

COVID-19's weight gain: basic methods for losing pounds

Lt. Col. Brenda D. White, MS, RDN, LD, CSSD.

Chief, Nutrition Care Division Eisenhower Army Medical Center

The COVID-19 pandemic brought many challenges, changes and necessary adaptations in 2020. It was a year of isolation, quarantine and countless restrictions to many of our favorite places. Time was once structured with normalcy. The new normal look may have included for some teleworking, homeschooling your children, watching television, playing games on your cell phone or gaming electronic.

Many packed on the COVID-19 pounds, which is relatable to college's Freshmen 15 pounds. You may have snacked or eaten continuously, without realizing you had gained the weight that is now packed primarily on your gluteus maximus, rectus abdominas, and for some, everywhere, as your clothes no longer fit.

Moreover, exercising/working out may have become something you use to do. Like most of us "gym rats," we initially, had no idea what to do; the gyms were closed. Can you relate to the initial moments of pure panic? I remember driving to three different gyms just to work out and finding each one closed.

I regrouped and returned to the basics with healthier eating through consuming

small meals throughout my day and exercising with what was available – the beautiful outdoors, my weight bands with miniature dumbbells, and walking up and down the stairs whether at work or leaving work. This plan sustained me through most of 2020.

Now that many restrictions have lifted, I've returned to my norm of going to the gym after work and maintaining with small meals throughout the day.

The International Society of Sports' nutrition position on nutrient timing is "Increased meal frequency appears to help decrease hunger and improve appetite control."

For those who still need to lose weight, the following are the basics of eating small meals throughout your day and exercising:

Plan meals, shop for week

- Make a grocery list of healthier food choices, such as fruit, vegetables, poultry, fish, whole-grain products, olive oil/ canola oil (good sources of monounsaturated fat), nuts, reduced-fat cheese, skim or 1 percent milk or reduced-fat almond milk with calcium.
- Grill, bake or sauté meats on the weekend and add whole grain products, reducedfat dairy, and fresh or cooked vegetables or/and fruit throughout the week.
- Be aware of true serving sizes.

Typical meal plan, frequency

- Breakfast (eat half and eat the other half an hour later); Lunch (eat half and the other half an hour later); and Dinner follows the same pattern.
- Include three low-calorie/no calorie snacks; one between 10-11 a.m.; the second between 2-3 p.m.; and the last between 7-8 p.m.

Exercise

Aerobic Activity

- The ISSD and the American Heart Association recommend at least 2-anda-half hours of moderate aerobic activity per week
- or 1 hour and 15 minutes of vigorous aerobic activity per week
- or you can combine moderate with vigorous aerobic throughout your week
- Try walking, biking, running, the stair master, etc.

Anaerobic Activity

- Two days ays per week, add resistance or strength training
- Moderate or/and high-intensity
- Use weight machines, free weights, bands, etc.
 Let's get started ...

Honor. Remember. Never forget

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Each year on Memorial Day Americans pause to remember the fallen and honor their sacrifice. Military.com pauses to remember the sacrifice of members of the Army, Air Force, Coast Guard, Marine Corps and Navy.

Memorial Day history

First established as Decoration Day after the Civil War, the holiday was set aside for families and friends to visit and decorate the graves of troops lost in the conflict. As time went on, the observance instead became known as "Memorial Day," until 1971, when Congress declared it an official holiday set to fall annually on the last Monday in May.

Memorial vs. Veterans days

Service members, veterans and their families know there is a big difference between Memorial Day and Veterans Day. While Veterans Day, Nov. 11, is a day set aside to celebrate all veterans, Memorial Day is a somber holiday dedicated to honor military fallen, with a special focus on those killed during military service or through enemy contact.

Both holidays often include parades, ceremonies and celebrations. But although Memorial Day also traditionally marks the beginning of summer, many in the military community believe that at least a portion of it should be spent to mourn and honor the fallen.



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Correction: In the October article entitled "Best place to start a literature search," the product referred to as "Medical Subject Heading" should have been "MeSH."



June is a month for 'farewells,' goodbyes'

Col. Carlene A.S Blanding Commander

Eisenhower Army Medical Center

It has been seven long months since our last edition of "Rounds" was published, and so many fantastic events have occurred in the life of our organization. We welcomed many new additions to Team Eisenhower and bid a fond farewell to those who helped shape and define who we are as an organization.

We have experienced the demands of

administering COVID testing, taking care of COVID patients and now vaccination. We felt the joy of welcoming new babies to the Eisenhower family and the sorrow of those teammates who left our ranks too soon. We prepared for and passed our Joint Commission Accreditation with excellence and teamwork.

This month Rounds is dedicated to all things Team Eisenhower. We highlight all the great things happening in and around Eisen-

Photo by John Corley

Eisenhower Army Medical Center Commander Col. Carlene A.S Blanding, center, and Command Sgt Maj. Natasha Santiago take part in Lt. Col. Peter Ferris', right, retirement ceremony Jan. 29.

hower Army Medical Center proper, Fort Gordon; Rodriguez Army Health Clinic, Puerto Rico; and SOUTHCOM Health Clinic, Miami. We highlight the new masking policy in light of the changes announced by the CDC, Secretary of Defense and Fort Gordon. We introduce and discuss the "Big Rocks" we are focusing on for the next 12-15 months, such as MHS Genesis, the DHA Transition and the Augusta Market, and our Leapfrog Survey.

