col. Carlene A. S. Blanding, left, commander of Eisenhower Army Medical Center, looks on as Maj. Gen. Neil S. Hersey, commanding general of the Cyber Center of Excellence and Fort Gordon, signs a proclamation for breast cancer awareness throughout October. The proclamation emphasizes the importance of getting your mammogram screening and staying vigilant when it comes to caring for your personal health. (Photo by Scott Speaks)

Eating for success ... and the Army Combat Fitness Test

**Lt. Col. Brenda D. White, MS, MS,
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Chief, Nutrition Care Division
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Training and fueling for the old Army Physical Fitness Test was much simpler in comparison to training and fueling for the new Army Combat Fitness Test.

First, the old APFT took less time to complete and only consisted of three physical fitness events. Second, you probably didn't give much thought to what foods you consumed during your train-up (or if you trained-up, at all), the night before, or the morning of the APFT.

However, with the new ACFT your success will largely depend upon your train-up for six physical fitness events and proper fueling (i.e. eating for success). The key to proper fueling is understanding the energy pathways the body uses for each ACFT event. These events are the 3-Rep Maximum Deadlift, Standing Power Throw, Hand-Release Push Up, Sprint-Drag-Carry, Leg Tuck and the 2-Mile Run.

As you train-up and fuel for each ACFT event, your body will become more efficient in training, and use and breakdown of key nutrients for energy to pass the ACFT. In essence, the production of energy is based on training intensity/duration and ensuring the right nutrients are available for conversion to energy.

There are three primary energy systems the body uses during physical activity, whether weight training, sprinting, agility moves, plyometric exercises, yoga, running or walking. They are Adenosine Triphosphate/Phosphocreatine (ATP-PC), Glycolytic/Lactic-Acid Anaerobic (Glycolytic), and the Aerobic/Oxidative Pathway. Both the ATP-PC and Glycolytic system do not use oxygen when nutrients are broken down for energy, whereas the Aerobic system does use oxygen to breakdown nutrients needed for long-term physical activity.

The ATP-PC system fuels short-term, high-intensity, power activities such as the 3-Repetition Max Deadlift, the Standing Power Throw, etc., (about 8 to 10 seconds in duration).

ATP and phosphocreatine is stored energy found in the muscles. Muscles do not store a lot of phosphocreatine, so it is



Photo by Sgt. LaShawna Custom

Pfc. Llasmin Martinez, an automated logistical specialist from 1st Battalion, 43d Air Defense Artillery Regiment, 11th ADA Brigade, performs the strength deadlift during the Army Combat Fitness Test Jan. 27, at Stout Field on Fort Bliss.

used up immediately and fast. The body does make some creatine in small amounts, but it is found primarily in protein food sources, such as beef, tuna and chicken. For those who are vegetarian, phosphocreatine can be produced from combined vegetable sources.

After ATP-PC is used up, the body immediately uses the next energy system, the glycolytic. The glycolytic system fuels moderate duration (about 10 seconds to 2 to 3 minutes), high-intensity power activities such as the Leg Tuck, Hand-Release Push up, and the Sprint-Drag-Carry. This system produces energy from glycogen (i.e. stored carbohydrates) in primarily the muscles and then the liver. The only nutrient that the body can use to produce energy with this system is carbohydrates. Not just any carbohydrates, consider high-fiber, nutrient dense, whole-grain foods such as 100 percent wheat/oat breads, brown rice, etc. Any refined carbohydrate sources will not sustain glycogen stores.

As duration continues and intensity decreases, the body uses the aerobic system to fuel lower-intensity activities such as the 2-Mile Run, walking, biking, etc. This system produces energy from carbohydrates

(stored glycogen) and second, primarily fats. If you sprint at the end of the 2-mile run, your body will convert back to the Glycolytic energy systems for its fuel source (i.e. stored glycogen).

As Francis La Rochefoucauld said, "To eat is a necessity; but to eat intelligently is an art."

You must ensure you are eating the right foods at the right time to maintain your

see **NUTRITION** on page 15

Rounds
Eisenhower Army Medical Center

October 2020
Vol. 6, No. 1

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.



October's focus is Breast Cancer Awareness

Col. Carlene A.S Blanding
Commander

Eisenhower Army Medical Center

Welcome back to our teammates who have been away from the organization due to Covid-19. I look forward to seeing all of our teammates back in our work spaces continuing the mission of providing 5-Star care.

This month Rounds magazine is dedicated to breast cancer as we bring awareness and education to the second leading cause of death in women, with the chance of about 1 in 36 women dying from breast cancer. Other than skin cancer, breast cancer is the most common cancer women may face in their lifetime.

Unfortunately the two biggest risk factors are being a woman and getting older, the two factors we can do nothing about. While getting older is a risk factor, we must be aware that this disease can occur at any age.

Breast cancer is often seen as a disease that affects only women, men must know that they are also at risk, low risk but a risk none the less. The American Breast Cancer Society estimates that in 2020 there will be about 2,600 new cases with approximately 520 men dying from the disease.

EAMC's mammography clinic and public health clinicians have teamed up to bring many great educational opportunities and



Photo by Scott Speaks

Eisenhower Army Medical Center Commander Col. Carlene Blanding, signs a proclamation for breast cancer awareness throughout October Sept. 21 in the office of Maj. Gen. Neil S. Hersey, commanding general of the Cyber Center of Excellence and Fort Gordon.

programs to drive awareness and understanding of this deadly disease. The third Friday in October each year is National Mammography Day established in 1993. On this day or throughout the month, all women are encouraged to schedule a mammography appointment and take control of their health.

Team, we must continue to be diligent in practicing our safety measures when it comes to the health and safety of each

other and our patients. We must continue to strictly adhere to and enforce the masking policy, hand hygiene policy and social distancing in our work spaces, on post and off post, and in gatherings with our family and friends. Eisenhower needs the entire team on board.

A big welcome to all the new employees who joined the Eisenhower Army Medical

see **COMMANDER** on page 15

Thoughts from the command sergeant major

Command Sgt. Maj. William Allen
Eisenhower Army Medical Center

Eisenhower family, I recently noticed a series of new posters up on the bulletin boards posted around Eisenhower.

One of my favorites is the attached photo which says "Together, we get it done."

This poster really struck a positive chord with me. It addressed several things which are greatly impacting our society and culture at the moment. The "O" in together is a mask, referring to Eisenhower Army Medical Center as the medical subject matter experts for the entire post and into the surrounding region; and demonstrating our commitment to safety and defeat of the coronavirus pandemic.

The "elbow bump" is a symbol of working together amidst the current pandemic. Although we cannot shake hands, hug or use other close-contact symbols of collaboration and appreciation, the elbow bump demonstrates that we need each other. We need affirmation, acceptance and person-to-person contact no matter how slight.

