

JANUARY 2016

BROOKE ARMY MEDICAL CENTER

FOCUS



**SAMMC WELCOMES
FIRST BABY OF 2016**

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BAMC FOCUS

JANUARY 2016

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BAMC Focus is an authorized publication for members of Brooke Army Medical Center and Southern Regional Medical Command, published under the authority of AR 360-1. Contents are not necessarily official views of, or endorsed by the U.S. Government, Department of Defense, Department of the Army, or Brooke Army Medical Center.

BAMC Focus is published monthly by the Communications Division, 3551 Roger Brooke Drive, JBSA-Fort Sam Houston, TX 78234.

Questions, comments or submissions for BAMC Focus should be directed to the editor at 210-916-5166 or by email to lori.a.newman.civ@mail.mil.

Deadline for submission is six business days before the first of the month. We reserve the right to edit submissions selected for publication.


San Antonio Military Health System
Proud Partner

OUR COMMITMENT



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Team,

To commemorate the Civil Rights movement, the third Monday in January was signed into law as Martin Luther King, Jr. Day by President Reagan. While enjoying this long holiday weekend, I strongly encourage all personnel to take safety into consideration and apply risk reduction techniques when making plans.

While on the roads, always drive defensively; watch out for “the other guy.” On wet or slick roads, keep more distance between your vehicle and those in front and behind. As you conduct your pre-trip risk assessment, I ask everyone to include a visual inspection (walk around the entire vehicle), check the tire pressure and all lights on your vehicle. South Texas winters are relatively mild; however, icy conditions can and do occur on occasions. Plan ahead – check the road and weather conditions for your driving route. As with all other drives, stay alert and buckle up – seat belts save lives.

Consider all known risks prior to an activity or event and take the necessary precautions to be safe. It's always good to have a contingency plan, just in case.

Supervisors and leaders at all levels should brief personnel on the safety hazards inherent to activities that might occur at this time of year. To assist in the seasonal safety briefs, information can be found on the BAMC Command Safety Office intranet website and the Army Safety Center website (<https://safety.army.mil/>). The BAMC Safety Office staff is also available for assistance, guidance and information.

CSM Crews and I are proud to be a part of this outstanding team. We wish every service member, civilian staff member, and family member a safe and enjoyable Martin Luther King, Jr. Holiday.

EVAN M. RENZ, M.D.
Colonel, MC
Commanding



Prescription refill changes to affect TRICARE beneficiaries

TRICARE beneficiaries are now required to get select brand-name maintenance drugs through a military pharmacy or TRICARE Pharmacy Home Delivery.

The new law took effect Oct. 1, 2015, requiring all TRICARE beneficiaries, except active duty service members, to get select brand name maintenance drugs through either TRICARE Pharmacy Home Delivery or from a military pharmacy.

Maintenance drugs are drugs taken regularly for a long period, such as to control blood pressure or cholesterol. The law does not apply to drugs people take for a short time, like antibiotics or generic drugs.

Beneficiaries who keep using a retail pharmacy for these drugs will have to pay the full cost. This will not affect people who live overseas or have other prescription drug coverage.

The TRICARE pharmacy contractor, Express Scripts, sent a letter to affected beneficiaries in September 2015 explaining their options. Beneficiaries can contact Express Scripts at 1-877-363-1303 if they have any questions.

Beneficiaries who fill an affected drug at a retail pharmacy will get another letter from Express Scripts. After that, beneficiaries have one final "courtesy" fill at a retail pharmacy. If they fill at a retail pharmacy again, they have to pay 100 percent of the cost of their medication.

Military Pharmacies and TRICARE Pharmacy Home Delivery will remain the lowest cost pharmacy option for TRICARE. However, Feb. 1 most copays for prescription drugs at home delivery and retail network pharmacies will increase slightly.

Copays for brand name drugs through home delivery will increase from \$16 to \$20, for up to a 90-day supply. At retail pharmacies, generic drug copays go from \$8 to \$10, and brand name drug copays go

from \$20 to \$24, for up to a 30-day supply. Copays for non-formulary drugs and for drugs at non-network pharmacies will also change.

Beneficiaries can save up to \$208 in 2016 for each brand name prescription drug they switch from a retail pharmacy to home delivery. Home delivery offers safe and convenient delivery of your prescription drugs right to your mailbox. For more information on Home Delivery, visit www.tricare.mil/pharmacy.

Medications at military pharmacies are still provided at no cost to beneficiaries.

"Switching your prescriptions to Joint Base San Antonio-Fort Sam Houston pharmacies is easy," said Army Col. Kevin Roberts, chief of Pharmacy Service, Brooke Army Medical Center. "You can contact the pharmacy directly (210-916-6036 or 210-295-9370) or have your provider send us the prescription(s) electronically.