Team, we, the collective, have done an exceptional job in these difficult times. As an organization we have a lot to be thankful for and to celebrate this month: the Army birthday and Army heritage; the Medical Service Corps 104th birthday, and Changes of Command at the company and battalion level.

On June 18, Lt. Col. Fred Terrado will relinquish command of the SOUTHCOM Health Clinic to Lt. Col. Jonathan Catalano. We offer Terrado a heartfelt "Thank You" and bid him a fond farewell for his exceptional leadership, compassion and dedication to the EAMC SOUTHCOM team. We wish him Godspeed and best of luck in his next assignment. We warmly welcome Catalano and his family to the EAMC SOUTHCOM team, and look forward to continued excel-

see IKE 6 on page 7

ON THE COVER: Sqt. 1st Class Andrew Hershey, a member of the Sergeant **Audie Murphy Club, blows** out the candle on the **Fallen Comrade Table at** the 243rd Army Birthday Ball June 1, 2018, at the **SINTEX Convention Center** in Hwaseong, South Korea. The Fallen Comrade Table is reserved to honor those lost in war and symbolizes that they are present in spirit. (U.S. Army photo by Spc. ShaTyra Reed, 20th Public Affairs Detachment)

Ike 7 asks: Who is in your golden triangle?

Command Sqt. Maj. Natasha Santiago Eisenhower Army Medical Center

I cannot believe that it is June. Where has the time gone? There is much to celebrate this month. June 14 is the 246th Birthday of the United States Army, and the official start of summer is on June 21.

Safety is a non-negotiable as we navigate through the summer months. Taking care of yourself, your family, and looking out for your teammates is paramount as we continue to traverse through the COVID pandemic and function in our dynamic operational environment.

I want to talk a little about "This is my Squad" or TIMS. Every single one of us here at Eisenhower Army Medical Center belong to a team; we have a squad that we belong to. None of them look the same, but, in context, our squads are those people who are there for us, day in and day out, when we come to work.

Our squads are the people to our left and right, military and civilian, who are there for us when times are good and bad. TIMS is so much more than just a catch phrase or an acronym.

I am going to share a personal vignette with you: A few weeks ago, my husband went in for a routine surgery at Fort Benning, Ga. At the exact same time of his surgery, our 8-month-old son got extremely

see IKE 7 on page 15

Joint Commission readiness is continuous

Page Lewis

Joint Commission Coordinator Eisenhower Army Medical Center

The Eisenhower Army Medical Center team led the way for Joint Commission Accreditation this year. Eisenhower was the first military medical facility to have its triennial Joint Commission survey. The survey was conducted March 9-12, and covered Eisenhower proper and all clinics on Fort Gordon, as well as Rodriguez Army Health Clinic in Puerto Rico, and SOUTH-COM in Miami.

During these four days, the hospital was surveyed under two accreditation manuals – the Hospital Accreditation Program, and Behavioral Health and Human Services. There are more than 1,450 Joint Commission Standards and Elements of Performance applicable to a Medical Center like EAMC. Out of those approximately 1,450, there were only 24 findings at EAMC,

A finding is an area for improvement within the hospital or a place for correction. All 24 findings this year were lower-risk findings.

This exceptional outcome, in the midst of a pandemic, is a testament to the professionalism and commitment of the EAMC staff and the high-quality care this team delivers to patients.

The hospital staff welcomed the sur-

veyors as a part of the Eisenhower team. They were here to provide an outside perspective, with the ultimate goal of improving quality and safety throughout the organization. They not only observed processes, but offered moments of education during their visit. Everyone came together and demonstrated the 5-Star Care that is delivered day in and day out.

Each surveyor mentioned being impressed with the care Eisenhower provides. The surveyors provided a myriad of compliments and praise throughout their visit.

The Primary Care Medical Home was referred to as the "gold standard." Staff were lauded on their "excellent care" and the wonderful "hospitality" was mentioned. The lead surveyor, Dr. Tom Stonum, include compliments to the Nutrition Care Division on the "great food" as well.



The surveyors truly did become part of the team; Dr. Tom, as he likes to be called, and his team even participated in reciting the Eisenhower motto at the end of the exit briefings.

A personal message from Page Lewis, EAMC's Joint Commission Coordinator

"This was truly an excellent survey from start to finish. All staff were phenomenal in the preparation and execution. But the work does not end here. Now the focus switches to sustainment. It is time to 'Stay Ready.' Joint Commission readiness is a continuous process. We will Stay Ready; We are Eisenhower."

Accessing articles directly from PubMed

Mary E. Gaudette
Librarian
Eisenhower Army Medical Center

Article records retrieved from a search of PubMed via its public interface may or may not include a link to the full text of those articles. However, as of April 29, Eisenhower Army Medical Center and Dental Health Activity staff have the option to search PubMed via an EAMC-specific interface that does provide such links. By accessing PubMed via the web address, all records retrieved from a search will contain an EAMC Library-specific, link-resolver icon, Clicking on the icon will provide access to the full text of those articles that are available pursuant to EAMC or DHA license agreements once the user logs into his or her EZproxy account.*

If a given article is not available per such

agreements, or is not otherwise freely available online, clicking the icon will display an Inter-Library Loan request form containing the article's PubMed citation. All the user has to do is provide the required contact information. Upon submission, the completed form is delivered to the EAMC Library Outlook mailbox.

The librarian has also configured MEDLINE also known as OvidSP, and EBSCOhost's Medline Complete to include a link resolver icon for searching those resources for articles.