Finally, the two exposed hands are obviously different ethnicities; a third symbol of teamwork and EAMC's commitment to diversity and treating everyone with dignity and respect. This poster completely symbolizes the Eisenhower motto: "We Are Eisenhower." You are what drives me to give my very best every day — keep up the good work.



Photo by Command Sgt. Maj. William Allen

4 EAMC welcomes new deputy commander officer

Staff Reports

Eisenhower Army Medical Center welcomes Col. Brandon Jerrell Pretlow as the new deputy commanding officer.

He is a native of New Castle, Del., where he lived until he began college at Hampton University, Hampton, Va. He received his commission into the Medical Service Corps in December 1992.

His first assignment was the Medical Platoon Leader for the 1-72d Armor Battalion, 2nd Infantry Division, in South Korea. He then served as a staff officer and company Executive Officer within the 82nd Forward Support Battalion, 82nd Airborne Division from 1994-1997.

Pretlow was later assigned to the 1st Cavalry Division and served in the Distributed Mission Operations Center as the Medical Logistics Officer followed by Company Command for Charlie Company, 115th Forward Support Battalion and Battalion S3 Operations Officer.

Following his time within the 1st Cavalry Division, he deployed to Kuwait to serve as the Forward Team Leader for the 6th Medical Materiel Management Center, supporting the CFLCC Surgeon's Office and 3rd Medical Command. Upon his return to the United States, Pretlow served as the deputy director for Force Sustainment Directorate within the U.S. Army Medical Materiel Agency at Fort Detrick, Md.

In 2006, Pretlow served as the Medical Logistics Planner for U.S. Pacific Command. Following his time at PACOM, he served as the chief of Medical Materiel for Tripler Army Medical Center.

In 2008, he deployed to Qatar to serve as the Chief of Materiel Management Division for the U.S. Army Medical Materiel Center-South West Asia. Upon redeployment, he served as the support operations officer and executive officer for the 6th MLMC. Following this assignment, he served as the deputy commander for Operations with USAMMA. Pretlow then served as the Brigade



Photo by David M. White

Eisenhower Army Medical Center welcomes Col. Col. Brandon Jerrell Pretlow as the new deputy commander officer. Pretlow arrived in mid-August.

Executive Officer for the 65th MED BDE in Korea. Following his assignment in Korea, he served as the G4 for the Regional Health Command Europe. In July 2018, he assumed command of the 531st Hospital Center at Fort Campbell, Ky.

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Round

Best place to start a literature search

Mary E. Gaudette

Librarian

Eisenhower Army Medical Center

Medical Subject Heading is a database maintained by the National Library of Medicine, and is a controlled vocabulary of medical subject headings, which are terms that enable researchers to construct their PubMed literature searches with the most appropriate term, or combination of terms, related to their information needs.

With MeSH, searches run in PubMed can be tailored to be very broad or tightly focused apropos the topic, all depending on the MeSH options chosen.

One of the options is to apply subheadings to a MeSH term. Choosing a subheading, or multiple subheadings, for a MeSH term will limit results to articles discussing specific aspects of the term. The number of subheadings available to choose

from will vary with each MeSH term. For instance, the term “dermatitis” lists 46 subheadings, whereas the term “rehabilitation centers” lists 11.

Search results can be broadened — or exploded — for a given term by having the MeSH database retrieve all records for which there are narrower terms for that topic in the MeSH hierarchy of terms. For instance, exploding the search on the term “dermatitis” will currently retrieve over 104,000 records indexed with dozens of narrower subject headings ranging from “drug eruptions” to “diaper rash.” As opposed to exploding a search, users can choose not to retrieve records indexed with any narrower subject headings of the chosen MeSH term. Such a search on the term “dermatitis” would then currently retrieve about 12,100 records.

Another option is to instruct the MeSH



database to return only those records for which the MeSH term is the major topic of the article. A MeSH major topic search on “dermatitis” will currently return 84,000 records.

The MeSHdDatabase is freely available worldwide at <https://www.ncbi.nlm.nih.gov/mesh/>. For assistance or training with MeSH, contact the Librarian at 787-4446, or send an email to mary.e.gaudette.civ@mail.mil.

October 2020

Hearing loss: It's not just for old folks anymore

Staff Reports

EENT/Audiology
Eisenhower Army Medical Center

More than 36 million American adults have some degree of hearing loss. That is more than four times the number of people who live in New York City.

The statistics are shocking and even more so knowing that over half of those 36

million Americans are under the age of 65.

Hearing loss is an increasing health concern in this nation that is often preventable. Twelve million Americans have hearing loss as a result of exposure to excessive noise levels.

Taking time to see an audiologist for regular hearing screenings, using hearing protection in loud noise and knowing the signs of hear-

ing loss can protect your hearing.

“Hearing loss can be caused by exposure to loud noises, ear infections, trauma, or ear disease; harm to the inner ear and ear drum, illness or certain medications, and deterioration due to the normal aging process,” said Terrie Ziegler, an Eisenhower Army Medical Center audiologist. The amount of noise Americans are exposed to today plays an important role in the recent increase of hearing loss across the nation. Hearing loss is no longer just a health concern for seniors.

Noise-induced hearing loss can be caused by prolonged exposure to any loud noise, such as concerts, sporting events, lawnmowers, fireworks, using ear buds at loud volumes or a brief exposure to a very intense sound, such as a gun shot near the ear.

An environment is too loud and considered dangerous if:

- You have to shout over noise to be heard.
- It is painful to your ears.
- It makes your ears ring during and after exposure.

On average, most Americans don't know how to recognize the first signs of hearing loss or which health professional is qualified to diagnose and treat the condition. If you think you may have a hearing loss, you need to see an audiologist.

Have you stopped going to restaurants and social gatherings? Do you keep to yourself when in noisy environments? If you answered yes, you may have a hearing problem.

According to Dr. Mark Little, EAMC's chief of Audiology, “some signs of hearing loss are: trouble hearing conversation in a noisy environment such as restaurants, difficulty or inability to hear people talking to you without looking at them, and/or a constant ringing in your ears.”

If you think you may have a hearing loss, you need to see an audiologist.

An audiologist is a licensed and clinically experienced health-care professional who specializes in evaluating, diagnosing and treating people with hearing loss and balance disorders. The first step in treatment of a hearing problem is to get your hearing evaluated by an audiologist. A hearing evaluation will determine the degree of

see **HEARING** on page 7

What can an audiologist do for you?

