

Pulse

MAY 2018

**HUMPHREYS
HOSPITAL
UPDATE
(PART 3)**

**BRIGADE
HEADQUARTERS
MEMORIALIZED**

**TRICARE CHANGES:
A CLOSER LOOK**

**Lotus
Lantern
Festival**



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- ✓ Dr. Kim has written numerous publications in his areas of expertise, including a recent textbook chapter: Orthodontics Basic Aspects and clinical considerations

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U.S. Certified Orthodontic Specialist

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- **University of Illinois at Chicago**
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EDITOR'S LETTER

Dear readership of the PULSE 65, WELCOME to the eleventh edition of a new publication highlighting all things medical, dental, veterinary and public health throughout the peninsula. Throughout this issue you will find a wealth of information to include the clinical phone directory, the continuing series on how to navigate a Korean hospital and a variety of photos and stories covering the units within the 65th Medical Brigade. One highlight of this issue is the memorialization of the new Brigade Headquarters as the Col. Ruby G. Bradley Hall, named after the most decorated woman in Army history. See more inside to include an excerpt from Hall herself.



One interesting item of note is the Korean Red Cross will be coming to collect blood from volunteer donors on U.S. Army Garrison Yongsan May 17 from 8 a.m. to 5 p.m. All eligible donors (U.S. active duty and civilian personnel, KATUSAs, CFC and Korean employees working in Yongsan). There will be a bus in the Yongsan PX parking lot. So come out and help save a life.

Now the front cover may be a little misleading in that it is the Camp Red Cloud Dental Treatment team, who established a field examination tent at U.S. Army Garrison Humphreys to provide exams to personnel in processing the peninsula. More to follow next month.

Also the last view photo depicts the 2nd Combat Aviation Brigade Medical Evacuation Team transporting a moulage patient during a Mass Casualty Exercise at U.S. Army Garrison Yongsan. More to follow next month.

We ask that if anyone has an interest in photography or covers an event to please submit to the following email: pulse65editor@gmail.com. We are always looking to broaden our coverage of this Brigade. Please share our publication with your family and friends so that others can see the great things the "Mighty 65th" is accomplishing on the Korean peninsula.

Also check out our social media Facebook page at <https://www.facebook.com/65thmedbde>. We hope that you enjoy our publication and assist us as we continue to strive to improve this publication. Suggestions and comments are always welcomed along with submissions. Help us in telling the Army Medicine, Army Dental, Army Veterinary and Army Logistic story.

William Wight
PULSE 65 Senior Editor
65th Medical Brigade
Public Affairs Specialist

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Front Cover

Beginning the last week of April, the 618th Dental Company Area Support rotated dental treatment teams to provide dental examination services to incoming personnel at U.S. Army Garrison Humphreys One Stop. With a lack of adequate space and furnishings, the Dental Company improvised with the establishment of a field dental examination tent next to the building. Capt. Inn Kwon, Area I Dental Clinic officer-in-charge, examines the teeth of Capt. Amanda Torsney, the officer-in-charge of the USAG Humphreys One Stop Dental station. More photos to follow in next month's issue of PULSE 65. (Photo by William Wight, 65th Medical Brigade Public Affairs Office)



Humphreys Hospital Update (Part 3)



TriCare Changes: A Closer Look



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The Yeon Deung Hoe (Lotus Lantern Festival) is an annual event that colors Korea with bright lanterns in celebration of the birth of Buddha. Originally as a religious festival during the Shilla Dynasty, this traditional festival is enjoyed by thousands every year. For more information on the Lotus Lantern Festival three day events (May 11-13) see pages 66-78.

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Foreigners Feel At Home At Columbia Dental Clinic

US-educated Dentists Offer Comprehensive Dental Care

Like a lot of foreigners who move to Seoul without speaking Korean, 15 year-old Angela Castillo was nervous about not being able to communicate with her healthcare providers. Until the Castillos, from San Antonio, Texas, found the Columbia Dental Clinic, Angela says that getting dental work was frustrating, "because no one could explain it in English. I want to know what's going on with my teeth." A year ago, her mother, Insun Castillo was referred to Columbia Dental by an American friend, and Angela felt comfortable immediately. "They speak English, and they take good care of my teeth, even though I've always had teeth problems."

Shortly after Angela got her first braces at Columbia Dental, she needed intensive procedures to correct overcrowding. "It was scary and it was worrisome," she remembers "but they always made sure that I was all right and that nothing was hurting." On top of the good care, Angela's mother, Insun, likes that the clinic is extremely convenient, especially because it's set-up for TRICARE coverage. "In other places, they don't know how to do the paperwork for TRICARE, but here there is everything we need. There's even valet parking". Now, Insun, Angela, Jadon, and Ret. Military



"McBride family and Glossup family gathered for little photo session with Dr. Yun and his hygienist Suhyun."

Rank Mr. Castillo are all regular patients. "Dr. Yun has really taken care of our family," said Sarah Burns, age 13 from Kansas. Michael Burns and his family moved to Seoul from Kansas City, Oklahoma a year ago. Sarah started with braces and then the rest of the family started visiting the clinic too. "Her's also good with younger children, like my brother, Joshua, who is 8 years old. Dr. Yun is a good mix of professional and kind."

For the Lenfant family, Columbia Dental was a critical link in continuing the quality of service they'd had in the States. "Dr. Yun is U.S. educated and licensed, with significant experience" said Col. Babette Lenfant and her husband Phil, who brought their 12-year-old son in the Phase 2 orthodontic treatment. "On the basis of comparison with an American orthodontic clinic, other U.S. general dentistry clinic in Seoul, Columbia Dental Clinic stands out as one of the best we have ever experienced."

Wide-range of dental treatments provided at Columbia Dental Clinic



Woosung Yun, DDS

- Columbia University School of Dental Oral surgery Division of Orthodontics.
- Columbia Presbyterian Hospital General Dentistry Residency.
- Columbia University School of Dental & Oral surgery Advanced Education in General Dentistry.
- Yale New Haven Hospital Dental Department Externship.
- Columbia University School of Dental & Oral Surgery Doctor of Dental surgery.
- Dr. Parlow's Orthodontic Clinic Partnership Practice.
- Licensed in New York, New Jersey, Connecticut U.S.
- Diplomate of the American Board of Orthodontics.
- 18th Medical and Dental Company Affiliated Hospital.

Son A Kim, DDS

- Columbia University School of Dental & Oral surgery Advanced Education in General Dentistry.
- Columbia University School of Dental & Oral surgery DDS.
- Brown University: Bachelor of Science in Biology.
- Bronx VA Hospital, NY, New York: Oral Biology Externship.
- Columbia University School of Dental & Oral Surgery: Cosmetic Dentistry Externship.
- Columbia University School of Dental & Oral Surgery: Oral Surgery Externship.
- Van Eten Hospital, NY, New York: Prosthodontics Externship.
- U.S. National and Northeast Regional Licensure in Dentistry.

Columbia Dental Clinic is proud to introduce H. Kim, DDS. She joined us with her great expertise in Pediatric (Children) Dentistry.

- Seoul National University: College of Dentistry
- Seoul National University: MS in Department of Pediatric Dentistry
- Seoul National University Dental Hospital: Pediatric Dentistry Residency



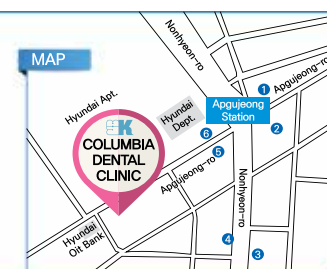
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- Cosmetic Dentistry [bleaching, laminate veneers]
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CALENDAR

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APR27-MAY13

Icheon Ceramic Festival

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Icheon-si, Gyeonggi-do
www.ceramic.or.kr



MAY03-12

Jeonju International Film Festival

Areas of Jeonju (Film Street,
Jeonju Stadium, etc.)
www.jiff.or.kr



MAY04-07

Iksan Seodong Festival

41-14, Godo 9-gil, Iksan-si,
Jeollabuk-do
+82-63-843-8817



MAY04-07

Yeoncheon Jeongok-ri Paleolithic Festival

1510, Yangyeon-ro, Yeoncheon-gun,
Gyeonggi-do
+82-31-839-2561 ~3



MAY11-13

Yeon Deung Hoe (Lotus Lantern Festival)

55, Ujeongguk-ro, Jongno-gu,
Seoul
www.llf.or.kr



MAY16-19

Jindo Miracle Sea Road Festival

Hoedong-ri, Jindo-gun,
Jeollanam-do
tour.jindo.go.kr



MAY17-20

Miryang Arirang Festival

324, Jungang-ro, Miryang-si,
Gyeongsangnam-do
+82-55-353-3550



MAY18-20

Seoul Rose Festival

332, Jungnangcheon-ro,
Jungnang-gu, Seoul
+82-2-2094-1820



MAY18-22

Boseong Green Tea Festival

775, Nokcha-ro, Boseong-gun,
Jeollanam-do
festival.boseong.go.kr



MAY18-22

Namwon Chunhyang Festival

1447, Yochon-ro, Namwon-si,
Jeollabuk-do
+82-63-620-5771 ~9



MAY19-22

Hadong Wild Tea Cultural Festival

571-25, Ssanggye-ro, Hadong-gun,
Gyeongsangnam-do
tour.hadong.go.kr



MAY20-27

Chuncheon International Mime Festival

112, Chuncheon-ro, Chuncheon-si,
Gangwon-do
www.mimefestival.com

DMZ TO THE SEA

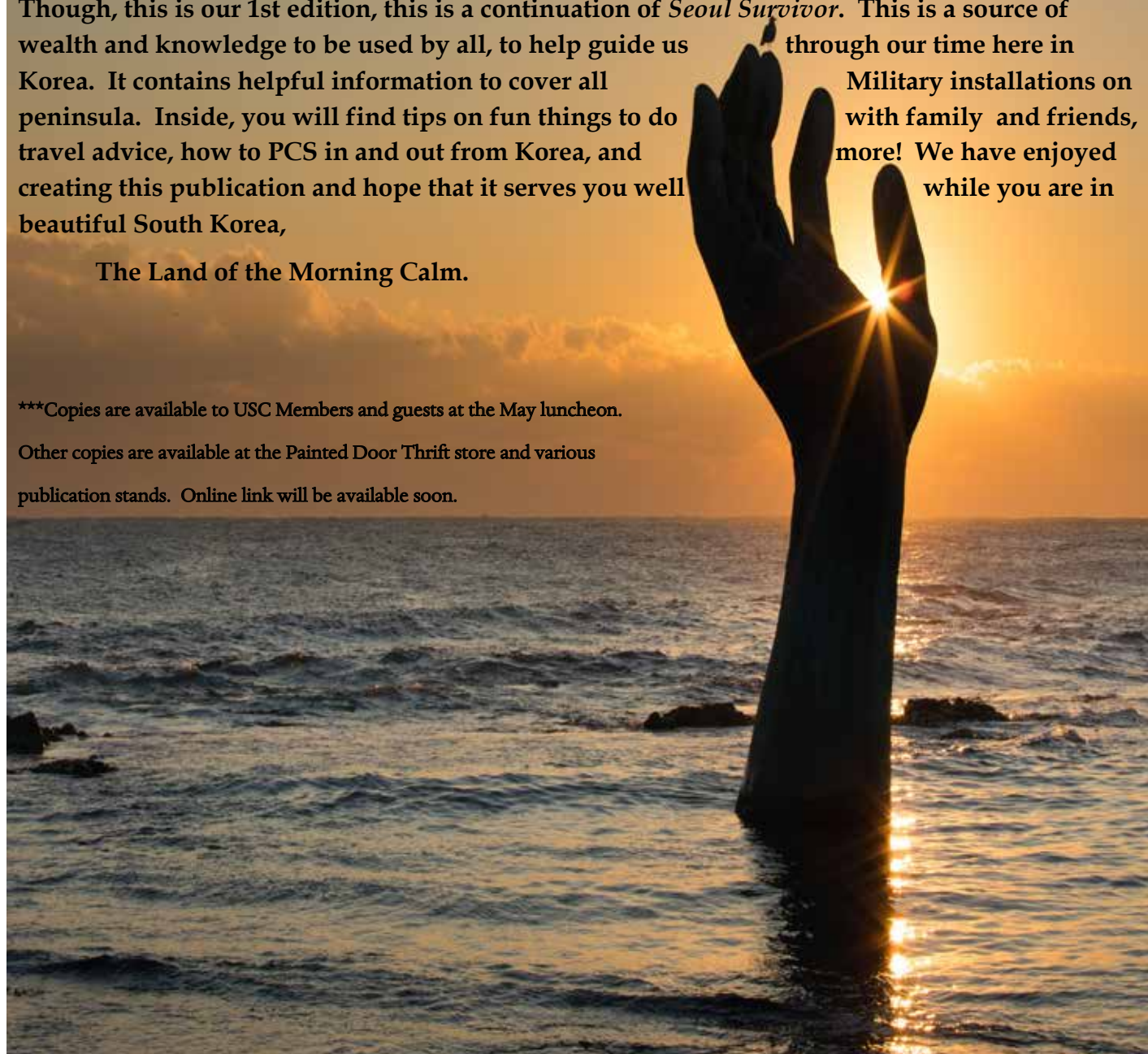


The United Spouses' and Civilian Club would like to present our 1st Edition of *DMZ to the Sea*. Though, this is our 1st edition, this is a continuation of *Seoul Survivor*. This is a source of wealth and knowledge to be used by all, to help guide us through our time here in Korea. It contains helpful information to cover all Military installations on the peninsula. Inside, you will find tips on fun things to do with family and friends, travel advice, how to PCS in and out from Korea, and more! We have enjoyed creating this publication and hope that it serves you well while you are in beautiful South Korea,

The Land of the Morning Calm.

***Copies are available to USC Members and guests at the May luncheon.

Other copies are available at the Painted Door Thrift store and various publication stands. Online link will be available soon.



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NAVIGATING KOREAN HOSPITALS

THIS MONTH'S HIGHLIGHTS



Adaptable Human Solutions Korea

Adaptable Human Solutions (AHS) has grown from the vision of a Canadian psychologist who recognized the need for high quality, effective psychological counseling services in Korea. Starting as a one-woman company, AHS has continually grown in size, but maintained an unwavering dedication to professionalism, confidentiality, and measurable outcomes.

There is no question that Korean culture is vastly different from those of which many expats in Korea originate from, and it may be difficult to find someone who really understands your experience.

To that end, their English therapy team is composed of many Western expatriates who were born, raised and trained in the West. They are credentialed professionals who have achieved advanced degrees specific to Psychotherapy (psychologists, marriage & family therapists, and licensed counselors). Further, AHS professionals have current licensure in the United States or Canada, and maintain the professional standards of their governing body.

This standard of qualifications has allowed many of their clients to receive reimbursement or to direct bill their overseas insurance provider or EAP (Employee Assistance Program).

Specializing in human interactions, motivation, and behavior AHS brings together a highly educated and skilled team from North America, Europe, Australia and Asia in the fields of psychology, marriage and family therapy, hu-

man resources, leadership and larger business.

AHS Professionals build and integrate custom designed solutions to optimize the life and work of our clients. Collaborating through trainings, executive and personal coaching, therapy services, and comprehensive employee wellness and development programs, they work in the ways that are most relevant to their clients, who come from around the globe including Africa, South Africa, America, Canada, France, Germany, Holland, Ireland, Japan, South Korea, Spain, United Kingdom and more.

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Website: www.ahskorea.com

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Daegu Fatima Hospital

Daegu Fatima Hospital was founded on July 2nd, 1956 by the St. Benedict Nunnery to care for the sick and improve national health standards based on the teachings and spirit of the Catholic faith.

Daegu Fatima Hospital opened IMC for foreign patients. IMC is ready to provide the best medical service for diplomats, tourists, exchange students, and soldiers. From appointment to fee payment, IMC focuses on a one-stop medical service for foreigners. Except for patients with serious conditions, most foreign patients can receive medical treatment without communication problems.

Foreign patients coming to IMC can feel at home as the service at IMC is just as comfortable and convenient as the treatment that they would expect to receive in their home land. Furthermore, an emergency service is available around the clock.

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- Number of specialist centers and clinics: 17

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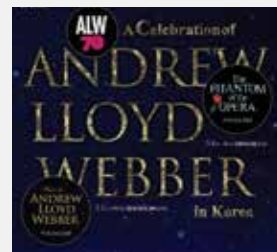
Location: 99 Ayang-Ro, Dong-Gu, Daegu 41199

Website: www.fatima.or.kr/eng/main/main.asp

Directions (Subway): Dong-Daegu Station (Daegu subway) line 1 exit 1. It will take 11 minutes walking or if you take a taxi it will cost about 3,000 won or from Kuengogae Station line 1 exit 4, 14 minutes walking distance.