"Just give your provider the following names of our electronic prescribing sites: DoD Ft Sam Comm ePhcy (Pharmacy NCPDP 591 1880/Pharmacy NPI 1831502590) or DoD Ft Sam ePhcy (Pharmacy NCPDP 591 19/Pharmacy NPI 1649683400)" said Roberts.

Prescriptions can be filled at the Main Pharmacy at San Antonio Military Medical Center or the Fort Sam Houston Community Pharmacy on main post, which is now open Saturdays from 8 a.m. to noon for prescription pick up.

In addition, JBSA-Fort Sam Houston pharmacies have developed an easy and



Retired Air Force Master Sgt. Gilberto Hernandez uses the Pharmacy's Medsafe dropbox in the Medical Mall at San Antonio Military Medical Center to get rid of expired medications Jan. 5. (Photo by Robert Shields)

accessible option to securely dispose of unwanted or unused medications.

"We've added a blue drop-off box near the pharmacies in the SAMMC Medical Mall and in the Capt. Jennifer M. Moreno Primary Care Clinic," Roberts said. "These boxes look like a mailbox, but are labeled 'MEDSAFE.'"

"Now our patients have a year round option to dispose of unwanted medications that could lead to medication safety concerns," he said.

(Source: BAMC Public Affairs)

BAMC earns Gold Seal of Approval from The Joint Commission

By Lori Newman
BAMC Public Affairs

Brooke Army Medical Center, which includes San Antonio Military Medical Center and its outlying clinics, has earned The Joint Commission's Gold Seal of Approval® for accreditation.

The Joint Commission accredited BAMC under two standards, the hospital standard and the behavioral health standard. The three-year accreditation award recognizes BAMC's dedication to continuous compliance with The Joint Commission's standards for health care quality and safety.

"The Department of Defense requires all military treatment facilities to maintain a civilian accreditation," said Air Force Col. Kimberly Pietszak, deputy to the commander for quality and safety at SAMMC.

"Not all civilian hospitals are accredited, so it sets a standard for the Department of Defense that we are transparent and we care about the quality and safety of the care we provide enough that we actually pay for and ask consultants to come into this organization and tell us how we are doing," Pietszak said.

BAMC facilities underwent the rigorous unannounced on-site survey in September 2015. A team of Joint Commission expert surveyors evaluated SAMMC and the outlying clinics for compliance with standards of care specific to the needs of patients, including infection prevention and control, leadership and medication management.

"We did exceptionally well," Pietszak said. "We earned a three-year accreditation and we had very few findings. Most of the findings were not related to patient care, they were more facilities based."

The Joint Commission's hospital standards address important functions relating to the care of patients and the management of hospitals. The standards are developed in consultation with health care experts, providers, measurement experts and patients.

Pietszak credited the entire staff for their caring and dedication.

"The entire staff worked very hard to put programs into place, to sustain those programs and to ensure that not only did they meet The Joint Commission standards, they exceeded them," she said.

"The survey team was unanimous and profuse in their compliments on the team-

work, skill, compassion, professionalism and passion to learn exhibited by all of our staff members," said Army Col. Evan Renz, BAMC commander.

"I am very proud of what we as an integrated team have accomplished over the past months to prepare for this survey and the results are outstanding."

Founded in 1951, The Joint Commission seeks to continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value. The Joint Commission is the nation's oldest and largest standards-setting and accrediting body in health care. Learn more about The Joint Commission at www.jointcommission.org.



BROOKE ARMY MEDICAL CENTER COMMEMORATES
DR. MARTIN LUTHER KING, JR. DAY

REMEMBER!
CELEBRATE!
ACT!
A DAY ON,
NOT A DAY OFF!

GUEST SPEAKER:
EDWARD K. MANEY

WHERE:
BAMC MEDICAL MALL

TIME:
JANUARY 22, 2016
AT 1200



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- ★ World Flavors: international favorites
- ★ Vegetarian: meatless delights
- ★ Pizzazz: fresh stone-hearth oven pizzas and calzones
- ★ Noodles: made-to order pastas

Keep an eye out for updates!



Patient makes post-stroke strides at brain injury clinic

By Elaine Sanchez
BAMC Public Affairs

When Kathryn Harris arrived for her first appointment at the Brain Injury Rehabilitation Service, she was leaning heavily on a walker.

The staff told her to park it at the door next time. “They told me no walker, no wheelchair. You don’t need them. You’re going to walk,” said Harris, who is recovering from a stroke at the clinic in San Antonio Military Medical Center. “I knew then I could achieve my goals here.”

The clinic, located in SAMMC’s lower level, is a one-stop shop for patients with brain injuries such as strokes, aneurisms, tumors and severe traumatic brain injuries. Once referred, patients are assigned to a team comprising a physical medicine rehabilitation provider, occupational therapist, physical therapist, speech language pathologist, psychologist, recreational therapist and veteran benefits coordinator.