- Assess and treat hearing loss, and some dizziness and balance disorders.
- Prescribe, fit, and dispense hearing aids and other amplification and hearing assistance technologies
- Serve as members of cochlear implant teams.
- Assess and treat those with tinnitus (perception of noise or ringing in the ears)
- Assess and treat individuals with auditory processing disorders
- Provide hearing rehabilitation training such as auditory training and listening skills improvement
- Design and implement newborn hearing screening programs
- Perform ear-or hearing-related surgical monitoring

NATIONAL AUDIOLOGY AWARENESS MONTH
OCTOBER 2020

MHS Military Health System health.mil | HEARING.HEALTH.MIL

Helping health care workers manage stress

1st Lt. Kenya Gaston, RN
11 West
Eisenhower Army Medical Center.

In these unprecedented times, it is important for health care workers to be conscious of their mental, physical and emotional health. The more enhanced the caregiver's mental and physical state, the more optimal patient care that can be provided. Eisenhower Army Medical Center is known to be a facility that provides 5-Star care that extends beyond patients to our coworkers and leaders alike.

It is vital that health care workers stay aware for feelings of irritation or anger, according to the Centers for Disease Control and Prevention. Feeling uncertain or anxious, lacking motivation, feeling tired or overwhelmed, feeling sad or depressed, and having trouble sleeping or having trouble concentrating are all issues that require attention.

There are many factors that can be attributed to new onset stress to include the Covid-19 pandemic. The CDC reports that new onset stressors could also include but

are not limited to having concern about the risk of being exposed to the virus at work, managing a different workload, lack of access to the tools and equipment needed to perform your job and/or adapting to a different workspace and/or work schedule.

Luckily the CDC and the Army has provided multiple tips to help alleviate stress and maintain resilience in a taxing workplace.

Try to identify things that cause stress and work together to identify solutions, talk openly with peers about how the pandemic is affecting work. Keep in mind that expectations should be communicated clearly by everyone. Recognize those things you do not have control over and do the best you can with the resources available to you. Increase your sense of control by developing a consistent daily routine when possible.

Ideally try to have a schedule that is similar to your schedule before the pandemic. When time allows, take breaks from work to stretch or exercise. Try spending some off time outdoors, either being physically active or relaxing. Finally, practice mind-

fulness and ask about how to access mental health resources in your workplace.

There is an abundance of resources available at Eisenhower. Behavioral Health is located at Bldg. 329 Central Hospital Road and is open from Monday through Friday from 7:30 a.m. to 4 p.m. Military personnel can also use Military One Source to get off-post therapy sessions.

Knowing the facts about Covid-19 can alleviate some stress and anxiety. Be informed about how to protect yourself and others from the virus. Understanding the risk and sharing accurate information with people you care about can help reduce stress and assist you make a connection with others.

Constantly remind yourself that each of us has a crucial role in fighting this pandemic. Remember that everyone is in an unusual situation with limited resources. Occasionally take breaks from watching, reading, or listening to news stories, including social media. According to the CDC, hearing about the pandemic repeatedly can be upsetting and mentally exhausting.

Talk with people you trust about your concerns, how you are feeling, or how the Covid-19 pandemic is affecting you. Find time in your busy lives to connect with others through phone calls, email, text messages, mailing letters or cards, video chat and social media. Remember that helping others improves your sense of control, belonging and self-esteem.

Always look for safe ways to offer social support to others, especially if they are showing signs of stress, such as depression and anxiety.

If you feel as though you may be misusing alcohol or other drugs — including prescription drugs — as a means of coping, reach out for help through your chain of command, peers or loved ones.

If you are being treated for a mental health condition, continue with your treatment and be aware of any new or worsening symptoms.

Remember the pandemic is a new situation for everyone worldwide. Make the best of your current work conditions and know that your peers, subordinates and leaders are here for you and have your best interests at heart. Providing 5-Star care is Eisenhower's mission, and 5-Star care begins with you.



Stock Photo by Pfc. Harrison Moore

Lt. Col. Angela White, chaplain, advises a member of the Kentucky National Guard on some of the employment services offered at the G1.

Providing behavioral health services via telemedicine

Myrta N. Sifonte, MD
Medical Evaluation Board Provider
Rodriguez Army Health Clinic

Decades ago, Albert Einstein said, “In the middle of every difficulty lies opportunity.”

The coronavirus pandemic has revealed a host of opportunities, but perhaps none as groundbreaking as the widespread use of telemedicine. Rodriguez Army Health Clinic has been no exception to this trend.

Even though the Behavioral Health Section at RAHC had used telemedicine in the past, its use was limited as, culturally, patients favoured in-person care. However, for the last several months, telemedicine has proven a lifeline, giving patients access

to health care without increasing their risk of exposure to the Covid-19 virus. It has provided a bridge to connect health care providers to patients amid stay-at-home orders.

Records show that since March 2020, behavioral health access and assessment have been used at higher rates. By using telemedicine, we have been able to maintain access to care even during these challenging times.

Although tele-behavioral health has certainly improved the patients’ access and efficiency in our clinic, it still carries its own drawbacks.

Some of the challenges we have experienced at RACH include, but are not limited

to, technological shortcomings. Occasionally, technology is not reliable, the picture may freeze or stutter, sound may cut out, or the call may be dropped entirely. Also, we have noticed that the tech-literacy or access to technology of our patients varies, creating additional barriers to the provision of care.

Patient education has been of utmost importance. Our providers have been working to ensure they are providing services when service members are best available for care.

Another significant challenge has been creating a balanced therapeutic telemedicine environment. Patients’ homes are sometimes filled with different distractions and privacy is not always ensured. Finally, if the need for behavioral health services among our population continues to rise, we will have to consider the addition of another behavioral health provider to our ranks.

Preparation, patience and practice combined with resiliency have helped to implement a more widespread use of telemedicine to deal with the challenges imposed by the Covid-19 pandemic.

RAHC plans to continue using telemedicine as another clinical tool to complement and enhance traditional in-person care. Nonetheless, it is our belief that telemedicine can never fully replace the gold standard: in-person care.

As stated in our mission, RAHC is committed to ensure our beneficiaries continue to receive high-quality, patient-centered health care and deliver military readiness while inspiring hope and wellness to every patient on our community.

Our priorities continue to be taking care of people in a safe environment while ensuring access to care and medical readiness.



Photo by Alexander Marrero

Dr. Sonia Hernandez participates in a telemedicine session from her cell phone July 27. From a recent patient survey: “Dr. Sonia Hernandez continues to do a superb job supporting my behavioral health] needs at the Rodriguez Army Health Clinic. During these challenging and difficult times of the COVID-19 pandemic, Dr. Hernandez has been there for me and my treatment has not been interrupted. She listens very carefully and I know I can always count on her expert advice and recommendations. She is awesome!!! I strongly recommend that Dr. Hernandez be recognized for her superior customer service support.”

