

# Pulse

SEPTEMBER 2018

Humphrey's  
**DENTAL  
ARTISTS**

**Chuseok**  
with Signature Foods

**FAMILY  
ADVENTURES in  
Bali, Indonesia**



# 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 alright 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.



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

Military 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. “He’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 12year-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



### SERVICES

- Orthodontics [adult, preventive, adolescents, invisalign]
- Crown and Bridges
- Cosmetic Dentistry [bleaching, laminate veneers]
- Cavity and Gingival Treatment
- Comprehensive Dental Care
- Highest Quality and Excellence in Patient Care
- Infection Control Protocols Following OSHA Guidelines
- U.S. Educated and Dentists
- English Fluent Doctors and Staff Members
- Implants
- Dentures
- Laser Therapy
- Pediatric Dentistry

### ADDRESS

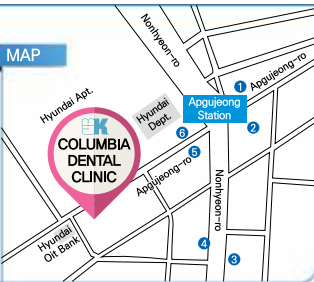
#401(4F) Karocity 2, 579 Sinsa-Dong Gangnam-Gu Seoul, South Korea

### SUBWAY

Orange Line No.3  
Apgujeong Station Exit No.5

### BUS

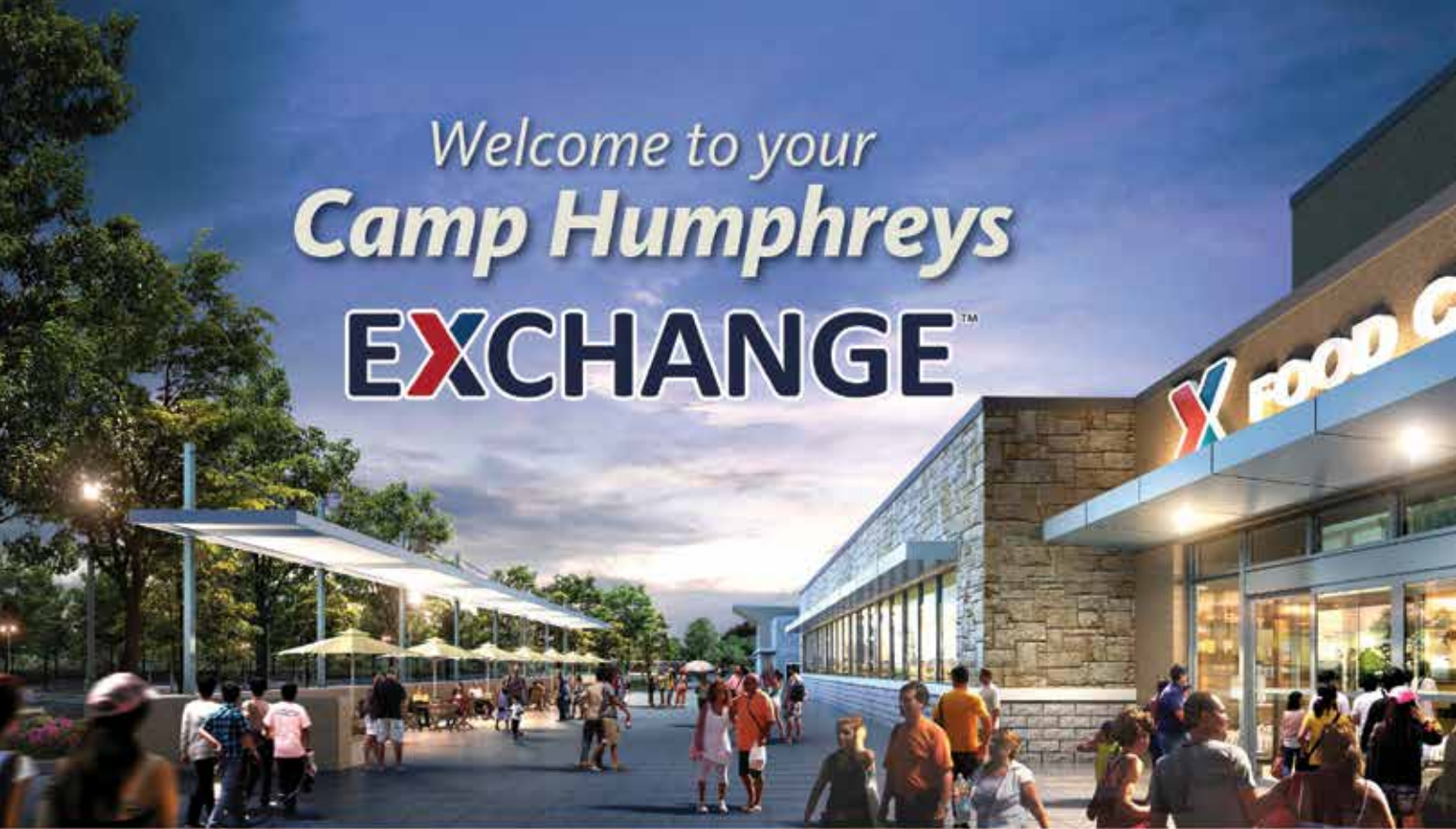
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## EDITOR'S LETTER

Dear readership of the PULSE65, I would like to thank YOU – the PULSE65 readership for taking the time to pick up a copy of our magazine. Throughout the peninsula, the racks are either empty or almost depleted each and every month and for that I say THANK YOU!

It is our goal to provide to you topics of interest in all things medical, dental, veterinary care and public health on the peninsula as well as cultural, travel, food and concert information.

Take note of the article on the upcoming influenza drive and community wide vaccination schedules. Just like previous year's the influenza vaccination is a requirement for ALL students attending DODEA schools, medical personnel, military personnel and the civilian workforce. Our Public Health team is working hard to provide all of our beneficiaries access to the vaccination.

I am often asked about the services the 65th Medical Brigade provides, this month we have highlighted two unique quality of patient care areas: HIPPA and JOES as well as a behind the scenes view of the lab technicians of the Carius Dental Treatment Facility.

A special thank you to Cheryl Brown for her contribution to the Family Adventures in Asia about her family's trip to Bali, Indonesia.

Also in this issue is an article on Chuseok, also known as Korean Thanksgiving Day. It is one of the most important and festive holidays of the year. This year, Chuseok falls on Thursday, September 19th, but the holiday period actually lasts for three days in total – including the day before and after Chuseok. Traditionally, Koreans return to their ancestral hometowns to celebrate with their families. The primary reason for Chuseok in South Korea is to honor ancestors and deceased relatives, but the holiday also serves the purpose of keeping the family together in a time when work and other obligations may separate people.

The PULSE65 is YOUR magazine! Please take time to tell us what you think about our publication and what you would like to see within its pages by completing our five question readership survey at <http://www.surveymonkey.com/r/KYPVLX8>.

We ask that if anyone has an interest in photography or covers an event or takes a tour or family vacation to please submit to the following email: [pulse65editor@gmail.com](mailto:pulse65editor@gmail.com). We are always looking to broaden our coverage. We need your help so please continue to share our publication with your family and friends. Suggestions and comments are always welcomed along with submissions.

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 further improve this publication.

William Wight  
PULSE65 Senior Editor  
65th Medical Brigade  
Public Affairs Specialist



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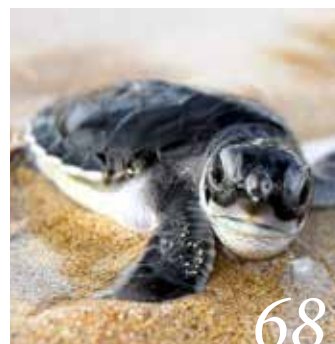
## Humphrey's Dental Artists

Carius Dental Treatment Facility Orthodontist Assistant, Chan Mi Yi uses the 'exam chair side' scanner to make a digital image of Capt. Jason Yoo's teeth. The image will be sent to the dental laboratory technician "artists" to fabricate an aesthetic or oral appliance.