Specialties: Allergy & Immunology, Cardiology, Dentistry, Dermatology, Dialysis, Emergency Care, Endocrinology, ENT, Gastroenterology, General Practice, Ground Ambulance, Infectious Disease, Internal Medicine, Nephrology, Neurology, Obstetrics & Gynecology, Oncology, Ophthalmology, Orthopedics, Pathology & Laboratory, Pediatrics, Pharmacy, Physiotherapy, Psychiatry – Adult, Psychology – Adult, Pulmonary, Radiology, Rheumatology, Surgery: Cardiothoracic/ Colorectal/ Facio-maxillary/ General/ Neurosurgery/ Plastic/ Vascular/ Urology

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MAY05-06

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MAY13

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Seoul Arts Center Concert Hall
www.sac.or.kr/eng



MAY16

The King's Singers

Lotte Concert Hall, Seoul
www.lotteconcerthall.com/eng



MAY18-20

TWICE 2ND TOUR 'TWICELAND ZONE 2: Fantasy Park'

Jamsil Indoor stadium, Seoul
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MAY19-20

Green Plugged Seoul Festival 2018

Seoul Nanji Hangang Park
www.gpsfestival.com



MAY19-20

Seoul Jazz Festival 2018

88 Olympic Park Bangi-dong,
Songpa-gu, Seoul
www.seouljazz.co.kr/english



MAY23-27

Scottish Ballet: Hansel and Gretel

LG Arts Center
www.lgart.com



MAY26-27

World DJ Festival 2018

Olympic Stadium Complex,
Seoul
www.wdjfest.com



MAY28-29

Bolshoi Ballet: Swan Lake

Seoul Arts Center, Opera
Theater
ticket.interpark.com



MAY31

**Sumi Jo & Roberto Alagna:
"Diva & Divo" Concert**

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ticket.interpark.com



MAY31

**Joshua Bell & Academy of
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Two Day Training for Moulage and CBRNE Related Wounds

Photos by William Wight
65th Medical Brigade Public Affairs Office



Alpha Company and the 121st Combat Support Hospital (CSH) Clinical Education Division (CED) conducted moulage training taught by the 51st Medical Group CED April 4-5, 2018 at U.S. Army Garrison Yongsan. The two day training iteration taught 12 Soldiers how to properly apply moulage to a training casualty. The training involved conventional moulage and Chemical Biological Radiological Nuclear (CBRNE) related wounds. The teams training was put to the test as



casualties were moulaged to take part in the training of the 121st CSH Decontamination team. 23 Soldiers were trained on proper execution of DECON operations, setup of a Mass Casualty DECON line and Patient Triage under CBRNE conditions.



Operation Imagination Tests Veterinary Team Abilities

Photos by Capt. Ginger Hammett
106th Medical Detachment Veterinary Service Support Team IV



The 106th Medical Detachment Veterinary Service Support Team IV conducted a combined Field Training Exercise with the 75th Medical Company Area Support and 568th Medical Company Ground Ambulance, units of the 168th Multifunctional Medical Battalion and the 1st Special Forces Group (Airborne) on Camp Carroll March 22-26. The FTX sought to train on collective tasks, increase mission readiness, overcome



geographical dispersion and strengthen ability to operate in an austere environment.

The team performed Military Working Dog Dental Surgeries, received privately owned animal patient appointments in a field setting, provided food safety support and executed ground ambulance evacuation of military working dogs during a Mass Casualty scenario. Medics and providers were cross training on triage, emergency assessment and stabilization of military working dogs in the event that veterinary care is unavailable.



Gathering for Denim Day

Photo courtesy of Brian Allgood Army Community Hospital Command Suite



On April 4, 2018, the Brian Allgood Army Community Hospital team were joined by Col. Erica Clarkson and Command Sergeant Major Nicole Haines for Denim Day. More than 100 employees wore appropriate denim attire in an effort to support the 2018 Sexual Assault Awareness Month.

SCENE & HEARD

NATIONAL & INTERNATIONAL

By Eric Young-Seok Park

LAST KNOWN PERSON BORN IN THE 19TH CENTURY DIES AT 117



The world's oldest known person, a Japanese woman, has died at the age of 117. Nabi Tajima died in a hospital on her native Kikai Island, one of Japan's southernmost islands. "She passed away as if falling asleep," Tajima's 65-year-old grandson said Hiroyuki. "As she had been a hard worker, I want to tell her 'rest well.'" Tajima reportedly had nine children - seven sons and two daughters - and at least 160 descendants. She claimed her secret to longevity was eating "delicious food" and sleeping well. Born on Aug. 4, 1900, Tajima was the last known person born in the 19th century. She was one of just 37 living supercentenarians - people who are at least 110 years old.

MAN JAILED FOR 50 YEARS FOR STEALING \$1.2M OF FAJITAS

A former youth offenders' centre employee in Texas has been convicted of stealing more than \$1.2m (£860,000) worth of fajitas. Gilberto Escamilla, 53, was jailed for 50 years after authorities discovered he was ordering the Mexican food to the Darrel B Hester Juvenile Detention Centre in Cameron County and selling it on for personal profit. Suspicions were raised after a driver from a food company called the centre's kitchen to tell them an 800-pound (363kg) delivery of fajitas had arrived. The grilled meat dish was not served at the detention centre. Escamilla pleaded guilty to theft by a public servant. "It was selfish. It started small and got bigger and out of control," Escamilla told the court. "It got to the point where I couldn't control it anymore." Officials said he took \$1,251,578 worth of fajitas and delivered them to his own customers. Cameron County Assistant District Attorney Peter Gilman the case was exceptional and asked the judge to sentence Escamilla to 50 years to send a message.



ESCAPED TORTOISE TRAVELED A FIVE-MINUTE WALK IN THREE DAYS



A tortoise that escaped from its owner's yard in Wales was found three days later using a sidewalk just a few blocks away. RSPCA Cymru said the organization was alerted last week to the presence of a spur-thighed tortoise found strolling down a sidewalk. The tortoise was picked up by an RSPCA officer and taken to the International Tortoise Association, where workers were able to track down its owner. The tortoise turned out to be George, a 12-year-old pet belonging to a woman named Karen. She said the tortoise escaped from her yard about a five minute's walk -- by human standards -- from where he was found three days later. "It's always nice to be involved in a happy ending," said RSPCA inspector Julie Fadden.

WOMAN ADOPTS BABY AFTER SITTING NEXT TO PREGNANT WOMAN ON A PLANE



A North Carolina woman became a mother in the most unexpected way. Samantha Snipes (left in photo), who was expecting a baby boy, was in the seat next to North Carolina resident Temple Phipps on a plane about a year and half ago. Snipes said she had just left an abusive relationship at the time. "I was scared and insecure and I wasn't even sure how to live on my own at that point," said Snipes. Phipps, on the other hand, was 42 years old and determined to fulfill her dream of becoming a mother. She had already met with adoption agencies and considered becoming a foster parent, but she was running into problems because she was a single woman. A few days after they exchanged phone numbers, Snipes went into early labor. After the baby was born, she called the woman she had just met. Snipes said, "After talking to Phipps on the flight, it just felt right. She looked like she would be a great mother for him." Phipps took to the newborn baby boy right away. He only weighed 5 pounds when he was born. Phipps named the newborn Vaughn, and Snipes has never second-guessed her decision. More than a year later, they have stayed in touch. Snipes decided to move to the area and now works with Phipps. The two even celebrated Vaughn's first birthday together. Phipps said, "I won the baby lottery for sure." She encouraged hopeful mothers to never give up hope.

TEENS PROTEST SCHOOL DRESS CODE FOR THE RIGHT TO GO BRALESS

Célestine Uhde and three other students at Joseph-François-Perrault High School in Quebec launched the Facebook group "Les Carrés Jaunes" (yellow squares) in response to their school dress code, which prohibits spaghetti straps and shorts that end above mid-thigh.



"We consider that most regulations are archaic and that we have the right to claim certain things," per the group's mission statement, translated from French. "The Yellow Square is our distinctive sign." In a follow-up post, the group stated, "Moreover, we claim the right not to wear brassières and respect when we do not wear them." "We launched the movement to fight the culture of rape and hypersexualization," said Uhde. "We want the equality of men and women both in our treatment and how the world views our bodies," adding that the group chose the color yellow because it's easily recognizable. Noting that bras can be physically uncomfortable, Uhde says, "In an ideal world, women would not need to hide their breasts and freely assume their bodies," because "hiding one's breasts sexualizes them more." School dress code protests often draw controversy for enforcing gender-and-weight discrimination, and lately, bras have become a focal point for some who feel the rules have gotten too invasive.

MORE THAN 50 DEAD GEESE FALL FROM IDAHO SKY

A gaggle of geese was found dead in a parking lot in Idaho Falls, Idaho, in what wildlife officials are calling a "freak accident." The 51 birds were clumped together, soaking wet, as golf ball-sized hail rained down on them during a thunderstorm. But it's not the hail that killed the birds as the migrated north, officials with the Idaho Department of Fish and Game (IDFG) said -- it's most likely lightning that caused them to fall from the sky. IDFG officer Jacob Berl said the birds -- 48 snow geese and three ross geese -- were all centrally located within a 100-yard radius, which is further proof that lightning likely caused their deaths. While it was a shocking sight, Brower said it's not completely uncommon. "Mother nature is sometimes cruel to the wildlife kingdom. We worry about accidents with cars and truck -- sometimes animals are affected just by the weather," Brower said. In his nearly eight years of working with the wildlife department, Brower said he's never seen a case quite like this, though. "It's always sad; it's never something you want to see," he added.



PYEONGCHANG 'RAISED THE BAR' FOR TOKYO 2020: IOC



A successful Winter Olympics in Pyeongchang has "raised the bar" for Tokyo 2020, the International Olympic Committee said, warning organisers to brace for difficult questions and criticism as the Games approach. IOC coordination commission chairman John Coates paid tribute to a "very, very successful" Games in South Korea as he started two days of meetings with Tokyo 2020 officials. "The bar has been raised for you," said Coates as he recalled the "fantastic sporting achievement" and "historic moments with the two Koreas walking together". With around two-and-a-half years until the Tokyo Olympics, Coates advised organisers that their preparation would come under increasing scrutiny. After a difficult start -- with budgetary problems and a series of PR disasters -- Tokyo 2020 organisers say they have wrestled the Games back on track. Organising committee president Yoshiro Mori said that "budget reduction is the highest priority action for us," after fury over the high price tag of the Games.

FIRST-EVER OCEAN PLASTIC CLEANER WILL TACKLE GREAT PACIFIC GARBAGE PATCH



The first-ever machine to clean up the planet's largest chunk of ocean plastic is due to set sail. It's heading to the Great Pacific Garbage Patch, halfway between California and Hawaii, where it will commence collecting the 1.8 trillion pieces of plastic rubbish amassed there by ocean currents. The system uses a combination of huge floating nets (dubbed "screens") held in place by giant tubes, ironically made out of plastic, to suck stubborn waste out of the water. It will then transfer this debris to large ships that will take it to shore for recycling. The beginnings of this intricate system will launch from San Francisco Bay within weeks and will start working by July, with plans to keep extending it thereafter. Ultimately, Ocean Cleanup (the Dutch non-profit behind the project) aims to install 60 giant floating scoops, each stretching a mile from end to end. Fish will be able to escape the screens by passing underneath them, while boats will visit to collect the waste every six to eight weeks.

SINGLE MOTHER MANAGED TO GRADUATE LAW SCHOOL WHILE RAISING 5 KIDS



Ieshia Champs never could have imagined what she would achieve when she grew up, as she bounced around family homes, entered into the foster care system at 7, dropped out of high school, and had her first child at 19. But nearly 14 years and a total of five kids later, the 33-year-old single mother, who is originally from Port Arthur, Texas, is about to graduate from Texas Southern University's Thurgood Marshall School of Law after a difficult journey -- and she says her faith led her through it all. On the toughest days, she admitted she drew inspiration from the five smiling faces she sees every day. "When I look at them, I know there is no way I want them to go back to that. They are my reason to keep going." Champs remains focused on what she wants to do with her doctorate once she passes the bar exam, which is to become a general attorney with a specialization in family law and juvenile law, and eventually become a judge. Champs said, "I want to be the one to fight for those children who are in these horrible living arrangements. To try to help them reconcile with the family, or if not, give them the same opportunity that I had."

"HIGH DEFINITION VINYL" IS COMING NEXT YEAR



People have been claiming that "vinyl sounds better" than digital music including mp3 and CD for years. An Austrian startup is now working on technology that actually improves the quality of vinyl records. Rebeat Innovation is creating "HD vinyl" that the company claims will have "30 percent more playing time, 30 percent more amplitude, and overall more faithful sound reproduction." Rebeat Innovation has received \$4.8 million in funding for the project. The improved quality comes from a new process that digitally converts audio to a 3D topographic map. Using lasers, the map is then cut into the vinyl, resulting in more precise, accurate sound. While the creation process is different, these records will still be able to be played on traditional turntables. The new technique also allows them to avoid using the chemicals required in traditional vinyl production. According to the CEO Günter Loibl, the first HD vinyls are expected to hit the stores by summer 2019.

MOM OFFERS \$500 REWARD FOR 3-YEAR-OLD'S LOST TEDDY BEAR



A New York mom was so desperate to find her 3-year-old lost teddy bear that she offered a \$500 reward for it. Amy Early said her family was on their way home from Disneyland when her daughter, Morgan, began asking where her beloved bear was. "We searched and searched and tore the truck apart, making sure it wasn't in there," said Early. "We were trying to figure out if it made its way out the window." Early said three-year-old "lost it" and she couldn't console her. She's had the teddy bear since birth. That's when the mom began searching garage sale sites to find the same bear, made by a company named Ganz. She even offered \$500 for anyone that might find the bear. Thankfully, a kind woman, who saw her post, reached out and let her know she had the same bear that she'd bought for her son when she was in a similar situation. "She knew it wasn't hers, but it's easing the pain for sure," Early said.

Brigade Receives 2017 Eighth Army Safety Award of Excellence

Photos by Cpl. Yang, Hyun-gyu
Eighth U.S. Army Public Affairs
Story courtesy of 65th Brigade Safety Office



Col. Wendy L. Harter, 65th Medical Brigade Commander, Command Sgt. Maj. Todd M. Garner, 65th Medical Brigade Command Sergeant Major, and Ta'Vares Hickey, 65th Medical Brigade Safety and Occupational Health Manager, received the 2017 Eighth U.S. Army Safety Award of Excellence April 18 from Lt. Gen. Michael A. Bills, Eighth U.S. Army Commanding General, and Command Sgt. Maj. Richard E. Merritt, Eighth U.S. Army Command Sergeant Major. Safety awards enhance Army operations and improve safety awareness through recognition and promotion of individual and organizational accident prevention measures and successes. The Brigade received the award for exceptional accomplishments in the areas of accident prevention, risk mitigation and overall safety.



This award is awarded every fiscal year to the general officer/senior executive service level organization, brigade, garrison (or equivalent) and battalion with the most effective overall safety program. The 65th Medical Brigade leads the way with a positive safety culture that has evolved with the tremendous leadership across the Brigade.

Hickey stated that the one thing about the Brigade is that everyone understands that they are all safety officers and no one is afraid to "do something about it" when they deem something is wrong.

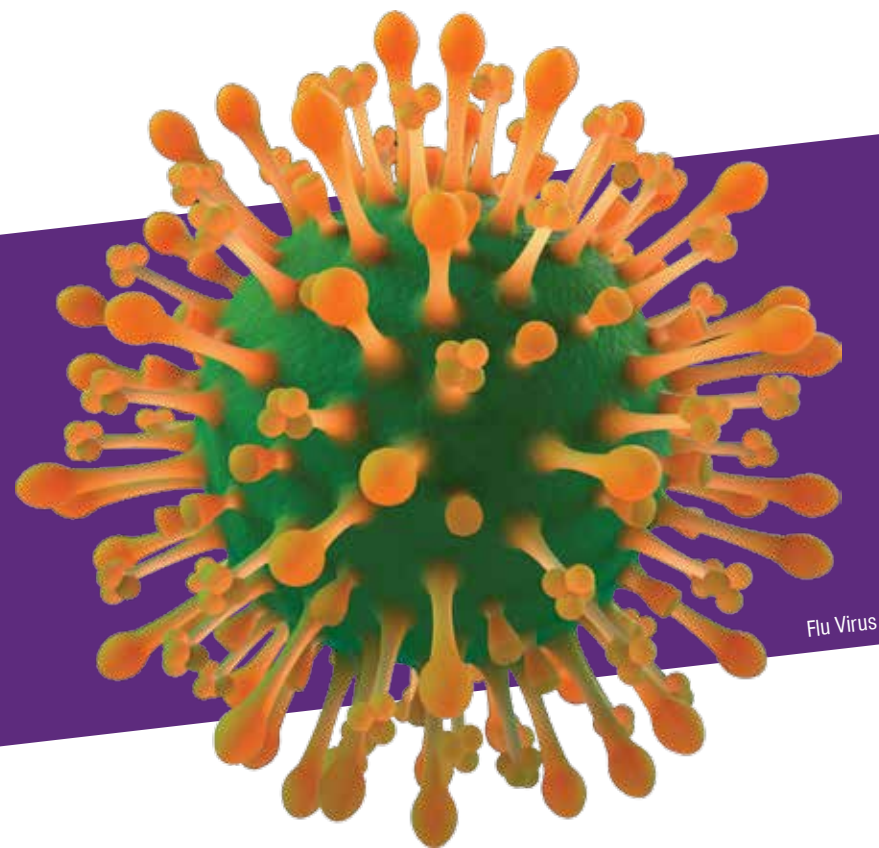
With deliberate risk management almost becoming like an infection within the Brigade, Harter said that the award was an easy one to be nominated as it is, "simply business as usual."

The Brigade not only won the 8th Army level award but also the U.S. Army Pacific Command level award which will be presented at the USARPAC Safety Council on May 16. The 65th Medical Brigade is currently nominated for the Secretary of Army level award.



This year's Flu Season has been Worse than Usual

By Dr. Grace Chen O'Neil
Tripler Army Medical Center



T

he flu is a contagious illness caused by the influenza virus, and during this year's flu season, more emergency room visits, hospitalizations, and deaths have occurred, especially among older people and very young children.

Many do not know that seasonal influenza viruses circulates year-round, but most commonly during the fall and winter months, with activity usually beginning in October and can last until May.

Peak flu activity occurs from December through February. However, the exact timing and duration of each flu season vary from year to year.

The flu is spread mostly by droplets made when someone with the flu coughs, sneezes or speaks. The droplets land on the mouth or nose of people nearby and infect them. Sometimes people can get the flu from touching something that has the flu virus and then transmitting it to themselves by touching their own eyes, mouth or nose.

Symptoms of the flu include fever, chills, cough, sore throat, runny or stuffy nose, body aches, headaches, weakness, vomiting, and diarrhea.

People with the flu may pass on the flu to others one day before their symptoms even begin, and up to seven days after becoming sick; though they are most contagious in the first three to four days of their illness.

Some people can be infected with the flu but have no symptoms and still spread the virus to other people. Once someone has been exposed to the flu, they typically develop symptoms in one to four days.

The flu and the common cold are illnesses with similar symptoms, but the common cold is usually milder than the flu. Colds, unlike the flu, usually do not result in serious health problems. People who have colds more commonly have a stuffy or a runny nose.