If a search of Medline Complete returns a record for an article that is not available via EBSCO's licensing agreements with DHA or EAMC, clicking on the icon will take users to any resource that does provide access. CINAHL Complete and the Dental and Oral Sciences Source research



databases now also feature the icon. Again, if access is not available from any licensed resource, clicking on the icon will display an ILL request form.

*An EZproxy account is now required to access most EAMC and DHA e-resources. Call 706-787-4446, or email the librarian at mary.e.gaudette.civ@mail.mil to request an EZproxy account.

Oncology pharmacy now operational on the eighth floor

Daryle Meddings, PE
Facility Manager
Eisenhower Army Medical Center

A new oncology pharmacy — featuring upgraded infection control measures as well as a state-of-the-art environment for preparation and handling medications — opened in January in the oncology department on the eighth floor.

Eisenhower Army Medical Center's Facilities Management-E&C Division, in partnership with contractor J&J Worldwide, Inc., and EAMC's oncology pharmacy, represented by Pharmacist Rhonda Motes, completed an extensive renovation of the oncology pharmacy in January.

The infection control measures are critical to ensure compliance with new regulatory requirements with an emphasis on changes to USP 800, Hazardous Drugs–Handling in Health Care Settings guidelines, implemented in 2019.

The oncology pharmacy is the most recent project to enhance provider capability in support of the 5-Star Health Care experience for which EAMC is known.

More projects in progress around EAMC this year include the ongoing flooring upgrades in the fifth floor ICU, transition of the Family Practice into temporary trailers this summer and completion of the Vet Clinic renovation this fall.



Photo by Daryle Meddings, PE

The new oncology pharmacy recently completed on the eighth floor, required a custom-built mechanical room to house the custom-built air handling unit dedicated to serving the oncology pharmacy. The AHU maintains clean airflow and minimum pressure differentials required in various spaces of the pharmacy. The project began in September 2019 and ended in January 2021.

Technology's future at Eisenhower via HMS Genesis

Maj. Justin Lilly Chief Information Officer Eisenhower Army Medical Center

Technology has changed nearly every part of our lives in the last century. Unless you are living 100 percent off the grid, you are affected by technology. Regardless of whether you carry a smartphone, have a computer or a smart toaster, technology is ingrained in every field, from racing to logistics, from entertainment to space exploration and of course, the medical field.

In 1958, the first pacemaker was implanted, followed by the first lithium-battery pacemaker in 1969. Which also happens to be the year man first walked on the moon.

The first documented defibrillation was in 1947 on a 14-year-old who was experiencing ventricular fibrillation during a surgery. The first portable defibrillator was installed in an ambulance in 1965 and weighed 150 pounds. Today's defibrillators

can be as light as a pound.

The first artificial heart was implanted in 1982 and was connected to a 400-pound air compressor the patient had to carry with them everywhere they went. It is now common to carry it around in a backpack.

Even our health records have benefited from the advances in technology.

Medical health records got their start in the 1920s when the American College of Surgeons created the Association of Record Librarians of North America as a way to standardize medical records. Flash forward to the 80s and the desktop computer began to make its way into even small medical practices. By 2015, 87 percent of medical practices and 96 percent of hospitals were using Electronic Health Records.

Now, in 2021 Eisenhower Medical Center has started to transition to a new EHR system called MHS Genesis.

Last fall, Information Management Division led an effort to convert the Eisenhower network to the Medical Community of Interest and Desktop to Datacenter. Med-COI and D2D is what will make it possible to transition to MHS Genesis. Together, Med-COI and D2D creates are a global network and architecture that allows a central system that is common to all DOD medical services. Think of it as bringing all medical systems and programs under one umbrella.

Just over a month ago, Eisenhower hosted a kick off meeting for our implementation of MHS Genesis with a planned go-live date around June 2022. MHS Genesis has several similarities to civilian EHRs as it was developed by Cerner, one of the top EHR companies in the United States.

Genesis integrates outpatient and inpatient services that will connect medical and

'Exceptional People, Essential Care' — Nurses' Week

Col. Ronald S. GesamanDeputy Commander for Nursing
Eisenhower Army Medical Center

This year the Eisenhower Army Medical Center's Nurses' Week motto was "Nurses: Exceptional People, Essential Care." National Nurses Week this past year May 6-12, reminded us to take a brief pause from our day-to-day operations and celebrate the accomplishments of our profession.

I would like to say "thank you" to all our nurses — and those who support our nurses — for their tireless efforts in supporting and caring for our service men and women and all of our beneficiaries. Your professionalism, dedication and resilience has emphasized how the nursing team is an integral part of not only EAMC but the whole-of-government response to protect our nation in times of need.

Nursing has a significant role on the two leading priorities of Army Medicine: people and readiness. At the same time, we all must continue to balance daily health care operations and place emphasis on people first, ensuring to care for one another. This is no easy task but our nurses have highlighted how compassion, innovation and resiliency is a stabilizing force during times of uncertainty and change.

Over the last 14 months this organization has been at the tip of the spear in the fight against COVID-19 and I believe it is important to review some of the amazing achievements we have accomplished. When looking back at what we have accomplished, the results are truly amazing, given what we have faced.

Through all this, we have developed and implemented COVID-19-centric, clinical-quality guidelines, COVID-19 Care Team concepts, and instituted new policies and procedures that have ensured the care of our patients and exceeded all expected clinical outcomes. All of this was accomplished with a complete team effort from every section of this organization, with the support and assistance of all members, leading us through some of the most challenging and difficult weeks of our clinical engagement. This model of organizational leadership and teamwork has been nothing less than amazing.