FRONT COVER:  
Photo by William Wight  
65th Medical Brigade Public Affairs Office



Chuseok with  
Signature Foods



Family  
Adventures in  
Bali, Indonesia

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# Pulse65

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Ganggangsullae is a 5,000-year-old Korean group circular dance that was first used to bring about a bountiful harvest and has developed into a cultural symbol for Korea. It incorporates singing, dancing, playing instruments and is exclusively performed by women. The dance is mostly performed in the southwestern coastal province of Jeollanam-do on Chuseok holiday and Daeboreum. See pages 60-65 for more about Chuseok and its signature foods.



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## Joy Jewelry

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# CALENDAR

## EVENTS *in* KOREA



**SEP01-09**

**Muju Firefly Festival**

326-17, Hanpungnu-ro, Muju-gun,  
Jeollabuk-do  
[www.firefly.or.kr](http://www.firefly.or.kr)



**SEP07-16**

**Hamyang Wild Ginseng Festival**

49, Pilbongsan-gil, Hamyang-gun,  
Gyeongsangnam-do  
[www.sansamfestival.hyg.go.kr](http://www.sansamfestival.hyg.go.kr)



**SEP09**

**Korea-Japan Festival**

513, Yeongdong-daero,  
Gangnam-gu, Seoul  
[www.omatsuri.kr](http://www.omatsuri.kr)



**SEP11-16**

**Wonju Dynamic Dancing Carnival**

170, Dangu-ro, Wonju-si,  
Gangwon-do  
[www.dynamicwonju.com](http://www.dynamicwonju.com)



**SEP14-16**

**Dasan Culture Festival**

11, Dasan-ro 747beon-gil,  
Namyangju-si, Gyeonggi-do  
+82-32-830-0605



**SEP14-16**

**Hongseong Hero Festival**

27, Amun-gil, Hongseong-gun,  
Chungcheongnam-do  
+82-41-630-1227/8



**SEP14-16**

**Jangsu Hanurag Sagwarang Festival**

393, Hannuri-ro, Jangsu-gun,  
Jeollabuk-do  
+82-63-352-2011



**SEP14-22**

**Baekje Cultural Festival**

Buyeo-gun & Gongju-si,  
Chungcheongnam-do  
[www.baekje.org](http://www.baekje.org)



**SEP20-22**

**Jeju Haenyeo Festival**

26, Haenyeobangmulgwan-gil,  
Jeju-si, Jeju-do  
[www.visitjeju.net](http://www.visitjeju.net)



**SEP28-OCT03**

**Chuncheon Puppet Festival**

3017, Yeongseo-ro, Chuncheon-si,  
Gangwon-do  
[www.cocobau.com](http://www.cocobau.com)



**SEP28-OCT07**

**Andong Mask Dance Festival**

239, Yusa-ro, Andong-si,  
Gyeongsangbuk-do  
[www.maskdance.com](http://www.maskdance.com)



**SEP29-OCT29**

**Sancheong Medicinal Herb Festival**

Donguibogam Village, Sancheong-gun,  
Gyeongnam  
+82-55-970-6601 ~5

# NATIONAL PAIN AWARENESS MONTH

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# NAVIGATING KOREAN HOSPITALS

## EDITOR'S NOTE

The following will feature a series on navigating Korean hospitals as published by the Brian Allgood Army Community Hospital Tricare Office. Each month we will highlight a portion of the guide to ease your concerns and answer some of the questions you might have about receiving medical care in Korea.

Seeking and receiving healthcare in a foreign country at a civilian hospital can cause hesitancy and concerns because of language barriers, transportation challenges, and stress associated with navigating in an unfamiliar environment and healthcare system.

Korean network hospitals are part of our network, and together with their international clinics provide the highest quality healthcare. All are accredited by the Joint Commission International or the Korean Hospital Association. Many of the medical staff speak English and a significant number have been trained in the United States.

Usually every Korean hospital has an international clinic with English speaking staff. It is important to know that active duty personnel must wear civilian clothing while visiting Korean hospitals in accordance with Army Regulation 670-1. TRICARE Prime Beneficiaries must have a referral before going to a network Korean hospital, unless it is an emergency. When visiting one of the Korean network hospitals, expect a modern design and atmosphere, and the same up to date technology as expected in the United States. Most of the signs are in Hangul, the Korean language, with English translation to make it easier for international visitors to navigate through their hospital.

Your health and well-being is their priority, and they want your stay at their hospital to be as comfortable as possible. Remember to be patient and cooperative with the hospital staff as they work to make sure you are taken care of in a timely manner and receive the best of care. Many of the hospitals have interpreters during normal business hours. If you need assistance, the international clinic will be glad to help and make sure that communication is clear, minimizing unneeded

stress. Bringing a trusted friend or colleague with Korean language capability is an option.

If you seek emergency care at a Korean hospital after hours, the international clinics will be closed. The emergency room staff may not always know how to deal with the TRICARE process. Some of the hospitals have a 24-hour English speaking service phone number. Usually emergency rooms reach out to an English speaking person as well. In case of an emergency you can always call International SOS who manages your care overseas at 080-429-0880. If you are a TRICARE Prime beneficiary, Korean hospitals that are within the network will file claims for you. If you are a TRICARE Standard beneficiary, be prepared to pay 100% upfront then file a claim to be reimbursed. Every beneficiary must ensure that you get a diagnosis from your doctor for claim purposes. If you pay for medication, you will need both the doctor's prescription and pharmacy receipt for claim processing.

We are here to help and ensure that you receive the best of care in a patient-friendly environment. Please let us know if you are having difficulties or concerns so that we can help.

## THIS MONTH'S HIGHLIGHT



### Ewha Womans University Mokdong Hospital

Ewha Womans University Mokdong Hospital, the western Seoul's representative university hospital, has secured competitiveness by delivering specialized medical services through operation of centers such as the Cranial Nerve Center, the Cardiovascular Center, the Blood & Marrow Progenitor Cell Transplantation Center, the Bariatric Surgery Center, the Gastrointestinal Disease Center, the Cranial Nerve Center, the Kidney Center, the Respiratory System Center and the Joint Replacement Center. The Hospital supports medical education and research activities through diverse clinical practices.

The Hospital was selected as one of the top ten hospitals at the national medical organization evaluation by the Ministry of Health, Welfare and Family Affairs in 2005. At the 2008 evaluation, the highest grade, for all the 15 categories. Emergency Care Center of Ewha Womans University Mokdong Hospital was selected as the best local emergency care center by the Ministry of Health, Welfare and Family Affairs by achieving the highest grade at the evaluation on national emergency care centers.

**Phone:** 02-2650-5890

**International clinic working hours:**

M – F 0800 – 1700

**Fax:** 02-2648-5890

**Email:** ewhaint@gmail.com

**Location:** 1071 Anyangcheon-ro, Yangcheon-gu, Seoul 07985  
**Website:** eng.eumc.co.kr

**Directions (Subway):** Dongsan Station, line 2 exit 1 or line 9 exit 13 ▶ Bus No. 6620 (Green) 10 Minutes ▶ Mokdong Apartment Complex 6 (one minute by walk)

**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, Pulmonary, Radiology, Rheumatology, Surgery: Cardiothoracic/ Colorectal/ Facio-maxillary/ General/ Neurosurgery/ Plastic/ Vascular/ Urology





# Live MUSIC&DANCE CALENDAR



**SEP06**

Ellie Goulding

424 Olympic-ro, Songpa-gu  
Seoul  
www.olympicpark.co.kr



**SEP07-09**

Chilpo Jazz Festival 2018

Chilpo Beach, Pohang  
www.chilpojazz.com



**SEP08**

Mayday 2018 Life Tour Live

Olympic Hall, Seoul  
ticket.interpark.com



**SEP08-09**

2018 SPECTRUM DANCE  
MUSIC FESTIVAL

Jamsil Olympic Stadium  
ticket.yes24.com



**SEP10**

Opera Grande Concert

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



**SEP11**

Daniel Hope & Zurich Chamber  
Orchestra

Lotte Concert Hall  
www.lotteconcerthall.com/eng



**SEP14,16**

Daegu International Opera  
Festival: Don Carlo

Daegu Opera House  
ticket.interpark.com



**SEP14-16**

Greenplugged Gyeongju 2018

Hwangseong Park, Gyeongju  
ticket.interpark.com



**SEP14-16**

WORLD CLUB DOME KOREA

Incheon Munhak Stadium  
worldclubdomekorea.com



**SEP15-16**

Let's Rock Festival 2018

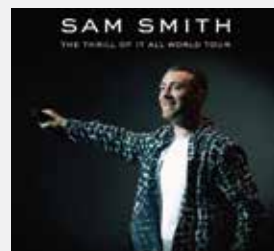
Nanji Han-River Park  
ticket.interpark.com