“We manage patients as a team,” said Amy Bowles, the service’s director. “The treatment is more comprehensive and we are able to address more global goals. It greatly benefits the patient’s recovery.”

Harris said she’s come a long way since her two strokes last spring. The San Antonio native was driving home from seeing her husband, retired Air Force Master Sgt. Allen Harris, one day in March when a driver side-swiped her car. She wasn’t injured but felt ill as she waited for the police to arrive. That evening, her daughter, Robbie Harris, asked her a question about the accident, but didn’t get a response.

“I knew something wasn’t right and then I saw the left side of her face droop,” Robbie said. She realized that her mother was having a stroke. Harris had a second stroke



Leville Crowther, physical therapy assistant, explains shoulder mechanics to Kathryn Harris and her daughter, Robbie Harris, Oct. 16. Kathryn Harris suffered two strokes last spring, but has made great strides at the Brain Injury Rehabilitation Service in San Antonio Military Medical Center. (Photo by Robert Shields)

at her outpatient rehabilitation center about a week later, affecting function on her entire left side, including the vision in her left eye.

She was provided home health care, but asked to be treated at SAMMC’s outpatient clinic. “I knew when I first walked in that the energy was different,” Harris said. “They were caring and nurturing, and pushed me to achieve my goals.”

Her goals, she added, included walking into her granddaughter’s school unassisted and “getting back into the kitchen.” Fortunately, the clinic is equipped with a full kitchen, along with assistance in everything from writing a grocery list to stirring a bowl with one hand.

“I made brownies here and everyone ate them up. I didn’t even get one,” she said

with a laugh.

She’s also improved her walking with help from a physical therapist and an anti-gravity treadmill. “I cried when I first used the treadmill because I could walk again,” Harris said.

Harris is just one of the many motivated patients who have made progress in the clinic since it opened its doors eight years ago, said Bowles, who has been with the service since its first day. The military initially stood up the clinic, formerly known as the Traumatic Brain Injury Service, to aid wounded service members with concussions and other brain injuries at the height of the war.

“We’d get patients here three days after they received a concussion or a more severe injury in Iraq or Afghanistan,” the

doctor recalled. The staff treated primarily active duty service members for nearly a decade but once the wars wound down, they looked to expand their scope to retirees and family members with other types of brain injuries to keep their skills sharp. They also provide frequent consults to inpatients across the hospital.

“The type of care they need falls right in our wheelhouse,” she said. “And we got a great response when we expanded our services. There was a definite need for comprehensive brain injury care among our retirees and family members.”

With every related specialty on hand, Bowles said she’s proud of the holistic care they offer both military families and civilian trauma patients.

Bowles said she most enjoys seeing her patients’ progress. She ran into one of her first active duty patients the other day and was glad to hear he was interviewing for a job and pursuing other interests.

“It’s wonderful to see how he’s building a new life,” she said. “It’s always deeply satisfying to see the progress our patients are making.”



San Antonio Military Medical Center’s first baby of the New Year was born at 6:24 a.m. Jan. 1 to Air Force Capt. Tiffany Prochaska, assistant team lead in the Emergency Department at SAMMC, and Richard Prochaska III. Baby Evelyn weighed 9 lbs. 2 oz. Pictured from left: BAMC Commander Col. Evan Renz, the Prochaska’s, BAMC Auxiliary President Anne Feldman and Diane Renz. (Photo by Air Force 1st Lt. Kati Spearing, clinical nurse)

BAMC welcomes first baby of New Year

By Elaine Sanchez
BAMC Public Affairs

She was due after the holidays, but decided to come early to the party.

A few hours after the ball dropped in Times Square, Evelyn Rose Prochaska made an appearance at 6:24 a.m. on New Year’s Day, marking San Antonio Military Medical Center’s first delivery of 2016.

“I was in the middle of pushing when the nurse told me that I was having the hospital’s first born of the year,” said Air Force Capt. Tiffany Prochaska, assistant team lead in the Emergency Department at SAMMC. “I was, of course, a little distracted at the moment.”

Prochaska’s due date wasn’t until Jan. 10, but she and her husband, Richard, an Air Force veteran, decided to have a quiet New Year’s Eve at home.

“We got invited to a bunch of parties, but I had a feeling it wouldn’t be a good idea to go out,”

she said. “It was too close to the due date and I wasn’t feeling well.”

Prochaska gut feeling paid off when contractions kicked in around 8 p.m. By 10 p.m., the contractions were closer and stronger and Richard insisted they head to the hospital.

A little over eight hours later, Evelyn Rose was born at 9 pounds, 2 ounces and 22 inches.