Most people with mild illness do not need to seek medical care or antiviral medications. People may feel better after taking Tylenol or Ibuprofen if they

have a fever. Drink lots of fluids as you will lose more water due to an increase in respiratory rate with a fever.

Most people with the flu recover, but some people will have a more severe illness or complications. Complications of the flu include pneumonia, bronchitis, sinus infections and ear infections. The flu can also cause chronic medical problems (such as asthma or heart failure) to worsen.

Some medical conditions which may increase flu complication rate include asthma, heart disease, kidney disease, liver disease, diabetes, people with extreme obesity (body mass index over 40), and people with a weak

agency care if you are having trouble breathing, dizziness, persistent vomiting, chest pain, or abdominal pain.

Bring your child to the doctor if they are unable to eat or take-in enough fluids, not interacting normally, having a fever with a rash, having trouble breathing, crying without tears, or urinating less wet diapers than usual.

People who are sick with the flu should stay at home and practice proper hand hygiene, washing with soap and water for at least 20 seconds to avoid spreading their illness. Also avoid sharing utensils, linens, and dishes with people who are sick.



immune system (due to medications or people with cancer or HIV).

Flu-related deaths occur one to two weeks after the person's infection because the person develops a secondary bacterial infection or because the flu aggravates a chronic illness.

People who are at high-risk for developing flu complications include children younger than five years old (especially kids under two years old), people more than 65 years old, pregnant women (and up to two weeks postpartum), nursing home patients, Native Americans, and people with certain medical conditions.

If you are in a high-risk group or are very sick, you should seek medical care immediately. Please seek emer-

The Centers for Disease Control recommends a yearly flu vaccine to prevent the flu to protect against three to four different viruses. Unfortunately, flu vaccines do not work as well against the H3N2 viruses which have been the most common this year.

But even with reduced vaccine effectiveness, the vaccine can still prevent some flu illness. There is also some data to suggest that if someone does get sick after the vaccine, their condition may be milder.

It is good to remember that people can always contract the flu, even during off-season months; so it is essential to learn more about the flu, and take actions to prevent from contracting the illness.

Army Laboratory Study Examines Impact of Military Physical Exercise on Bone Health

Story and photos by Mallory Rousse
U.S. Army Research Institute of Environmental Medicine

The exercise physiology laboratory located within the U.S. Army Research Institute of Environmental Medicine, or USARIEM, has been bustling with activity this past month with researchers collecting bone health data from 30 female research volunteers in an effort to better understand how bones, and hormones that affect bone regrowth, respond when new recruits start their first days of initial military training, or IMT.

Stress fractures and other musculoskeletal injuries not only hurt the Soldier, but, as the number one cause of medical holdovers, they also hurt Army readiness by costing the Army millions of lost or

restricted work hours and dollars.

In fact, according to last year's statistics, about 20 percent of female recruits and five percent of male recruits can suffer from some form of stress fracture during IMT due to the novice warrior's inability to withstand unaccustomed, repeated stress to their bodies, such as marching with body armor. Women beginning IMT with poor vitamin D status are especially vulnerable to these injuries.

USARIEM's military performance and nutrition teams made an Army-wide impact in 2017 when it came to preventing injuries and improving readiness. USARIEM researchers conducted separate field studies that led to developing the Occupational Physical

Assessment Test, or OPAT, which assesses a recruit's physical performance capabilities to determine if they should be allowed to join the Army, and the Performance Readiness Bar, or PRB, a calcium and vitamin D-fortified snack bar developed to strengthen bones.

Since the Army began administering the OPAT to all recruits in 2017 and since all Army Basic Combat Training schools began distributing the PRB in 2018, Soldiers have been able to begin their careers with a slimmer chance of experiencing career-threatening occupational injuries.

Dr. Erin Gaffney-Stomberg, the principal investigator of the current USARIEM women's bone health laboratory study, and her

team realize that in order to create more countermeasures against musculoskeletal injuries, it is also important to understand how the human skeleton responds to militarily-relevant exercise, especially when a freshly recruited Soldier is completing IMT for the first time.

"We know that during IMT, that period of seven to twelve weeks when a civilian first enters the military and undergoes a series of trainings, the risk of stress fracture is higher," said Gaffney-Stomberg, a research physiologist from USARIEM's Military Performance Division. "We also know that bone turnover increases. In other words, bone formation and bone resorption markers or hormones in the blood go up with training. What

During a women's bone health data collection in the exercise physiology laboratory inside the U.S. Army Research Institute of Environmental Medicine, or USARIEM, Dr. Erin Gaffney-Stomberg, middle, the principal investigator, and Spc. Alexis Gonzalez, left, assist a female research volunteer in donning body armor during a simulation of a militarily relevant exercise. This data collection is part of USARIEM's effort to understand how hormones that affect bone regrowth, specifically the parathyroid hormone, or PTH, react when new recruits start their first days of initial military training, or IMT.

we do not understand is some of the reasons why these hormones go up and whether or not these changes are beneficial or detrimental to bone."

Gaffney-Stomberg and her team have zeroed in on the parathyroid hormone, or PTH, which

is secreted from four parathyroid glands in the neck. According to Gaffney-Stomberg, PTH regulates calcium levels in the blood by increasing the levels when they are too low. The hormone does this through its actions on the kidneys, bones and intestines.

"The parathyroid hormone increases during training for Soldiers and during other types of intense exercise for civilians, and it is known to stimulate the release of calcium from large calcium stores in the bones into the bloodstream, decreasing the formation of new bone," Gaffney-Stomberg said. "In this study, we are researching to understand why PTH goes up with the initiation of exercise."

Both men and women can



produce PTH. However, Gaffney-Stomberg noted that targeting women as the study demographic would not only lead to gaining insight into women's bone health, but it would also provide data that Army researchers could use to prevent stress fractures in all Soldiers.

"With women being integrated into combat roles, there is a greater need for research that can help us develop countermeasures against musculoskeletal injuries," Gaffney-Stomberg said. "Once we understand what PTH does in people who are at higher risk of stress fractures, we can use this information to improve existing injury prevention guidance, including developing dietary interventions and proper exercise guidance."

One of the main culprits of stress fractures is recruits completing exercises they are unaccustomed to for longer periods. In order to replicate this common incident during IMT in the lab, the researchers had study volunteers complete a load carriage exercise, which would simulate recruits marching in body armor.

For this study, the research volunteers not only had to be women. They had to be civilians.

"We are trying to understand the initial bone and calcium kinetic response to a militarily relevant exercise," Gaffney-Stomberg said. "We want someone who has not been through military training before, such that their bones are naïve or unaccustomed to that type of exercise."

During the load carriage exercise, each study volunteer wore body armor that was weighted at

30 percent of her body weight. The volunteers walked at different speeds and grades on a treadmill, exercising at about 65 percent of their maximum effort, which the researchers calculated during the beginning of the study through an aerobic fitness test. Study volunteers spent three days in USARIEM's exercise lab out of a six-day period either exercising or resting.

To understand how each volunteer's PTH levels changed during and after the load carriage exercise, the researchers needed a way to

"With women being integrated into combat roles, there is a greater need for research that can help us develop countermeasures against musculoskeletal injuries."
— Gaffney-Stomberg

track where calcium traveled in the body. The researchers did this by giving the volunteers stable calcium isotopes both orally and through an IV on the first day of the study. Gaffney-Stomberg explained that these isotopes were non-radioactive and served as a safe way to record a person's calcium levels. The researchers recorded these hormone changes by collecting urine and blood samples from volunteers during and after the treadmill exercise.

Since diet can also affect a person's PTH levels, the researchers provided the study volunteers with all of their food, which was supposed to mirror the amounts of calcium each volunteer normally ate at home.

The researchers will continue their data collection for the rest of 2018, and they plan to publish their results by next year. Despite being a small lab, USARIEM has made a significant mark in the Army's effort to prevent injury, and they will continue to do so in the future. This study is one of several USARIEM studies focused on prevention and reduction of musculoskeletal injuries among Soldiers.

"There are multiple factors that can impact a person's risk of developing a stress fracture," Gaffney-Stomberg said. "Some of those factors are not modifiable, such as being female. There are also genetics that can place people at higher risk. Then, there are modifiable factors, such as nutrition status and physical fitness. At this point, there is guidance on what the known risk factors are, and then once a person experiences a bone fracture during training, there are clinical care guidelines for how to treat that person. Typically, that involves taking a calcium supplement, as well as some rehabilitation."

"Unfortunately, about 60 percent of male and female recruits who experience a stress fracture will drop out of the military. If we can reduce the number of people who get injured during IMT, we can reduce the number of people whose military careers have prematurely ended."

GETTING OUT SOON? ALREADY OUT? HAVE QUESTIONS ABOUT YOUR BENEFITS OR THE VFW? HELP IS ON THE WAY!

VFW service providers are coming to Korea to help you and your family understand your VA benefits. VA-accredited advocates from the VFW will be on hand to help you file your VA benefit claims on the spot and answer your questions.



VFW-accredited representatives will meet one-on-one with you on a first-come, first-served basis.



Please bring:

- Your photo ID.
- Complete medical records (military and/or civilian).
- Any prior service DD-214s or proposed date of separation.
- Banking information (required for VA direct deposit).
- Any dependent spouse or child information.

To file on the spot, you must be:

- A service member who is getting out of the military within the next 6 months.

OR

- A veteran who has been discharged under conditions other than dishonorable.

Our accredited representatives will be on hand at these convenient locations:

Date	Base	Times	Location
May 16	Yongsan Garrison	0900, 1300, 1800 hrs.	Dragon Hill Lodge
May 17	Camp Walker	1300, 1730 hrs.	Evergreen Club
May 18	Camp Carroll	1300, 1730 hrs.	Community Activity Center
May 19	Songtan	1400 hrs.	Pacific Hotel
May 20	Osan Air Base	1400 hrs.	Enlisted Club
May 21	Camp Humphreys	0900, 1400, 1730 hrs.	Warrior Zone
May 22	Camp Humphreys	0900, 1400 hrs.	Warrior Zone

The VFW is a congressionally-chartered veterans service organization, recognized by the Department of Veterans Affairs for the purposes of preparation, presentation and prosecution of claims for benefits administered by VA. By law, VFW claims assistance is provided to all veterans at NO COST and under NO OBLIGATION -- just one of the ways the VFW proves NO ONE DOES MORE FOR VETERANS.





‘ANGEL IN FATIGUES,’ FORMER 8TH ARMY NURSE AND MOST DECORATED WOMAN IN ARMY HISTORY MEMORIALIZED AT BRIGADE HEADQUARTERS

Story and photos by William Wight
65th Medical Brigade Public Affairs Office



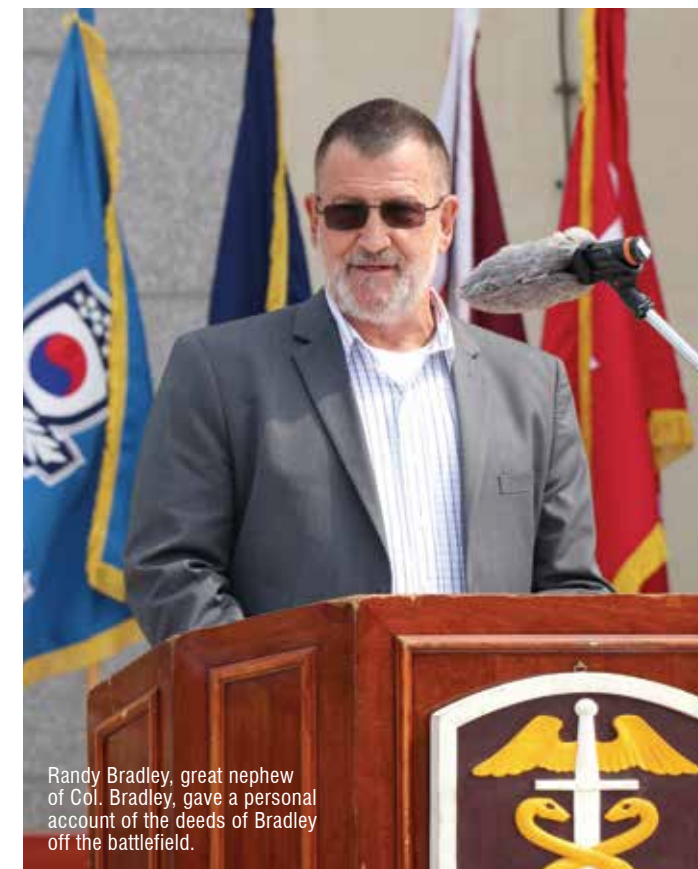
On March 28, 2018, the Soldiers of the U.S. Army Medical Department Activity Korea, 65th Medical Brigade, 8th U.S. Army, U.S. Army Garrison Humphreys, civilians and family members gathered in front of building #3033 for a ceremony to memorialize the Brigade Headquarters as the Col. Ruby G. Bradley Hall.

As the cornerstone of the medical command in Korea, Col. Wendy Harter, Commander of the 65th Medical Brigade and MEDDAC-Korea, said, “Colonel Bradley was a notable figure in women’s history who dedicated her life to caring for the sick, injured and wounded both on and off the battlefield.”

Bradley is memorialized in perpetuity with the Brigade and MEDDAC Korea team as the former chief nurse of 8th Army and Japanese Prisoner of War. The Brigade Headquarters building in Yongsan was once a Japanese interment compound and building 3033 was once occupied by 8th Army prior to the Brigade’s transition to Humphreys.

Guest speaker at the event was Lt. Gen. Michael Bills, Commander Eighth U.S. Army who said that he was proud to dedicate a building to a person who made a big difference in taking care of Soldiers.

When she left Korea in June, 1953, Bradley was giv-



Randy Bradley, great nephew of Col. Bradley, gave a personal account of the deeds of Bradley off the battlefield.



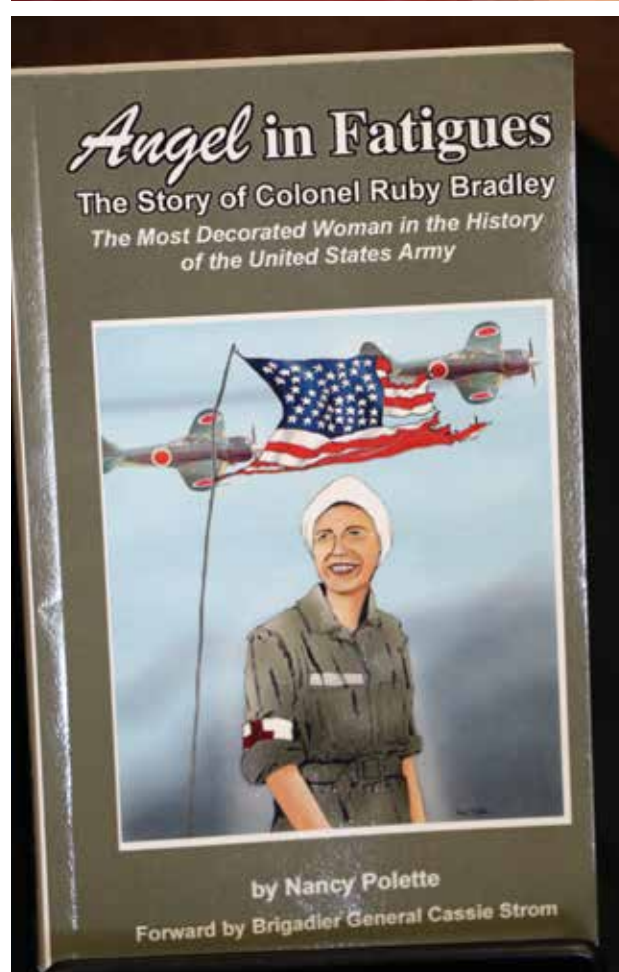
en a full-dress honor guard ceremony, the first woman to ever receive a national or international guard salute.

"I am impressed with the Brigade and all of its accomplishments and no doubt Col. Bradley would be proud of your efforts as a Brigade that is leading from the front in readiness," said Bills.

The general continued that Bradley wanted to be remembered just as an Army nurse and all should remember her as one of the greatest Army nurses in history.

Arriving to Korea from Kentucky, Randy Bradley, the great nephew of Col. Bradley, gave personal accounts of the deeds of Bradley off the battlefield. "Aunt Ruby always said that she held no ill feelings towards anyone to include the enemy. When someone remarked she was a hero, she replied that she was not a hero and just wanted to be remembered as an Army nurse."

Harter concluded, "Her legacy and professionalism resonates daily in the mission execution of the 65th Medical Brigade and MEDDAC-Korea. Her selfless service remains an example for all of the Pacific Medic Team. In the Col. Ruby G. Bradley Hall, the 65th Medical Brigade and MEDDAC Korea will conduct the medical mission command required to provide health service support and force health protection to 8th Army and U.S. Forces Korea. Here we will continue to save lives in the spirit of Col. Bradley, the 'Angel in Fatigues' is now part of us and part of our future."



3rd Annual
Baby & Family
Expo

Saturday, 19 May, 1000-1300
121 CSH BAACH Lobby

In partnership with

Building Brighter Futures

There will be:

- Parent Support Organizations
- Games
- Information Booths
- Light Refreshments

Open to all DoD ID Card holders and their dependents.

RSVP by **16 May** at yongsanbabyfamilyexpo@gmail.com
or registration forms are available at ACS.

For more details, contact ACS at 738-7505 or visit USAG Yongsan ACS, FMWR Facebook page.

National MENTAL Health MONTH

WHY SCREEN?

Mental health screenings are a key part of mental health and allow for early identification and intervention and help bridge the gap. Early treatment may also lessen long-term disability and prevent years of suffering.

