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A Quarterly Newsmagazine Serving the Soliders, Staff, and Beneficiaries of the U.S. Army Southern Regional Medical Command

S R M C S T A R SENTINEL

INSIDE THE ISSUE

**COMMANDER'S
CALL**
Page 2

HOOAH! REPORT
Page 3

**TELE-BEHAVIORAL
HEALTH**
Page 5

**PARTNERSHIP
FOR PATIENTS**
Page 6

**READY AND
RESILIENT
CAMPAIGN**
Page 7

TRICARE UPDATES
Page 8-10

**DON'T BE A
NO-SHOW**
Page 11

**AROUND THE
REGION**
Page 12

Welcome MG Keenan!

**SRMC Change
of Command**
page 4





COMMANDER'S CALL

Hello, Southern Region!

I can't tell you how proud I am to lead such a fine group of professionals!

During the next few months as I visit each of your facilities, I look forward to getting to know you and what I can do to make your mission more successful. Our mission is simple: taking care of America's Sons and Daughters. In this, I work for you; not the other way around.



We are entering a critical time for our Army and our Nation. With the current fiscal situation, we are being challenged to not only comply with a reduced budget for the foreseeable future, but we must do so without any major impact to the current level of extraordinary patient care we provide day in and day out.

I'm not going to tell you this will be easy, but we are very lucky to be in place during a pivotal time in Army Medicine. What we do and how we respond today will make every bit of difference down the road, we must see these challenges as opportunities to ultimately be more effective and able to do more good. That does not mean, however, that we do more with less. We will ensure we keep focused on the mission at hand, taking care of America's Sons and Daughters. This includes our military, civilians and all those entrusted to our care.

I am proud to be on this journey with you.

Serving to Heal... Honored to Serve

Jimmie O. Keenan
Major General, U.S. Army
Commanding General

SRMC STAR SENTINEL STAFF

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Unless otherwise indicated, all photos are U.S. Army Photos.



HOOAH! REPORT



Hooah, Team!

This past month, we celebrated 238 years of proud Army history. Two hundred thirty-eight years of traditions, camaraderie and victories for our great Nation. During this time, the Army has faced and overcome many challenges; we have navigated this country through groundbreaking social changes by keeping our eyes on the Army's mission, keeping our

Nation safe from those who seek to destroy the freedoms we hold so dear; and keeping our eyes on what's truly important as providers of world class healthcare—the health and welfare of our Soldiers and their Families—these are our priorities. With that in mind, I am going to take this opportunity to address a dangerous and pervasive problem that has eroded our esprit-de-corps, our mission effectiveness, the faith our Soldiers have in their leaders, and the faith America has in her Army.

Thousands—yes, thousands—of sexual assaults happen in the Army every year. In fact, that number has gone up, by thousands, this year alone. This is unacceptable, and I want to echo our leadership in the Pentagon and tell each of you that there is **zero tolerance** for sexual assault and sexual harassment in my Army. Civilian or military, it doesn't matter. This activity is a crime, it's contrary to ALL of our Army Values and also to the good order and discipline it takes to run a smooth, successful fighting force.

We've been at war for more than a decade, we have pushed past obstacles and challenges that most organizations and individuals would not have been able to face, much less conquer. I know that we are up to this challenge. The Army will face down this challenge as well. Our goal is to bring the number of incidents down to zero, and that will take the engagement of every member of this great Army—civilian and military, from the four-star generals in Washington to the newest private graduating basic training.

I'm counting on each of you to face this obstacle head on and succeed. For more information, contact your unit's Sexual Harassment/Assault Prevention Program (SHARP) representative.

Serving to Heal... Honored to Serve.

CSM Marshall L. Huffman
Command Sergeant Major





MG Keenan assumes command at SRMC

By Lindan A. Moya, SRMC Public Affairs

Maj. Gen. M. Ted Wong relinquished command of Southern Regional Medical Command to Maj. Gen. Jimmie O. Keenan during a change of command ceremony at the MacArthur parade field, June 6.

SRMC is the Army's largest medical region, with 11 military treatment facilities across 11 states, plus the Commonwealth of Puerto Rico and the Virgin Islands, caring for 503,116 beneficiaries with a total of 23,284 staff members.

During his two-year tenure as the SRMC commanding general, Maj. Gen. Wong, a Southern California native, also served as the commanding general of Brooke Army Medical Center for 18 months. He was hand-picked by the Army Surgeon General, Lt. Gen. Patricia D. Horoho, commanding general of the U.S. Army Medical Command, to lead the transformation of BAMC through the Army's portion of the Base Realignment and Closure process, seamlessly integrating with Wilford Hall Medical Center, the largest Air Force military treatment facility located on Lackland Air Force Base. Simultaneously, Maj. Gen. Wong served as the San Antonio Military Health System's deputy director, and he worked very closely with SAMHS Director Air Force Maj. Gen. Byron C. Hepburn to continue to deliver high-quality care to San Antonio area military members and their families.

In addition to the many titles and responsibilities Maj. Gen. Wong

held during his time at SRMC, he also served, and is currently serving, as the U.S. Army Dental Corps Chief. On June 20, Maj. Gen. Wong assumed command as the commanding general of the Northern Regional Medical Command, in Fort Belvoir, Va.

Incoming Commanding General Maj. Gen. Keenan entered the Army as a nurse corps officer in July 1986, receiving her commission through the Reserve Officer Training Corps at Henderson State University in Arkansas. She holds a Master of Science in Nursing Administration from the Medical College of Georgia and a Masters Degree in Strategic Studies from the U.S. Army War College. She also served as a Congressional Fellow for former Sen. Kay Bailey Hutchison, (R-TX) and is currently the chief of the U.S. Army Nurse Corps. Maj. Gen. Keenan was the commanding general for U.S. Army Public Health Command prior to her selection as commanding general of SRMC.