BAMC Commander Col. Evan Renz stopped by for a quick visit and to present the family with a “first baby of the year” gift basket, packed with newborn necessities, donated by the BAMC Auxiliary.

“I was shocked when I saw the basket,” Prochaska said. “It was huge and filled with helpful gifts. It was a really nice thing to do for us.”

The new mom said she was impressed with the care. “Everyone was great,” she said. “I knew a lot of the people taking care of me which took a lot of the anxiety away. I’m thrilled to work and receive care here.”

Hospital leaders 'reverse cycle' to better connect with staff, patients

By Elaine Sanchez
BAMC Public Affairs

Brooke Army Medical Center leaders are adjusting their schedules to ensure they're connecting with staff and patients from dusk till dawn.

The process, called Reverse Cycle Leadership Rounding, entails visiting units throughout the hospital during night and weekend shifts.

"As leaders, we have a very real responsibility for knowing how medicine is practiced within our walls, for knowing if and how we are meeting the needs of our patients at all times of the day and night," said BAMC Commander Army Col. Evan Renz, who also serves as an active surgeon. "Active, engaged leadership at all levels is vital to continued success and medical readiness throughout BAMC."

The commander and his most senior leaders embarked on another reverse cycle rounding shift Dec. 11 from 8 p.m. to nearly dawn. Friday nights make

sense, Renz explained, noting that with a 24/7 trauma and specialty care mission, the weekends are oftentimes when the staff kicks into high gear.

For their reverse cycle schedule, "the goal was to visit the areas of the facility that operate 24/7, observe operations and speak with staff about patient care and support services," explained Army Col. Mark Swofford, BAMC deputy commanding officer and deputy commander for administration.

"The hospital runs continuously and processes that work during normal weekday operations may not work as well at night or on the weekends," he added. "By doing the reverse-cycle and weekend rounding, we can get a better understanding of how our decisions will impact the organization over the entire range of operations."

The teams visited nearly every floor of the hospital, speaking with staff in medical, neonatal, pediatric and surgical intensive care units throughout the facility.

Karen Rideout, a neonatal ICU staff nurse, said she was honored by the late night visit. "I was able to share stories about our NICU family, which includes parents, grandparents and, of course, the babies," she said. "We create very close bonds with many of our NICU patient families; these bonds continue for years."

"We were not in need of any particular assistance at the time, but the offer to assist with our needs was welcomed, appreciated and helpful," she added.

Glinda Rangel-Garcia, a nurse in the 5E antepartum unit, said seeing the command team made her feel more connected to leadership. "I was very impressed when the commander asked if our unit had any gynecology patients on the boards," she said. "Our unit is primarily an antepartum unit, and the fact that he knew we extend our services to serve GYN patients made me feel he took an active part in knowing each unit he commands."

As he walked throughout the units, Swofford said he gained valuable feedback on staff challenges, "but one of the most important things that occurred was that we had a chance to speak with the staff in various areas and thank them for what they are doing for our patients."

The discussions were mutually beneficial, added Army Col. (Dr.) Douglas Soderdahl, deputy commander for surgical services.

"The command team was able to directly discuss issues with staff, and employees had the opportunity to provide candid and direct feedback and suggestions to the leadership of the hospital," said Soderdahl, who also serves as a urologist.

The reverse cycle rounding program is an addition to leaders' already robust daytime rounding routine. Additionally, last year the hospital implemented the "Suits to Scrubs" program in which nurse leaders trade their uniforms for scrubs to join their staff on the front lines.

It's all about keeping their finger on the pulse of this organization, Renz said, which includes the Defense Department's only Level I trauma center, more than 8,500 staff, 425 inpatient beds, and over 2 million square feet of clinical facilities.

Renz said he looks forward to the future reverse cycle rounding schedule. "The process of establishing a High Reliability Organization demands that those responsible for day to day operations have an



Dr. Katherine Harrison discusses Emergency Department operations with (from left) Sgt. Maj. Dwight Wafford, Col. Kelly Bramley, Col. Pedro Lucero and Col. Kimberly Pietszak during Reverse Cycle Leadership Rounding late Dec. 11. (Photo by Robert Shields)

accurate grasp of all activities that occur within a major military medical center," he said. "We have an enormous responsibility to optimize the valuable resources we have been given to ensure safe, high quality care."

"At the end of the day, our patients are at the center of everything we do."