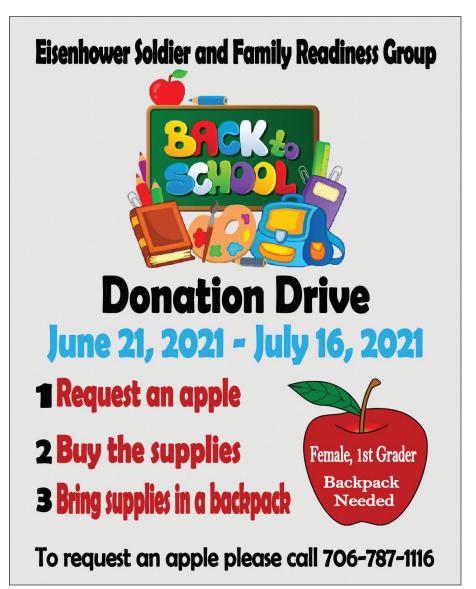
The visibility of the contributions nurses make to this health care team continues to be outstanding, and I cannot over-emphasize how important your role has been and continues to be. Nurses are the heart and soul of health care and I know nurses will continue to lead the way.

Thank you for all you do, and take time to celebrate yourself, your team and being a part of the best profession in the world.



Photo by John Corley

Eisenhower Army Medical Center's Sgt. Alice Tymes-Rudolph, LPN, prepares a vaccination Feb. 11 in the temporary ILI Clinic, erected in the EAMC parking lot.



Leaders meet at SOUTHCOM

Lt. Col. Fred B. Terrado, Jr.

Commander U.S. Army Health Clinic – SOUTHCOM

Brig. Gen. Paula Lodi, Regional Health Command-Atlantic Commanding General; Command Sgt. Maj. Rebecca Booker; Col. Carlene A.S. Blanding and Command Sgt. Maj. William Allen, Eisenhower Army Medical Center, visited SOUTHCOM Army Health Clinic Sept. 29, 2020. They conducted key senior leader's engagement with Navy Rear Adm. Yvette Davids, U.S. Southern Combatant Command Chief of Staff; and Senior Mission Commander, Maj. Gen. Rafael Ribas, Deputy Commander for Mobilization and Reserve Affairs, Southern

Combatant Command; Brig. Gen. Timothy Brown, Director of Intelligence and Installation Commander and Greta Buccellato, USAG-Miami Garrison Manager; to strengthen command partnership and foster quality sustainment medical care for

all beneficiaries in Southern Florida and SOUTHCOM AOR in support of readiness.

In addition, the senior mission commanders discussed ongoing COVID-19 Support, DHA Transition Update and Dental Readiness Support.



Photo by Aaron Jackson

Col. Carlene A.S Blanding, commander, Eisenhower Army Medical Center, left, greets Navy Rear Adm. Yvette Davids, U.S. Southern Combatant Command Chief of Staff, and Senior Mission Commander; Sept. 29, 2020, at a leadership meeting at SOUTHCOM, Miami.

IKE 6 from page 3

lence under his leadership.

A huge "Thank You" to our Pastoral Care Team for continuously providing spiritual, mental and emotional support to the EAMC team and to our Behavioral Health Department for their continued support, education and focus on maintaining mental health during stressful times. During the past seven months we have lost some

great teammates and family members, and we have leaned on both the BH team and the Pastoral Care team more than ever. They have been rock solid for individuals and sections across our organization. Thank you, Pastoral Care Team, for providing 5-Star Spiritual Care and the BH Department for providing 5-Star Mental Health Care.

A big Eisenhower welcome to all the new employees who joined the EAMC team

within the last seven months. Each of you bring the knowledge, skills and intellect our organization needs to continue providing the 5-Star Care, the hallmark of Eisenhower.

We will continue to remain stalwart in our fight against COVID 19, maintaining safety precautions and encouraging staff, family members and beneficiaries to get vaccinated. Thank you for all you do to make Eisenhower an organization where people are valued and are always treated with dignity and respect.



National Atmospheric and Oceanic Agency

Planning for hurricane season and other potential disasters can be stressful, and during the COVID-19 pandemic, it may be especially so.

Public health and emergency response professionals have advice to help you safely prepare, evacuate, and shelter for severe storms while protecting yourself and others from COVID-19. Here are some tips to help you and your family stay safe during hurricane season this year.

Prepare for hurricane season

Understand that your planning may be different this year because of the need to protect yourself and others from COVID-19.

Give yourself more time than usual to prepare your emergency food, water, and medicine supplies. Home delivery is the safest choice for buying disaster supplies; however, that may not be an option for everyone. If in-person shopping is your only choice, take steps to protect your and others' health when running essential errands.

Protect yourself and others when filling prescriptions by limiting in-person visits to the pharmacy. Sign up for mail order delivery or call in your prescription ahead of time and use drive-through windows or curbside pickup, if available.

Are you a hurricane this year? (2021 hurricane names) Bill Claudette Danny Elsa Fred Grace Henri lda Julian Kate Larry Mindv **Nicholas** Odette Peter Rose Sam Teresa Victor Wanda

Pay attention to local guidance about updated plans for evacuations and shelters, including shelters for your pets.

COVID-19 pandemic.

If you need to go to a disaster shelter, follow CDC recommendations for staying



Photo courtesy of the Hurricane Prediction Center

According to the National Hurricane Center, as of May 12, there are no tropical storms in the Atlantic Ocean. Maps are updated daily unless that is tropica storm activity imminent. Visit nhc.noaa.gov for up-to-date information.