**OCT06-07**

SEOUL FOREST JAZZ FESTIVAL  
2018

Seoul Forest  
ticket.interpark.com



**OCT09**

Sam Smith

Gocheok Sky Dome, Seoul  
ticket.interpark.com

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## Coins of Excellence

Photo by Sgt. 1st Class Gerick Galvez  
65th Medical Brigade Correspondent



The Eighth United States Army Prevention of Sexual Assault Task Force convened August 8. 8th Army Commanding General Lt. Gen. Michael Bills asked commanders to brief their Sexual Harassment and Sexual Assault statistics and the initiatives they implement on preventing and eliminating them. The comments provided by Soldiers were candid, and gave leaders insight on the younger generations thought processes to adjust and create new courses of action on how to combat Sexual Harassment and Sexual Assault on the peninsula. The 65th Medical Brigade Command Sergeant Major, Command Sgt. Maj. Thomas Barone presented Pvt. 1st Class Kyle Butler and Spec. Lajayleus Kinnebrew with the 8th Army Commanding Generals Coin of Excellence for their honest and candid composed responses to questions during the quarterly PSATF.

## CFC Surgeon Visits USAMMC-K

Photo courtesy of USAMMC-K command suite



Republic of Korea Army Colonel Kang Ho Kim, Chief of C1 Medical Division, Combined Forces Command and his staff visited the United States Army Medical Materiel Center-Korea (USAMMC-K) Headquarters August 8 for a command brief and tour of the medical warehouse facilities with Lt. Col. Marc Welde and the USAMMC-K staff.





# SCENE & HEARD

NATIONAL & INTERNATIONAL

By Eric Young-Seok Park

## DUESENBERG BECOMES MOST EXPENSIVE AMERICAN CAR EVER SOLD



A 1935 Duesenberg SSJ, widely accepted as one of the greatest cars ever made, has sold for \$22m, making it not just the most expensive American car sold at auction but also the most expensive pre-war car ever sold. The sale took place Gooding & Co sale during the Monterey Car Week in California, with the high price achieved quickly due to an intense bidding war between two phone bidders. The record for the highest priced American car had previously been held by the first Shelby Cobra, which achieved \$13,750,000 at an RM Auctions sale in 2016. The car is one of only two Duesenberg SSJs ever made, and was built on a specially shortened 125in wheelbase. Of the two cars, this one (chassis J-563) went to legendary actor Gary Cooper and the other (chassis J-567) went to fellow Hollywood superstar Clark Gable. Gary Cooper was known for his love of fast cars. The SSJ was perfect for him, with its 400bhp supercharged twin-cam inline 8-cylinder engine – 80bhp more than the standard Duesenberg SJ, which was already the most powerful and one of the fastest production cars of its day. The SSJ Speedsters improved on the SJ with a lightweight bobtail body by LaGrande, a subsidiary of Auburn.

## PARENTS OUTRAGED AFTER THEIR SON IS PUNISHED FOR REFERRING TO HIS TEACHER AS 'MA'AM'



Teretha Wilson and McArthur Bryant raise their 10-year-old son Tamarion to call their elders "ma'am" and "sir," but that politeness got the fifth grader in trouble from a teacher at his preparatory school. The North Carolina parents said that they had Tamarion moved to a different classroom at North East Carolina Preparatory School in Tarboro after his teacher punished him for calling her "ma'am." Tamarion had returned from school with a punishment he had to have signed by his parents. He went on to explain that he had continued to repeatedly call his teacher "ma'am" despite her requests not to, and was told to write the word "ma'am" written on a piece of paper four times per line on both sides as a penalty. "He had a look on his face of disappointment, shame," Bryant said. "At the end of the day as a father, to feel kind of responsible for that... knowing that I have been raising him and doing the best that I can, it's not acceptable." Reps for North East Carolina Preparatory School said, "This is a personnel matter which has been handled appropriately by the K-7 principal." Bryant is warning other parents. "If it happened to my son, I'm pretty sure if not a week, a day, a month, a year, it will occur to somebody else's child," he said. And as for Tamarion's punishment, it was returned to the teacher, signed as promised — but with a second sheet of paper attached, the family said: Tamarion, writing the definition of the word "ma'am."

## MOM-SHAMED OVER DAUGHTER'S DOG WALKING



An Illinois mother says that trying to teach her daughter a little independence and responsibility ended in investigations from police and child services. Corey Widen says she let her 8-year-old daughter, Dorothy, walk family dog Marshmallow around the neighborhood in the Chicago suburb of Wilmette where they live. She could see her daughter out the window for most of the walk. Shortly after Dorothy got back from walking Marshmallow on Aug. 2, police showed up at the door. Apparently, someone had called them to report that a child -- whom the caller incorrectly reported as around 5 -- was walking a dog alone. Wilmette Police Chief Kyle Murphy said that after responding to the home and speaking with Widen, they determined that nothing was wrong. But the situation didn't end there. The neighbor also ended up calling the Illinois Department of Children & Family Services, prompting the agency to open an investigation into the family that went on for nearly two weeks. Widen hired a lawyer and DCFS ultimately closed the case, finding no wrongdoing. But she says things never should have gotten that far in the first place. "The initial call was for an unattended 5-year-old, and once they knew I didn't even have a 5-year-old, it should have stopped there," she said. "I don't think it should have made it past the hotline that a little girl walking her dog needs to be investigated." While investigations into Widen's family were ultimately resolved without issue, people calling authorities on parents and children in the U.S. the past has led to disproportionately severe consequences for families. And experts have said law enforcement is often much harsher on families of color and lower-income parents.

## FAMILY AFFAIR! TEARS AS N. KOREA'S RIM FOLLOWS LITTLE SISTER TO GOLD

Rim Jong Sim bagged North Korea's seventh weightlifting gold of the Asian Games in Indonesia to complete a remarkable family double, just a day after a victory by her little sister. Like her 22-year-old sibling Rim Un Sim in 69kg category, the reigning Olympic champion enjoyed a comfortable margin of victory in the 75kg class -- this time by a massive 26kg. "I was a bit nervous after my sister won, just hoping I could do the same," said a delighted Jong Sim, 25, who was watched by her sister Un Sim as she further extended North Korea's record weightlifting haul at the Asian Games. After wiping away her tears, Un Sim told AFP: "I was so happy for 'Onni' (big sister). I knew she could win but I couldn't hold back when I thought of her and my country." It was a sentiment echoed by Jong Sim. "This gold is not just for me but for my country," she told reporters. "I cried when I thought about my country. I can't wait to go back home now." North Korea's previous best performance at the Games had been four weightlifting golds at the Incheon Asiad four years ago.



## TESLA'S SEMI TRUCK IS TRAVELING CROSS-COUNTRY 'ALONE'



Tesla's Semi truck has already made some city-to-city trips, but how does it fare on cross-country jaunts -- you know, what it'll be doing when it enters service? Just fine, if you ask Elon Musk. In response to an Electrek piece on the Semi's latest visit (to Arkansas trucking behemoth J.B. Hunt), the CEO noted that the Semi has been traveling thousands of miles entirely by itself, using the existing Supercharger network. The only necessary help is an "extension cord" to help the truck plug in. To be exact, it's a system of cords that plugs into multiple stations at once to top up the Semi's giant battery before the company's Megachargers come online. That solo travel is likely meant in part to reassure customers (including J.B. Hunt) that the Semi is already capable of handling long-distance trips without escorts. This is a significant step toward the Semi hitting the road in earnest, but there are many more steps to go.