Maj. Gen. Keenan also assumes the duties of the deputy director of SAMHS, and in September will take over as the director,



Maj. Gen. Keenan (far left), Lt. Gen. Patricia D. Horoho and Maj. Gen. M. Ted Wong stand at attention at the end of the Southern Regional Medical Command Change of Command Ceremony. Photo by Erin Perez.

replacing Maj. Gen. Hepburn.

Maj. Gen. Keenan will be the first Army general officer to hold the position of director of SAMHS, overseeing all of the military medical treatment facilities across the San Antonio metropolitan area to include Wilford Hall.

At the end of her remarks, Maj. Gen. Keenan addressed the SRMC military treatment facility commanders and staff, and emphasized their mission to take care of America's Sons and Daughters, no matter the challenges that lay ahead.

Tele-behavioral health reaching more patients, providers

Tele-behavioral health continues to be an outstanding way to address the behavioral health needs of America's sons and daughters. Tele-behavioral health programs began in August 2011, with then Army Vice Chief of Staff Gen. Pete Chiarelli commenting that it was an important step in delivering behavioral health care to those in need who might not otherwise be able to receive it, whether due to stigma or geographical separation. With the additional challenges of limited provided availability, tele-behavioral health is one proven approach to optimize care in a fiscally constrained environment.

“Tele-behavioral health allows the Army the ability to shift providers across the enterprise to meet unforeseen service requirements or surge demands by allowing tele-behavioral health providers the ability to see service members remotely.”

*-Dr. Cho-Stutler
Center for Deployment Psychology*

Another perhaps less obvious benefit is that patients do not have to worry about running into their behavioral health provider on post, or at social functions. This appears to have translated into patients being more willing and open to discussing difficult or upsetting problems with a tele-behavioral health provider.

Nine military treatment facilities in the Southern Regional Medical Command have tele-behavioral health capabilities, and on average in the region 6,811 patients received tele-behavioral health services in the last 12 months.

In the past, tele-health technology has been primarily used in radiology

and dermatology. For example, at the Institute for Surgical Research, Maj. (Dr.) Kevin Chung developed the 'Chungbot,' which he uses to monitor burn patients remotely. Tele-health applications are gaining momentum in rural areas in order to decrease costs and make consultations with specialists more available.

The nine SRMC MTFs that offer tele-behavioral health are:

Bayne-Jones Army Community Hospital (Fort Polk)

Blanchfield ACH (Fort Campbell)

Darnall Army Medical Center (Fort Hood)

Eisenhower AMC (Fort Gordon)

Lyster Army Health Clinic (Fort Rucker)

Martin ACH (Fort Benning)

Moncrief ACH (Fort Jackson)

Reynolds ACH (Fort Sill)

Winn ACH (Fort Stewart)



August is National Immunization Awareness Month

According to the Centers for Disease Control, we all need immunizations (also called vaccines or shots) to help protect us from serious diseases. To help keep our community safe, each of the Southern Region's military treatment facilities is proudly participating in National Immunization Awareness Month.

Shots can prevent serious diseases like measles, diphtheria and rubella. It's important to know which shots you need and when to get them.

Everyone age six months and older needs a seasonal flu shot every year. Other shots work best when they are given at certain ages.

If you have a child age six or younger, find out which shots your child needs:

http://www2a.cdc.gov/nip/kidstuff/newscheduler_le/.

Find out which shots you or your teenager needs:

<http://www2.cdc.gov/nip/adultImmSched/>.

Talk to your doctor or nurse to make sure that everyone in the family gets protection from easily preventable diseases by keeping up-to-date on the shots they need. For more information, talk to your primary care provider and look for more information at your local clinic in the month of August.

Interim guidance for Question 21 supports victims of sexual assault

The Office of the Director of National Intelligence recently announced interim guidance for completing the questionnaire for national security positions, which is commonly known as the Standard Form 86. The new guidance supports victims of sexual assault who hold or wish to hold a government security clearance, but may be reluctant to seek mental health counseling for fear they may have to disclose the counseling on their security clearance questionnaire.

Currently, Question 21 on the SF86 asks if in the last seven years an individual has consulted a health care professional regarding an

emotional or mental health condition or if they were similarly hospitalized. In 2008, revised language provided exemptions for this question; the exemptions are if an individual received family, grief or marital counseling that was unrelated to violence by them or if they received counseling for combat-related military service.

As outlined in Executive Order 13467, the following language was added to Question 21 to read, "Please respond to this question with the following additional instruction. Victims of sexual assault who have consulted with a health care professional regarding an emotional or mental health condition during this period

strictly in relation to the sexual assault are instructed to answer, No."

The interim guidance reaffirms existing policy, which says seeking health care alone would not adversely impact the individual's ability to obtain or maintain eligibility to hold a national security sensitive position or eligibility for access to classified information. The guidance which was issued on an interim basis is pending formal revision of the policy. For more information, visit: <http://www.dami.army.pentagon.mil/site/PerSec/Q21.aspx>

(Source: U.S. Office of Personnel Management)

DoD, MHS newest participants in Partnership for Patients

The Department of Defense Military Health System has signed on to be a participant in the Partnership for Patients: *Better Care, Lower Costs*. The partnership is aimed at helping to improve the quality, safety, and affordability of healthcare for all Americans.

The Partnership for Patients brings together leaders of major hospitals, employers, physicians, nurses, and patient advocates along with state and federal governments in a shared effort to make hospital care safer, more reliable and less costly.