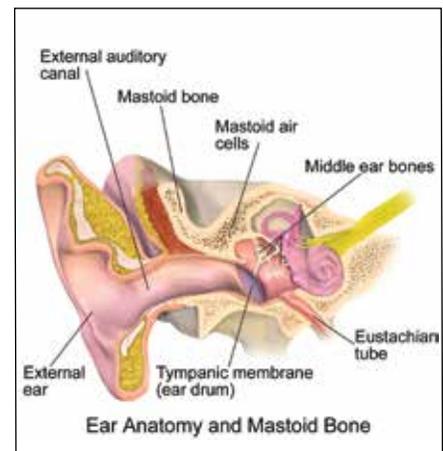
HEARING from page 5

hearing loss you have and what can be done to help reduce the effects of hearing loss. Although most hearing loss is permanent, an audiologist can determine the best treatment, which may include hearing aids, assistive listening devices and hearing rehabilitation. Some people may have a problem with their ear drum or middle ear that could be resolved with medicines or surgery and would be referred to the ear, nose and throat specialist.

EAMC’s Audiology Clinic provides hearing evaluations for all military beneficiaries and you may request a referral from

your Primary Care Provider.

If the evaluation indicates hearing aids would be beneficial, top-of-the-line technology is provided at no cost to active duty soldiers. Retirees can obtain hearing aids through the Retiree At Cost Hearing Aid Program that allows them to purchase hearing aids at government contract prices, usually less than \$1,000 for the set of aids, compared to \$6,000 in town. Dependents are referred to a civilian Tricare provider for no-cost hearing aids. Retiree dependents are not currently eligible for hearing aids at the MTF or through Tricare, but can request a hearing evaluation.



Courtesy Illustration

October is also Domestic Violence Awareness Month

Gail Bennett, MSW, Chief of Family Advocacy
Maj. Demetrice Pittman, PhD,
Clinical Psychologist
 Department of Behavioral Health
 Eisenhower Army Medical Center

The month of October is often associated with the color pink and Breast Cancer Awareness Month. Many do not realize that the color purple has been associated with October since 1981 and represents Domestic Violence Awareness Month.

The main tip is to be available to help whenever they may need it. What they need most is someone who will believe and listen.

Domestic Violence Awareness Month was first introduced in 1981 by the National Coalition Against Domestic Violence. Domestic violence takes place in our nation every minute of every day, occurring just about every 15 seconds. Most of these cases are left behind closed doors. That's why the Domestic Violence Awareness Month was introduced to not only educate and raise that awareness but bring the support and strength that domestic violence victims need.

Statistics

Every year, right around 10 million people become victims of domestic violence, which equates to just about 20 people every minute. Those are some pretty big and startling numbers. Many believe that the number is bigger because it is often under reported. In addition, due to Covid and physical distancing, many cases that may have been caught, are not being reported.

Domestic violence affects not only women, but men and children, of all different races, status, religions, and culture. No one is immune to it.

- 1 in 3 women and 1 in 4 men have experienced some form of physical violence by an intimate partner. This includes a

range of behaviors (e.g. slapping, shoving, pushing) and in some cases might not be considered "domestic violence."

- 1 in 4 women and 1 in 7 men have been victims of severe physical violence (e.g. beating, burning, strangling) by an intimate partner in their lifetime.
- On a typical day, there are more than 20,000 phone calls placed to domestic violence hotlines nationwide.
- Between 2003 and 2008, 142 women were murdered in their workplace by their abuser, accounting for 78 percent of women killed in the workplace during this timeframe.

Tips to help victims

Acknowledge they are in a very difficult and scary situation, be supportive and listen. Let them know that the abuse is not their fault. Reassure them they are not alone and there is help and support out there. It may be difficult for them to talk about the abuse.

Be non-judgmental. Respect your friend or family member's decisions. There are many reasons why victims stay in abusive relationships. They may leave and return to the relationship many times. Do not criticize their decisions or try to guilt them. They will need your support even more during those times.

If they end the relationship, continue to be supportive of them. Even though the relationship was abusive, your friend

or family member may still feel sad and lonely once it is over. They will need time to mourn the loss of the relationship and will especially need your support at that time.

Encourage them to participate in activities outside of the relationship with friends and family.

Support is critical and the more they feel supported by people who care for them, the easier it will be for them to take the steps necessary to get and stay safe away from their abusive partner. Remember that you can call the hotline 1-800-799-SAFE to find local support groups and information on staying safe.

The main tip is to be available to help whenever they may need it. What they need most is someone who will believe and listen.

Find help here

Resources are available on Fort Gordon by calling: the Family Advocacy Program office at 706-787-3656 or 706-414-5375.

- National Domestic Violence Hotline
1-800-799-7233 (SAFE)
www.ndvh.org
- National Child Abuse Hotline/Childhelp
1-800-4-A-CHILD (1-800-422-4453)
www.childhelp.org
- National Center for Victims of Crime
1-202-467-8700
www.victimsofcrime.org

Women between **18-24** years of age are at the greatest risk for intimate partner violence.



Only **34%** of people who are injured by intimate partners receive medical care for their injuries

Every minute, about **20** people are physically abused by an intimate partner in the U.S.



Information gathered from U.S. News.

Graphic: Allie Crawford | Laydon

Managing breast cancer care during Covid

Alice Valentine, RN
Breast Health Coordinator
Department of Radiology
Eisenhower Army Medical Center

October is Breast Cancer Awareness Month and, like everything else in 2020, this year looks much different than Octobers past.

This year, to support social distancing, we can't have the 5k walks or other events where we are able to gather together and hug those we love and hold dear. Many of us with loved ones who are battling or have battled breast cancer look forward to these public shows of support each year and are hopeful we can return to that normalcy next year. Covid-19 has changed the fabric of our landscape and we are all seeking to protect our loved ones during this time. It is simply unsafe to put those battling breast cancer in danger by exposing them to large, packed crowds.

Having said all of that, it doesn't mean

that there aren't Covid-19-safe ways to show support and care to these cancer warriors. One of the very best things to do is wear a mask at all times in public and practice social distancing by staying six feet apart from others.

Masks aren't foolproof ways to completely stop the spread of the disease, but we are seeing compelling research that confirms it is helpful in preventing the spread of Covid-19.

My mask helps protect you and your mask helps protect me. An important step is helping children get used to wearing masks and keeping them up over their noses, which is not an easy task.

Patients currently undergoing chemotherapy have compromised immune systems and

wearing a mask shows you care about them. They do everything they can to

stay out of the public, but sometimes it is necessary for them to leave their homes for things other than doctor visits. This leads me to think of other ways we can show love and care to those around us.

In listening to stories from my patients, I have heard a common theme of requests for help with

simple tasks. Many of us are quick to say "call me if you need anything," but it's so rare for anyone to ever ask for that help.

When I ask my patients what some of their needs are, I hear many of the same things: grocery shopping, laundry, rides to doctor's appointments, picking up prescriptions, child care, lawn care — all tasks that are easy to lend a hand with.