## BEAR DEFENDING CUB ATTACKS 10-YEAR-OLD BOY AT YELLOWSTONE NATIONAL PARK



A mother bear attacked and injured a 10-year-old boy at Yellowstone National Park on Thursday. Officials said the bear was defending its cub when it charged a group of four hikers, including the young boy. The 10-year-old tried to run, but the bear chased the boy and knocked him down, the National Park Service said in a statement. His family managed to drive the animal away with bear spray. The boy "suffered an injured wrist, puncture wounds to the back and wounds around the buttocks," the statement read. He's been taken to a local hospital for treatment. Officials are searching for the bear, which they say is likely a grizzly with at least one cub. They praised the family for their quick thinking. "This incident could have been more serious. We applaud the family for traveling in a group, carrying bear spray, and knowing how to effectively use it during their emergency," Pat Kenney, Yellowstone National Park deputy superintendent, said in a statement. This is the first reported incident involving a bear in the park since 2015.

## SCIENTISTS DISCOVER GIANT DEEP-SEA CORAL REEF OFF ATLANTIC COAST

As the research vessel Atlantis made its way out to sea from Woods Hole, Massachusetts, last week, expedition chief scientist Erik Cordes predicted the team would discover something no one has ever seen before. It didn't take long. Some 160 miles off the coast of Charleston, South Carolina, a half mile below the ocean surface, is a dense forest of cold water corals. And based on their observations and recent sonar mapping of the ocean floor, researchers estimate that the reef runs for at least 85 linear miles. "This is a huge feature," Cordes said. "It's incredible that it stayed hidden off the U.S. East Coast for so long." The existence of the reef was confirmed during a pair of submersible dives this week that were part of a two-week expedition to explore uncharted canyons, gas seeps and coral ecosystems off the Atlantic coast. The discovery builds upon research this summer by scientists working aboard the Okeanos Explorer, a National Oceanic and Atmospheric Administration ship.



## THESE SEARS AND KMART STORES WILL START LIQUIDATION SALES SOON



Sears Holdings Corp. has provided a list of 46 unprofitable stores, across 28 states, that it will close in November. The number includes 33 Sears stores and 13 Kmart stores. The struggling department store chain said liquidation sales at the closing stores begins soon. Earlier this summer, Sears provided an updated list of 78 Sears and Kmart stores that it said would close in September. The company had originally said in May that it had identified 100 non-profitable stores, and that it would begin closing 72 of those stores in the coming months. At that time, Sears initially provided a list of 63 stores it would begin closing in early September, then updated that list in early June to 68 stores, then added 10 more stores to the list in late June that it said would begin closing in late September. "We continue to evaluate our network of stores, which is a critical component to our integrated retail transformation, and will make further adjustments as needed," the company said in a statement.

## UK REPORTEDLY PLANS ITS OWN SATELLITE NAVIGATION SYSTEM



Now that the UK likely won't be involved in the EU's Galileo positioning satellites, it's in a tough spot. How does it get the most accurate navigation technology it can once Brexit is official? By building its own satellite network, apparently. It is said that Prime Minister Theresa May has ordered the creation of a UK-built satellite positioning system, with up to £100 million (about \$128.5 million) set aside for "mapping out" how it would work. Any self-developed network is likely to be expensive (one estimate put it at £3 billion), and it's easy to foresee opposition to the plan if made official. The country does have strong incentives to build its own satellites instead of relying on others, though.

## GIRLS WHO LOST DEPLOYED DAD SURPRISED WITH NEW PUPPY

A Long Island, New York family left devastated by the death of a military dad deployed to Iraq this year was recently surprised with the uplifting gift of a puppy. Master Sgt. Christopher Raguso, of Commack, was killed in a helicopter crash one day after his 39th birthday, leaving behind two young daughters and his wife. Raguso and his wife, Carmela Raguso, had planned to get a dog upon his return. Sadly, they never got the chance. However, a charity called Paws of War that trains shelter dogs to be given away to help comfort military families heard their story. Over the weekend 5-year-old Eva and 7-year-old Mila were introduced to Calvin and they couldn't have been happier. "This pup Calvin will help the children sleep better," said Robert Misseri with the Long Island-based charity. The girls' mother said they've suffered from nightmares since losing their dad. "There's no question that he will bring some calmness and serenity into their lives," Misseri said of Calvin, a black Lab who was slated to be put down in a crowded Louisiana shelter before rescuers drove him up to New York. The group said they provided the Raguso family with toys, food, and other dog necessities. "We needed happy, something genuinely happy, something to keep their minds off the everyday and something to take care of," said Carmelo Raguso.







# DENTAC Korea Changes Leadership

Photos by William Wight  
65th Medical Brigade Public Affairs Office

**T**he 618th Dental Company (Area Support) is a unique organization in the Army Dental Care System in that it is the only organization with a dual mission.

It supports the Eighth United States Army during transition to hostilities and provides armistice health care to all United States Forces Korea beneficiaries on a daily basis at Camps Casey, Walker and Carroll as well as Humphreys and Yongsan Army Garrison.

Recently, the 618th underwent a change in leadership as the top U.S. Army dentist in of all Korea, Col. Jae Hwang was replaced by Col. Tawanna McGhee-

Thondique during a ceremony August 6 at U.S. Army Garrison Humphrey's Sitman Fitness Center.

Presiding over the change of command was Col. David Mott, U.S. Army Dental Health Command-Pacific Commander and Col. Derek Cooper, 65th Medical Brigade Commander.

"618th you are truly a great unit, doing great things that quite honestly no other dental unit in the Pacific or entire dental enterprise is able to master," said Cooper. "You are carrying the responsibilities as the only dual command with a full time TDA responsibility coupled with full functional MTOE mission. Soldiers

stationed in Korea benefit greatly from your expertise, skills and ability to maximize dental readiness and wellness."

DENTAC Korea over the past few months opened two fully functional dental facilities: the 79-chair Carious Dental Treatment Facility, the largest in the U.S. Army, and the 28-chair Sgt. Shin Woo Kim Troop Medical and Dental Facility, as well as established two additional treatment rooms at the Humphreys in-processing center to provide support for the Go First Class mission while closing four dental facilities, moving the Headquarters all while maintaining facilities throughout the peninsula.

"Leadership is the capacity to translate vision into reality and Col. Hwang your vision, adaptability, flexibility and strength enabled DENTAC Korea and the 618th DCAS to thrive during a time of significant transition and transformation," said Cooper.

"Today is a historic day for the 618th Dental Command as we witness the change of command from one great leader to another. I thank all of you for the quality of care you having given to those here in Korea," said Col. Mott, who went on to say





that the Korea team has seen more than 132,785 patients and conducted over 346,080 procedures during Col. Hwang's tenure. "Not only soldiers benefited from the great dental care, but many family members and other beneficiaries passed through their doors. What made this unit unique is at the same time they performed the no fail mission of armistice dental care, and field training to support any contingencies that may arise on the Korean peninsula."

"As the 618th is the most-forwarded deployed dental unit in the Army, my number one priority was dental readiness," said Hwang. "Together we were able to execute our mission and successfully modularize our assets to deploy dental teams throughout the peninsula."

Col. McGhee comes to the command from Tacoma Washington where she served as the I Corps, 593rd Expeditionary Sustainment Command and the 62nd Medical Brigade as the Commander of the 673rd Dental Company (Area Support), Joint Base Lewis-McChord.

"As I assume command, I welcome the challenge and although we have changed commanders, the driving force of this organization is to remain constant and ready," said McGhee.



## 618th Dental Company (Area Support)

The 618th Dental Company (Area Support) receives its lineage from the 618th Medical Clearing Company, which was constituted in the regular Army in March 1929 as the 53rd Hospital Company. It was activated in June 1941 as Company H, 18th Medical Regiment at Camp Forest, Tennessee, reorganized and redesignated as the 618th Medical Battalion (Dental Service), and redesignated once more as the 618th Medical Company (DS) in April 1993. In October 1999, the 163rd Medical Battalion (DS) was inactivated and the 618th Dental Company (AS) was activated.