The two goals of the new partnership are to:

1. *Keep patients from getting injured or sicker. By the*

end of 2013, preventable hospital-acquired conditions would decrease by 40 percent compared to 2010. Achieving this goal would mean approximately 1.8 million fewer injuries to patients with more than 60,000 lives saved over three years.

2. *Help patients heal without complication. By the end of 2013, preventable complications during a transition from one care setting to another would be decreased so that all hospital readmissions would be reduced by 20 percent compared to 2010. Achieving this goal would mean more than 1.6 million patients would recover from illness without*

suffering a preventable complication requiring re-hospitalization within 30 days of discharge.

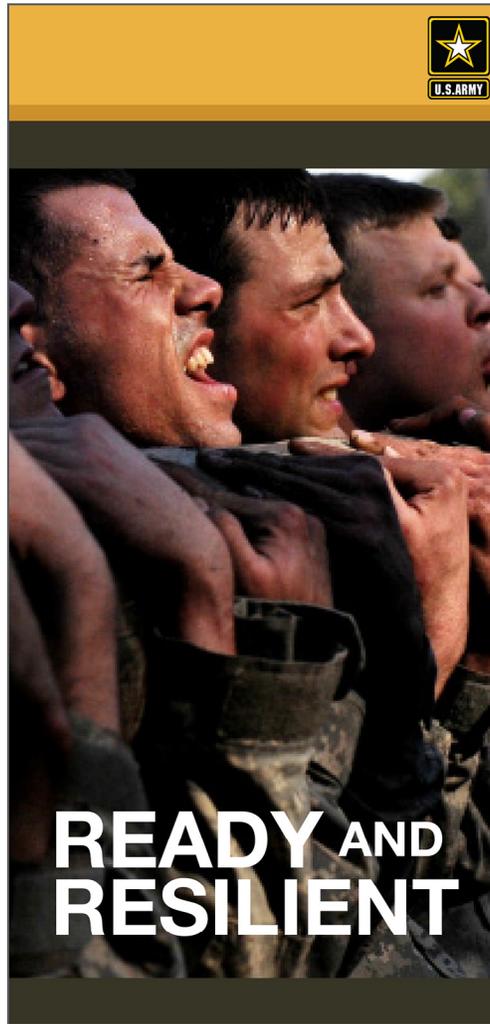
Achieving these goals will save lives and prevent injuries to millions of Americans, this will help put our nation on the path toward a more sustainable healthcare system. The Military Health System pledges to work to attain the goals of the Partnership for Patients initiative by building on work already under way, and supporting local initiatives, to improve the quality of care. The Military Health System looks forward to working with public and private healthcare organizations committed to reducing preventable patient harm.

Army ramps up Ready and Resilient Campaign

The Ready and Resilient Campaign is a collection of comprehensive programs designed to guide the Army's efforts to build physical, emotional and psychological resilience in our Soldiers, families and civilians, and directly enhance personal and unit readiness. To ensure the health and well-being of the entire team, the Army's goal is to invest in and improve the performance of every individual on the team.

The all-volunteer military force has repeatedly shown amazing strength, skill and performance during the longest period of combat operations in the nation's history. The Ready and Resilient Campaign integrates and synchronizes multiple efforts and programs to improve upon that strength, while increasing readiness and resilience of Soldiers (Active, Guard and Reserve), Army civilians and families. The campaign creates a holistic, collaborative and coherent approach to increasing individual and unit readiness and resilience.

The Ready and Resilient Campaign



also builds upon physical, emotional and psychological resilience in Soldiers, families and civilians so they improve performance to deal with the rigors and challenges of a demanding profession.

The campaign helps the Army to integrate and synchronize key programs aimed at preventing suicide, sexual harassment and assault, bullying and hazing, substance abuse, and domestic violence. The campaign also helps the Army as it reviews programs, processes and policies to ensure effectiveness and reduce redundancies, improve methods for commanders to understand high-risk behaviors and intervene early, and continue improvements to the Integrated Disability Evaluation System. Through the campaign, the Army works to reduce barriers and stigma associated with seeking help and promotes healthy lifestyles based on the performance triad of physical fitness, nutrition, and sleep. The campaign's success requires engaged leadership at all levels, a collaborative and multidisciplinary approach, and effective prioritization of resources.

IDES is #2 in the SRMC Six

The SRMC Six was developed to prioritize efforts and establish on-going standardization actions. These were chosen from the Army Surgeon General's Top 10 plus 2, and include SRMC's Core Business Operations Metrics. The Integrated Disability Evaluation System is the second part of a six-part series focusing on the SRMC Six.

Originally called Disability Evaluation System Pilot, IDES is a disability process implemented in 2007. It brings together resources of two federal agencies to evaluate both referred and claimed medical conditions.

IDES is designed to effectively and

efficiently determine fitness for duty as well as disability compensation, when necessary. Based on the fact

The SRMC Six

- 1. Patient Centered Medical Home*
- 2. Integrated Disability Evaluation System*
- 3. Soldier Medical Readiness Processing Campaign Plan*
- 4. Comprehensive Behavioral Health System Of Care*
- 5. Comprehensive Pain Management Plan*
- 6. Core Business Operations Metrics*

that a medical care provider has identified medical condition(s) that may result in unfitness for continued duty, a service member is referred to the IDES. The streamlined IDES system improves the delivery of

disability services and benefits for U.S. Soldiers, servicemembers, veterans, and their families. Under

IDES, one single disability medical examination is conducted by a Department of Veterans Affairs' certified physician, and one single-source disability rating to determine the fitness for duty and eligibility for Department of

Defense and VA disability compensation and benefits is established.