Covid-19 has made it even more dangerous for cancer patients to be in public see **MANAGING** on page 13



Covid-19 and mammograms

Many patients have concerns about coming to the hospital to have mammograms during the pandemic. Please, be assured we are taking your safety and health very seriously, and have precautions in place to minimize your risk to the virus.

We absolutely want you to call to make an appointment.

Earlier this year, we temporarily suspended routine services to help flatten the curve of the virus in our area. Now that we are back to normal scheduling in the Mammography Department, we are working as quickly as we can to get patients in for their exams.

All mammography centers in the country are experiencing these same backlogs and we know it's a scary time for all patients.

If you have any new symptoms such as a lump, reach out to your PCM. We are able to work with them to prioritize your exam.

Breast density

You may have noticed that the results letter you receive in the mail looks different this year.

New legislation known as "Margie's Law" was passed in Georgia in July 2019.

This law requires us to notify all patients if they have dense breast tissue and encourages you to speak with your provider about additional testing.

This is a great tool to help patients reconnect with their referring providers to discuss any steps that need to be taken. At Eisenhower, our Mammography Department works with you at the time you come for your mammogram to assess your risk factors so that the radiologist can determine if you need additional testing.

These new letters might be confusing in the beginning; however, if you need an MRI or other test, we will say in the result letter if you should speak to your PCM about an MRI.



Medical investigator recognized for performing exceptional duty

Candies Gerald, a medical claims investigator in Eisenhower Army Medical Center's Office of the Judge Advocate, was recognized Sept. 16 with a Legal Services Award for her "exceptional performance of duty."

For 12 years, Gerald has served as the medical claims investigator in EAMC's Office of the Center Judge Advocate. Prior to this position, she was a claims clerk in the Fort Gordon legal office for two years following her military retirement after 20 years on active duty. She has served 34 years of dedicated service to the nation.

"In June of this year," Lt. Col. Yvonne L. Sallis, command judge advocate, Regional Health Command – Atlantic, said "Gerald, who is also a qualified paralegal specialist, did not hesitate to don full medical PPE to assist a COVID-19 positive patient who requested an advanced medical directive."

Wellness campaign launched by Behavioral Health

**Maj. Demietrice Pittman, PhD,
Clinical Psychologist**
Department of Behavioral Health
Eisenhower Army Medical Center

Our daily lives have changed dramatically, routines have been thrown out the window and many workers are feeling anxious and concerned about uncertainty in the coming weeks and months.

Never has it been more important for organizations to show empathy, care, kindness and support to their staff. And helping employees stay mentally and physically fit is a very tangible and crucial way organizations can support their staff in these unsettling times.

To that end, you may have noticed a few new signs and tables popping up around Eisenhower Army Medical Center. This is due to the launch of a wellness campaign by the Department of Behavioral Health to promote good mental health and wellness among EAMC staff.

Chief of DoBH, Lt. Col. Stephanie Latimer noted that health care workers at EAMC have been battling Covid-19 since March and the continuous strain of the work can lead to provider burnout and stress.

"Provider burnout is a big issue and we want to work on preventing this stress because it can lead to low productivity and mistakes," Latimer said. "Reminding health workers to practice wellness can have a pro-

Never has it been more important for organizations to show empathy, care, kindness and support to their staff.

found impact on patient care."

The wellness campaign consists of the following activities.

- DoBH has set up two tables within the hospital (third floor by Ike's Café and fourth floor staff entrance) with information on stress management, resources and wellness items (e.g., water bottles, stress balls, etc.). Many of the items were designed and developed by members of the wellness team consisting of Staff Sgt. Christopher Rivera, Staff Sgt. Ashley Jennings, Spc. Alondra Magana.
- You may also see the wellness team stopping in your sections/clinics conducting "walkabouts." These walkabouts are designed for the wellness teams to distribute information and wellness items to hand out to staff. Items include stress

balls, water bottles, brochures etc.

- Hospital staff may also see signs in the announcement cases and on the lawns with sayings of encouragement such as "Smile," "You got this," "You are making a difference," "Tough Times don't last, Tough Teams do." The team hopes this helps put staff in a positive mood as they come to and leave work.
 - All EAMC staff can also see a trained therapist for stress management tips and resources in Building 327. This consultation is off the record and designed to be a one-time stop to get specific wellness tips and offer resources.
 - Opening by mid-October is a wellness room which staff can use. Wellness rooms are a quiet, private space where staff can go to temporarily escape work-related stressors without leaving the workplace. The wellness room will have a spa-like feel and be located on the 13th floor.
- DoBH understands that stress is a common occurrence for the DOD population but many people do not seek care for their concerns. The wellness campaign will promote wellness, improve morale and decrease psychological injuries. Wellness teams have been established in many organizations for employees and have shown to improve staff morale, productivity and overall job satisfaction. Let us know how you feel about the campaign.

Patient's first encounter with health system

Maj. Robert Weber
Chief, Clinical Operations
Eisenhower Army Medical Center

One early Monday morning, you wake up coughing, sneezing and feeling miserable. Realizing you need to see a doctor, you slide out of bed, pick up your cell phone and dial 787-7300 to make an appointment.

From the moment that phone call is made, a patient makes their first contact with Eisenhower Army Medical Center's 5-Star service. For those dedicated staff members at Eisenhower's patient appointment call center, that phone call is just one of the many received from the nearly 40,000 active duty, family members and retirees who are enrolled in our primary care clinics.

"We always strive for 'first call resolution' with all of our patients, because we know the importance in answering their questions and getting them seen by their doctors," said Christina Fowler, who has worked at Eisenhower for 12 years.

Located in a separate building away from



Photo by Maj. Robert Weber

Viccarra Johnson, an appointment clerk in the Central Appointments Template & Scheduling Services building, schedules an appointment for a beneficiary Aug. 6.

the main hospital, Eisenhower's call center staff provide services from 6 a.m. to 4:30 p.m., Monday – Friday.

Jerel Brooks supervises and leads a committed team of professionals that provides the initial access point for many of Eisenhower's and SOUTHCOM's patients.

"My team strives every day to take care of our patients" Brooks said. "In addition to primary care appointments, we also book soldier PHAs, and well-woman and well-baby appointments."

In addition to the call center, Brooks leads the provider template and schedule team that partners with the clinics' administrators in creating the templates for the phone agents to book appointments into CHCS.

"Our job is important because it forces us to pay close attention to details when we work with the clinics in building the provider's schedules. We are constantly engaged with them" Fowler said.

The appointment booking processes begins with the phone agents looking into CHCS — not ALTHA — for the beneficiary's Primary Care Manager's availability. If the PCM's schedule does not align with the patient's availability, the phone agent's booking protocols looks to the availability of the PCM's team and then clinic, respectively.