The 618th Dental Company (AS) provides dental care to Soldiers throughout the Republic of Korea at Camps Casey, Walker and Carroll as well as Humphreys and Yongsan Army Garrisons.

The 618th Dental Company is a unique organization in the Army Dental Care System. It is the only organization that has a dual TDA/MTOE mission. It is an MTOE organization, preparing to support Eighth Army during Transition to Hostilities, but also has a significant TDA mission – that of providing armistice health care to all USFK beneficiaries on a daily basis.

The 618th Dental Company (AS) is proud of its heritage and takes pride in the services it performs for all USFK beneficiaries in the Republic of Korea.

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# In Memory of Cpt. BONIFAS and 1st Lt. BARRETT

Story by William Wight  
65th Medical Brigade Public Affairs Office  
Photos courtesy of Pvt. 1st Class Sidney Perry  
U. S. Army Garrison Yongsan Visual Information Services

Forty two years ago the first true conflict between north and South Korea, since the armistice agreement was signed in 1953 took place when 30 Korean People's Army guards attacked 12 Korean and U.S. Soldiers. The United Nations Command Security Battalion-Joint Security Area held the Barrett-Bonifas Memorial Ceremony on Camp Bonifas Aug. 20 to remember the loss of two Soldiers, Capt. Arthur Bonifas, of Newburgh, N.Y., the Joint Security Force company commander, and 1st Lt. Mark Barrett, of Columbia, S.C., the 1st platoon leader, who were brutally axed to death during a routine tree trimming operation near the Bridge of No Return.

**T**

he United Nations Command workforce and a 10-man security detail began a routine tree trimming operation Aug. 18, 1976, on a large poplar tree, which was impeding the South's visibility between two UNC checkpoints. The UNC workforce was attacked without warning. The fight only lasted for four minutes, during which time Bonifas and Barrett were killed by north Korean soldiers.

Among the guests at the memorial ceremony were representatives of the Republic of Korea, U.S., New Zealand, Swedish and Swiss Army, members of the JSA Veterans Association, aka "JSA old boys" members of the Bonifas-Barrett Memorial Post 8180 Veterans of Foreign Wars and members of the Col. Lewis L. Millett Post 38 of the American Legion.

Mr. Kim Moon-hwan, the former Korean Augmentation to the United States Army company commander in the Joint Security Area during the time of the attack, worked with Bonifas at the JSA in 1976, was also by his side during his last moments on earth.

"I lost a good friend," said Kim. "We fought together against the KPA guards."

Back in 1976, as it is today, the JSA was a sensitive location. Even the smallest incident could escalate to something bigger, and then it could be the rekindling of the Korean War, Kim stated.

According to Kim, in 1976 the KPA guards were able to move freely throughout the Demilitarized Zone and no one thought anything of it.

"Before we speak about the incident on Aug. 18, 1976, we need to know the situation in 1976," said Kim. "In 1975, the Vietnam War was finished and a lot of people did not want to be involved in the war in foreign countries. So we tried to lessen the tensions with North Korea."

Kim stated that there were small altercations between the KPA guards and Republic of Korea and U.S. Soldiers who were at the JSA from 1975 up to Aug. 18, 1976, but no one had been killed.

That all changed on that horrid day.

"Because check point three was in a dangerous location and surrounded by north Korean outposts we used a nearby check point to look after Soldiers who were on duty by signaling to each other; but the tree hindered observation," said Kim.



The fight only lasted for four minutes, during which time Bonifas and Barrett were killed by north Korean soldiers.







Steve Tharp (right), represented the Bonifas Barrett Memorial Post 8180 of the Veterans of Foreign Wars, Bill Beatty (middle) and Chris Vaia (left) represented the Col. Lewis L. Millett American Legion Post 38 Korea.

In order to be able to see from the check point, Bonifas and a team of 11 ROK and U.S. Soldiers proceeded to cut down the branches.

That was the last mission Bonifas and Barrett took part in before they were attacked by the KPA and killed.

While performing the tree trimming detail, the group was brutally attacked by 30 KPA guards resulting in two deaths and others receiving minor injuries.

Three days later the United Nations Command launched Operation Paul Bunyan, the largest tree trimming operation in Korean history, which placed all U.S. and South Korean forces in Korea on full combat alert. The regular JSA security force was augmented with an additional combat platoon from the JSA, 50 martial arts experts from the ROK Special Forces and



“

We should never forget that Capt. Bonifas and 1st Lt. Barrett sacrificed their own lives for peace on the peninsula.”

— General Vincent Brooks, United Nations Command/Combined Forces Command/United States Forces Korea Commanding General

15 combat engineers to cut down the tree. Flying south of the DMZ were B-52 bombers, F111s, and F-4s in support whilst steaming off the coast of Korea was the USS Midway aircraft carrier with her entire battle escort on full alert. In forty five minutes the Task Force completed its mission without incident.

Today, at the Bridge of No Return, a bronze and stone monument stands where Bonifas, Barrett and 10 other ROK and U.S. Soldiers fought off those 30 KPA guards.

Kim returns to the JSA throughout the years because he believes Bonifas is still there even though he knows he has passed.

Maj. Arthur Bonifas is interred in West Point Cemetery and 1st Lt. Mark Barrett is buried at Greenlawn Memorial Park in Columbia, South Carolina.



United Nations Command/Combined Forces Command/United States Forces Korea Commanding General Vincent Brooks and USFK Command Sergeant Major Steven Payton pay tribute with white carnations to the memorial of Bonifas and Barrett.





# TRICARE Users May Have Received *Contaminated Drug*

Courtesy of Military.com

**O**n July 13, 2018, the Food and Drug Administration issued a voluntary recall of Valsartan, which is used to treat high blood pressure. Express Scripts identified 8,400 TRICARE beneficiaries who received the contaminated product through the mail order network. Another 17,200 TRICARE beneficiaries received a potentially contaminated product from retail pharmacies. The Department of Defense sent letters to all beneficiaries who received the product. Compare the information on your prescription bottle with the information in the recall list. If your medicine is included in the recall, contact your pharmacist or physician. For more information, visit <https://www.fda.gov/drugs/drugsafety/ucm613916.htm>. For complete guides on TRICARE programs, visit <https://tricare.mil>.



**ATTENTION:**

## DRUG RECALL!

On July 13, 2018, the Food and Drug Administration issued a voluntary recall of **VALSARTAN**. Valsartan is used to treat high blood pressure and heart failure. The FDA announced the voluntary recall after finding an impurity linked to cancer in drug products containing valsartan.

To learn more, visit:  
[www.fda.gov/drugs/drugsafety/ucm613916.htm](https://www.fda.gov/drugs/drugsafety/ucm613916.htm)

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Joint Combat Life Saver course instructor Sgt. Jared Basquez, a medical operations noncommissioned officer with 35th Air Defense Artillery Brigade surgeon section, evaluates as Pvt. 2nd Class Dustin Furlong, a paralegal specialist assigned to the 35th ADA Brigade, applies a tourniquet to a simulated casualty.



# JOINT COMBAT LIFE SAVER TRAINING STANDARDIZES CRITICAL CARE ON THE BATTLEFIELD

Story and photos by Staff Sgt. Todd Pouliot  
35th Air Defense Artillery Brigade Public Affairs Office

The 35th Air Defense Artillery Brigade surgeon section provides training in critical life-saving techniques several times throughout the year, not only to members of its own unit, but to service members throughout the Republic of Korea, both U.S. and ROK.

The section recently conducted a Joint Combat Life Saver course August 13 to 17, at Osan Air Base, in which Soldiers and Airmen trained on assessing and treating traumatic battlefield injuries.

Staff Sgt. Erin McKee, 35th ADA Brigade surgeon noncommissioned officer-in-charge and lead instructor of the Joint Combat Life Saver course, said her section has hosted participants from various U.S. Army units, U.S. Air Force, and members of the ROK Army and Air Force.

“CLS is specifically used to train nonmedical personnel medical tasks,” McKee said. “We teach the students how to effectively, accurately, and in the right order, treat a patient from start to finish.”

The course focuses on top three concerns; controlling hemorrhaging, keeping an open airway and treating chest injuries.