Continued on pg. 11



TRICARE offers Pharmacy Home Delivery

The TRICARE Pharmacy Program provides outpatient prescription drugs through military treatment facility pharmacies, TRICARE Pharmacy Home Delivery, and TRICARE retail network and non-network pharmacies. The TRICARE Pharmacy Program is available to all TRICARE-eligible beneficiaries registered in the Defense Enrollment Eligibility Reporting System, with the exception of U.S. Family Health Plan enrollees.

The TRICARE Pharmacy Home Delivery is the least expensive option when not using the military pharmacy. It's safe, convenient and easy

to use even when traveling on a temporary assignment or if moving.

There is no cost for TRICARE Pharmacy Home Delivery for active duty service members. For all other beneficiaries, there is no copay for up to a 90-day supply of generic medications. Copayments DO apply for brand-name and non-formulary medications. Home delivery is best suited for medications taken on a regular basis, and the prescriptions are delivered with free standard shipping, and refills can be ordered easily online, by phone, or by mail. Home delivery also provides convenient notifications about

order status, refill reminders, and assistance in renewing expired prescriptions.

For more information on TRICARE Pharmacy programs, go to www.tricare.mil/Pharmacy. To contact Express Scripts and set up Home Delivery, visit www.express-scripts.com/tricare or call (877) 363-1303.



TRICARE Online: access anytime, anywhere

TRICARE Online (TOL) is the Department of Defense's online patient-focused portal providing eligible beneficiaries (18 or above), who receive care at a military treatment facility or clinic, access to online health care information and services including Appointment Center, Blue Button, Prescription Refill, Health Risk Assessment, Secure Messaging and Resource Center.

Appointment Center – Schedule, cancel, view, or set reminders for primary care appointments.

Blue Button – View or download personal health data including medications, allergies, problem lists, and lab results. The Blue Button is a partnership with the Department of Veterans Affairs.

Prescription Refill – Request

one or more prescription refills from military treatment facility for pick up, check the status of prescription, and link to the TRICARE Mail order Pharmacy to schedule home delivery.

Health Risk Assessment – Access health risk assessment surveys.

Secure Messaging – Securely communicate with your healthcare team. More information on Secure Messaging can be found at: <http://www.tricare.mil/SecureLogin/SecureMessaging.aspx>

Resource Center – Access to TRICARE services and benefits information and other valuable health education resources.

Beneficiary Benefits

TOL empowers beneficiaries to become active participants

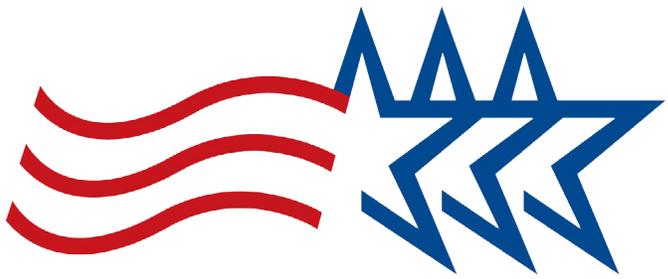
in managing their healthcare. TOL also provides consolidated healthcare information and services that are available anytime, anywhere as an alternative to limited call center days and times.

How to access TOL

Beneficiaries have three ways to access TOL at www.tricareonline.com

1. *Premium DoD Self-Service Logon*
2. *DoD Common Access Card*
3. *Defense Finance and Accounting Services myPay login*

A TOL account is used to validate the patient is an eligible TRICARE beneficiary and to ensure the security of the personal health data. TOL customer service is **(800) 600-9332**.



T R I C A R E[®]

Community Based Medical Homes available for retirees aged 65 and under

Did you know that seniors age 65 and under can enroll at the Community Based Medical Home? That includes retiree family members and survivors who are eligible for TRICARE Prime enrollment within the local Prime Service Area unless maximum capacity has been reached. If capacity is reached, then active duty family members take precedence over retirees, their family members and survivors for enrollment.

CBMHs are Army-run, primary care clinics located off-post in the communities where Army Families live. But CBMHs offer more than a convenient location.

In the Patient Centered Medical Home, each patient partners with a team of healthcare providers – physicians, nurses, behavioral health professionals, pharmacists, and others – to develop a comprehensive, personal healthcare plan. That healthcare team works with each patient over time to take care of health issues as they arise, ensure delivery of prevention screening and services, manage chronic conditions, and promote a spirit of health, wellness and trust.

Call **1-800-444-5445** for TRICARE South to enroll and begin enjoying the benefits of CBMH care.

SRMC CBMH LOCATIONS

Fort Campbell
Screaming Eagle Medical Home
Gateway Medical Center
Medical Office Building One
647 Dunlop Lane
Clarksville, TN 37040

Fort Sill
Frontier Medical Home
5404 SWG Lee Blvd
Lawton, OK 73505

Fort Stewart
Way's Station Shopping Center
2451A Hwy 17
Richmond Hill, GA 31324

Fort Sam Houston
Schertz Medical Home
Horizon Center
6051 FM 3009
Schertz, TX 78154

Fort Jackson
Moncrief Medical Home
1021 Pinnacle Point
Columbia, SC 29223-5740

Fort Hood
Copperas Cove Medical Home
458 Town Square
Copperas Cove, TX 76522

Fort Hood
Harker Heights Medical Home
Market Heights Shopping CTR
201 East Central Texas
Expressway
Harker Heights, TX 76548

Fort Hood
Killeen Medical Home
3404 Kaydence Court
Killeen, TX 76542

Fort Benning
North Columbus Medical Home
1100 Brookstone Centre
Parkway
Columbus, GA 31904

<http://www.armymedicine.army.mil/cbmh/index.htm>

TRICARE expands autism care, treatment for retired beneficiaries and their families

The Department of Defense is **not** making changes for active duty family members seeking autism services. However, an expansion of services through the Applied Behavior Analysis Pilot Program will allow retirees and their families to receive Autism Service Demonstration benefits.