HOW SCREENING CAN HELP:

Early detection, assessment, and treatment can have a significant impact and prevent problems from worsening.

mentalhealthscreening.org/programs

MAY 2018

History of the 65th Medical Brigade

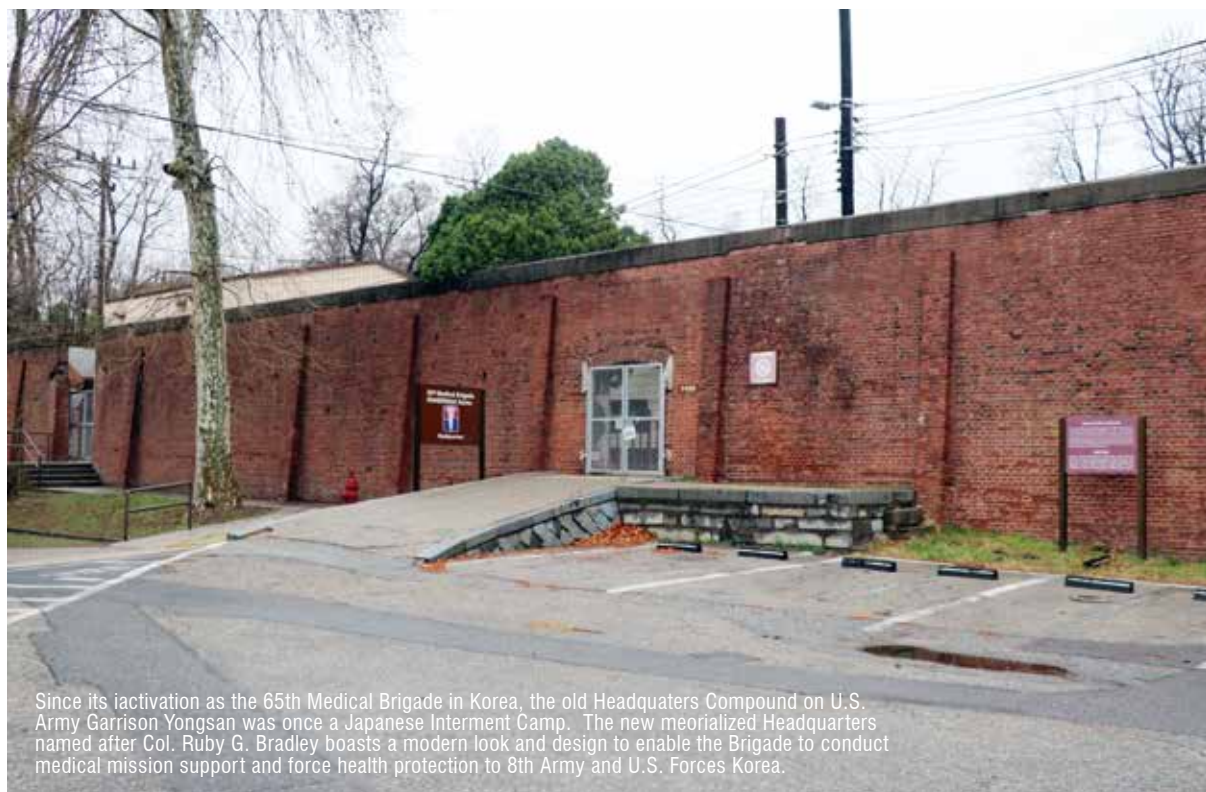
The 65th Medical Brigade was constituted on October 18, 1927 in the Regular Army as the 15th Medical Regiment. It was re-designated as the 65th Medical Regiment on May 28, 1941 and activated on June 1, 1941 at Fort Oglethorpe, Georgia. On March 10, 1944, the unit was re-designated as the 65th Medical Group. The 65th Medical Group was inactivated on January 30, 1946 in Germany.

The 65th Medical Group was reactivated on June 25, 1958 in Korea as a subordinate unit of Eighth Field Army Support Command, and later on October 1, 1968 as a Major Subordinate Command of Eighth Army. The 65th Medical Group was inactivated in Korea in 1971.

On October 15, 2008, the 18th Medical Command was inactivated, and the 65th Medical Brigade was activated on October 16, 2008.

Shoulder Sleeve Insignia (SSI):

Maroon, white, and the Caduceus historically are associated with the Army Medical Corps. Gold is emblematic of excellence and high ideals. The sword is pointing downward to indicate a military unit with a non-combatant posture. The serpents intertwine the sword blade seven times to represent the five campaign streamers awarded the unit during World War II, Normandy, Northern France, Rhineland, Ardennes-Alsace, and Central Europe, one for the Meritorious Unit streamer embroidered European Theater, and one for the unit's service in the Republic of Korea. The strong and enduring alliance between the United States and the Republic of Korea is highlighted by the wavy division of the patch in the manner of the Taeguk, with maroon (for red), above and blue, below.



Since its iactivation as the 65th Medical Brigade in Korea, the old Headquarters Compound on U.S. Army Garrison Yongsan was once a Japanese Interment Camp. The new meorialized Headquarters named after Col. Ruby G. Bradley boasts a modern look and design to enable the Brigade to conduct medical mission support and force health protection to 8th Army and U.S. Forces Korea.



We make...

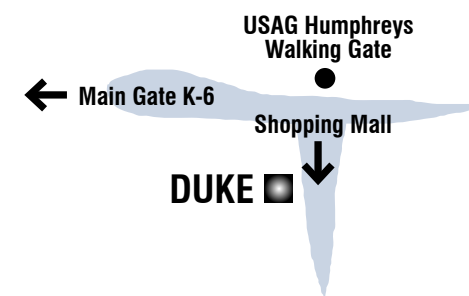
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I am proud to serve you!



COL. RUBY G. BRADLEY

The Life and Times of the Army's Most Decorated Female Soldier



Col. Ruby G. Bradley is the Army's most decorated female Soldier, and was the third woman in Army history to be promoted to the rank of Col.

She was born on December 19, 1907 in Spencer, West Virginia, to Fred and Bertha Bradley. In 1926, she graduated from Glenville State Teachers College, and worked for four years as an elementary school teacher in Spencer, West Virginia. She graduated as a surgical nurse from the Philadelphia General School of Nursing in 1933.

Col. Bradley entered the Army Nurse Corps as a surgical nurse in 1934. Following her initial assignment to Walter Reed General Hospital in Washington, DC, she was assigned to the Station Hospital at Fort Mills, Philippine Islands. When the Japanese attacked the Philippine Islands in December 1941, Col. Bradley was serving at Camp John Hay, in Baguio on the island of Luzon. She was captured three weeks after the initial attack. In 1943, she was moved to the Santo Tomas Internment Camp in Manila. While there she and the other nurses earned the title "Angels in Fatigues" from fellow captives for providing medical help and other assistance to the adult prisoners and their children. Col. Bradley sought to feed starving children by shoving food into her pockets whenever she could, often going hungry herself. The weight she shed made room in her uniform for smuggling surgical equipment into the prisoner-of-war camp that she used to assist in 230 operations and help to deliver 13 children. On February 3, 1945, U.S. troops stormed the gates of the Japanese camp and liberated Col. Bradley and her fellow prisoners, ending her three years of captivity.

Five years later, Col. Bradley returned to the battlefield during the Korean War. She was assigned as the Chief Nurse of the 171st Evacuation Hospital in Daegu, Korea. While there she refused to leave until she had loaded the sick and wounded onto a plane while surrounded by 100,000 Chinese soldiers. She escaped just in time, as her ambulance exploded behind her. "You got to get out in a hurry when you have somebody behind you with a gun," Col. Bradley said once in a TV interview.

In 1952, Col. Bradley was assigned to the Medical Section of Headquarters, 8th Army. Following the Korean War, her assignments included Fort McPherson, Georgia, Heidelberg, Germany, and Fort Sam Houston, Texas. After three decades of military service, Col. Bradley retired from the Army in 1963.

Following her retirement from the Army, Col. Bradley worked for 17 years in the private nursing service in Roane County, West Virginia. She passed away in May 2002. She is buried in Arlington National Cemetery.

Colonel Bradley's Military Awards and Decorations

Legion of Merit with 2 Oak Leaf Clusters

Bronze Star Medal with 1 Oak Leaf Cluster

Army Commendation Medal with Oak Leaf Cluster

American Defense Service Medal with Foreign
Service Clasp

American Campaign Medal

Asiatic-Pacific Campaign Medal with 2 bronze service stars for participation in the Philippine Islands and Luzon Campaigns

World War II Victory Medal

Army of Occupation Medal with Japan Clasp

National Defense Service Medal

Korean Service Medal with 1 silver star (in lieu of 5 bronze service stars) and 2 bronze service stars for participation in the UN Offensive, Chinese Communist Forces Intervention, UN Summer-Fall Offensive, Second Korean Winter, Korea Summer-Fall 1952, Third Korean Winter, and Korea Summer-Fall 1953

United Nations Service Medal

Philippine Liberation Ribbon with 1 Bronze Service Star

Philippine Independence Ribbon

Distinguished Unit Emblem

Philippine Presidential Unit Citation

10 Overseas Bars

My Experiences as a Prisoner of War

Editor's Note: Excerpts of an essay Colonel Ruby Bradley wrote, reflecting on her experiences as a prisoner of war for 37 months in the Philippines during World War II, are printed below.

To be captured by an enemy in time of war could not be considered a mark of distinction by any standard. Nevertheless, during every major conflict in which the United States has been involved a certain percentage of her citizens has been detained--prisoners of war. The percentage is not always the same nor is the status of the individuals. That there are always some prisoners of war is the point. The fact that there were US Army Nurses captured during World War II necessitates a chapter devoted to the subject in any history of the corps--if it is to be a factual account

of the corps. Although this event, the capture of the ANC officers, is not one which brings prestige to the corps, the Army, or the nation itself; the fact that these nurses survived and were a credit to their country during and following the episode does reflect credit upon them, their corps and the United States.

The lessons learned that would help in a like situation would be difficult to enumerate. Whether one could profit from such an experience would depend upon the individual's personality. People are human. They want a place to live, food, companionship and freedom - in a word: security.

The question is - when an individual returns to a world of free people will he be able to forget everything that he has experienced, will he be embittered, broken and disillusioned, or will he have enough strength to find purpose and meaning in life again. In reality, should he be expected to go counter to the laws of human behavior by truly forgetting his experience or should he concentrate upon whatever small good the experience provided, guard those small bits of good, using them as chinking to rebuild the wall of his life?

Those who survive internment could be most easily classified into

two categories. First, the antisocial, evidencing a completely selfish disregard for everyone and everything not directly related to the enhancement of the "self" concept. In this category the generalized attitude may be expressed as: "I have done my share, let others do theirs and endure suffering and hardships." Obviously, these would be the unhappy ones, the ones whose readjustment to the American standard of living is actually minimal.

The second, the empathetic, evidencing more humanity than ever before. Humanity is here defined as a combination of the best principles of human behavior, based upon the best philosophical and religious tenets known to man. This individual will have learned here something that no other form of education could have taught him. He will have learned the value of life - his own, and that of others - and the worth of freedom too.

We need, therefore, a well

adjusted, well educated and disciplined individual who can cope with adversity - roll with the punches so to speak - one who when faced with worms in his food can say: "Aha! Protein! Just what my country and I need at this moment. This I will eat for the good of my country."

Tolerance of ones self and tolerance of others was a daily lesson. Of course, this must have been learned long before a period of adversity. Realization and acceptance on ones self and others is not always "understanding."

The idea of the value of freedom was enhanced. Its meaning was made clear, for perhaps the first time, to those who had enjoyed it for their entire lives until this period of internment which suddenly eliminated what had been a constitutional right of the US citizens who were captured. The many privileges, normally enjoyed every day, become very cherished when they no longer exist: Freedom to speak without censor-

ship; freedom to communicate in writing without censorship; freedom to travel; freedom to enjoy various news media, and the like.

It was immediately evident that survival required belief in and practice of the philosophy of utilitarianism. Without the application of this philosophy, survival would have been even less easily attained. One soon learned that the value of an item could be measured by its utility.

When supplies and equipment are, or have become practically non-existent, there is no substitute for well-prepared workers, be they physicians, nurses or teachers, or other professional, paraprofessional or nonprofessional personnel. What is lacking in equipment can be made up, to a point, by people who are properly prepared.

Perhaps the major lesson learned, and certainly the most difficult to accept was that we were not thoroughly prepared to win an armed conflict.



○ Col. Ruby G. Bradley

**The Col. Ruby G. Bradley Hall
(65th Medical Brigade Headquarters)**



What is the Status of the **New BAACH?**

Story and photos by William Wight
65th Medical Brigade Public Affairs Office

Part 3

Army Corps of Engineers Explain Electrical Design

In continuing efforts to update the readership on the status of the new Brian Allgood Army Community Hospital and Ambulatory Care Center at U.S. Army Garrison Humphreys, the Pulse 65 editorial staff conducted an interview with the projects electrical engineers from the U.S. Army Corps of Engineers, Steve Morehead and Steven Lee regarding the design and construction of the hospital's electrical system.

Q Gentlemen, there have been rumors that the hospital's electrical design was constructed to Korean standards of 220volts rather than 120volt standards. How would you describe the electrical system in the new hospital?

A The electrical system at the hospital complies with the U.S. standards in terms of voltage but as a critical facility, the electrical system for the hospital must meet far more stringent criteria. In addition to appearing in Part III of Art. 517 of the NEC (NFPA 70), requirements for essential electrical systems can be found in Chapter 4 of NFPA 99 Standard for Health Care Facilities. A major responsibility of ours to the Project Delivery is to ensure we comply with these requirements and standards.

Q Can you describe the power structure of the current newly built facility?

A The essential power systems in a health care occupancy consist of life safety branch, critical



During his April 3, 2018 visit to South Korea, the Regional Health Command-Pacific commander, Brig. Gen. Bertram Providence (above right) visited the Brian Allgood Army Community Hospital construction site at U.S. Army Garrison Humphreys. The General was in Korea for the Senior Executive Review Group meeting focusing on the governance of the new hospital construction.

branch, and equipment branch of which all three are required to be backed up by a standby power system (such as generators) in order to keep the hospital up and running for 96 hours in the event of a power grid failure, natural disaster or other emergency situation. The system must be robust and tested monthly, semi-annually and yearly to ensure it can operate under any and all circumstances.

Life safety branch is the power required to safely egress the building and includes egress lighting, exit signs, powered doors in the path of egress, and the fire alarm system. To add confusion to the limitations of this branch of power, the National Electrical Code also includes elevator controls and lights, generator set accessories, medical gas alarms, and other communications and notification systems required to egress the building. This does not include elevator power, medical gas pumps, or the public address system that plays the lullaby when a baby is born in the hospital.

The critical branch is more straightforward with its power “direct patient care.” If it directly affects the wellbeing of a patient, it is on critical branch. The basic definition is receptacles and lighting in patient care areas. As electrical designers, we need to use our judgment on what this specific part of the NEC



constitutes that is not already indicated in the previous eight subparts. Be mindful that other portions of the Code require normal branch, or an alternate critical branch, source of power in most locations that require critical power. This is done to ensure there is at least some power in each room is available upon a fault. The logic is based on the fact that the probability of two branches of power failing at the same time is far less than likely than for a single branch failure. The code does not allow us to serve patient care areas with a single source of critical branch power. There must be a redundant power scheme for these areas.

The final choice for the essential systems is equipment branch power. This, again, is rather intuitive regarding what is required on this source of power. This is where our medical gas equipment and other mechanical systems reside. The items required to be either on automatic or delayed equipment branch power include systems such as operating room heating and air conditioning (HVAC), heating for patient rooms, cooling for data/server rooms and elevators for getting patients to and from the Intensive Care Unit or



When standards aren't enforced or followed, that's when an mishap is likely to happen.

Whether handling an assigned or a privately owned weapon, remember to always **THINK** safety:

TREAT EVERY WEAPON AS IF IT IS LOADED.

HANDLE EVERY WEAPON WITH CARE.

IDENTIFY THE TARGET BEFORE YOU FIRE.

NEVER POINT THE MUZZLE AT ANYTHING YOU DON'T INTEND TO SHOOT.

KEEP THE WEAPON ON SAFE AND YOUR FINGER OFF THE TRIGGER UNTIL YOU INTEND TO FIRE.

YOUR LIFE, OUR LOSS

When a Soldier dies in a preventable accident, it has a detrimental effect on the morale and welfare of the unit. That Soldier's absence, however, extends far beyond the Army because often they also leave behind a heartbroken family, friends and colleagues. Remember, **IT'S YOUR LIFE, BUT OUR LOSS.**

Visit our **Range and Weapons Safety Toolbox** at <https://safety.army.mil> for more information about safe weapons handling.

Operating Room in the case that there are complications with their recovery.

Q What about those items that do not fall into these power categories?