"In addition to booking appointments, we also verify and update the patient's information, such as name, home address, and phone number" Brooks said. A common misconception is that phone agents are able to medically triage patients over the phone.

In addition to the Defense Health Agency standards in appointment scheduling and booking, every clinic at Eisenhower provides, and periodically updates, their own booking guidelines for the phone agents to use when filling appointments. For instance, a pediatric physician may request that all patients 2 years old and younger must be seen face to face for their appointments instead of a virtual (house call).

"We work closely with the clinic leadership," Fowler said, "and we try to remain flexible in scheduling and rescheduling appointments."

Having these guidelines allows the booking agents to place the right patients into the right appointment slots for each clinic. By remaining in close communication with the clinics, the team at Eisenhower's call center strives to give our patients 5-Star service.



Photo by Maj. Robert Weber

Briana Lee, an appointment clerk in the in Clinical Operations' Call Center, schedules an appointment for a beneficiary Aug. 6.



The Monthly Mindset Minute is a tool you can use to continually implement an Outward Mindset in your work with others. Simply take a minute to read the application tool below and just do it.

**OCTOBER:
Look for a co-worker
who is struggling
and find a way to
help him/her.**

O'Leary's cow milked for Fire Prevention Week

Vincent L. Wilson

Chief, Safety and Occupational Health Manager
Eisenhower Army Medical Center

On October 8, 1871, the proverbial legend tells us that when Mrs. O'Leary went into her barn to milk her cow, she was carrying a kerosene lantern. There are other theories regarding how the fire was started and what she may have been doing in the barn.

Let's suppose that perhaps she was, in fact; milking the cow or performing some other task. The point of this story is that the cow kicked over the lantern that Mrs. O'Leary placed on the hay-strewn barn floor.

Who would have thought that the routine chore of milking the family cow could have erupted into something so catastrophic?

If the story is true, then Mrs. O'Leary's innocent gesture may have been responsible for perhaps the worst fire that had ever taken place in America within the Mid-western region of Chicago at that time. Historical records indicate that the blaze raged on for two days and caused devastating damage. This horrific conflagration killed more than 250 people, left 100,000 homeless, destroyed more than 17,400 structures, and burned more than 2,000 acres of land. This historical event came to be known as "The Great Chicago Fire."

This incident was such a profound event that it caused the United States to become keenly aware of the errors that were made during the construction of the city of Chicago. The realization that the buildings within the city were constructed primarily of wood was a contributing factor in its rapid combustion. Additionally, the fact that the dusty streets were layered with sawdust was another circumstance that contributed to the demise of the city.

In 1925, in commemoration of the Great Chicago Fire, President Calvin Coolidge proclaimed Fire Prevention Week as a national observance. It is the longest running public health observance in our country. The recognition of this historical event is unparalleled in the significance of the role in which it plays in conveying the message of fire safety in America.

In honor of Fire Prevention Week, Oct. 4-10, let's reflect on fire safety and how it can impact our lives, families, homes and work spaces.

Like Mrs. O'Leary, what are some seemingly harmless habits or practices that we do on a daily or routine basis that could be construed as a fire hazard? For instance, do you leave food cooking on the stove unattended? Did you know that cooking is the number one cause of home fires and home fire injuries? Unattended cooking is the leading cause of fires in the kitchen. The other home fire casualties result from heating, electrical distribution, lighting equipment, intentionally ignited, and smoking materials such as cigarettes, cigars, e-cigarettes, tobacco products, etc.

Below is a checklist of some basic tips for fire prevention:

Heating:

- Heating equipment, like space heaters, are involved in 1 of every 6 home fires. Furthermore, 1 in every 5 home fire deaths and half of all fires caused by home heating occur between December and February.
- Make sure to always keep anything that gives off heat at least 3 feet away from flammable materials or items.
 - Never plug more

than one heating appliance into an outlet.

- Keep portable gas generators outside and away from windows to avoid carbon monoxide poisoning.
- If you have a fireplace, make sure your chimney is checked and cleaned by a professional once a year. Use a metal or glass screen that is large enough to prevent escaping embers.
- Never leave fireplace burning, or heating appliances plugged in, while asleep, in another room, or when you leave your home.
- Insulate problem areas properly to remove the need for a space heater.
- Add extra heating ducts or radiators to areas that are lacking heat.
- If you have children in the house, make sure your coil heater has a fire-proof gate around it.
- Purchase space heaters that have timers and automatic shut off features when tipped over.

Dryers/appliances

- Are responsible for about 9 out of 10 appliance fires.
- Check dryers and all your appliances-for testing labels that indicate you purchased them in safe working order. You may not find them on some older appliances, so consider whether it's time to replace them or have them checked by a professional.
 - Make it a habit to clean out the lint screen every time you use your dryer. It may be an annoyance,

but this simple action can save you a lot more pain and aggravation later.



see **FIRE** on page 15

From *SOUTHCOM's clinic commander's notebook*

Lt. Col. Fred Terrado
Commander
SOUTHCOM Clinic

Our 20/20 Vision: Focus on Federal Employees – military, civilian

The South Florida federal community includes approximately 35,000 employees in 130 federal agencies. The Department of Commerce/Federal Executive Awards Board collectively recognized more than 540 individuals, including 23 of our team members who were recognized. SOUTHCOM Clinic competed in the professional and administrative category. Our Patient Administration and Medical Support Team made it to the Blue Ribbon Selection Category.

PAD

Our Medical Records Department has been blessed with staying safe and healthy since the beginning of this coronavirus pandemic. MR has continued all functions in helping our service members and dependents and all local hospitals, clinics, and VA with all requests. MR announce a new member to the Medical Records Department team. Welcome aboard.

- Jesse Rubizovsky, medical record technician, Miami.

PCMH

By repurposing existing space and furniture, PCMH expanded the labo-

ratory's drawing area by 30 percent. It was also aligned with TJC and OSHA to separate patients from the specimen area. PCMH repurposed space to allow for an immunization room to be created. It holds the immunizations refrigerator and all supplies once again, aligning it with TJC and OSHA. PCMH continues to staff the Covid-19 testing site. PA Javier Ditas initiated direct contact with Miami Recruiting Command leading to increase individual medical readiness. PCMH announces two new members to the Patient Centered Medical Home team. Welcome aboard.

- Tanya Charles, Medical Support Assistant, Miramar, Fla.
- Jeanette Llorens, Homestead, Fla.

Pharmacy

AHC SOUTHCOM's pharmacy has maintained full operations while offering curbside pickup/delivery for patients to minimize contact and traffic in/out of the clinic and waiting area. Overall curbside pickup/delivery has been very well received and has been beneficial in reducing risk for both patients and staff. Outpatient and clinical pharmacy services have had no interruptions, and telework is being used to limit staff in the small space for administrative functions.