TRICARE has long covered ABA for active duty family members as a benefit of the Extended Care Health Option. To increase access to ABA services, in March 2008 the DoD implemented the ECHO Autism Demonstration for active duty family members. According to the TRICARE website, the demonstration expanded the opportunity for access to ABA services through a variety of provider types, to include ABA “reinforcement” by tutors. ABA reinforcement by tutors has not been available for non-active duty family members.

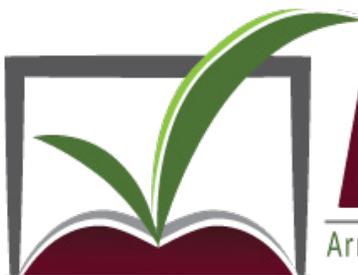
Beginning July 25, 2013, autism services available to non-active duty family members will be greatly expanded with the introduction of the ABA Pilot Program. The pilot program provides retirees and their families with access to additional areas of ABA



reinforcement. Autism care and treatment is evolving, and the pilot program is expected to provide insight into evaluation protocols. It was developed by crafting requirements through consultation with experts in the field and with advocacy groups in an attempt to discover

validated tests, and the best approach for focusing on what would be the most appropriate care in order to provide the best possible outcomes for children with autism. According to an American Forces Press Service article, Dr. Jonathan Woodson, assistant secretary of defense for health affairs and director of the TRICARE Management Activity, said it is “paramount” for children with autism to obtain professional reassessments to ensure they get the right care, at the right time, with updated care plans.

According to the DoD, Autism care benefits for qualifying children of active-duty service members’ enrolled in TRICARE will not change. There is also no change in benefits for anyone enrolled in the basic medical program that began July 2012. For more information about autism benefits under TRICARE, visit <http://www.tricare.mil>



APLSS

Army Provider Level Satisfaction Survey

REMINDER: Please fill out and return the Army Provider Level Satisfaction Survey so that military treatment facilities can improve healthcare services. As of July 2013, the following Southern Regional Medical Command facilities had the number one rankings for each question in the survey. *Well done!*

Fox Army Health Center ranks #1 with 94.7 percent on the overall satisfaction with the visit with the provider.

Brooke Army Medical Center ranks #1 with 81.8 percent on the overall phone service received in scheduling the appointment for this visit.

Lyster Army Community Hospital ranks #1 with 82.3 percent on the amount of time from when you made the appointment until your actual visit.

Lyster AHC ranks #1 with 89 percent on the courtesy and helpfulness of the staff during this visit.

Lyster AHC ranks #1 with 89.9 percent on the convenience of the facility you visited.

Brooke AMC ranks #1 with 95.9 percent on everything considered, how satisfied were you with the facility during this visit?

Don't be a No-Show!

Today's patient has a busy life with multiple demands that may cause one to easily forget or ignore a medical appointment. According to the Medical Group Management Association, the national missed scheduled appointment without calling to cancel, also known as no-show rate, is about seven percent. The Southern Regional Medical Command's no-show rate is 2.9 percent with a goal of less than five percent.

Not showing up for an appointment has multiple effects, such as:

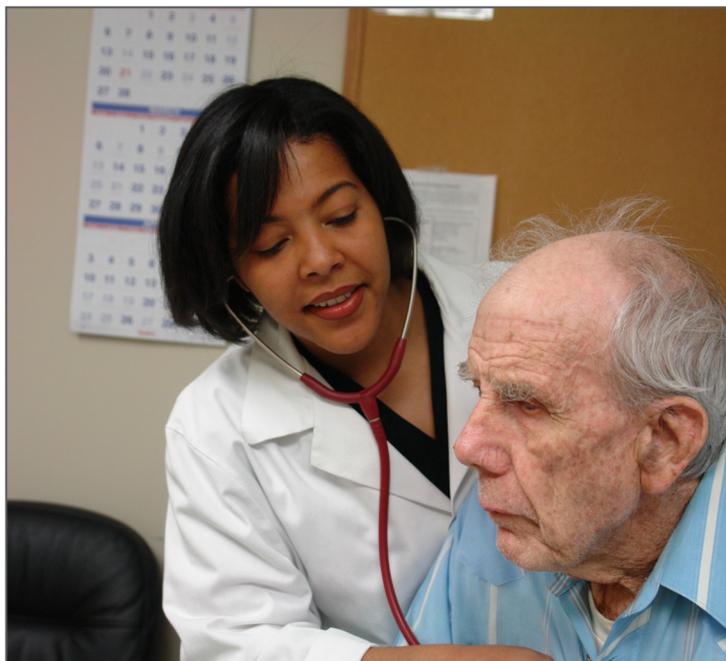
- *The patient is unable to receive the healthcare they may need*
- *The patient may need to reschedule another appointment*
- *Another patient could be seen by the provider*

Missing an appointment can negatively impact a patient's continuity of care and keeping the Army family healthy is essential for Army medical readiness. If a patient fails to show up for their appointment, they may experience continued or undiagnosed health problems.

To lower the SRMC no-show rate, SRMC assessed Winn Army Community Hospital's model of reducing active duty service member no-show rates and implemented their

successful effort region-wide. Every week, the military treatment facilities provide installation unit commanders a report showing the appointments missed during the week and a list of pending appointments for the next two weeks. The report assists unit commanders to schedule training, meetings and activities around the active duty service member's medical appointment(s) to minimize the impact of a no-show. Winn Army Community Hospital reduced active duty no-show rates from 9.23 percent in 2009 to today's rate of 3.36 percent. The no-show initiative reduced SRMC's active duty service member no-show rate from 11.4 percent in January 2010 to 5.5 percent in June 2013.