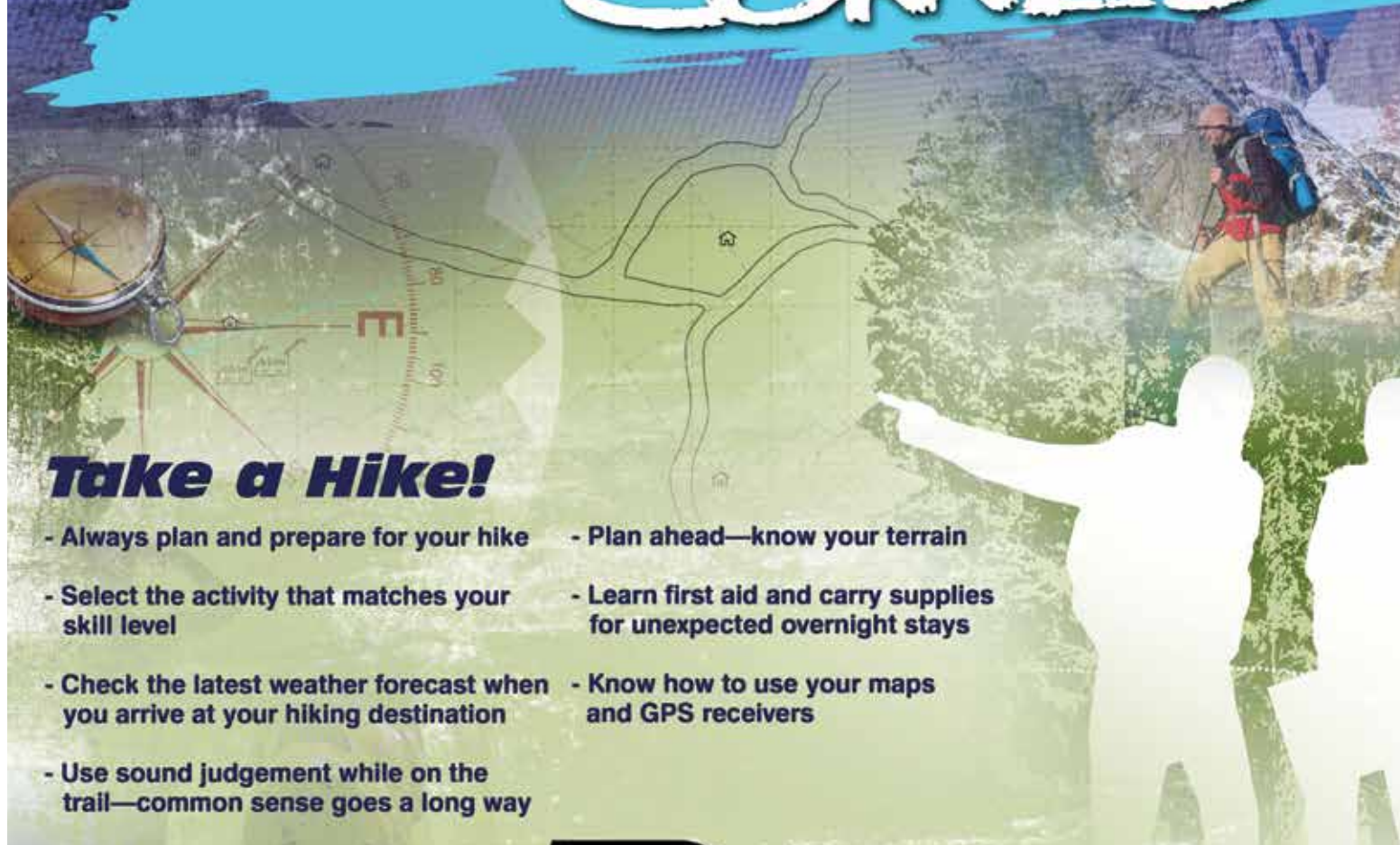
A Those items that are not in the “required” equipment branch power list still have the opportunity to receive generator power. They are permitted to be on the “optional” branch of power. Often we see radiology equipment, non-patient care HVAC units, and chillers on this branch of power. The project’s emergency power system can gauge the Hospital’s demand loads and add these additional loads as power becomes available.

Q What happens if there is a power fault within the system?

A Each power system (life safety, critical & equipment) is required to be separated from other sources with a few exceptions. This extra precaution is taken to ensure that if there is a fault in one emergency power branch the others are not affected because they are physically separated from each other. For example, if there was an electrical fire in one equipment branch circuit the life safety and critical branches would be unaffected. This would allow patient care to continue and allow egress of the building should a fire continue to spread.



HERE IT COMES



Take a Hike!



- Always plan and prepare for your hike
- Plan ahead—know your terrain
- Select the activity that matches your skill level
- Learn first aid and carry supplies for unexpected overnight stays
- Check the latest weather forecast when you arrive at your hiking destination
- Know how to use your maps and GPS receivers
- Use sound judgement while on the trail—common sense goes a long way

READY ... OR NOT?

<https://safety.army.mil>

Ready ... or Not is a call to action for leaders, Soldiers, Army Civilians and Family members to assess their readiness for what lies ahead - both the known and unknown. #Armysafety

So are **YOU** ready ... or not?





Samsung Construction Team Addresses Challenges

The Pulse 65 editorial team was able to catch up with Samsung C&T, the construction contractor for the new Brian Allgood Army Community Hospital project at U.S. Army Garrison Camp Humphreys. As part 3 of our 5 part series on the completion of the hospital project, the following is our interview with the construction contractor's team as they near the June 30 construction completion date.



Q At some point during the projects placement there were some significant quality challenges to overcome. Even today, rumors linger on the adequacy of the buildings foundation and electrical systems. How have you addressed those challenges and what strategies were employed to prevent reoccurrence?

A “In fact, the project has been quite challenging in addition to differences in codes and standards and there are both cultural and language challenges that had to be successfully overcome to reach the point we are at today having completely remediated all of our U.S. partners quality concerns and nearing the completion of the hospital construction. One of the challenges stems from the lack of Tiered Governance, even if the working level could conceive of a resolution to a given problem, we had no way of confirming with leadership if our preferred course of action would be supported. This was problematic because many of our preferred solutions involved the need for more resources, both manpower and funding.”

Q What you see as your company's future building similarly complex hospital projects - given your

understanding of the project, how have your skills been enhanced by this project, why does that make you have something more valuable to offer in the future as a result?

A “Simply put, a U.S. hospital constructed to U.S. standards under U.S. supervision and accredited by an independent accreditation body, such as the Joint Commission, is a very elite building capability possessed by very few contractors, even on U.S. soil. The complexity of building systems, their integration with one another and the Fire and Life Safety systems necessary to achieve the Defend-In-Place strategy is quite simply unparalleled. Samsung C&T works on very complex projects, including state-of-art semiconductor manufacturing facilities, power plants, dams, bridges, iconic apartments and skyscrapers both on and off-shore throughout the world. Because of the complexity and oversight necessary to be successful on the hospital project we feel uniquely qualified to take on projects involving similar regulatory oversight anywhere in the world.”

Q When do you see construction completing and your understanding of follow on activities neces-



sary to start up patient care operations in the new hospital? What do you see as the construction completion schedule? We hear that it is this June completion and government acceptance in October?

A “Samsung remains committed to the June 30, 2018 Construction Completion Date. The Project Delivery Team (PDT) consisting of the Designer of Record, Republic of Korea Government, Corps of Engineers and the U.S. Army Health Facilities Planning Agency are working on two rather significant design challenges involving two of the most highly regulated areas, namely the Bio Safety Level 3 Lab and the Pharmacy compounding areas. Both of these modifications require materials only manufactured in the U.S. and compliance with very specific regulations intended to both protect public safety and patient/staff infection prevention. These two changes will push the construction completion in these specific project areas to late-summer 2018, however. They are not expected to impact transition to patient care activities, however and the PDT has management strategies in place ensure we are limiting schedule delays on the construction side, including the building commissioning



activities so critical to ensuring the hospital and all its building systems work as the designer intended.”

Q Can you explain the ‘green’ aspects of the project beyond LEED?

A “Korea has always been a very green country. Because of the challenges with transporting raw materials needed to produce what we do for the world’s economy, we’ve followed the “three Rs” (Reduce, Reuse and Recycle) from our post-war days. The tenants of the U.S.’s LEED program is very compatible with what we do in Korea. It is through this projects design and construction phase, every effort was made to source-locally to achieve stringent U.S. environmental and safety standards. This not only avoids transportation costs but the burning of fossil fuels needed to transport products from half a world away. One example of a product that we were successful in sourcing-locally is a modular wall system where the original product would have originated in Canada. Samsung nominated and the U.S. accepted a modular wall system designed and used throughout Europe but also produced here in Korea that meets all of the requirements or equivalencies for the originally specified product. The end result will be a product that the U.S. can source locally when they need to change any of their modular wall systems as medical practice change.”



**SILENCE IS GOLDEN...
UNLESS IT'S PERMANENT.**

**TURN DOWN
THE VOLUME**

**PROTECT YOUR HEARING...
IT'S A NOISY WORLD.**



DEPARTMENT OF DEFENSE
**HEARING CENTER
OF EXCELLENCE**



VISIT [HTTP://HEARING.HEALTH.MIL](http://hearing.health.mil) TO LEARN MORE ABOUT HEARING LOSS PREVENTION.

EVENT SPOTLIGHT

Seoul Jazz Festival 2018: May 19-20

12th

SEOUL
JAZZ
FESTIVAL
2018

5.19 SAT - 5.20 SUN
OLYMPIC PARK

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f /seouljazzfestival
ig /seouljazzfestival
t /seouljazzfest



5.19 SAT

1st-2nd Daily Line up

Ms. Lauryn Hill

Maceo Parker NEW

Chris Botti

Iron & Wine

Gretchen Parlato

에픽하이 EPIK HIGH NEW

루시드폴 with 조윤성 & 황호규 LUCID FALL TRIO NEW

이하이 LEE HI NEW / Loyle Carner NEW

Khruangbin NEW / The Soul Rebels NEW

AND MANY MORE



5.20 SUN

Branford Marsalis Quartet NEW

Jessie J NEW

Arturo Sandoval & His All-Star Band

Clean Bandit

Rhye / PREP NEW

Children of the Light

: Danilo Pérez, John Patitucci, Brian Blade

The Duke Ellington Orchestra NEW

헤이즈 Heize NEW

리처드파커스 RICHARD PARKERS NEW

AND MANY MORE

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The United Spouses Club (USC) would like to Thank Everyone for their support this year!! With the help of our amazing USAG Humphreys Community we were able to give away

\$92,000 in various Grants and Scholarships in 2017-2018

In 2016-2017, The USC gave away \$45,000

In 2015-2016, The USC gave away \$32,500

The Painted Door Thrift Store has contributed 51% of it's proceeds' to the Scholarship and Welfare fund.

Your continued support with sales at the Painted Door Thrift Shop, memberships to the United Spouses Club, USC's monthly luncheons and events such as the Holiday Bazaar and Mardi Gras are what allows us to award Grants and Scholarships to deserving recipients.....

Thank You

The United Spouses' Club Board Members, 2017-2018



Congratulations to our United Spouses Club President

*****Tracy Schreurs*****

Volunteer of the Year (family member category).

This honor was well deserved as she has tirelessly and passionately given so much, not only to the Club, but to our amazing community since 2015.

Tracy has served as president of the United Spouses Club Since February of 2016. The United Spouses Club's mission is to develop a spirit of community responsibility and to provide opportunities for social, cultural and creative pursuits. Membership consists of a very diverse group of both military and civilian spouses and includes young and old alike. During her time as President, membership swelled to over 150 members. As president, Tracy managed 28 board members, all of whom possess unique skills and responsibilities. The board, under Tracy's supervision, carried out very successful community events. Revenue generated from these events and sales at the Painted Door thrift shop enabled the United Spouses Club to have a very generous Scholarship and Welfare program. Tracy's organizational skills, leadership ability and passion have truly pushed the organization forward.

Tracy has dedicated over 2,000 volunteer hours this year alone as the United Club's President. Her volunteer hours since taking the reins as President in 2016 have exceeded 5,000 hours, earning Tracy the Lifetime Achievement Presidential Service Award. Tracy's contributions have benefitted United Club members, families, Soldiers and our Korean partners within the USAG Humphreys community. Her service and dedication to this community is second to none.



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A Closer Look at Recent TRICARE Plan Changes

By Colonel Michael Place
Madigan Army Medical Center

As anyone who uses TRICARE can attest, 2018 has ushered in a number of changes to TRICARE. In response to many inquiries from patients, let's address some of the recent TRICARE plan changes.

With changes from the regional contractor to types of plans available to copays, one question many ask is why so many changes are happening at the same time. The key reasons are the implementation of Congress' 2017 National Defense Authorization Act legislation, which happened to fall on the same date as a change in the TRICARE support contracts.

One of the most noticeable changes is the creation of the TRICARE Select plan, which replaced TRICARE Extra and TRICARE Standard plans. If you enrolled for TRICARE Standard and TRICARE Extra on Dec. 31, you were automatically enrolled in TRICARE Select effective Jan. 1.

Because TRICARE Select is a self-managed, preferred provider network option, you are not required to have a primary care manager; this allows you to visit any TRICARE-authorized pro-

vider for TRICARE-covered services without referrals. TRICARE Select patients may also take advantage of plan improvements such as additional preventive care services.

It's important to remember that with the change to active enrollment for all plans, patients may only enroll in a TRICARE plan or make changes during the open enrollment season which will be from Nov. 12 through Dec. 10 for health care coverage during 2019. If you choose not to enroll in a TRICARE plan or enroll and fail to pay enrollment fees, your only option for health care is in a military treatment facility in a space-available status; the network medical would not be covered.

Patients may also notice a change in copays. With the new TRICARE changes, many cost shares (the percentage of the allowed amount) were replaced with copays (fixed amounts) for in network care. While some may pay more out-of-pocket fees, the copay system does offer patients greater predictability on how much each visit will cost.

Please note as well that TRICARE shifted from the fiscal year to the calendar year for the administration of benefits, which means payments for deductibles along with other out of pocket costs are applied to catastrophic caps beginning Jan. 1 of each year. Depending on when you became eligible for TRICARE, you may need to pay an enrollment fee for TRICARE Select.

You can find your health plan costs at tricare.mil/costs/healthplan-costs

Another significant TRICARE change this year was the change of our regional contractor to a new contractor, Health Net Federal

Services. If you're a TRICARE Prime patient, you should verify your doctor and other health care providers are still TRICARE certified.

In addition, due to a backlog of unprocessed routine referrals which Health Net Federal Services is processing, patients have been granted an authorization waiver for network outpatient specialty care for referrals written between Jan. 1 and March 31.

In other words, if a doctor wrote a referral for you during this time frame for dermatology, for instance, you only need a copy of the referral and the waiver letter to be seen by a network dermatologist.

It is important to note that when we return to requiring authorizations for referrals made in April and later, you will no longer receive authorization letters in the mail. Instead, you should log onto tricare-west.com to view your referral authorization there.

Finally, you should know the TRICARE Retiree Dental Program is ending at the end of 2018. Beginning in 2019, dental and vision plans will be available through the Office of Personnel Management's Federal Dental and Vision Insurance Program — tricare.mil/about/changes/FEDVIP. If you currently get your dental coverage through TRICARE, you will need to enroll in a FEDVIP Dental plan during the TRICARE open season to sustain coverage next year.

While this doesn't cover all of the various TRICARE changes this year, these are some of the most impactful to our patients. For more information about these changes, please visit the TRICARE website at tricare.mil/changes.

TAKE COMMAND

The current TRICARE Retiree Dental Program will end
DEC. 31, 2018.

We are replacing it with the Office of Personnel Management's (OPM) Federal Dental and Vision Insurance Program (FEDVIP). Vision plans will also be available to eligible TRICARE beneficiaries through FEDVIP.



Dental care improves oral health.

Given increasing connections between oral and overall health, dental coverage is critical.



Most adults need vision correction.

Approximately 66% of Americans age 18 and over report using glasses, contacts or both.

FEDVIP Dental Plans:

Aetna Dental	GEHA
Delta Dental	Humana
Dominion Dental	MetLife
EmblemHealth	Triple-S Salud
FEP BlueDental	United Concordia Dental

FEDVIP Vision Plans:

Aetna Vision
FEP BlueVision
UnitedHealthcare Vision
Vision Service Plan (VSP)

Note: Plan details and rates for the 2019 plan year will be available in fall 2018.

Important Dates

You don't need to take action now. But, to prevent a gap in dental coverage when your TRDP plan ends, you must select and enroll in a FEDVIP dental plan during the next Federal Benefits Open Season.



Fall 2018
2019 FEDVIP plan rates are available



Nov. 12–Dec 10, 2018
Federal Benefits Open Season for FEDVIP



Jan. 1, 2019
2019 FEDVIP plan year begins

FITTER, DEADLIER SOLDIERS:

This is How the Army Plans to Prepare You for Tomorrow's Wars

Soldiers assigned to 2nd Brigade Combat Team, 1st Armored Division, scale a hill during a rotation at the National Training Center at Fort Irwin, Calif., in August. The Army wants to extend basic training and revamp its physical fitness program in preparation for high-intensity, near-peer combat. (U.S. Army photo by Spc. Dana Clarke)



Story by Meghann Myers
Military Times

M

ore than four decades since the Army turned its eye to the particular challenges and necessities of its new, all-volunteer force, the service is taking a step back and reinventing itself for the 21st century, senior leaders said in late March.

The Army's top two civilians and vice chief of staff took to the stage at the AUSA Global Force Symposium in Huntsville, Alabama, to lay out a modernization vision, rooted in six priorities, that will bring new vehicles, aircraft, gear and other technology to the force over the next 10 years.

And in the margins, leaders voiced their support for another push: to re-think development and maintenance of the soldier as a weapon, to regard themselves as elite athletes preparing for a high-end fight.

"We need to treat soldiers the same way you do a professional athlete. They're hurt, give them an MRI," Army Undersecretary Ryan McCarthy told Army Times on March 27. "Otherwise, for four months someone's giving them Motrin and they're getting worse."

To tackle those issues — lack of physical fitness, lack of discipline and costly, chronic injuries — the Army is coming from all angles, mulling the idea of extending initial entry training, as well as revamping how the service builds and tests physical readiness.

"I saw this even back when I was in the Army, when I was in the Ranger Regiment, the difference between the way the special operations community and the conventional force were conducting physical training," McCarthy said.

Creating soldiers

Two years ago, officials at Training and Doctrine Command were mulling an extension to basic training, taking more time in a soldiers' initial entry to the Army to better prepare them for their first units.

"We've known that for some time, you know, that basic training wasn't long enough to get to the quality of soldier we wanted. That's not new," Sergeant Major of the Army Dan Dailey told Army Times on March 27. "That's hard to do when you're drawing the Army down. It's hard to do when you're in a resource environment that's hard."

At the time, the force was on a path to 450,000 active troops and funding itself with a continuing resolution after sequestration slashed the budget.

So with fewer recruits coming in, it made sense to try extending those first 10 weeks to see whether soldiers could be more fit, more disciplined and more proficient before moving on to the next step.

But it wasn't to be. At the end of 2016, then-President

Obama signed a National Defense Authorization Act to increase the active component to 476,000 soldiers in the following nine months.

Fast-forward to 2018, and the Army continues to increase its end strength, while revisiting the prospect of both overhauling and extending basic training.

The Center for Initial Military Training took the first step in February, when it unveiled an overhauled initial entry training program of instruction at Fort Jackson, South Carolina, the Army's largest training post.