“If those three things are not addressed correctly

and effectively the first time, it could kill a patient,” she said.

McKee’s section strives to conduct the 40-hour, five-day JCLS course once a quarter. Although Soldiers from the 35th ADA Brigade are the course’s primary target audience, opening the course up to other units brings a unique diversity of experiences that enhances the training.

“The more experiences you get into a class, the better class you get,” she said. “You’re going to have some people who have deployed, some people who have not; some with previous outside medical training, others with none.”

According to McKee, CLS is unique to the Army. It is unlike training conducted in other military branches. The objective of the JCLS course is to bring military members from diverse units together to train to a highly defined and proven standard.

U.S. Air Force SSgt. Luis Colon, with 51st Security Forces Squadron at Osan Air Base, participated in the most recent JCLS class, and expressed his appreciation for the joint aspect of the training.

“Everybody does things differently,” said Colon. “What’s unique about this training is that we all get the same training so it’s universal. It gets everyone on the same page.”

Reciprocally, Colon teaches another joint course on Osan Air Base, the combat readiness course, in which soldiers of the 35th ADA Brigade also participate, as well as members of the ROK air force. Emergency response is a significant segment of CRC and Colon said he will introduce what he learned from the JCLS course. “I can definitely pass on the information I’ve learned to those who come through the combat readiness course,” Colon said. The section on controlling hemorrhage greatly increased my understanding of the importance of controlling bleeding.”



First Lieutenant Yoon Yang, a communications officer from 35th Air Defense Artillery Brigade, calls in a nine-line medical evacuation for a simulated casualty.



Joint Combat Life Saver course instructor Sgt. Jared Basquez, a medical operations noncommissioned officer with 35th Air Defense Artillery Brigade surgeon section, evaluates as Pvt. 2nd Class Dustin Furlong, a paralegal specialist assigned to the 35th ADA Brigade, prepares to apply a pressure dressing to a simulated casualty.

In one years’ time, McKee has amassed nearly 300 hours teaching JCLS training more 170 personnel. McKee believes that number should be much higher due to the importance of service members being able to care for one another in the event of an emergency.

“I think that people don’t put enough emphasis on getting their soldiers trained in CLS and that it is not just a junior enlisted function,” McKee said. “They are not the only ones who need to be trained. This training is increasing our readiness and increasing our ability to take care of one another.”



# September is National Preparedness Month

Courtesy of ready.gov



**D**uring this observance, people are reminded to take action throughout the year to prepare for emergencies that can affect them where they live and work.

The Department of Homeland Security provides disaster information, planning tools and other helpful resources in support of National Preparedness Month. This year's overarching theme is "Disasters Don't Plan Ahead. You Can."

The goal of National Preparedness Month is to increase the number of individuals, families and communities that engage in pre-

paredness actions at home, work, business, school and place of worship.

Make a plan for yourself, family and friends, and signup for alerts and warnings in your area. Be sure to practice your plans.

Planning and preparing for a disaster could save your life.

The Army's focus remains steadfast to educate, empower and involve the Army community in preparedness activities that enhance the Army's resiliency and increase the nation's readiness for all hazard events.

Make a plan and remember that

your family may not be together if a disaster strikes. It's important to know which types of disasters could affect your area.

Consider specific needs in your household. Discuss your needs and responsibilities and how people in the network can assist each other with communication, care of children, business, pets or specific needs like the operation of durable medical equipment.

Let someone know your travel plans, to include anticipated time of departure, route and expected time of arrival at your destination. If these change, update that person.

Don't be in a hurry. Give yourself sufficient time to complete your journey and add extra time to your planning to accommodate unexpected developments.

Weather-related fatalities in automobiles in ice and snow conditions represent 70 percent of all weather-related deaths, according to the National Weather Service.

Technology such as smartphones and GPS devices can only help you if they're charged.

If you think the weather is too hazardous for travel, or if it changes when you're on the road, don't try and force the issue. Waiting for better weather is worth the delay.

Staying warm and well hydrated are the most important things to consider if you become stranded in your car.

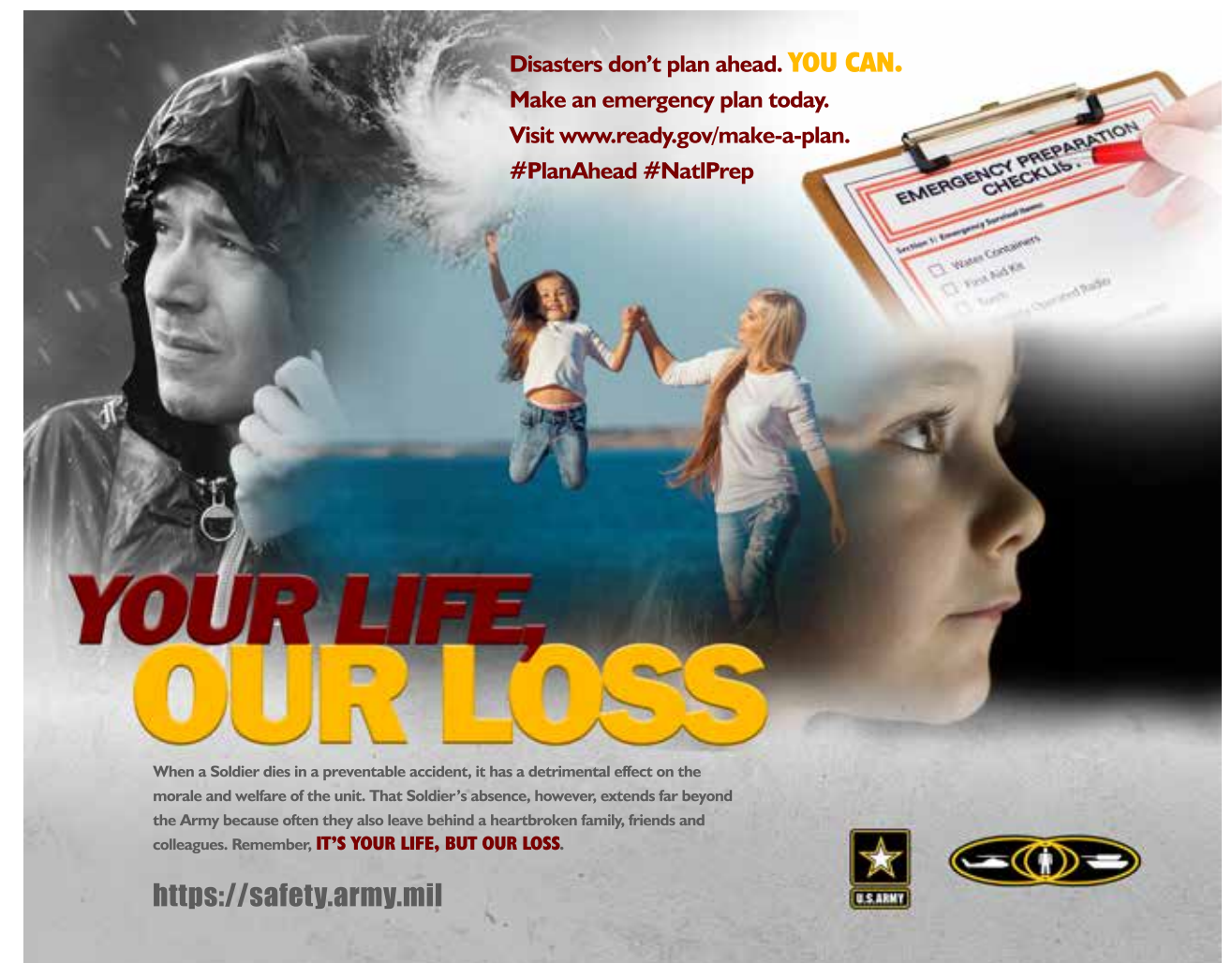
A list of recommended items that should be in your vehicle for travel is available at [www.Ready.gov](http://www.Ready.gov) and other sites.