Family members and retirees are welcome to cancel and/or reschedule appointments as soon as they know they are unable to keep them. Patients can cancel appointments in a number of ways:



- *Call the clinic/provider's appointment line phone number*
- *Select the cancellation option during automated appointment reminder calls*
- *Log-in to TRICARE Online at www.tricareonline.com*

SRMC 6 continued from pg. 7

The transformation from two separate evaluation and disability systems to IDES, helps current and future Soldiers and servicemembers by delivering:

1. *Enhanced Case Management*
2. *A Single Comprehensive Disability Examination*
3. *A Single-Sourced Disability Rating*
4. *Increased Transparency*
5. *Faster Disability Processing*

KNOW WHAT'S RIGHT
I know the signs
DO WHAT'S RIGHT

U.S. ARMY COMBAT READINESS/SAFETY CENTER
4905 5th Ave. Fort Rucker, AL 36362-5363
Comm. (334) 255-3770 Fax (334) 255-2266
<https://safety.army.mil>

Keep cool in hot weather!



SRMC Soldier, NCO of the Year selected at Best Warrior Competition

By Lindan A. Moya, SRMC Public Affairs

Eighteen soldiers, representing the military treatment facilities of Southern Regional Medical Command competed for the 2013 SRMC Soldier of the Year and Noncommissioned Officer of the Year titles during the Joint Base San Antonio–Fort Sam Houston Best Warrior Competition.

The week-long competition took place May 12-17 and was organized by Installation Management Command with support from SRMC, Army North, Army South, and U.S. Army Medical Department Center and School. Events were held at Camp Bullis and JBSA-Fort Sam Houston.

The challenging series of events that make up the competition are meant to test the physical and mental stamina and warrior task knowledge of each competitor in order to select the best of the best to represent SRMC at the U.S. Army Medical Command Best Warrior Competition later this year. The competition consists of numerous events to include the Army Physical Fitness Test, weapons qualification, warrior tasks, an oral board, combatives, and the obstacle course.

Staff Sgt. Benjamin Taylor, Carl R. Darnall Army Medical Center, Fort Hood, Texas, won SRMC NCO of the Year, and Spc. Connor Loehr, Bayne-Jones Army Community Hospital, Fort Polk, La., won the SRMC Soldier of the Year. The winners were announced during an awards ceremony and luncheon, and presented the Army Commendation Medal for their outstanding performance.

Runner-ups were awarded the Army Achievement Medal and included Staff Sgt. Bruce Cardenas, Brooke Army Medical Center, JBSA-Fort Sam Houston, Texas, for SRMC NCO of the Year, and Sgt. Garette Kelley, Blanchfield Army Community Hospital, Fort Campbell, Ky., for SRMC Soldier of the Year.



(TOP) Army Col. J. Anson Smith, chief of staff, Southern Regional Medical Command (far left), and Command Sgt. Maj. Marshall L. Huffman present Staff Sgt. Benjamin Taylor, Carl R. Darnall Army Medical Center, Fort Hood, Texas, with an Army Commendation Medal for earning the SRMC Best Warrior Noncommissioned Officer of the Year. U.S. Army photo by Nichole Riley.

(BOTTOM) Army Col. J. Anson Smith, chief of staff, Southern Regional Medical Command (far left), and Command Sgt. Maj. Marshall L. Huffman present Spec. Connor Loehr, Bayne-Jones Army Community Hospital, Fort Polk, La., with an Army Commendation Medal for earning the SRMC Best Warrior Soldier of the Year. U.S. Army photo by Nichole Riley.

Senior leader honors Soldiers, thanks staff for service

By Maria Gallegos, BAMC Public Affairs



A senior leader from the Pentagon honored two Soldiers and visited with warriors, families and staff at Brooke Army Medical Center July 17.

Jessica L. Wright, acting undersecretary of defense for personnel and readiness, presented Sgt. Anthony Ayers and Spc. Joseph Contreras with their Purple Heart medals and certificates, while Maj. Gen. Jimmie Keenan, commanding general, Southern Regional Medical Command, was the host for the ceremony.

Wright, a retired veteran with 35 years of service and a mother of a deployed Soldier, voiced her admiration and empathy to the Purple Heart warriors at the ceremony.

“Clearly an honor to be here,” she said. “I am humbled because I am a former Soldier and a mom of a Soldier ... I am humbled to be here in your presence. Thank you very much for everything you have done.

“The fact that you have given your time and energy and of yourself to preserve this intangible gift -- that we, the United States enjoy every day -- thank you very much for that,” Wright added.

Ayers, an infantryman, was conducting a combined dismounted patrol in Afghanistan on May 14 when he was struck by an improvised explosive device resulting in his combat injuries. Serving as a tank crewman, Contreras



Command Sgt. Maj. Marshall Huffman, Southern Regional Medical Command (from left), Maj. Gen. Jimmie Keenan, SRMC commanding general, Sgt. Anthony Ayers, Spc. Joseph Contreras, and Acting Undersecretary of Defense for Personnel and Readiness Jessica Wright, pose after the Purple Heart ceremony at the Warrior and Family Support Center July 17. Wright was the presenter at the ceremony. U.S. Army photo by Rebekah Almquist.

was conducting a mounted patrol when his vehicle was struck by an IED Aug. 4, 2011, resulting in his combat injuries.

“... To my grandpa, who was a World War II veteran -- I know he would be proud of me right now if he was here.”