The goal, according to CIMT commander Maj. Gen. Malcolm Frost, is to increase the fitness and discipline of the approximately 1,200 recruits who graduate every week, before going on to job-specific training.

A 27,000-person study of the training base, as well as leadership from operational units, found that soldiers were not adequately prepared to jump in at their first units of assignment.

"The No. 1 thing that was asked for, five-fold, was discipline," Frost said. "What leaders have observed is that, in general, they believe that there's too much of a sense of entitlement, questioning of lawful orders, not listening to instruction. Too much of a buddy mentality with NCOs and officers."

They also weren't familiar with calling for support over radios or proficient with using iron sights on their rifles, and they had little understanding of Army history.

To tackle the PT issues, the new POI requires three scores of 60 points each on Army Physical Fitness Tests events, up from the remedial 50-50-50 minimum score of recent history.

Trainees are also practicing more drill and ceremony in their first weeks of becoming soldiers, honing their skills with organized marching while moving throughout their days, culminating with a competition before graduation.

And to top it all off, basic training now includes three field training exercises — dubbed Hammer, Anvil and Forge — with minimum requirements to participate in each one.

The events test every warrior task and battle drill trainees have acquired throughout the previous weeks, in addition to PT tests and a battalion-wide combatatives competition.

The new curriculum is jam-packed, leaders say, and a few extra weeks would give time to fine-tune not only soldier skills but the mindset and habits of someone who's ready to deploy at a moment's notice.

"There's a saturation rate when you expose a human being to information, and how much they can retain during certain periods," Dailey said. "We want to extend basic training even without adding new content."

And when it comes to improving overall fitness and habits, he added, it will necessarily require more time and funding.

“We say we want to, you know, create the culture of a young soldier coming in,” Dailey said. “Unfortunately some of those things that are critically important are suf-



Drill sergeants welcome their first company of Soldiers to Fort Leonard Wood, Missouri. (U.S. Army photo by Stephen Standifird)

fering because there’s so much being piled on.”

No plans have been set in motion to extend BCT in general now, but infantry one-station unit training at Fort Benning, Georgia, will pilot a 21-week program this July, which adds a full seven weeks

“Does it need to get better?” Dailey said. “Sure, if you want the better product — of course.”

Training like athletes

When it comes to the much-maligned APFT, “it’s lived a good life but it’s no longer adequate for today,” the Army Forces Command boss says.

For the better part of a decade, the Army has been working to develop an occupational fitness test. It now has three, if you count the Occupational Physical Assessment Test required for entering the service, along with the Army Combat Readiness Test and Soldier Readiness Test, two pilot programs in varied stages of research.

Early numbers from OPAT look good, Gen. Robert Abrams, the FORSCOM commander, told Army Times on

March 26, with a reduction in attrition for soldiers who were required to take the test before basic training.

According to research, higher levels of overall fitness reduce injury rates and save the Army both time and resources on treating injuries and making up for the loss of a soldier.

Both Training and Doctrine Command, the proponent of the ACRT, and FORSCOM, where the SRT is in development, were preparing to brief senior leadership on their progress as this article was going to print.

“And I don’t think it’s going to be an either/or,” Abrams said. “I think we’ll probably come up with a hybrid between the two. I don’t think that we’re going to have enough time to do both.”

To clarify, he added, in his experience, competing pilot programs like this often meet in the middle with one grand compromise.

While the ACRT has been developed as a test of record, which would count toward promotion points and have career repercussions, the SRT’s model is a unit-wide test given and evaluated by each commander.

In addition, the SRT pilot includes three different levels of staff support and training equipment to prepare for the test.

Not surprisingly, Abrams said, those with full-time strength coaches and other professionals had the best outcomes.

“We had about a 25 percent reduction in soldiers [with] musculoskeletal injuries, who are on profile, who are not deployable,” he said.

And outcomes were equally good for those who did get hurt.

“So if they were getting injured, or if they were injured, because of the embedded medical capabilities, we were able to rapidly get them back into the fight, and with a full-time strength and conditioning coach who designed their training programs,” he said.

Both tests are designed to measure multiple domains of fitness in ways that approximate combat.

For instance, the ACRT gauges muscular power with a backward medicine ball throw. To test muscular endurance, the SRT requires stacking sandbags on the back of a truck. ACRT has a single dead-lift to measure strength, while SRT tests agility with a small shuffling course.

But there is some overlap, like an equipment drag and, of course, a run. If soldiers are taking two tests for different purposes, despite measuring similar things, how can the Army justify that?

“We could do that,” Abrams said. “But if we do that they both need to be for record.”

“I think there’s really good components of both, and I think we’ll see what more they want and the direction that we want to go,” Abrams said. “What I will tell you is regardless of what test is chosen — fundamentally the message to the Army is we are going to change how we do PT, and it is going to drive a cultural change on how we do PT, because the numbers are there.”

Health and deployability

Also of note, at this point in the development process, is neither the ACRT nor the SRT have alternate events. So, for example, if a soldier has a profile that says they don’t have to run during the APFT, they are allowed to walk.

Not so with the new tests.

Remedial options may end up in the final test or tests, Abrams said.

But that could create some confusion, Dailey said. If the APFT is a health test, alternates are necessary to continue gauging health. But a combat fitness test is a different story.

“The one recommendation I would make is that if you’re going to say that you have to do this event to be able to prove that you can do your job, then there shouldn’t be any alternate events,” Dailey said.

And, naturally, that could force separation for a soldier who can’t complete a combat readiness test for more than a year, per a new Defense Department deployability policy.

“That’s why I said, well, if you’re not deployable, should you stay in the service?” Dailey said. “The answer to that is no, ... because your job is to fight.”

And if this is the test that determines whether you can fight, he added, there shouldn’t be any alternatives.

If you think about it, he added, the Army has been giving a pass to soldiers on profile, while punishing those who actually take the test and come up short.

“We’ll throw a soldier out that’s failed by one second, but we’ll keep one that doesn’t take it,” Dailey said.

So where does that leave the APFT? While it doesn’t measure combat effectiveness, the test’s simple measurement of cardiovascular health and muscular endurance does serve a purpose.

“I think we need one that gauges your level of overall fitness,” Dailey said, beyond the standards for combat. “That’s important. That’s the health aspect of this. And there’s a physiological difference between men

and women.”

The Army’s forays into occupational testing have included gender-neutral standards, on the idea that fitness for combat is black-and-white. Health, including a soldier’s risk for stroke or heart attack, is another measurement entirely.

“My job is to keep you healthy so you’re not expensive, so you live longer and have a higher quality of life and you’re more productive and you’re more efficient,” Dailey said.

So while a gender-neutral occupational test is a step forward in preparing soldiers for combat, the Army still has to look at troops as employees whose health care bills they are covering.

“I think we have to be careful that ... we don’t hurt one thing while we’re trying to correct the other,” Dailey said.

Regardless of how long basic training ends up being or which fitness test the service settles on, the changes will cost money.



Pfc. Ryan Oliver, a wheeled vehicle mechanic with the 82nd Brigade Engineer Battalion, 2nd Armored Brigade Combat Team, 1st Infantry Division, jumps into a lake during cold-water immersion training with the U.K. 1st Royal Welsh Battalion in Tapa, Estonia on March 7. (U.S. Army photo by Spc. Hubert D. Delany III)

McCarthy said that both House and Senate Armed Services Committee members ask how they are tackling fitness challenges, and leaders present this holistic philosophy.

“I think they’ll be supportive,” he said. “We talk about it a lot, about non-deployables, so I think we’d get support there.”

The 8th KOREA HOGUK ART EXHIBITION

제8회 대한민국 호국 미술 대전

The ROK Army and Citizens Brought Together through Art

The Army is holding the 8th Korea Hoguk Art Exhibition to create an opportunity to communicate with citizens through art on the topics of 'national defense' and 'security'. We ask for your active support and participation based on the information below.

Application period

2018
4. 23. ^{Mon} - 7. 27. ^{Fri}

※ Download the application form from the Army internet homepage 'Hoguk Art Exhibition' section (<http://www.army.mil.kr/event/hoguk/>)



How to Apply

Exhibition Categories / Standard Size	Painting (Korean, Western, watercolor and engraved painting) : Within 30~100 ho (Within 60×48 inch) Calligraphy (Korean, Ancient Chinese) : 70cm in width, 135~140cm in length Literary Paintings : Within 70cm in width, 140cm in length Design (poster, cartoon, illustration, graphic design) : size A1 Photograph (color, black & white) : 20×24 inch or within 20×30 inch Sculpture (sculpt, molding) : Sum of length×width×height within 3m, excluding pedestal
Exhibition Theme	Army and Citizens Brought Together through Art Content that encourages love for our nation and will for national defense Content commemorating the sacred sacrifice of our patriotic martyrs Expressing the Army's spirit of fighting for victory The Army going together with the citizens and receiving trust A proud and impressive army preparing for the future ※ Other content expressing patriotism for our nation such as Mugunghwa, Taegeukgi and our homeland
Entry Qualification	Any ROK citizen of at least 16 years of age ※ Foreign military personnel from allied nations residing in ROK can also participate
Entry Quantity Limit	2 pieces per person (4 pieces for photograph category) / No entry fee ※ Entry of 2 or more pieces require separate application

Award Details

Grand Award	President Certificate of Merit	6 mil.won	1 person
Top Award	Minister of National Defense Certificate of Merit	3 mil.won	1 person per category / 6 persons
Runner-up Award	Army Chief of Staff Certificate of Merit	1.5 mil.won	3 persons per category / 18 persons
Serviceman / Special Award	Army Chief of Staff Certificate of Merit	1 mil.won	1 person per category / 7 persons
Special Recognition	Army Chief of Staff Certificate of Merit	Souvenir	5 persons per category / 30 persons
Selection Award	Army Chief of Staff Certificate of Merit		00 persons per category / 000 persons
※ Grand, Top, Runner-up and Special award receiving pieces are considered as Army HQ property and purchasing fee is substituted by prize money(withholding tax credit)			

For further Information

Refer to the Army website (<http://www.army.mil.kr/event/hoguk/>) or call 070-8844-7280 for inquires

Hosted / Supervised by The Republic of Korea Army HQ / Korea Hoguk Art Exhibition Organizing Committee

Sponsored by KOREAN FINE ARTS ASSOCIATION 한국산업미술협회 한국산업미술협회

The 8th Korea Hoguk Art Exhibition Application Form

Categories	<input type="checkbox"/> Painting <input type="checkbox"/> Calligraphy <input type="checkbox"/> Literary <input type="checkbox"/> Design <input type="checkbox"/> Photograph <input type="checkbox"/> Sculpture	Registration Number		
Personal	Name	surname first names		
	Nationality / Birth Year	/ M Home Phone (In Korea)		
	Military Number	F Mobile Phone		
	Address	Zip code() (Art pieces can only be delivered to a Korean address)		
	Unit / Rank	/ Email		
	Method of retrieval	<input type="checkbox"/> Self-collection <input type="checkbox"/> Delivery by courier <input type="checkbox"/> Agreement to receive work back <input type="checkbox"/> Agree <input type="checkbox"/> Disagree		
Title	Size	Length cm	Width cm	Height cm
Description of work				
Etc	Exhibits / Awards / Career / Impression			

I agree to comply with the Korea Hoguk Art Exhibition rules, authorize the use of the copyright on the winning works, and if do not reclaim my works within the due date, the organizer has authority of discretionary processing.

2018 / / (Date of application)

Name (Signature)

To: Korea Hoguk Art Exhibition Organizing Committee

The 8th Korea Hoguk Art Exhibition Application Form

Categories	<input type="checkbox"/> Painting	<input type="checkbox"/> Calligraphy	<input type="checkbox"/> Literary	Registration Number	
	<input type="checkbox"/> Design	<input type="checkbox"/> Photograph	<input type="checkbox"/> Sculpture		

Personal	Name	surname	first names			
	Nationality / Birth Year	/	Gender	M	Home Phone	(In Korea)
	Military Number			F	Mobile Phone	
	Address	Zip code()				
	(Art pieces can only be delivered to a Korean address)					
	Unit / Rank	/	E-mail			
Method of Retrieval	<input type="checkbox"/> Self-collection <input type="checkbox"/> Delivery by courier * courier charge at your own expense, if there are concerns over damage self collect			Agreement to receive work back	<input type="checkbox"/> Agree <input type="checkbox"/> Disagree	

Title		Size	Length	cm
Description of work			Width	cm
			(Height)	cm
Etc	Exhibits / Awards / Career / Impression			

I agree to comply with the Korea Hoguk Art Exhibition rules, authorize the use of the copyright on the winning works, and if do not reclaim my works within the due date, the organizer has authority of discretionary processing.

Signature

Date

Field	Registration No.
	—
Title of Artwork	
Name of Artist	surname
	first names
Address	Zip code()
Contact	Home
	Mobile
Unit / Rank	/
Precautions	

Registration Form	
Field	Registration No.
	—
Name of Artist	
Title of Artwork	
2018 / mm / dd	
Korea Hoguk Art Exhibition Organizing Committee	





*Traditional Charm &
Excitement Meet at the
Lotus Lantern Festival*

Courtesy of Korea Tourism Organization

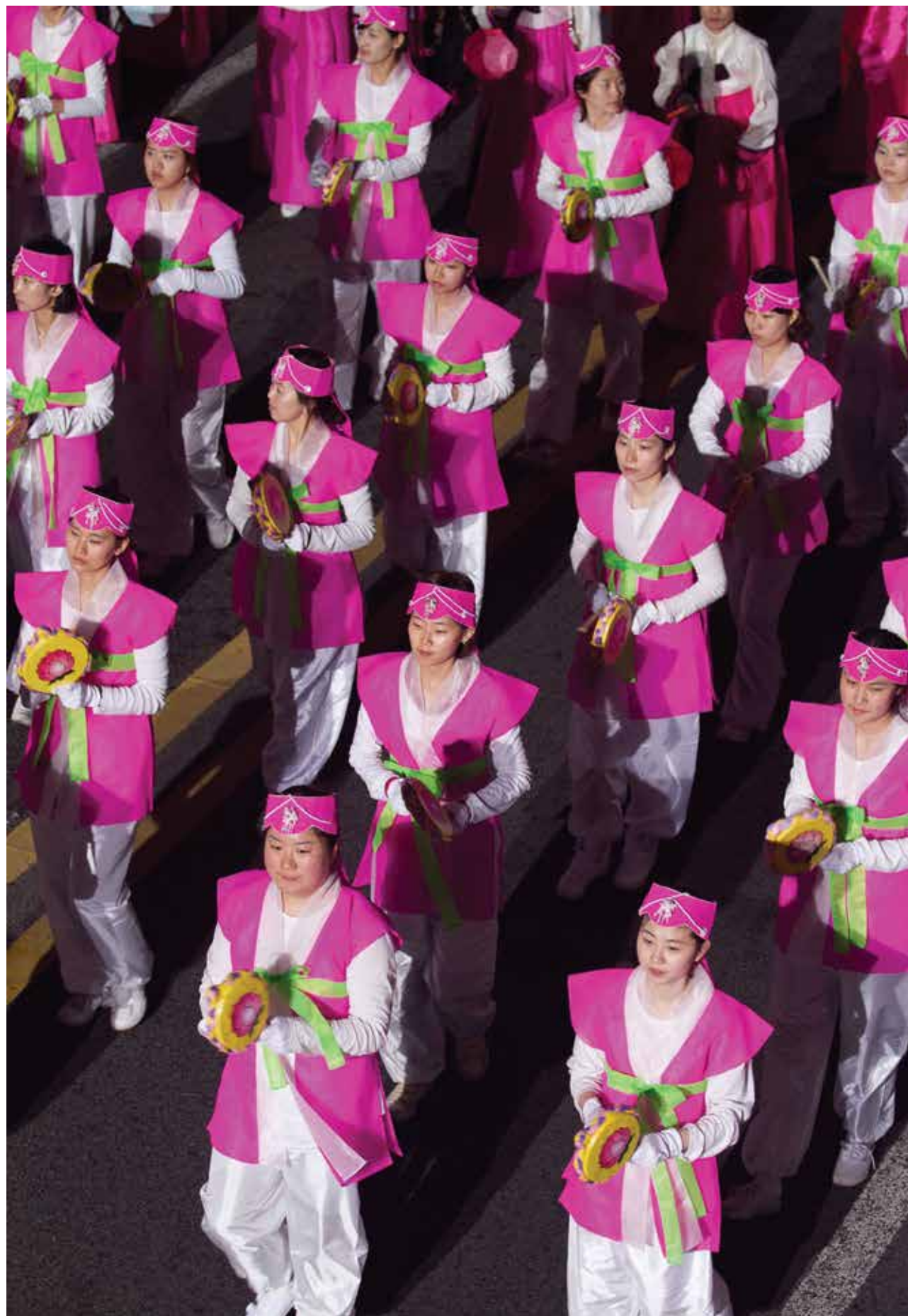
The Yeon Deung Hoe (Lotus Lantern Festival) is an annual event that colors Korea with bright lanterns in celebration of the birth of Buddha. Started as a religious festival during the Silla Dynasty (57 BC – AD 935), this traditional festival has come to be enjoyed by thousands of people every year, regardless of background, nationality, or religion.

Organized to celebrate the Buddha's coming into this world, the month-long festival will pack its most highlighted events into three days on May 11 to 13, 2018. The dates of the festival change every year as it is held during the weekend right before the Buddha's birthday which falls on 8th April in Lunar Calendar (May 22, 2018).

There will be hands-on experiential programs and performances to sing and dance along with, as well as parades and exhibitions. The lantern parade features lanterns shaped like Buddhist instruments and monks host a talk concert at the Buddhism culture plaza.

Most programs are family-oriented and the festival's spiritual ambience and energetic togetherness is something you won't be able to experience anywhere else. On the night of May 12, 2018, more than one hundred thousand luminous lanterns will light up the Seoul night.





The majestic parade of lanterns in unimaginable shapes and colors will bring the hearts of both participants and spectators together.