Col. Richard Evans, deputy chief, Army Nurse Corps, discusses a visual management board with BAMC Commander Col. Evan Renz and Command Sgt. Maj. Henry Chapman III during Reverse Cycle Leadership Rounding late Dec. 11. (Photo by Robert Shields)



Air Force 1st Lt. Tomas Pasvogel, a clinical nurse, speaks with (from left) Col. Douglas Soderdahl, deputy commander for surgical services, Col. Richard Evans, deputy chief, Army Nurse Corps, and BAMC Commander Col. Evan Renz during Reverse Cycle Leadership Rounding late Dec. 11. (Photo by Robert Shields)



BAMC Commander Col. Evan Renz talks with Air Force Capt. Shauna Butler, pediatrics resident, while Col. Douglas Soderdahl, Sgt. Maj. Rosalba Chambers and Command Sgt. Maj. Henry Chapman III look on during Reverse Cycle Leadership Rounding late Dec. 11. (Photo by Robert Shields)

People share ideas during first

SAN ANTONIO MILITARY MEDICAL CENTER

MED Talks

IDEAS THAT HEAL

By Lori Newman
BAMC Public Affairs

Brooke Army Medical Center held its first MED Talks Dec. 14 in the fourth floor auditorium at San Antonio Military Medical Center.

MED Talks, like TED Talks, are short, informational talks to engage people on various health-related topics and get them talking about them.

The noncommissioned officers in charge of Inpatient Behavioral Health unit Army Staff Sgt. Nicholas Polk and Air Force Tech. Sgt. Shameeka McKoy came up with the idea as a way to address suicide awareness, but it became much more.

Fourteen presenters provided short discourses on a variety of subjects including behavioral health, resiliency and the Performance Triad's three pillars – sleep, activity and nutrition.

“On the grand scheme of the different topics that were discussed, it was intended to reach a variety of people on different levels,” McKoy said. “We wanted everyone to take something away from it.”

“They’re short segments, presented in a catchy, exciting way,” Polk said. “We didn’t want it to be death-by-PowerPoint;

we wanted it to be exciting.”

Topics included sleep, nutrition, effective communication, post-traumatic stress disorder and its treatment, and the power of positive thinking.

Army Col. Vincent Mysliwiec, sleep medicine consultant to the Army Surgeon General, talked about the power of sleep and its ability to heal.

Army Maj. Trisha Stavinoha, chief of Outpatient and Community Nutrition, talked about healthy eating habits. “No one food is going to save you and no one food is going to kill you,” she said during her 12-minute talk.

Army Maj. David Keller, clinic chief, Child and Family Behavioral Health Service, presented one of the most poignant segments by sharing some very personal experiences about being a patient.

“Brutal honesty is just that – it’s brutal, and it has no place in health care,” Keller

said. “Sometimes we as doctors, as providers, and as staff in hospitals deliver news quickly, abruptly, because we have things to do, patients to see.

“Being a patient has taught me to be a little more kind, a little more courtesy, a little more calm and to listen a little bit more,” he said.

“When I was listening to his talk I was very moved by it,” Polk said. McKoy agreed, “His message touched a lot of people.”

Polk and McKoy want to see MED Talks become an annual or semi-annual event.

“Behavioral health started the idea of MED Talks, but we want other disciplines to join in,” Polk said. “People do great things in this hospital. Whether its radiology, surgery, nursing or nutrition, we want to have people come up and speak about what they do. Military medicine is a huge topic and it’s very important.”



JTS receives first MHS Battlefield Innovation Award

The Joint Trauma System at the U.S. Army Institute of Surgical Research was presented the inaugural Military Health System Battlefield Innovation Award Dec. 3 by Dr. Jonathan Woodson, assistant secretary of defense for health affairs, at the 2015 Association of Military Surgeons of the United States Annual Continuing Education Meeting held in San Antonio. In an email to the JTS leadership from the MHS Chief of Innovation, Dr. Steve Steffensen wrote: “The title of ‘MHS Chief of Innovation’ is a new role that is arguably ambiguous and prone to misinterpretation. But have no doubt that central to everything I intend to do in this position is to advocate for the combat medic and remember our core mission in the military health system. It is therefore with greatest respect that I have chosen to recognize the Joint Trauma System for the first ever MHS Battlefield Innovation Award.”

Present and former staff members of the Joint Trauma System at the U.S. Army Institute of Surgical Research accept the first Military Health System Battlefield Innovation Award by Dr. Jonathan Woodson, assistant secretary of defense for health affairs, during the AMSUS Annual Continuing Education Meeting Dec. 3. Left to right: Col. (Dr.) Jeffrey Bailey, Mary Ann Spott, Ph.D., Col. (Dr.) Stacy Shackelford, Col. (Dr.) Kirby Gross, Dr. Jonathan Woodson, Dr. Frank Butler, Capt. (Dr.) Zsolt Stockinger, and Dr. Brian Eastridge. (Photo by Steven Galvan)

Burn flight team uses CRRT during transport

By Steven Galvan
USAISR Public Affairs

Since 1952, the Burn Flight Team from the U.S. Army Institute of Surgical Research Burn Center has deployed throughout the world to provide burn care and transport patients to the Burn Center. The burn critical care provided by the six-person team during transport has been crucial in saving the lives of hundreds of burn patients from on and off the battlefield.