When you check on neighbors and friends, be sure to follow social distancing recommendations (staying at least 6 feet from others) and other CDC recommendations to protect yourself and others.

Prepare to evacuate

If you may need to evacuate, prepare a "go kit" with personal items you cannot do without during an emergency. Include items that can help protect you and others from COVID-19, such as hand sanitizer with at least 60% alcohol, bar or liquid soap, disinfectant wipes (if available) and two masks for each person. Masks should not be used by children under the age of 2. They also should not be used by people having trouble breathing, or who are unconscious, incapacitated, or unable to remove the mask without assistance.

Know a safe place to shelter and have several ways to receive weather alerts, such as National Weather Service cell phone alertsexternal icon, NOAA Weather Radioexternal icon, or (@NWS) Twitter alerts.

Find out if your local public shelter is open, in case you need to evacuate your home and go there. Your shelter location may be different this year due to the

safe and healthy in a public disaster shelter during the COVID-19 pandemic.

Follow guidance from your local public health or emergency management officials on when and where to shelter.

Make a plan and prepare a disaster kit for your pets. Find out if your disaster shelter will accept pets. Typically, when shelters accommodate pets, the pets are housed in a separate area from people.

Follow safety precautions when using transportation to evacuate. If you have to travel away from your community to evacuate, follow safety precautions for travelers to protect yourself and others from COVID-19.

Staying with friends, family

If you will be staying with friends or family outside your household to evacuate from the storm:

Talk to the people you plan to stay with about how you can all best protect yourselves from COVID-19.

Consider if either of your households has someone who is at higher risk of developing severe illness from COVID-19, including older adults or people of any age

see **HURRICANE** on page 15

What to do during hurricane watch, warning

Hurricane watch = conditions possible within 48 hours

- Review your evacuation route and listen to local officials.
- Review the items in your disaster supply kit. (See below.) Add items to meet the household needs for children, parents, individuals with disabilities or other access and functional needs or pets.

Hurricane warning = conditions are expected within 36 hours

- Follow evacuation orders.
- Check-in with family and friends by texting or using social media.
- Follow the hurricane time line preparedness checklist, depending on when the storm is anticipated to hit and the impact that is projected for your location.

Hurricane 36 hours away

- Turn on your TV or radio in order to get the latest weather updates and emergency instructions.
- Build or restock your emergency preparedness kit. Include food and water sufficient for at least three days, medications, a flashlight, batteries, cash and first aid supplies.
- Plan how to communicate with family members if you lose power. For example, you can call, text, email or use social media. Remember that during disasters, sending text messages is usually reliable and faster than making phone calls because phone lines are often overloaded.
- Review your evacuation plan with your family. You may have to leave quickly so plan ahead.
- Keep your car in good working condi-

tion, and keep the gas tank full; stock vehicle with emergency supplies and a change of clothes.

Hurricane 18-36 hours away

- Bookmark your city or county website for quick access to storm updates and emergency instructions.
- Bring loose, lightweight objects inside that could become projectiles in high winds (e.g., patio furniture, garbage cans); anchor objects that would be unsafe to bring inside (e.g., propane tanks); and trim or remove trees close enough to fall on the building.
- · Cover all of your home's windows. Permanent storm shutters offer the best protection for windows. A second option is to board up windows with 5/8" exterior grade or marine plywood, cut to fit and ready to install.

What's in your disaster supply kit?

To assemble your kit, store items in airtight plastic bags and put your entire disaster supplies kit in one or two easyto-carry containers such as plastic bins or a duffel bag.

Basic emergency supply kit

Water − one gallon of water per person per day for at least three days, for drinking and sanitation

☐ **Food** – at least a three-day supply of non-perishable food

Battery-powered or hand crank radio and a NOAA Weather Radio with tone alert

 \perp Flashlight

First aid kit

on utilities

Extra batteries

→ Whistle to signal for help Wrench or pliers to turn off and

bags and plastic ties for personal sanitation

→ Manual can opener for food

Cell phone with chargers

Additional supplies

Consider adding the following items to your emergency supply kit based on your individual needs:

Prescription medications

Non-prescription medications such as pain relievers, anti-diarrhea medication, antacids or laxatives

 Glasses and contact lens case with solution

Infant formula, bottles. diapers, wipes, diaper rash cream

Pet food, extra water for pet(s)

Cash or traveler's checks

Important family documents such as copies of insurance policies, identification and bank account

records saved electronically or in a waterproof, portable container

— Sleeping bag or warm blan**ket** for each person

Complete change of cloth**ing** appropriate for your climate and sturdy shoes

Household chlorine bleach and medicine dropper to disinfect water

container

Feminine supplies and personal hygiene items

 \square Paper and pencil

→ Books, games, puzzles or other activities for children

☐ Fire extinguisher

☐ Matches in a waterproof

→ Mess kits, paper cups, plates, paper towels and plastic utensils

2021



Photo by Lt. Col. Joseph W. Walker

Recognized during Rodriguez Army Health Clinic's Administrative Week, April 22, were, from left to right, front row: Jose Ortiz, Patient Administration; Lillibeth Reyes, Medical Support Assistant; Dr. Myrta Sifonte, Integrated Disability Evaluation System; Ruthi Rosario, Executive Assistant, Patient Advocate; Vilma Ramos, Health Care Administrator; Ismael Rivera, Industrial Hygiene; and Edmin Torres (Information Management Division. From left to right, second row: Juan Miranda, Medical Support Assistant; Ileana Rivera, Patient Administration; Iris Polanco, Referral Clerk; Elvis Martinez, Physical Evaluation Board Liaison Officer; Jose Martinez; Operations; Marc Gomez, Logistics; Alexander Marrero, Information Management Division; and Daisy Vidal Educational and Developmental Intervention Services. Not pictured: Mildred Morales, Managed Care; and Juan Oliveras, Environmental Health.