NATIONAL PREPAREDNESS MONTH 2018

  
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**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.**

<https://safety.army.mil>



# What You Should Know about *Tuberculosis*

By 1st Lt. Eduardo Mendezlanda  
U.S. Army Garrison Humphreys Public Health Nurse



**A**ccording to the Centers for Disease Control and Prevention (CDC) there are globally, 9 million new Tuberculosis (TB) cases and nearly 1.5 million TB-related deaths each year. There are two TB-related conditions: TB disease, often called “active TB” and latent TB-infection or LTBI. Given modernization, higher

standards of living, and current medical care, the risk and severity of TB has been greatly reduced in the United States. Worldwide however, TB is still on the top 10 causes of death in particular in developing countries according to the World Health Organization (WHO). In South Korea, the WHO says around 43,000 people are infected yearly with TB and about 2,000 lives are claimed each year.

TB spreads through the air by tiny droplets when a person with active TB coughs, sneezes, speaks, or sings. People in direct contact with a person with active TB are at risk of becoming infected by breathing in the bacteria. Once the bacteria enters the body, it can settle in the lungs and grow. Because of how it is transmitted, people with active TB are more likely to spread it to

those they spend the most time with like friends and family, especially if living or working in crowded spaces. Most at risk are those with a weak immune system such as young children, the elderly, those with other diseases like diabetes, infections such as HIV, and other conditions that may weaken the body. TB is not spread by shaking someone’s hand, kissing, sharing food or drink, or touching objects.

Not everyone who becomes infected with TB will get sick. Most people’s bodies are able to fight the bacteria. When this happens, there are no signs or symptoms of sickness, TB is inactive and is called LTBI. Someone with LTBI cannot spread the TB bacteria to other people. LTBI could remain inactive for a lifetime without causing disease in

some people. But in others, especially those with a weak immune system, LTBI could convert into active TB disease. When someone has active TB, the most common symptoms include: a bad cough lasting more than three weeks, chest pain, coughing blood, night sweats, weight loss, weakness and lack of appetite.

Testing for TB is done with the TB skin test or a TB blood test and is quite often found with a chest x-ray. People who believe to have come into contact with someone with active TB should get tested as well as those who are recently diagnosed with a disease that weakens the immune system, and those who visit crowded places in areas where TB is high.

Both LTBI and active TB disease are treatable and preventable with

education and awareness. The method of treatment is determined by a medical provider that will consider different factors such as the person’s age, medication allergies and other concurrent diseases. The majority of people can be treated at a clinic and take medications at home. Prevention can be achieved by recognizing symptoms of active TB and knowing if one has been exposed.

TB is a deadly disease that has been around for a long time, but with modern improvements in healthcare, education and awareness, the global efforts to reduce and eliminate TB can be achieved. For more information on TB and LTBI visit the CDC website at <https://wwwnc.cdc.gov/travel/diseases/tuberculosis> or reach out to your local military treatment facility and consult with a provider.

### WATCH WHERE YOU WALK

In FY17, 11 Soldiers perished in pedestrian-related mishaps compared to five deaths in FY16.

Everyone is susceptible to accidents, but tragedy is not inevitable. When walking always remember to:

- Maintain situational awareness and avoid distractions.
- Know and follow all traffic rules, signs and signals.
- Walk in safe places.
- Avoid alcohol consumption; according to AAA, almost half of all traffic crashes resulting in pedestrian casualties involve alcohol consumption.

## YOUR LIFE, OUR LOSS

Take advantage of the risk management process and tools the Army provides to help keep you safe. Remember, **IT'S YOUR LIFE, BUT OUR LOSS.**

To learn more, visit <https://safety.army.mil>.



# How is Your Health Information Protected?

## A Look inside HIPPA

Courtesy of the Brian Allgood Army Community Hospital HIPPA office



Most of us believe that our medical and other health information is private and should be protected, and we want to know who has this information. The Privacy Rule, a Federal law, gives you rights over your health information and sets rules and limits on who can look at and receive your health information. The Privacy Rule applies to all forms of individuals' protected health information, whether electronic, written, or oral. The Security Rule is a Federal law that requires security for health information in electronic form.

In 1996, the United States Congress signed into law The Health Insurance Portability and Accountability Act commonly referred to as HIPAA.

HIPAA is defined as protected health information (PHI) as individually identifiable health information that is maintained or transmitted in any form or medium, except for information in records covered by the Family Educational Rights and Privacy Act and employment records held by a covered entity in its role as employer. The HIPAA Privacy Rule covers PHI in all forms (paper, oral and electronic). The HIPAA Security Rule applies only to PHI that is maintained or transmitted in electronic form.

HIPPA at the Brian Allgood Community Hospital and all outlying medical clinics on the Korea peninsula is protected by administrative safeguards. (i.e., HIPAA policy within the hospital, privacy act coversheets when transporting PHI, and safe disclosure on a need to know basis).

### What is considered HIPAA protected?

PHI or Protected Health Information is called Individually Identifiable Health Information under HIPAA Privacy Rule. It is defined as any kind of information that is saved, accessed or used by any covered entity or its business associates in any form, i.e. oral, electronic, media or the paper medium.

### What does HIPPA do?

HIPAA does the following:

- Provides the ability to transfer and continue health insurance coverage for millions of American workers and their families when they change or lose their jobs;
- Reduces health care fraud and abuse;
- Mandates industry-wide standards for health care information on electronic billing and other processes; and
- Requires the protection and confidential handling of protected health information

Entities that must follow the HIPAA regulations are called covered entities.

Covered entities include:

- Health Plans, including health insurance companies, HMOs, company health plans, and certain government programs that pay for health care, such as Medicare and Medicaid.
- Most Health Care Providers—those that conduct certain business electronically, such as electronically billing your health insurance—including most doctors, clinics, hospitals, psychologists, chiropractors, nursing homes, pharmacies, and dentists.
- Health Care Clearinghouses—entities that process nonstandard health information they receive from another entity into a standard (i.e., standard electronic format or data content), or vice versa.

In addition, business associates of covered entities must follow parts of the HIPAA regulations.

Often, contractors, subcontractors, and other outside persons and companies that are not employees of a covered entity will need to have access to your health information when providing services to the covered entity. We call these entities "business associates." Examples of business associates include:

- Companies that help your doctors get paid for providing health care, including billing companies and companies that process your health care claims

- Companies that help administer health plans

- People like outside lawyers, accountants, and IT specialists

- Companies that store or destroy medical records

Covered entities must have contracts in place with their business associates, ensuring that they use and disclose your health information properly and safeguard it appropriately. Business associates must also have similar contracts with subcontractors. Business associates (including subcontractors) must follow the use and disclosure provisions of their contracts and the Privacy Rule, and the safeguard requirements of the Security Rule.

### Who Is Not Required to Follow These Laws?

Many organizations that have health information about you do not have to follow these laws.

Examples of organizations that do not have to follow the Privacy and Security Rules include:

- Life insurers
- Employers
- Workers compensation carriers
- Most schools and school districts
- Many state agencies like child protective service agencies
- Most law enforcement agencies
- Many municipal offices

### What Information Is Protected?

- Information your doctors, nurses, and other health care providers put in your medical record

- Conversations your doctor has about your care or treatment with nurses and others

- Information about you in your health insurer's computer system

- Billing information about you at your clinic

- Most other health information about you held by those who must follow these laws

### How This Information Is Protected?

- Covered entities must put in place safeguards to protect your health information and ensure they do not use or disclose your health information improperly.

- Covered entities must reasonably limit uses and disclosures to the minimum necessary to accomplish their intended purpose.

- Covered entities must have procedures in place to limit who can view and access your health information as well as implement training programs for employees about how to protect your health information.

- Business associates also must put in place safe-

guards to protect your health information and ensure they do not use or disclose your health information improperly.

### What Rights Does the Privacy Rule Give Me over My Health Information?

Health insurers and providers who are covered entities must comply with your right to:

- Ask to see and get a copy of your health records
- Have corrections added to your health information
- Receive a notice that tells you how your health information may be used and shared
- Decide if you want to give your permission before your health information can be used or shared for certain purposes, such as for marketing
- Get a report on when and why your health information was shared for certain purposes
- If you believe your rights are being denied or your health information isn't being protected, you can file a complaint with your provider or health insurer and with the Department of Health and Human Services.