During its most recent mission Dec. 9 to Singapore, the team added a new capability to its arsenal of critical care equipment—a kidney dialysis machine to provide continuous renal replacement therapy. According to burn trauma surgeon, Maj. (Dr.) Ian Driscoll, this was the first time that the Burn Flight Team has performed this therapy in-flight.

“It was necessary for a patient who was in renal failure after sustaining electrical

injury and extensive burns,” he said. “He would not have survived the flight without this specialized organ support.”

CRRT is routinely used in the Burn Intensive Care Unit to purify the blood of toxins through a filtration system and assist in fluid removal. Team members Sgt. Francisco Rosario and Andrew Wallace constantly monitored the equipment during the flight and it performed flawlessly at extremes of altitude and temperature.

Driscoll believes that CRRT will someday be routinely used to transport patients in renal failure.

“I also believe that this proves that CRRT can be used in austere locations where it hasn’t been available in the past,” he said. “I hope that this motivates the development of smaller, portable units.”

Until then, the Burn Flight Team will use CRRT when needed and continue upholding its world-renowned reputation and living up to its motto: “Anytime, Anywhere.”



U.S. Army Institute of Surgical Research Burn Flight Team members Staff Sgt. Daniel Zimmerman, Capt. Sarah Hensley and Capt. Kirt Cline monitor the patient during a mission to Singapore Dec. 9. (Photo by Steven Galvan)

New residential treatment program opens at SAMMC

By Dewey Mitchell
BAMC Public Affairs

Overcoming addictions is the mission of the new program on San Antonio Military Medical Center’s 7W.

Called the Substance Use Disorder Residential Treatment Program, the chief of the unit, Army Maj. Sandra Shelmerdine, explained that the RTP is a rigorous six-week program designed to help patients overcome their addictions to alcohol or illicit drug use.

The program will not only better serve our active duty patients, but will bring patient care back into San Antonio Military Medical Center, which had often been referred out to local facilities.

The program is open to all active duty service members and activated National Guard and reservists who are eligible to receive military medical services. Patients must have a primary diagnosis of a substance use disorder and be currently enrolled in the Army Substance Abuse Program or service branch equivalent.

Patients were going out to the network, Shelmerdine explained. “We felt, as a military program, we can better work with ser-

vice members to reintegrate them back into their units.”

“We have a program that utilizes evidenced-based practices such as cognitive behavioral therapy and motivational enhancements,” Shelmerdine said. “Occupational and recreational therapy add a unique aspect to the program.”

Patients do make daily trips off the ward to perform PT, attend Alcoholics Anonymous meetings, and participate in other community reintegration outings such as golf, bowling, horseback riding and some chaplain-sponsored outdoor activities like a trip to Canyon Lake.

“We apply an integrated treatment model consisting of social work, occupational therapy, nursing, recreational therapy and psychiatric services,” said Patricia Shaw, clinical program manager. More than 30 medical professional staff make up the entire team including psychiatric/psychological technicians.

“While substance use disorders is the



Brooke Army Medical Center Commander Col. Evan Renz visits the new Substance Use Disorder Residential Treatment Program conference room during a visit to 7W. (Photo by Robert Shields)

primary focus of treatment, patients can also receive treatment for other co-occurring psychiatric disorder(s),” Shaw said. “The treatment and skills provided along with the unique aspects of our program will enhance their recovery.”

The vision of the RTP is to become military medicine’s leader in supporting service members along their journey to recovery from alcohol and other drug addiction.

Tis the season ...



Brooke Army Medical Center Warrior Transition Battalion Commander Lt. Col. Michael Harper and Command Sgt. Maj. Michael Garza serve WTB Soldiers and their families during a holiday lunch Dec. 18 at the Warrior and Family Support Center. (Photo by Robert Shields)



Former Deputy Commander for Clinical Services retired Col. Mary Ann McAfee (right) and Melissa Wright (left) play holiday music for BAMC staff and patients in the SAMMC medical mall Dec. 15. (Photo by Lori Newman)



Jordan Taylor enjoys a visit from Santa, Mrs. Claus and their dog Jake Dec. 16 at San Antonio Military Medical Center.