Behavior Health

Behavior Health & SUDCC is pleased to announce new members to our Behavioral Health and Substance Use

Disorders Clinical Care team. Welcome aboard.

- Dr. Teresa Ross, supervisory clinical psychologist, from Pentagon Primary Care Behavioral Health in Arlington, Va.
- Amanda McIntyre, social worker SUDCC, from Navy Primary Care Behavioral Health in Okinawa, Japan.
- Darius Russell, social services assistant, Fort Irwin Behavioral Health in Calif.
- Joshua Cravo, psychology technician, from Florida Community Behavioral Health Services.

LAB

The lab received its moderate complexity CLIP certificate and is currently working on its moderate complexity CAP certificate. We have received two Abbott ID now machines for Rapid COVID testing. It is currently undergoing validation. Ongoing lab expansion/layout change project.

Staff Special

Wanda F. Bell, SOUTHCOM HCA, was one of the six civilians recognized for the 2020 Army Medical Department Iron Major Civilian Award.



MANAGING from page 9

and simply picking up groceries is a risk. Be specific and insistent on either shopping or picking up curbside grocery delivery for your friends; it's such a welcome relief.

Surprise your friends by mowing the lawn and providing other lawn care. This is an exhausting task that's out of the realm of possibility for cancer patients; however, don't forget their primary caregivers. This helps them by taking something off of their plate so they can have more time to care for your friends.

Meals are always appreciated; consider

bringing casseroles or other dishes that can be frozen and reheated on those days when cooking is difficult. When you arrive to drop them off, fold some towels or iron some clothes.

Offer rides to the doctor or, equally as helpful, offer to pick up or drop off kids to and from school. Dropping off kids at school in the morning allows patients the opportunity to take advantage of early morning appointments when there are fewer people in the waiting rooms.

Most patients with school-age children are keeping their kids at home for online learning to minimize their risks of expo-

sure. These families could really use some help with this. Are you a math whiz? Offer to tutor. History buff? Offer to help with research projects. Bookworm? Offer to help research and proofread papers.

There are so many ways to be supportive and show we care about our loved ones, even during this unprecedented pandemic.

It's hard to know what to say to a friend who is battling breast cancer and even harder to know what to do. Be gently insistent and show your friends that you understand their needs and can offer that tangible support. Oh, and when you do, don't forget your mask.

Assurance of things hoped for, conviction of things not seen

Lt. Col. Peter Ferris, chaplain

Department of Ministry and Pastoral Care
Eisenhower Army Medical Center

If you were asked how to define faith, how would you answer? Do statements like a leap in the dark, or blind leap of faith come to mind? Is it something you muster up within yourself?

The epistle to the Hebrews in Chapter 11 is one of the key biblical passages that comes to mind for this definition. Verse 1 reads, "Now faith is the assurance of thing hoped for, the conviction of things not seen." A classic textbook answer from the text of the Bible, which then goes on to illustrate this in a long succession of Hall of Faithers. Take for example the patriarch Abraham, which the author of Hebrews give quite an extensive treatment of from Verses 8-19. Just consider some of the highlights.

In Verse 8, Abraham is called by God, he obeyed, he went out, not knowing where he was going.

Let that sink in a while before you think to yourself, "that's insane, who would venture anywhere not knowing what's next, what's the end state, contingency plan?" As with any portion of Scripture if you are puzzled, keep reading and the context will shed much needed light for inquiring minds and hearts.

Verse 10 lets us in on Abraham's vision. You can see what he sees. He wasn't going out blindly, he had an end goal "...he was looking for the city which has foundations, whose architect and builder is God." Furthermore, in Verses 14-16 we read,

For those who say such things make it clear that they are seeking a country of their own. And indeed if they had been thinking of that country from which they came out, they would have had opportunity to return. But as it is, they desire a better country, that is, a heavenly one. Therefore God is not ashamed to be called their God; for he has prepared a city for them.

I can't help but think that the hymn

**If you were asked
how to define faith,
how would you
answer?**

writer of The Bright, Heavenly Way, had this text in mind in the third stanza that reads, "Drawing nearer to that city, yet seen by faith alone. Longing for the Father's mansion, and rest before the throne. All unworthy though I be, there is welcome there for me. For the King is our own Jesus, Lord and Saviour of His own."

How is your vision? How far out do you see? If your eyes are fixed on the author and perfecter of faith (Hebrews 12:2) than by God's amazing grace, eyes that were once blind can now see. Hallelujah! Amen.

Got questions about your hearing?

Your hearing conservation program can help you with:

- Hearing protection fitting and advice
- Health education and training
- Hearing evaluations
- Consultation on noise-hazardous areas and non-hazardous nuisance noise in the workplace, and more!

Contact your service hearing conservation program for an appointment.

**NATIONAL AUDIOLOGY
AWARENESS MONTH**

OCTOBER 2020

MHS Military Health System
health.mil

HEARING.HEALTH.MIL

PRETLOW from page 4

Pretlow received his Bachelor's of Science in Airway Science from Hampton University. He received a MS in health care administration from Touro University and a MSS from the Army War College.

Pretlow's awards and decorations include the Legion of Merit, Defense Meritorious Service Medal, Meritorious Service Medal, the Army Commendation Medal, and the Army Achievement Medal. He has earned the Senior Parachutist Badge and the Expert Field Medical Badge. He is a proud member of the Order of Military Medical Merit and earned the Surgeon General's "A" Proficiency Designator for Medical Logistics.

He is married to his wife, Stephanie D. Mitchell, and they have three boys — Bryce 20, Ryan 16 and Austin 14.

COMMANDER from page 3

Center team last month. Each of you bring the knowledge, skills and intellect our organization needs to continue providing the 5-Star care that EAMC is known for providing.

A huge thank you to our Pastoral Care Team for continuously providing spiritual, mental and emotional support to the EAMC Team. During the past six months we have lost some great teammates and family members. We have leaned on the Pastoral Care team more than ever and they have been rock solid for individuals and sections across our organization. Thank you, Pastoral Care Team for providing 5-Star spiritual care.

Thank you for all you do to make Eisenhower an organization where people are valued, and are always treated with dignity and respect.

We are Eisenhower!

—Ike 6

Mission

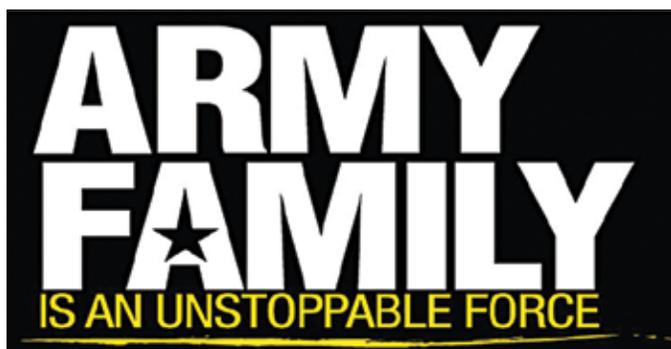
Provide high quality, complex, patient-centered health care services, and deliver military readiness through sustained medical education and multidisciplinary care.