Rodriguez Army Health Clinic recognizes importance of admin. team

Lt. Col. Joseph W. Walker

Commander Rodriguez Army Health Clinic

On April 22, Rodriguez Army Health Clinic recognized its administrative staff for the significant contributions to the RAHC organization, patients and community.

A special luncheon was provided, where each member was recognized for his or her commitment and dedication to RAHC. RAHC relies on its administrative staff to provide the foundation directly enabling the ability to provide 5-Star patient care.

Over the last year, we have been at war; not against a foreign enemy, but rather a pandemic. RAHC's administrative staffs were and still are combat enablers.

They equip and supply Personal Protective Equipment provide the virtual connectivity to sustain access to health care in constrained environments; and ensure

those who serve at the clinic are paid on time, every time. They synchronize clinic operations and mitigate risk; protect our staff and our patients; and are the first and last encounter with our patients.

The administrative staff are the clinics' patient advocates; environmental and industrial hygiene experts and RAHC's human resource technicians. The administrative staff enables readiness and access to care.



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, 2020, 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 serves 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."

EAMC adds medical coder training to quiver

Lt. Col. Bruce Brown

Chief, Patient Administration Division Eisenhower Army Medical Center

Eisenhower Army Medical Center's Patient Administration Division last fall launched its first American Association of Professional Coders, Certified Professional Coder training program.

The inaugural course, facilitated by AAPC Instructor Sylvia Dennis from the PAD Clinical Documentation Improvement team, included 10 EAMC and SOUTHCOM Clinic staff. At the successful completion of an eight-week training program students, will qualify to sit for the AAPC CPC's certification exam.

In the fall of 2019, PAD Medical Coding staff began to fall short in their ability to review all of the approximately 55,000 patient records generated each month by clinical staff. This was due to an enduring deficit in the staffing of 16 Outpatient Medical Coders. To address these shortfalls, the PAD leadership began looking for innovative ways to acquire certified coders to fill the shortages. As a result, the team decided to train its own instructors.



Dennis volunteered to attend the AAPC Instructor program, earning her instructor credentials, and allowing EAMC to offer on-site training and testing. She also went TDY to the AMEDD Center for Health Care Excellence and served as an assistant instructor at the 68G (Patient Administration Specialist) Advanced Individual Training during their two-week coding block of instruction.

Historically, it has been a challenge for Military Treatment Facilities to recruit and hire qualified medical coders into the federal system due to tight competition with local civilian health care organizations and Veterans Health Administration hospitals. In 2017, the Army Medical Department worked with Training & Doctrine Command to revamp the 68G AIT course to include a two-week Medical Coding certi-

fication block as a solution to assist MTFs in addressing their coder shortfalls.

Though the training changes provided some success and allowed for some of the 68G Soldiers to earn the Additional Skill Identifier Y8 (or Medical Coder), traditional recruiting and hiring of civilian employees has remained the primary means of filling vacancies.

Medical coders are professionals who are responsible for translating provider clinical notes using alphanumeric codes contained in the International Classification of Diseases, 10th edition; and Common Procedural Terminology codes. These professionals work behind the scenes, assuring all pertinent information is coded appropriately to ensure patient's records are documented in a consistent and accurate manner. After a medical provider examines or treats a patient, third-party payers such as MEDICARE and private insurance agencies need to understand what was done to process the claim. Common language is too inexact to summarize

see CODER on page 13



June 2021

Soldiers, members gave helping hoof

Master Sgt. William Carlyle Chief Instructor Eisenhower Army Medical Center

Everyone has his or her version of escape to self-care. For some, it may involve peace and quiet in a serene environment. For others, it may involve partaking in physical fitness activities. For a few, it may involve helping others during their time off.

For 12 Eisenhower Army Medical Center Soldiers, they found their version of self-care last fall at a 90-acre horse ranch in Aiken, S.C.

First Sgt. Scott Schumacher, A Company First Sergeant, and 11 EAMC Soldiers found an opportunity to give back to the community while indulging in their own self-care at Aiken Equine Rescue.

AER is a non-profit organization that rescues and rehomes abandoned, abused, neglected or surrendered horses, donkeys and mules. Alongside 15 other Soldiers from across Fort Gordon and 18 Daughters of the American Revolution, these EAMC Soldiers volunteered their personal time painting the fence lines; organizing items for a fundraiser auction; caring for the horses; and organizing and cleaning storage rooms and tack. Although this may seem like daunting and tiring work, the volunteers gave nothing but positive feedback regarding their experience on the ranch.

Schumacher, who took charge of the volunteer Soldiers, said he enjoys volunteering at AER because it is an escape from the stress of being a first sergeant.

"It also reminds me of my grandparents' ranch in Texas when I was growing up," Schumacher said.

Sgt. David Owiti from the Sterile Processing Division, said, "I chose to volunteer because of the progress volunteering brings to the community."

Owiti's favorite part of volunteering for AER was seeing the expression of joy people had and the horses running around excitedly.