Pediatric patient Caiden Achan and his mother Tia Gibson cut the ribbon Dec. 9 officially opening a Winter Wonderland in the courtyard of the fifth floor Inpatient Pediatric Ward at San Antonio Military Medical Center. The Winter Wonderland is filled with holiday decorations to help children celebrate the holidays even though they are in the hospital. (Photo by Maria Gallegos)

Brooke Army Medical Center Commander Col. Evan Renz visits with retired Lt. Col. Norman Levesque Christmas morning. The BAMC command staff and their families delivered fruit baskets and Christmas cards to patients at San Antonio Military Medical Center Dec. 25. The command team and their families then made their way down to the new dining room to serve Christmas dinner to patients and staff. The buffet featured some traditional favorites such as tamales and bread pudding along with prime rib and a plethora of vegetables, salads and desserts. (Photos by Lori Newman)



Maj. Gen. Thomas Tempel, Regional Health Command – Central (P) commander, speaks to Daniel Mata, a patient at San Antonio Military Medical Center, Christmas morning. Tempel and his family joined the Brooke Army Medical Center command staff to deliver fruit baskets and cards to patients Dec. 25.

Diane Renz gives patient James Martinez a Christmas card and fruit basket Dec. 25 at San Antonio Military Medical Center. SAMMC receives thousands of cards each year from all over the country for service members and patients who are in the hospital during the holidays.



(Above) Col. Mark Swofford (right), deputy commanding officer and deputy commander for administration, serves tamales in the new dining room at San Antonio Military Medical Center Dec. 25. The command staff and their families helped serve Christmas dinner to patients, family members and staff.

(Right) Brooke Army Medical Center Command Sgt. Maj. Albert Crews (right) shakes hands with Bashir Hmabzi Dec. 25 at San Antonio Military Medical Center.



Other Happenings

at Brooke Army Medical Center



National Guard Celebrates 379 Years

The youngest Soldier, Cpl. Princess Fuller, and the oldest Soldier, Sgt. 1st Class William Leonard, cut the cake at the 379th National Guard birthday celebration Dec. 11. Army Col. William Dotson, Senior Army National Guard Advisor at U.S. Army South was the guest speaker at the event, which was held at the Warrior and Family Support Center's Purple Heart Garden. *(Photo by Lori Newman)*



Executive Lunch in the New Dining Facility

Professional staff members from the House Armed Services Committee visited San Antonio Military Medical Center Dec. 11 to discuss healthcare reform. Army Lt. Col. Sarah Flash, chief of the Department of Nutritional Medicine and staff set up the new Executive Meeting Room located adjacent to the new dining room on the lower level of the hospital for a working lunch. *(Photo by Dewey Mitchell)*



New BRAG Board Members

Brooke Army Medical Center Commander Col. Evan Renz welcomes new BAMC Retiree Activities Group board members Dec. 16 during a ceremony at San Antonio Military Medical Center. From left: Frank Farris, treasurer; Eugene "Tony" Meyer, BRAGGER editor; Robert Hansen, vice president; Joyce Earnest, president, and Renz. Not pictured is Henry Flores, secretary. *(Photo by Robert Shields)*

Rethink New Year's Resolutions

Use SMART goals toward healthier eating, weight loss

By Adam Michael Woodyard
*Outpatient Dietitian, Department of
Nutritional Medicine*

For many, ringing in a new year involves more than just a countdown, fireworks and champagne. Many take this opportunity to improve bad habits. Unfortunately, resolution-makers often give up before February.

The failure to meet goals isn't always from a lack of trying or motivation. The wording of the goals can spell failure. Vague goals like "be healthier" and "lose weight" mean different things to different people.

Goals should always be clear, concise, and SMART: Specific, Measureable, Attainable, Realistic and Timed. "Be healthier" can be revamped to "eat five servings of fruits and vegetables every day for the next week" or "decrease soda intake from four per day to one per day."

The following tips can help you successfully achieve SMART goals:

Focus on making smaller goals. Focus on small goals vs. large goals. Losing five pounds is much more attainable than losing 30 pounds. This is not to say that losing 30 pounds isn't possible, but it is definitely a long term goal. Breaking big goals down into smaller steps can help you inch towards the top. Losing 5 pounds of 30 is a success and means you are definitely on track.

Focus on fewer goals at a time. Keep the list simple, no more than three or four goals at a time. Being more active, losing excess weight, getting organized and quitting smoking can all have positive effects. However, making too many changes at



once is usually not sustainable. Too many goals can create unrealistic expectations, and slipping on just one can have a snowball effect on the others. Meeting small goals will give you the confidence to sustain them and move on to new ones.

Write down your goals and a defined time frame and game plan. You can have long-term and short term-goals but keep your focus on the day to day. Writing things down can keep you from getting off track and losing focus.

Recruit friends, family and even professional help. Tell your friends and family your goals. They can be your cheerleader when your motivation is low. An even better situation would be if they have similar goals. A friendly competition may also help.

When it comes to revamping your weight loss goal, a registered dietitian can help you determine the best course of action. There is a lot of misinformation when it comes to nutrition and weight loss. RDs use evidence-based practice to help develop personalized SMART goals toward healthier eating for weight loss.

Focus on what you have accomplished, not what you haven't. Shortcomings are just goals that you haven't met yet. While you may not be quite down to one soda per day, you have decreased from four to two.