Vision

Deliver Readiness, provide a 5-Star patient experience

Priorities**COVID Operations, Restoration of Services**

- Readiness
- Cultivate an organization-wide quality and safety culture
- Sustain medical education activities
- Deliver 5-Star patient experience
- DHA transition

**NUTRITION** from page 2

training. It is recommended you consume at least six to eight small meals a day with a balance of complex carbohydrates (i.e. whole grains with at least 2 to 3 grams of fiber) versus simple carbohydrates (refined sugary foods, etc.) lean proteins, and good fats (i.e. monounsaturated and polyunsaturated, etc.).

Remember to start exercise well hydrated, drink at least 2-3 cups of fluid 2 to 3 hours before you exercise to allow excess fluid to be lost in urine, and replenish accordingly afterwards.

After the ACFT, (You passed; Hoooooah!), consume a balanced meal with high-glycemic index type foods. High GI foods will replenish your glycogen stores faster, and the balanced meal will aid in your overall recovery from the ACFT.

FIRE from page 12**Electrical distribution:**

All appliance and electronic cords have to plug in somewhere, so your electrical outlets should be next on your home inspection list.

- Are any overloaded or showing signs of wear?
- Rearrange things so as many appliances as possible have their own outlets, and do not use extension cords to reach more distant outlets.
- This option may be a bit unsightly, but avoid running extension cords under rugs.
- Make sure your lamps are all using bulbs with wattage equal to or less than what the manufacturer recommends as well.
- When it comes to electronics, unplug them when they're not in use whenever possible.
- Finally, keep in mind that items like televisions and computers need space from anything flammable because they can overheat.

Lighting equipment:

- Use flameless, or battery-operated candles.
- Keep candles at least 12 inches from other objects.
- Place candle(s) on a sturdy place where they will not be knocked or tipped over accidentally.
- Use appropriate holders for candles that are fire-proof and safe.

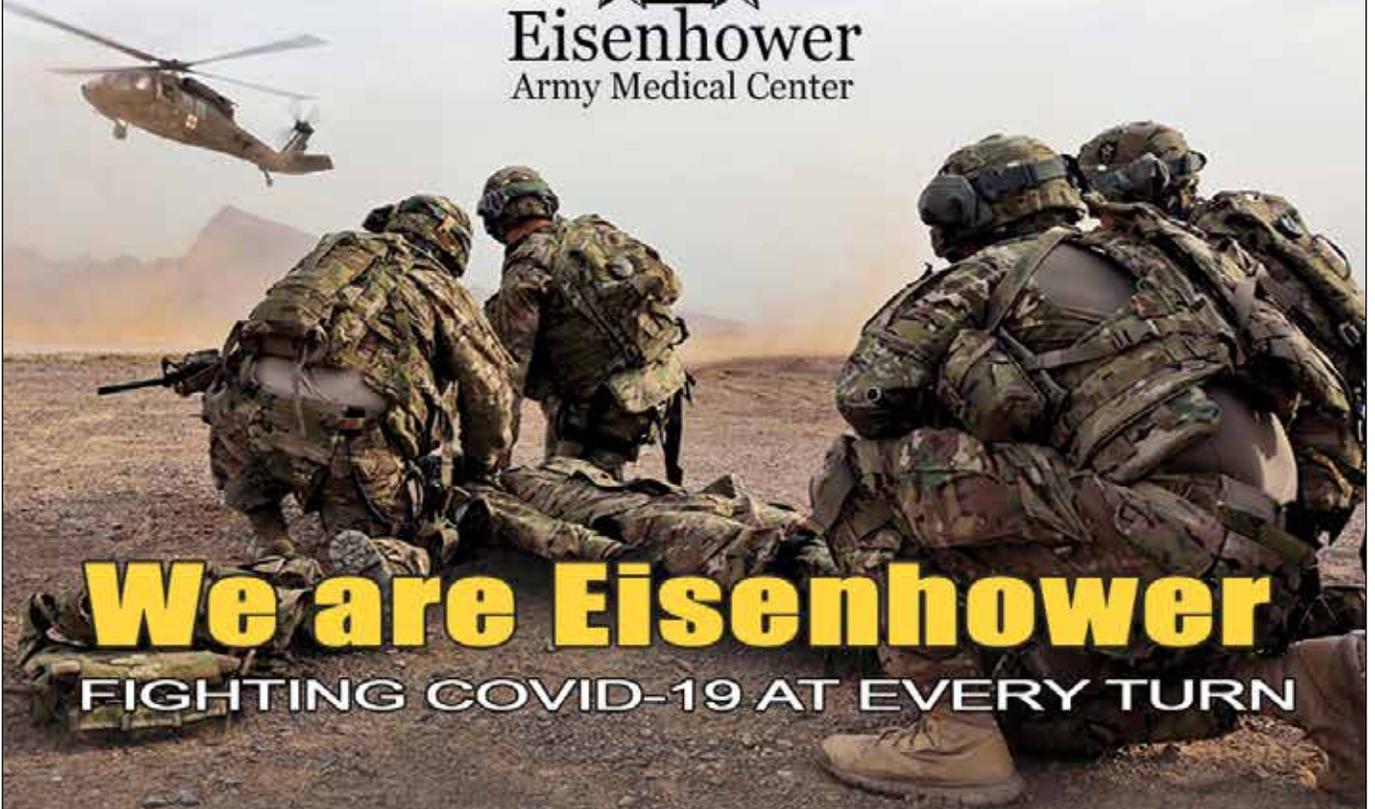
Smoking materials:

- If you are a smoker, do so outdoors.
- Extinguish cigarette using water or sand.
- Do not hold onto cigarette butts (some people place them in their pocket).
- Do not smoke if you are tired, intoxicated or on other medications as this can cause a lapse in judgement where you can essentially 'forget' there is a cigarette in your hand.

This fire prevention checklist contains a few tips that will create a conversation about fire safety with your family and coworkers. Taking the time to do a quick review of how we conduct our daily routines could make all the difference in preventing fire hazards or a casualty.



Eisenhower
Army Medical Center



We are Eisenhower

FIGHTING COVID-19 AT EVERY TURN

If you are sick, help prevent
the spread of COVID-19



Stay home
except to get
medical care



Separate
yourself from
other people
in your home



Call ahead
before visiting
medical
facilities



Clean your
hands often
with soap
and water