It "definitely made the day even better when we, as EAMC," Owiti said, came together as a group to help." He found the environment mentally calming and it provided a rich country setting to enjoy.

Sarah Carlyle, a military spouse, volunteers practically every Saturday as a way to put "my energy and focus into a positive outlet," she said. "It brings us a sense of comfort, relaxation and joy to help take care of the

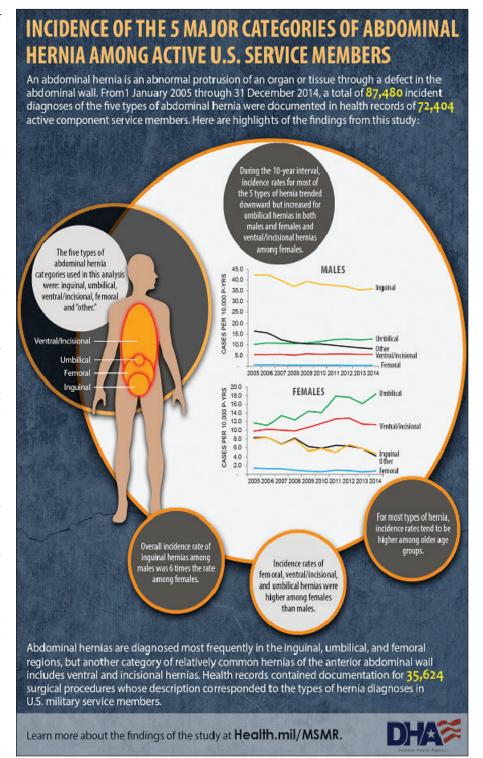
magnificent creatures who have the chance to rehabilitate from a life of abuse or neglect."

By giving a helping hoof, a kind hand and compassion for horses in need, EAMC's Soldiers experienced peace of mind and fulfillment

Anyone interest in volunteering, can contact Schumacher at 706-787-2270, Carlyle

at 706-513-2477 or Aiken Equine Rescue directly at 803-643-1850 or aikenequinerescue@gmail.com.

The mission statement of the Aiken Equine Rescue is "People helping horses. Horses helping people." Their volunteer hours are Monday through Saturday from 9 a.m. to 1 p.m.



CODER from page 11

the accurate details, so a set of specific codes has been established to define medical procedures. It's the role of the medical coder to serve as the conduit and pass along this information in a way that is useful and efficient.

Prior to EAMC's certification as a training site, only the Army Center for Medical Excellence at Fort Sam Houston, Texas, and Landstuhl Regional Medical Center, Germany, were the only two locations in MEDCOM that provide Medical Coder

Certification training. EAMC is now the third site.

As a teaching medical facility, EAMC is proud to add this capability to its list of professional training programs. Moving forward, PAD will begin to offer the program once per quarter for EAMC staff.

HMS GENESIS from page 5

dental for continuity of care from the point of injury to the MTF. Genesis will not be an additional system to manage, but will replace legacy systems.

Once Genesis is fully implemented, it will replace the Composite Health Care System, Essentris, AHLTA, dental record systems and components of the Theater Medical Information Program-Joint portfolio. Genesis will allow access to more

than 9.5 million DOD beneficiaries and will follow patients from their first treatments in an MTF to the VA. Genesis will provide single health record for service members, veterans and their dependents.

Converting to MHS Genesis will at times be difficult and everyone in encouraged to find out what their role will be before, during and after the "Go Live."

The commander has appointed a Site POC, Cid Jackson, and she has been scheduling and coordinating information

gathering and training. There is also page on IKENet that can be found by clicking the MHS Genesis logo at the top of the page. On that page is a calendar with key dates and information on the many roles that will be required to make this transition a success.

MHS Genesis is the future of how Eisenhower will continue to deliver 5-Star Health Care. Everyone is encouraged to be part of the solution. Star Trek fans may be familiar with the following quote: "Resistance is futile."





Religious Affairs Soldiers test their mettle, train hard

Col. Karen Meeker

Chaplain

Eighth Army

U.S. ARMY GARRISON HUMPHREYS, Republic of Korea – Twenty-three chaplains and religious affairs specialists tested their mettle April 18-30 during training at Camp Humphreys, Republic of Korea.

The Eighth Army Chaplain directorate hosted the two-week course, called the Emergency Medical Ministry/Combat Medical Ministry Course, or EMM/CMM for short.

The EMM/CMM is to the Chaplain Corps as the Expert Infantryman's Badge and the Expert Field Medical Badge are to the infantry and medical branches, said Maj. Eric Dean, chaplain, Eighth Army deputy command chaplain and course director.

"Students were required to combine basic Soldier skills with casualty care and the Chaplain branch's core competencies: nurture the living, care for the wounded and honor the fallen," Dean explained.

The commander of Eighth Army, Lt. Gen. Bill Burleson, emphasized the importance of the training, specifically noting the role religious affairs Soldiers serve in units.

"Being ready to 'Fight Tonight' means we all need to be ready mentally, physically, socially, emotionally, and spiritually," said Burleson during the course graduation ceremony. "This includes unit ministry teams in battalions and brigades that are on the forefront of religious and spiritual preparation. As a commander in combat, I looked to my UMT to help Soldiers deal with the wounds of war. Some of which are visible and other wounds which are hidden — often carried silently."

Course participants led devotions at the beginning of each training day, incorporating Korean War chaplain and chaplain assistant history. At night, they conducted rounds visiting patients and staff at the Brian D. Allgood Army Community Hospital on U.S. Army Garrison Humphreys.