Reward yourself for a job well done. After meeting your goals it's time to reward yourself and reflect. Any step in the right direction is better than stagnation no matter how small. Recognize that you are taking control. When you've successfully met your SMART goal take some time for yourself, take a relaxing bath, go on a day trip, take your dog to the park, go to a concert or anything that makes you happy and reinforces your success.

Always celebrate the win and don't stop there! Keep the momentum. Don't wait for another year before making new goals. Avoid rewarding yourself with food. That is often how people get off track.

Remember, keep your New Year's Resolutions SMART and watch the small victories add to huge changes. Let 2016 be the best you yet!

For more information, RDs are available at SAMMC and Fort Sam Houston. Call 808-2232 or 808-3609 to make an appointment. For most nutrition conditions, a referral is not needed.

SAN ANTONIO AREA MAP



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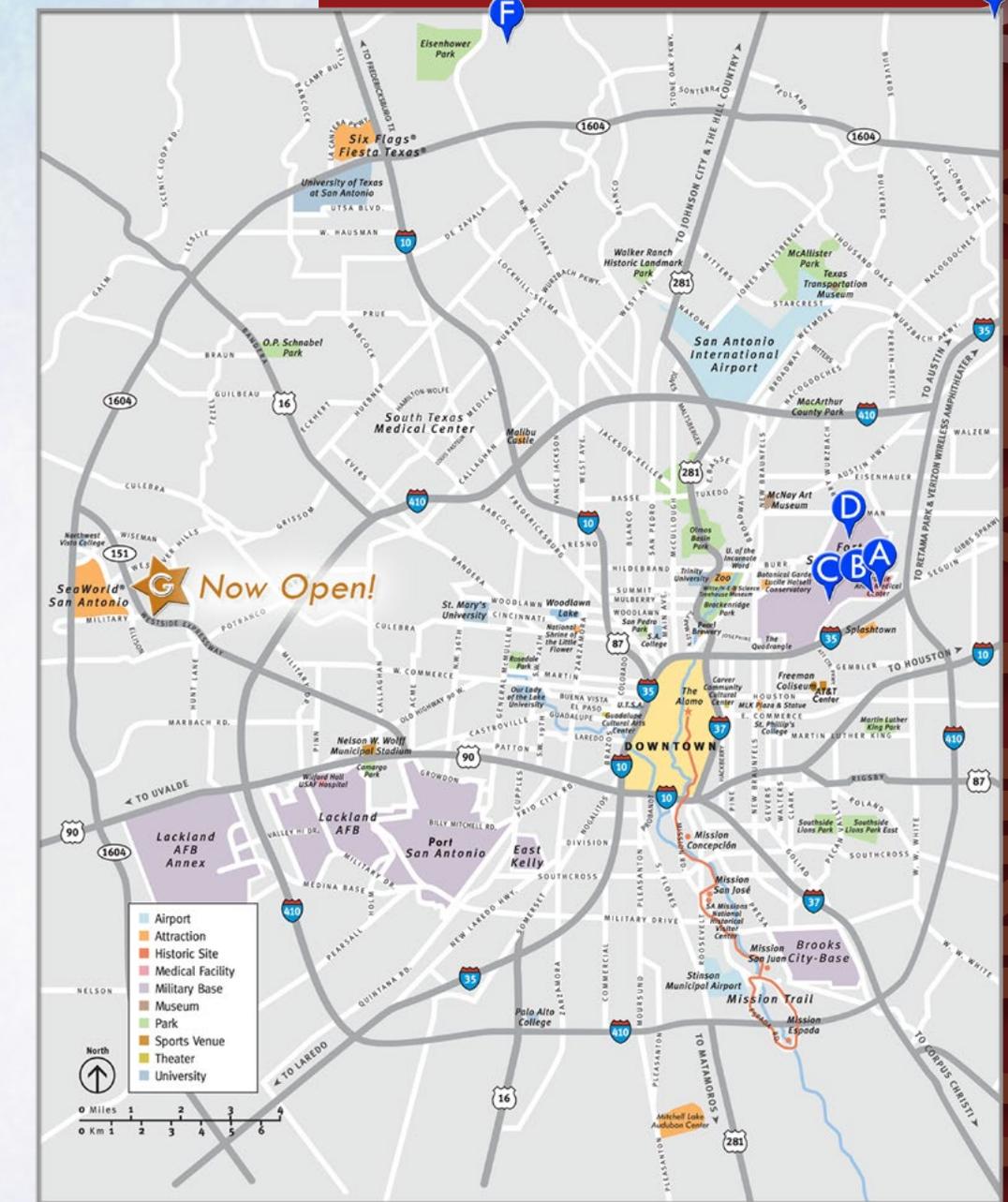
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