- Spc. Joseph Contreras

Following the ceremony, Wright visited with warriors, their families and staff at the Warrior Transition Battalion,

Center for the Intrepid, Fisher House, Burn Center and the Emergency Department at San Antonio Military Medical Center.

Wright is the deputy senior policy advisor to the Secretary of Defense on recruitment, career development, pay and benefits for 1.4 million active duty military personnel, 1.3 million Guard and Reserve personnel, 680,000 Department of Defense civilians, and is responsible for overseeing the overall state of military readiness.

Two Medication Reconciliation awards go to BACH

In conjunction with Medication Reconciliation Awareness Month, the U.S. Army Medical Command awarded Blanchfield Army Community Hospital in two categories of the MEDCOM's Medication Reconciliation Competition. The two categories BACH earned top marks in are the Medication Reconciliation

Education and the Medication Reconciliation Improvement categories. Medication reconciliation is a regimented, documented review to avoid drug errors during patient transfers within medical treatment facilities. *Congratulations on your outstanding service, BACH staff!*





BAMC earns top AMEDD technology award

By Maria Gallegos, BAMC Public Affairs

Brooke Army Medical Center Information Management/Information Technology was recently awarded the 2012 Team of the Year Mercury award by Army Medical Command.

“I am incredibly proud of my team,” said BAMC Chief Information Officer, Army Lt. Col. David Broyhill. “This is a significant accomplishment for the entire BAMC IMD team. This award reveals their unbelievable support and devotion to making a difference. Their success in providing IM/IT services and technology is a critical component and contributor to the success of BAMC and Army Medicine.”

The BAMC IMD team earned this recognition, in part, for its success with the new Virtual Kiosks, also known as Viosk. It allows the end-users to log on to any computers throughout the medical center without losing their documents, notes or applications they had previously worked on or had at a different desktop. The Viosk users also can log into the system in an average of 25 seconds versus a standard 3-4 minutes on a normal PC.

“The Viosk system has improved the capability of providing seamless transitions in care and management of patients in a variety of environments and locations,” said Army Lt. Col. Peter O’Connor, BAMC Otolaryngology-Head and Neck

surgeon and Sleep Medicine physician.

“The ability of having my workstation follow me from clinic, office, and into the operating room along with other IT tools such as Dragon has been an improvement. I can efficiently move some of my admin workload to the point of care and efficiently accomplish now, what would otherwise be pushed off until non-clinical time and allow me to stay on schedule,” he said.

Broyhill said the success of the virtual kiosks stems from the IMD team staff who exhibited professionalism, hard work and dedication throughout the full implementation process.



Maj. Gen. M. Ted Wong (far right), former SRMC commanding general, attaches the U.S. Army Safety Excellence Streamer to the unit guidon for Fox Army Health Center. Col. William M. Darby, commander of Fox AHC, Redstone Arsenal, Ala., stands at attention and looks on during the ceremony. The Army Safety Excellence Streamer is awarded to detachments, company-sized units, battalion-level units or higher who have demonstrated safety excellence, upheld Army safety standards, and have not had any reportable Class A or B accidents for the past 365 days. In addition, every member of the unit must have completed the Army Composite Risk Management training and the Army Readiness Assessment Program. U.S. Army photo by Erin Perez.

Guests connect with Wi-Fi

By Maria Gallegos, BAMC Public Affairs



The 180-day guest wireless pilot program, which began in January, was implemented in late July as an added service at the San Antonio Military Medical Center.

The Wi-Fi enables guests to continue to text, email or just browse the Internet using their tablets, smart phones or other various wireless devices at the SAMMC Center.

The success of the program is attributed to the constant feedback received from the Interactive Customer Evaluation (ICE) survey that patients completed once they

registered for the Wi-Fi service.

“Over 90 percent of those surveyed agreed and provided positive feedback, noting the new service as ‘Excellent or Good,’” said Patti Steward, senior wireless engineer, Brooke Army Medical Center. “Due to Department of Defense security requirements, there are a few additional steps to register and log in.”

A guest noted on the survey, “Access allowed me to communicate with work and others while waiting to be seen. Before this I could not get data

service via my phone – this is great.”

The BAMC IMD team worked closely with the U.S. Army Medical Information Technology Center and the Army Medical Command’s Enterprise IM/IT service providers to balance usability with the utmost security of personal health information with advanced information technology to better serve the patients at the medical center.

SRMC MTFs recognized in MEDCOM Patient Safety Week poster contest

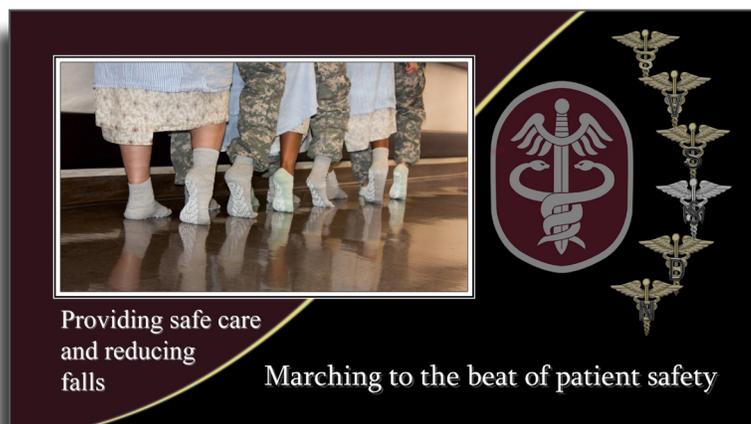
During National Patient Safety Awareness Week in March, the U.S. Army Medical Command celebrated by inviting all its military treatment facilities to participate in a patient safety poster contest, the winners were announced in April, and SRMC MTFs won three of the six awards. You can see the winning posters on this page. *Well done!*



1st Place: Martin Army Community Hospital
General Patient Safety



2nd Place: Martin Army Community Hospital
Medical Theme Related



3rd Place: Carl R. Darnall Army Medical Center
General Patient Safety

Intrepid Fallen Heroes Fund breaks ground for new Center

Military leaders, Soldiers treated for traumatic brain injury, National Intrepid Center of Excellence representatives, and representatives from the Intrepid Fallen Heroes Fund broke ground June 13 at a ceremony near the Fort Campbell, Ky., Fisher House for the third in a series of nine National Intrepid Center of Excellence Satellite Centers designed to diagnose and treat traumatic brain injury and post-traumatic stress.