Soldiers participating in the EMM/CMM

course also received blocks of instruction on bio-medical ethics, traumatic event management, moral injury, and post-traumatic stress. They practiced memorial and ramp ceremonies, which are a memorial service held prior to the departure or arrival of an aircraft carrying a deceased Soldier's body. The drills included loading simulated casualties and remains on CH-47 Chinook and UH-60 Blackhawk helicopters.

Other physical portions of the EMM/CMM course included a tactical water survival orientation at the Lt. Gen. Thomas Vandal Training Complex on USAG Humphreys and the tactical combat casualty care course. Participants were also led by Lt. Col. Patrick Devine and Maj. Omari Thompson, both chaplains, and Sgt. 1st Class Trevor Rush on a staff ride to the location of the first U.S. Army Chaplain killed in action during the Korean War, Capt. Herman Felhoelter, chaplain, who was executed by the enemy while providing last rites to wounded troops at the Battle of Daejeon.

Patient Safety Nominees for the month of November 2020

Patient Safety Division

Leslie Ramirez, RN; Brooke Ripley, CNA; and Kim Farris, MSA; continued to demonstrate a consistent commitment to patient safety when an elderly patient became disoriented and lost her way around Eisenhower Army Medical Center last fall.

Ramirez, from the Cardiology Clinic, escorted the patient to the lab and then to the pharmacy before the patient left through

the second-floor entrance. The patient's daughter telephoned the clinic concerned because her mother had not come home.

Members of the Coumadin Clinic staff, Farris and Ripley, took immediate action and started to search for the elderly patient.

The daughter was able to contact her mother by cell phone. The daughter reported that her mother stated she had found a ride from a nice couple but was

unable to tell her daughter her location at that time. The daughter contacted the staff immediately and security was informed.

In the meantime, Ramirez called the patient, spoke with the couple and was able to provide directions to the patient's house. Ramirez remained on the phone with the couple until the patient arrived home and she received confirmation from the patient's daughter that patient was safe.



Photo by Scott Speaks

Leslie Ramirez, RN; Kim Farris, MSA; and Brooke Ripley, MA; were recognized by Col. Carlene A.S Blanding, commander Eisenhower Army Medical Center, last fall for their consistent commitment to patient safety when an elderly patient became disoriented and lost her way around EAMC last fall.



IKE 7 from page 3

sick. Those few days were extremely stressful and exhausting. But, as a wife and mom, there is nothing that I would rather be doing than taking care of them.

While all of this was going on, plans were ongoing for my first trip with the commander to visit the team at Rodriguez Army Health Clinic. I was so excited. Command circulation is so important when teammates are geographically dispersed.

My husband had his first post-op appointment 10 days after surgery, and the providers diagnosed a complication that was not expected. It knocked the wind out of our sails.

The day I got the news, I was distraught, and I had to tell the boss. I was crying in my office as I hit a proverbial "wall" in my personal life. I had to fill her in on all of the updates to my situation. I also had to tell her that I did not think I could travel to see the team. This was so hard; I had to admit that I couldn't handle everything, and needed to put my family first.

Team, my battle buddy could not have been more understanding and the rest of my squad was just as supportive.

My son is better and my husband is on the road to recovery.

Being open and having a strong support system at work has helped me more than they probably realize.

I share this because no one is impervious to hitting walls, breaking down or needing support. And, that is Okay.

I implore you to talk to your team, your boss, to chaplains, Behavioral Health, or



U. S. Army graphic

EAMC teammates: Who is in your golden triangle? Post your triangles in your work areas and share with your teammates.

anyone you feel comfortable sharing your situation with.

I am grateful to have the squad that I do and to have a strong golden triangle who is always there for me.

This month I ask all EAMC teammates

this question: Who is in your golden triangle? I encourage you all to post your triangles in your work areas and share with your teammates.

I will end with this: Happy 246th Birthday U.S. Army.

HURRICANE from page 8

who have underlying medical conditions. Make sure everyone knows what they can do to keep them safe from COVID-19.

Follow everyday preventive actions, including covering coughs and sneezes, washing your hands often, and avoiding touching your eyes, nose, and mouth with unwashed hands. Consider taking extra precautions for people living in close quarters.

Know what to do if someone in your family or in the household you are staying with becomes sick with COVID-19. Take steps to keep your pets safe.

Stay safe after a hurricane

In addition to guidance for staying safe and healthy after a hurricane, note that:

You should continue to follow preventive actions to protect yourself and others from COVID-19, like washing your hands and wearing a mask during cleanup or when returning home.

It may take longer than usual to restore power and water if they are out. Take steps to prevent carbon monoxide poisoning if you use a generator.

If you are injured or ill, contact your medical provider for treatment recommendations. Keep wounds clean to prevent infection. Remember, accessing medical care may be more difficult than usual during the pandemic.

Dealing with disasters can cause stress and strong emotions, particularly during the COVID-19 pandemic. It is natural to feel anxiety, grief, and worry. Coping with these feelings and getting help when you need it will help you, your family, and your community recover.

People with preexisting mental health conditions should continue with their treatment and be aware of new or worsening symptoms. Additional information can be found at the Substance Abuse and Mental Health Services Administration external icon page.

After a hurricane, it's not unusual for rats, mice, and other pests to try to get into your home or building. Be aware that with restaurant and commercial closures related to COVID-19, there are already reports of increased rodent activity as they try to seek other sources of food.

- website: www.nhc.noaa.gov.



facilities

and water

in your home