Hands-on activities and things to see:

Lotus Lantern Parade

The highlight of the Lotus Lantern Festival is the lantern parade. Passing Heunginjimun Gate on its way along Jongno Avenue all the way to Jogyesa Temple, this large scale parade is a true sight to behold. Following the theme of this year's festival, the parade will include lanterns in the shape of the four Dharma instruments of Buddhism which represent guidance of all creatures living above ground, underground, in the sky and in the waters. The inclusion of all forms of life shows the strong aspiration of Buddhists for salvation of all living creatures in a world without discrimination.

International visitors coming to watch the parade will also have the chance to learn the rhythmic movements of the parade with the help of over one hundred members of the global supporters group.

Exhibition of Traditional Lanterns

In remembrance of the birth of Buddha, exhibitions of traditional lanterns will be on display for a ten-day period in various parts of Seoul including Ujeong Park by Jogyesa Temple, Bongeunsa Temple and Cheonggyecheon Stream. These exhibitions provide a wonderful opportunity to marvel at the unassuming charm of Korea's traditional paper, hanji. In particular, Cheonggyecheon Stream's exhibition will display quality lanterns with a theme of "yeomcheon," meaning "to think of the sky."





Traditional Cultural Events

The Traditional Culture Zone will be prepared in front of Jogyesa Temple, featuring approximately 130 booths run by Buddhist organizations and temples from across the nation. These booths provide a chance for visitors to learn about and better understand Buddhist culture. International visitors in particular will enjoy the chance to try temple foods and hands-on crafts.

One of the most popular activities is the lotus lantern contest (pre-reservation available) as participants can create their own personal lanterns. There are also many other hands-on activities and things to see in the culture zone. Buddhism-related performances, temple cuisines and experiences are also prepared for both local and internation-





al participants to enjoy and learn about this local culture using all five senses.

Yeondeungnori (Final Celebration)

From the streets of Insa-dong to the road before Jogyesa Temple and all around the area of Jongno, the Lotus Lantern Festival will end in a final parade with grand lanterns and the music of a street performing troupe. The performers, visitors, and lanterns will come together for a fun and exciting time full of dancing and laughter in the streets.



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Hours of Operatoin

Mon-Fri	1000-1900
Sat	1000-1700
Sun	closed

More Information on Lotus Lantern Festival Programs

Exhibition of Traditional Lanterns: May 11 - 22

Place Jogyesa Temple, Bongjeonsa Temple, Cheonggyecheon Stream

With soft and lovely light, the lanterns convey the aspirations and careful attention to detail of their creators. You can browse through traditional hanji paper lanterns in different colors and shapes.

Euollim Madang (Buddhist Cheer Rally): May 12, 16:30-18:00

Place Dongguk University Stadium

Before marching onto the streets to begin the lantern parade, participants can heighten their joy watching the spectacular dance movements and upbeat songs held on stage by various performance groups. The performance is followed by the ceremony of bathing the baby Buddha and a Dharma service.

Lantern Parade: May 12, 17:00- 21:30

Place Street in front of Jongno (Dongdaemun Gate → Jogyesa Temple)

All participants become stars of the luminous lantern parade.

Thousands of lanterns will create magnificent waves of light that flow through the heart of metropolitan Seoul like an earthbound Milky Way. Anyone can participate and become a star of the festival.



Hoehyang Hanmadang (Post-Parade Celebration): May 12, 21:30-23:00

Place Jonggak Intersection

The rain of flower petals expresses the aspiration for happiness.

The cultural performances unfolding under a rain of flowers and the lively group dance of Ganggang Sullae bring all participants together as one, transcending nationality, gender, ethnicity and religion.

Traditional Cultural Events: May 13, Noon-19:00

Place Street in front of Jogyesa Temple

A variety of hands-on experiences to satisfy your senses.

The street festival pulsates with the unique aesthetics of Korea.

You can enjoy various cultural experiences including lantern making and temple food tasting.

Cultural Performances: May 13, Noon-18:00

Place Performance stage in front of Jogyesa Temple

See lively performances filled with deep emotion and joy.

Enjoy traditional folk performances including songs, dances and rope walking, along with Buddhist performances and various traditional performances from other Asian countries.



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More Information on Lotus Lantern Festival Programs

Yeondeungnori (Final Celebration): May 13, 19:00-21:00

Place Street in front of Insa-dong and Jogyesa Temple

Beautiful performances and a mini-parade of splendid lanterns.

Following the performance groups, another lantern parade will be held to express the aspiration for peace and happiness all over the world.

Performance Times:

May 11 19:00

May 12 16:00-23:00

May 13 12:00-22:00

Open to visitors of all ages.



Transportation (Subway)

• Jogyesa Temple

Route 1: Jonggak Station (Seoul Subway Line 1), Exit 2.

Walk straight for approx. 200m to arrive at Jogyesa Temple.

Route 2: Anguk Station (Seoul Subway Line 3), Exit 6.

Walk straight for approx. 130m, and turn left at the Anguk Intersection.

Walk straight for approx. 200m to arrive at Jogyesa Temple.

• Bongeunsa Temple

Samgseong Station (Seoul Subway Line 2), Exit 6.

Walk straight for approx. 600m, and turn left.

Walk straight for approx. 150m to arrive at Bongeunsa Temple.

• Jongno Street

Jonggak Station (Seoul Subway Line 1)

• Dongguk University Stadium

Dongguk Univ. Station (Seoul Subway Line 3), Exit 6.

Walk straight for approx. 110m and turn left.

Walk straight into the campus to the stadium.

E-Mail: hong@buddhism.or.kr

Homepage: www.llf.or.kr (Korean, English, Chinese, Japanese, French, German, Spanish)

SAM Korean Medicine Detox Package

Loquat Moxibustion + Coffee Detox Therapy + Cupping Therapy

■ Loquat Moxibustion

Moxibustion(Chinese: 灸) is a traditional Chinese medicine therapy which consists of burning dried mugwort(moxa) on particular points on the body.

Loquat Moxibustion is mainly used in Korean Medicine as a hyperthermia. It emits the toxin in our organs, bones and cells throughout the skin by using the arsenic and hydrocyanic acid gas. It releases the pain with cancer and prevents our body from metastasis.

Effect Enhancement of immune system / Blood circulation / Uterine myoma / Bladder and gastric disease / Period pain / Constipation / Indigestion / Fatigue



■ Coffee Enema Detox Therapy

Coffee Enema Detox Therapy's principal is veins carries rectal / sigmoid toxins directly to the liver for detoxification. When a coffee enema is used, the caffeine from the coffee is preferentially absorbed into this system and goes directly to the liver where it becomes a very strong detoxicant.



Effect Body detoxification / Enhancement of immune system / Developing liver function / Pain relief / Emit active oxygen / Reducing ascites and toxin/ Constipation improvement / Skin care/ Losing weight / Recovering from fatigue/ Normalizing ammonia level

■ Cupping Therapy

Cupping Therapy is a local suction which is created on the skin. During the suction, the skin is drawn into the cup by creating a vacuum in the cup placed on the skin over the targeted area.



Effect Blood circulation / Pain relief (shoulder and back) / Improving immune system / Disk treatment / Contusion treatment and internal organ disease



About 2 hours 20 minute [Loquat Moxibustion (about 1 hour)
+ Coffee Detox Therapy (about 40~60 min) + Cupping Therapy (about 10~30 min)]

* All treatment method should get the balance each other to treat the patient comprehensively.

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Pentagon wants to spot illnesses by monitoring soldiers' smartphones

Story by Aaron Gregg
Washington Post

Imagine that your smartphone's camera, microphone and motion sensors were monitoring you for signs of illness. That's the future envisioned by scientists at the Pentagon's secretive weapons development arm, where such a system is being built to keep tabs on deployed U.S. service members.

The Defense Advanced Research Projects Agency announced Thursday that it has awarded a \$5.1 million contract to the Fairfax, Va.-based cybersecurity company Kryptowire to develop what DARPA calls the "Warfighter Analytics using Smartphones for Health" program, or WASH for short. The app would be used to spot diseases based on data that it collects from a person's smartphone.

Tom Karygiannis, Kryptowire's vice president of product, said he hopes the technology can one day broaden access to health care by spotting health problems before a person visits a doctor or nurse. "Ultimately, this could mean better treatment, cost savings and making treatment available to more people," he said.

But the idea has privacy advocates spooked.

"If you're activating a microphone on someone's phone, that is going to raise a lot of alarms," said Jay Stanley, a senior policy analyst with the American Civil Liberties Union. "People don't want to feel like someone is listening in on their private life. That's going to have to be subject to tight controls."

For DARPA, the goal is to help the military deal with some of its biggest health-care problems while conserving resources. The WASH development program started last year and will continue through 2021, an agency spokesman said.

"The program aims to develop algorithms that use raw data from smartphone sensors to enable continuous and real-time assessment" of warfighters' health status, identifying latent or developing conditions and diseases, DARPA communications chief Jared Adams said in an email.

According to a fact sheet published by the agency, the app will collect data from smartphone features including cameras, light sensors, pedometers, fingerprint sensors, microphones and other sources. With the knowledge and consent of the user, the information would be collected continuously and passively, meaning a soldier's smartphone could be constantly scanning for signs that something is wrong.

Company officials say one goal of the research is to find a way to keep that data secure and private — safe from hackers or inadvertent leaks.

The work evolved out of an earlier project at Kryptowire to replace password sign-ons with passive electronic monitoring. Kryptowire's primary business is a software tool that searches for vulnerabilities in mobile applications. The company works under contract with the Department of Homeland Security, the Justice Department and a grab bag of private corporations.

That work led to a technology designed to let people sign into their smartphones by identifying all the ways they interact with the device: How people walk, how they hold the phone and how often they use it all became a part of the "profile" that could detect whether the person using a phone is its true owner.

After learning how to build these profiles, product developers at Kryptowire realized they might also be able to detect when something is wrong.

"For example, if a user is inebriated we found they

would interact with the device differently," Karygiannis said. "So if you can do that, the question is, what else can you do?"

Now, with financial backing from DARPA, the company is reaching out to hospitals and medical research institutions to figure out how to use that information to detect illnesses.

Possible targets could include early detection of diseases such as Alzheimer's and Parkinson's or conditions such as post-traumatic stress disorder, company officials said.

Once the company's medical research partners understand what the technology can do, Karygiannis said, "They'll probably come up with other ideas that we haven't."

Executives at Kryptowire say the eventual goal is to move beyond the military to everyday smartphone users, though they acknowledge that the technology would need to make a big leap from the current fitness and other health apps on the market.

Still, there's some precedent for what Kryptowire and DARPA are doing. Companies are pushing commercial smartphone apps that diabetics can use to track their blood sugar levels. Fitness apps such as Fitbit have become so popular that some employers are building rewards programs around them, paying their workers small bonuses for

healthy behavior, for example.

Seeing DARPA put money down on such an untested idea suggests that private investors might take an interest in it, too. After all, there is a long history of DARPA-funded technologies eventually entering the civilian world; GPS and the Internet (once called ARPAnet, after the agency's predecessor) benefited from early funding from the agency.

Chris Shipley, managing partner of Ascent Line Partners, an innovation and market strategy consultancy, said the agency's involvement could mean the technology will hit the commercial market much sooner than it otherwise would have.

"I think these are really early days," Shipley said.

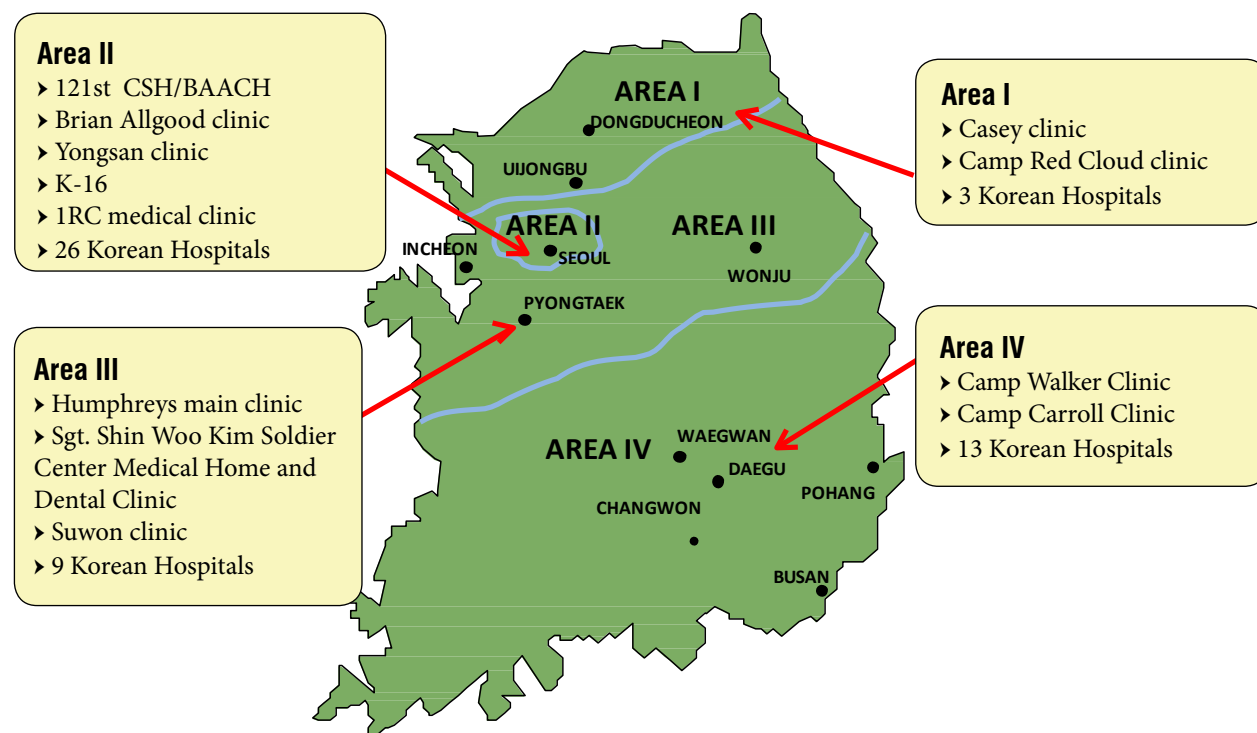
"The fact that this is being deployed in a DARPA-funded application is going to be a great learning space for how they can be used in a consumer context."



Brian Allgood Army Community Hospital (BAACH)

Medical Capabilities

Population Supported



Brian Allgood Hospital

- Emergency Medicine
- Primary Care
 - Internal Medicine
 - Family Medicine
 - Pediatrics
- Medical Services
 - Dermatology
 - Sleep Medicine
 - Echocardiogram/ Stress Test
- Behavioral Health
 - Psychiatry
 - Psychology
 - Social Work
 - Addiction Medicine
 - Family Advocacy
- Radiology (MRI/CT)
- Surgical Services
 - OB/GYN
 - ENT
 - General Surgery
 - Orthopedics
 - Podiatry
 - Oral Maxillo-facial Surgery
 - Neuro-Surgery (limited)
- Physical Medicine & Rehabilitation
 - Physiatrist
 - Physical Therapy
 - Occupational Therapy
- Medical Board Section
 - Soldiers recommended for medical board in CONUS/ medical curtailment
- Nutrition



Casey Clinic

- Primary Care (13-99 yrs)
- Pharmacy
- Laboratory
- X-ray
- Hearing exams
- Immunizations
- PHAs
- Occupational Health
- Public Health Nurse
- Physical Therapy
- Behavioral Health
- Nurse Case Manager
- Host Nation Liaison Nurse
- Optometry

Camp Red Cloud Clinic

- Primary Care (18-65 yrs)
- Pharmacy
- Laboratory
- X-ray
- Hearing exams
- Immunizations
- PHAs
- Occupational Health
- Public Health Nurse
- Physical Therapy (part time)

Brian Allgood Primary Care Clinic

- Primary Care (0-99 yrs)
- Pharmacy
- Laboratory
- X-ray
- Hearing exams
- Immunizations
- PHAs
- Nurse Case Manager
- All other services offered in BAACH hospital are available

K-16 Clinic

- Primary Care (18-65 yrs)
- Pharmacy
- Laboratory
- Hearing exams
- Immunizations
- PHAs/Flight physicals
- Physical Therapy (part time)

Suwon Clinic

- Primary Care (18-65 yrs)
- Pharmacy
- Laboratory (in progress)
- Hearing exams
- Immunizations
- PHAs/Flight physicals
- Dental
- Working on:
 - Physical Therapy (part time)

Camp Humphreys Main Clinic (Bldg. 555)

- Primary Care (0-99 yrs)
- Pharmacy
- Laboratory
- X-ray
- Hearing exams
- Immunizations
- PHAs/Flight physicals
- Occupational Health (Bldg. 370)
- Public Health Nurse
- Physical/Occ Therapy (Bldg. 370)
- Behavioral Health (Bldg. 370)
- Nurse Case Manager
- Optometry (Bldg. 576)
- Orthopedics (2 days per month)
- Prenatal care (up to 36 weeks)
- Dermatology (1 day per week)
- Nutrition (hiring)

Sgt. Shin Woo Kim Soldier Center Medical Home

- Primary Care (18-65 yrs)
- Pharmacy
- Laboratory
- X-ray
- Hearing exams
- Immunizations
- PHAs
- Public Health Nurse (once weekly)
- Physical Therapy
- Behavioral Health
- Nurse Case Manager
- Optometry
- Prenatal care (up to 36 weeks)

Camp Walker (Wood Clinic)

- Primary Care (0-99 yrs)
- Pharmacy
- Laboratory
- X-ray
- Hearing exams
- Immunizations
- PHAs
- Occupational Health
- Public Health Nurse
- Physical Therapy
- Behavioral Health
- Nurse Case Manager
- Optometry
- Nutritionist
- OB care off post

Camp Carroll Clinic

- Primary Care (18-65yrs)
- Pharmacy
- Laboratory
- X-ray
- Hearing exams
- Immunizations
- PHAs
- Occupational Health
- Public Health Nurse
- Physical Therapy (hiring)