Thousands of wounded, injured and ill service members who suffer from traumatic brain injury and post-traumatic stress incurred in Iraq, Afghanistan or at their home duty station will have access to the diagnosis and treatment they need at the Intrepid Spirit III. The site will be funded and built by the Intrepid Fallen Heroes Fund. Construction is due to be complete in approximately 12 months.

Welcome new MTF Commanders, CSMs!

Col. Patricia Darnauer
Carl R. Darnall Army Medical Center

Col. Mark C. Wilhite
Bayne-Jones Army Community Hospital

Col. Noel J. Cardenas
Reynolds Army Community Hospital

Col. Kirk W. Eggleston
Winn Army Community Hospital

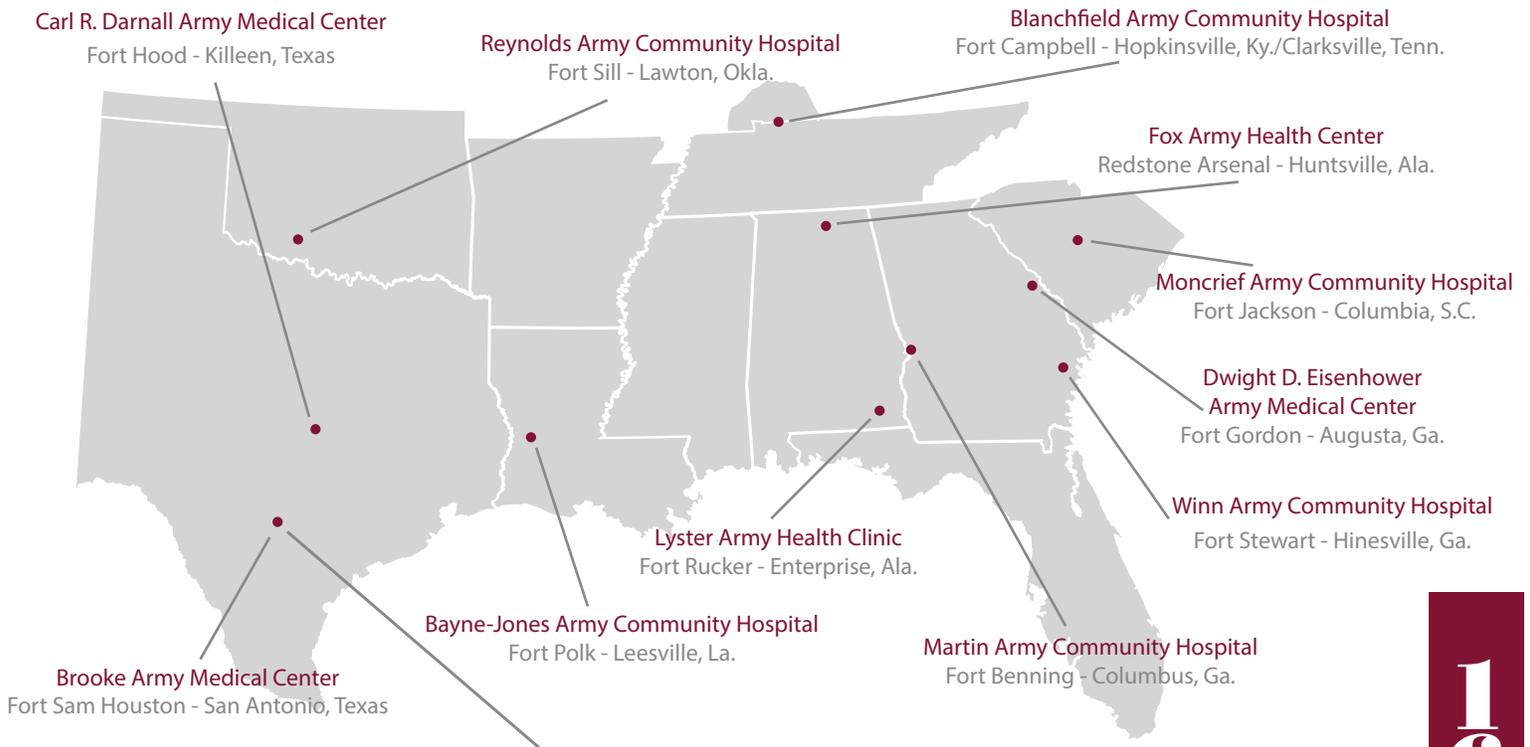
Col. Scott B. Avery
Command Sgt. Maj. Napoleon Noguera Payan
Martin Army Community Hospital

Col. George Appenzeller
Command Sgt. Maj. Miguell E. Reyna
Blanchfield Army Community Hospital

Col. John Lamoureux
Dwight D. Eisenhower Army Medical Center

Sgt. Maj. Jeffery L. Pinnel
Lyster Army Health Clinic

Sgt. Maj. Hoyt Williams
Fox Army Health Center



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