After-hours medical care

- Emergencies- use BAACH App on post or 119 for off post (Host nation ambulance services will come)
- Provider on call for each clinic--off-duty hours
- Phone number posted on clinic doors/or use BAACH App
- On call provider gives medical advice
- If provider recommends an ER visit, unit transportation preferred, or provider will arrange transport with on call driver

Off post medical care

- Tricare approved Korean hospitals close to every base in Korea, many with international health centers with translation services
- Healthcare provided is on par with US care with some cultural differences
- Brian Allgood monitors all inpatient hospital care and provides assistance as needed
- Tricare Prime patients have no payments for Tricare approved hospitals

Humphreys Transformation

- Extended Hours of the main Humphreys Clinic
 - Mon-Fri: 8:30 a.m - 9 p.m.
 - Weekends/Holidays: 8:30 a.m. - 7 p.m.
- For appointments call 737-2273 or 0503-337-2273 from 7 a.m. to 5 p.m.
- For extended hour appointments call 737-2767 or 0503-337-2767 from 5 -9 p.m. on weekdays and 8:30 a.m. to 7 p.m. on weekends and holidays.
- New hospital expected to have first patient day in November, 2019



Current construction in progress

Coming healthcare enhancements

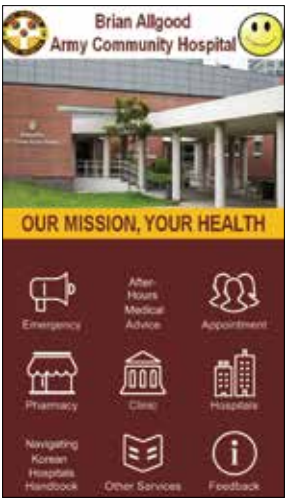
- Korea-wide bilingual medical advice line (24/7)
- Rotating specialty providers from BAACH to Humphreys Clinics
- Enhancing tele-health at Humphreys

iPhone/Android App

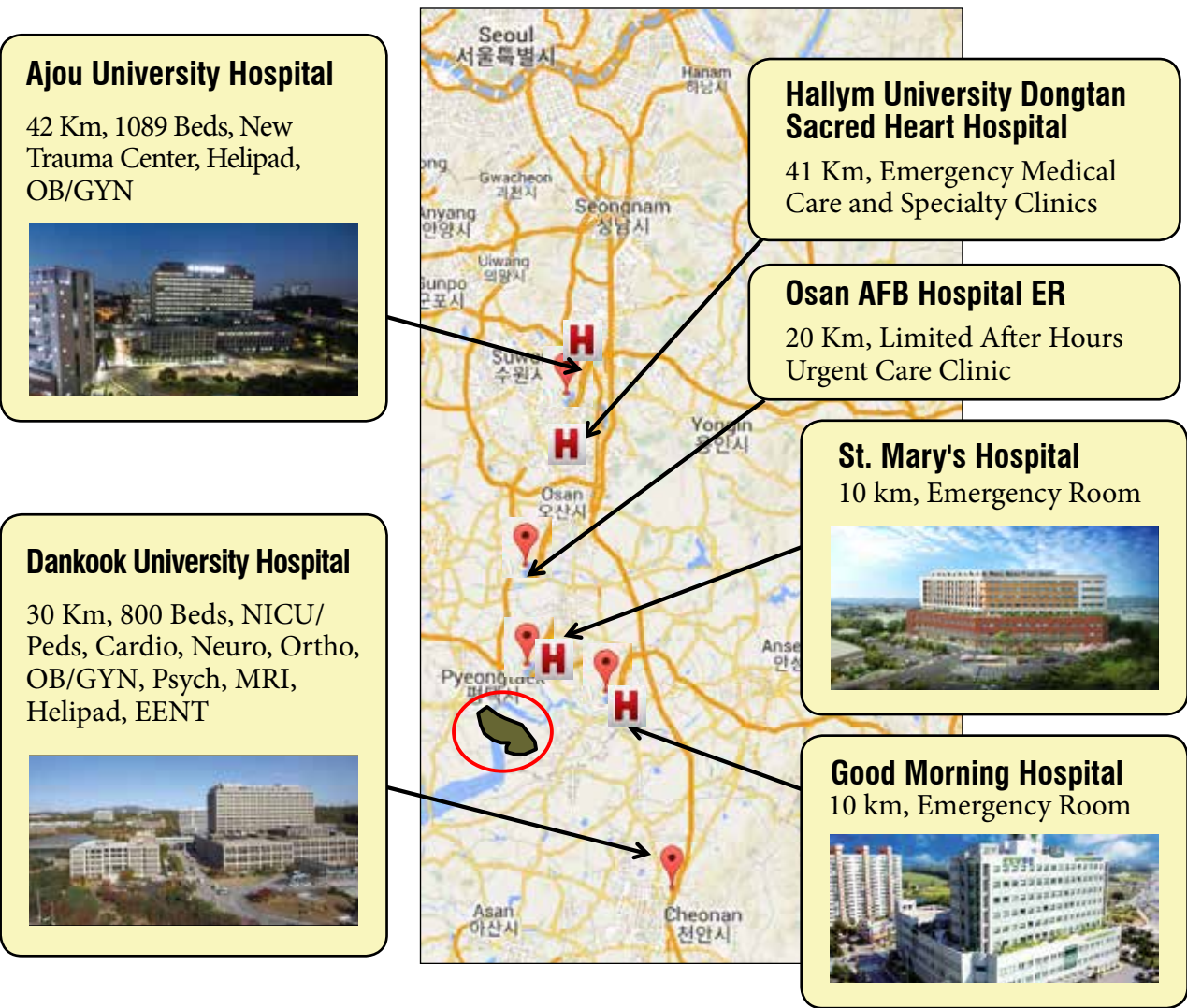
For convenience, staff and patients enrolled or seeking care can navigate Brian Allgood Army Community Hospital 24/7 from anywhere in South Korea. Beneficiaries can download the free BAACH app. from apple iTunes or Google Play store.

This app technology improves effective and efficient beneficiary access to their health care system anytime, any day, from anywhere on the Korean Peninsula.

Ensure location services are enabled on your phone and the app will link to your phone's map program to help you navigate to local hospitals.



Camp Humphreys Purchased Care Sector Providers



Facilities Directory

HEALTH CARE/TMC

AREA I

Camp Casey Health Clinic

M,T,W,F 0800-1700
Thurs 1300-1630

Camp Casey Front Desk: 737-2762/2763

CRC TMC Front Desk: 732-7776/6011

APPOINTMENT LINE: 737-2273
(Mon-Fri 0700-1600)

Public Health Nurse:

737-3557
Mon-Fri 0830-1730

Audiology: 737-3590

Mon-Fri 0830-1130 & 1300-1630

Behavioral Health (Bldg. 802):

730-4304
Mon-Fri 0830-1730

Immunizations: 737-3577

Mon-Fri 0830 -1200 & 1300-1700

Lab: 737-3580

Mon-Fri 0830-1700

Optometry: 737-3594

Mon-Fri 0900-1200 & 1300-1700

PHAs: Call Appointment Line
737-2273

*APPTs ONLY

*MUST COMPLETE PART 1 FIRST

Pharmacy: 737-3598
Mon-Fri 0830-1700

Physical Therapy: 737-3588

Mon-Fri 0800-1200 & 1300-1700

Radiology: 737-3585

Mon-Fri 0800-1130 & 1230-1700

Triage & Transport Center (TTC): 737-3582

Open 24/7

Camp Red Cloud Medical Clinic

737-2273

Mon – Wed, Fri 0900-1730 (closed 1200-1300)
(Soldiers only)

AREA II

Brian Allgood Army Community Hospital

737-2273 (Press 1-1)

Mon-Wed, Fri 0800 - 1900 (closed 1200 - 1300)

Thurs 1300 - 1700

(Soldiers/family members/retirees/DOD Employees)

K-16 Medical Clinic

741-6300

Mon – Wed, Fri 0900 - 1530 (closed 1130 - 1300)
(Soldiers only)

AREA III

Sgt. Shin Woo Kim Soldier Center Medical Home

(Bldg. 6370): 737-2273

Mon – Wed, Fri 0830 - 1700; Thurs 1300 - 1700
(Soldiers only)

Master Sgt. Henry L. Jenkins Patient Centered Medical Home

(Bldg. 555): 737-2273

Mon – Fri 0900 - 2100; Sat, Sun, Holiday 0830 - 1900
(closed 1200-1300)
(Soldiers/family members/retirees/DOD Employees)

Suwon Aid Station

788-5107

(Soldiers only)

AREA IV

Camp Carroll Clinic

737-4300

Mon – Wed, Fri 0900-1700 (closed 1200-1300)
(Soldiers only)

Camp Walker (Wood Clinic)

737-2273 (Press 2-5-1)

Mon – Wed, Fri 0900-1700 (closed 1200-1300)
(Soldiers/family members/retirees/DOD Employees)

AREA V

Osan Air Base

0505-784-DOCS (3627)

BHC Chinhae

762-5415

Mon – Fri 0830-1630

DENTAL CLINIC

AREA I

Camp Casey DC

(Bldg. 808)

737-9011 / 737-9012

Mon – Fri 0730 - 1630

In/Out Processing (Mon - Fri): 0730 - 1600
(Lunch 1130-1230)

Camp Red Cloud DC

(Bldg. S-306)

737-9009 / 737-9010

Mon – Wed 0730 - 1630, Thur 1300 - 1630,
Fri 0730 - 1530

During normal hours of operation

AREA II

Dental Clinic #2

(Bldg. 5107)

737-9089 / 737-9090

Mon – Fri 0730 - 1130 & 1230 - 1630

Exams: Mon – Fri 0830 - 1100 & 1230 - 1330

Call for appointment

In/Out Processing: Mon - Fri 0830 - 1100 & 1230 - 1330

AREA III

Sgt. Shin Woo Kim Dental Clinic

(Bldg. 6370)

737-5129 / 5130

Mon – Wed, Fri 0830 - 1700; Thurs 1300 - 1700

Carius Dental Treatment Facility

(Bldg. 3020)

737-9206/9207

Mon – Fri 0730 - 1630

AREA IV

Bodine Dental Clinic

(Bldg. 220)

737-9452 / 737-4791

Mon – Fri 0730 - 1630

Dental Exams: Activity Duty: Mon – Wed & Fri (Walk in only)

0900 - 1100, Thurs 1300 - 1500

*LIMITATIONS DUE TO SERGEANTS TRAINING

Activity Duty Family appointment only:

(Call 1230 - 1530 Mon – Fri) Space Available appointments

Camp Carroll Dental Clinic

(Bldg. 180)

737-4201/4202

Mon – Fri 0930 - 1630

Call to make appointments for all dental treatment

AREA V

Osan Air Base Dental Clinic

(Bldg. 777)

784-2108

Mon – Wed, Fri 0700 - 1700

Thurs 0900 - 1700

US Forces Medical-Dental-Veterinary

Facilities Directory

VET CLINIC

AREA I

**USAG Red Cloud
(Bldg. 437)**
732-7434
Closed in observance of all Federal Holidays.
Mon, Tue, Wed, Fri 0900-1200, 1300-1600

AREA II

**USAG Yongsan
(Bldg. 4728)**
737-2450
Closed in observance of all Federal Holidays.
Mon 1300 - 1600 Tue 0900 - 1600
Wed 0900 - 1600 Thurs 1300 - 1600
Fri 0900 - 1600
(Closed for lunch 1130 - 1300)

AREA III

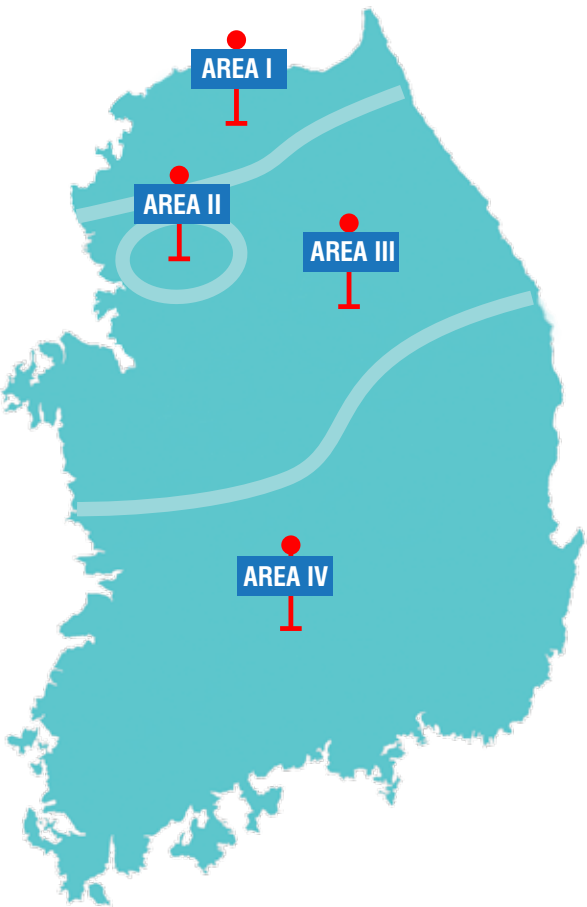
**USAG Humphreys
(Bldg. 2260)**
737-9720
Closed in observance of all Federal Holidays.
Mon, Thurs Closed
Tue, Wed, Fri 0900 - 1200, 1300 - 1600

AREA IV

**USAG Walker
(Bldg. 341)**
764-4708
Closed in observance of all Federal Holidays.
Tue, Wed, Fri 0900 - 1200, 1300 - 1600

AREA V

**Osan Air Base
(Bldg. 766)**
784-6614
Closed in observance of all Federal Holidays.
Mon – Fri 0900-1600



To Call DSN by cell phone, dial 050-3330-xxxx
for numbers starting with 730 or
050-3337-xxxx for numbers starting with 737.
Dial last four digits as normal.
NOT AN EMERGENCY CARE CLINIC

EMERGENCY on post from DSN: 911
EMERGENCY on post from Cell: 050-3330-5906
EMERGENCY off post from Cell: 119

PURCHASED CARE SECTOR PROVIDERS

AREA I

- Dongducheon Jooang St. Mary's Hospital 031-863-0550 (ext.104)
- Inje University Ilsan Paik Hospital 031-910-7777
- Uijeongbu St. Mary's Hospital 031-820-3636

AREA III

- Good Morning Hospital 031-659-7736
- Pyeongtaek St. Mary's Hospital 070-5012-3420
- Hwain Metro Hospital 041-622-1300
- Dankook University Hospital 041-550-7640
- Hallym University Dongtan Hospital 031-8086-2300
- South Seoul Hospital 031-218-0761
- Ajou University Hospital 031-219-4010
- St. Vincent's Hospital 031-249-8016
- Seoul National University Bundang Hospital 031-787-2038
- Cha University Bundang Medical Center 031-780-5168

AREA II

- AHS Korea 02-749-7915
- Yeouido St. Mary's Hospital 02-3779-2212
- Seoul St. Mary's Hospital 02-2258-6818
- Drs. Woo&Hann's Skin and Laser Clinic 02-777-2991
- The Mindcare Institute 070-8888-8277
- Hangang Sacred Haert Hospital 02-2639-5025
- Severance Hospital 02-2228-5819
- Cha Gangnam Medical Center, Cha University 02-3468-3127
- Seoul National University Hospital 02-2072-4100
- Tong Il Medical (DME only) 02-766-2433
- Ewha Womens University Mokdong Hospital (West) 02-2650-5890
- EZPAP Care (DME only) 10-3106-0414
- Asan Medical Center 02-3010-5001
- Samsung Medical Center 02-3410-0203
- Withmed (Southwest;DME only) 031-395-4397
- Inha University Hospital (West) 032-890-2080

AREA IV

- Hyosung Hospital 053-766-7073
- Yeungnam University Hospital 053-640-6645
- Keimyung University Dongsan Medical Center 053-250-7997
- Daegu Fatima Hospital 053-940-7520
- Women Medi Park Hospital 054-450-9870
- Gumi Cha Hospital 031-219-4010
- Samsung Changwon Hospital 055-290-6229
- Pohang St. Mary's Hospital 054-260-8105
- Busan St. Mary's Hospital 051-933-7061
- Dongeui Medical Center 051-850-8523
- Ilsin Christian Hospital 051-630-0411



A Soldier from the 2nd Combat Aviation Brigade Medical Evacuation Team reviews the medical charge sheet of a moulage casualty prior to loading him into a UH-60 Black Hawk helicopter at U.S. Army Garrison Yongsan's heliport. The training was a joint exercise with USAG Yongsan, the Brian Allgood Army Community Hospital Emergency Room and 2CAB. For more photos and information check out next month's PULSE 65. (Photo by William Wight, 65th Medical Brigade Public Affairs Office)

WITH THE LG DOOR-IN-DOOR REFRIGERATOR LIFE'S MORE CONVENIENT

Introducing the LG Signature Door-in-Door Refrigerator. It's the French Door with more. It has the largest capacity in its class, and a unique door-in-door design that gives you easy access to all the things you use most. It's the dream fridge for everyone, only from LG.

Model Number GR-D907SL
George Parker – Award winning actor



Linear Compressor – makes it quiet



Gyeongsangnam-do

Located in the South-east of the Korean peninsula, Gyeongsangnam-do, with Busan metropolitan city on its east and Daegu metropolitan city in the north, has a temperate climate with a yearly average temperature of 13°C.

The province's main tourist attractions can be divided into two main categories: Its North-western area is renown for 'healing Tourism' with its dense thick forests, including Jiri Mountain, Deogyu Mountain, Gaya Mountain, and clear valleys (this area is where the beauty of nature meets the traditional culture of Korea); The Southern area of the province is a famous tourist attraction featuring small islands and outstanding scenery offering a new experience for all family members as well as couples, while sharing its unique charm along its southern coastline.



Haeinsa Temple In Gaya Mountain



Place Name	Gyeongnam Provincial Government
Population	3.4million
Area	Encompassing 10.5% of South of Korea
Administrative Divisions	18 Cities and Counties, 315 Districts
Major Cities	Changwon-si