You should get to know these important rights, which help you protect your health information.

You can ask your provider or health insurer questions about your rights.

### Who Can Look at and Receive Your Health Information?

The Privacy Rule sets rules and limits on who can look at and receive your health information. To make sure that your health information is protected in a way that does not interfere with your health care, your information can be used and shared:

- For your treatment and care coordination
- To pay doctors and hospitals for your health care and to help run their businesses
- With your family, relatives, friends, or others you identify who are involved with your health care or your health care bills, unless you object
- To make sure doctors give good care and nursing homes are clean and safe
- To protect the public's health, such as by reporting when the flu is in your area
- To make required reports to the police, such as reporting gunshot wounds

Your health information cannot be used or shared without your written permission unless this law allows it. For example, without your authorization, your provider generally cannot:

- Give your information to your employer
- Use or share your information for marketing or advertising purposes or sell your information





OFFICE  
FOR  
CIVIL  
RIGHTS

# YOUR HEALTH INFORMATION PRIVACY RIGHTS

Most of us feel that our health information is private and should be protected. That is why there is a federal law that sets rules for health care providers and health insurance companies about who can look at and receive our health information. This law, called the Health Insurance Portability and Accountability Act of 1996 (HIPAA), gives you rights over your health information, including the right to get a copy of your information, make sure it is correct, and know who has seen it.

### Get It.

You can ask to see or get a copy of your medical record and other health information. If you want a copy, you may have to put your request in writing and pay for the cost of copying and mailing. In most cases, your copies must be given to you within 30 days.

### Check It.

You can ask to change any wrong information in your file or add information to your file if you think something is missing or incomplete. For example, if you and your hospital agree that your file has the wrong result for a test, the hospital must change it. Even if the hospital believes the test result is correct, you still have the right to have your disagreement noted in your file. In most cases, the file should be updated within 60 days.

### Know Who Has Seen It.

By law, your health information can be used and shared for specific reasons not directly related to your care, like making sure doctors give good care, making sure nursing homes are clean and safe, reporting when the flu is in your area, or reporting as required by state or federal law. In many of these cases, you can find out who has seen your health information. You can:

- **Learn how your health information is used and shared by your doctor or health insurer.** Generally, your health information cannot be used for purposes not directly related to your care without your permission. For example, your doctor cannot give it to your employer, or share it for things like marketing and advertising, without your written authorization. You probably received a notice telling you how your health information may be used on your first visit to a new health care provider or when you got new health insurance, but you can ask for another copy anytime.
- **Let your providers or health insurance companies know if there is information you do not want to share.** You can ask that your health information not be shared with certain people, groups, or companies. If you go to a clinic, for example, you can ask the doctor not to share your medical records with other doctors or nurses at the clinic. You can ask for other kinds of restrictions, but they do not always have to agree to do what you ask, particularly if it could affect your care. Finally, you can also ask your health care provider or pharmacy not to tell your health insurance company about care you receive or drugs you take, if you pay for the care or drugs in full and the provider or pharmacy does not need to get paid by your insurance company.

# SHARING HEALTH INFORMATION WITH FAMILY MEMBERS AND FRIENDS

There is a federal law, called the Health Insurance Portability and Accountability Act of 1996 (HIPAA), that sets rules for health care providers and health plans about who can look at and receive your health information, including those closest to you – your family members and friends. The HIPAA Privacy Rule ensures that you have rights over your health information, including the right to get your information, make sure it's correct, and know who has seen it.

### What Happens if You Want to Share Health Information with a Family Member or a Friend?

HIPAA requires most doctors, nurses, hospitals, nursing homes, and other health care providers to protect the privacy of your health information. However, if you don't object, a health care provider or health plan may share relevant information with family members or friends involved in your health care or payment for your health care in certain circumstances.

### When Your Health Information Can be Shared

- Under HIPAA, your health care provider may share your information face-to-face, over the phone, or in writing. A health care provider or health plan may share relevant information if:
- You give your provider or plan permission to share the information.
- You are present and do not object to sharing the information.
- You are not present, and the provider determines based on professional judgment that it's in your best interest.

### Examples:

- An emergency room doctor may discuss your treatment in front of your friend when you ask your friend to come into the treatment room.
- Your hospital may discuss your bill with your daughter who is with you and has a question about the charges, if you do not object.
- Your doctor may discuss the drugs you need to take with your health aide who has come with you to your appointment.
- Your nurse may **not** discuss your condition with your brother if you tell her not to.
- HIPAA also allows health care providers to give prescription drugs, medical supplies, x-rays, and other health care items to a family member, friend, or other person you send to pick them up.

A health care provider or health plan may also share relevant information if you are not around or cannot give permission when a health care provider or plan representative believes, based on professional judgment, that sharing the information is in your best interest.





# 8A Safety Gram

## Off Post Weight Loss Clinics



### What's the Issue?

Off-post Korean weight loss clinic have been known to utilize **potent and high risk medications** in combination with herbs and/or other supplements. In the US/DoD **some of these medications are prescription only by physician**, and are not normally intended for weight loss treatment but rather for **asthma, heart failure, and high blood pressure**. Additionally, there are **service specific regulations** regarding controlled substance use and the use of anorexic agents solely for the purpose of weight loss. Service Members and Beneficiaries need to understand the risk associated with taking medications and potential medication-to-medication and medication-to-supplement reactions.

### What are the medications of concern?

A review of common medications that require a medical prescription in the US provided by Korean weight loss clinics include: Phentermine, Aminophylline, and Spironolactone. The main medication of concern is **Phentermine**. Phentermine is similar in nature to an amphetamine. Because of this, it can produce a "false-positive screen" for amphetamine on a urinalysis test as well as cause potentially fatal side effects.

Side effects of Phentermine include:

- ✓ Chest pain, palpitations
- ✓ Depression or severe changes in mood
- ✓ Increased blood pressure
- ✓ Nervousness or restlessness, Irritability, difficulty sleeping
- ✓ Severe dizziness, headache
- ✓ Shortness of breath
- ✓ Problems urinating
- ✓ Nausea, vomiting
- ✓ Blurred vision or other eye problems
- ✓ Changes in sexual ability or desire
- ✓ Constipation or diarrhea

### What should I do if I am taking these supplements?

Service Members and Beneficiaries should discuss all medications with their Primary Care Manager or Pharmacist to assure there are no potential negative reactions.

### Where can I get safe recommendations on weight loss and supplements?

The DoD maintains websites with information about how to lose weight safely and improve overall health and fitness. The Human Performance Resource Center (<https://www.hprc-online.org/>) and the Operation Supplement Safety website (<https://www.opss.org/>).

### What local resources are available?

For safe evidence-based weight loss, please contact the 65th Medical Brigade Dietitian, MAJ John Dunning at [john.a.dunning.mil@mail.mil](mailto:john.a.dunning.mil@mail.mil) or DSN: 737-1779 or CPT Elizabeth Ressler, Chief, Medical Nutrition Therapy at [elizabeth.b.ressler.mil@mail.mil](mailto:elizabeth.b.ressler.mil@mail.mil) or DSN 737-1727.

For more information contact the **8A Command Safety Office** at **DSN 755-1281**



An international event to bring awareness to

## STOP DOMESTIC VIOLENCE

# Light It Up Purple

## Domestic Violence Awareness Walk

Friday, October 19th @ 1730

ACS Building 4106

(Glow sticks will be provided for the walk)

**\*\*\*Light refreshments and entertainment will be provided after the walk\*\*\***



**We aim to strengthen and support healthy relationships to help prevent domestic abuse.**

For more information contact ACS at DSN 738-7505 or COMM 0503-338-7505.





# Medical Clinics Strive to Improve Patient Satisfaction

Story by William Wight  
65th Medical Brigade Public Affairs Office



We Care About  
Your Experience today!

**The Brian Allgood Army Community Hospital wants you to be fully Satisfied!**  
Please ask for the clinic's OIC/NCOIC at the front desk, if we can improve your experience.

**I**mproving the quality care received at the Brian Allgood Army Community Hospital and all outlying clinics on the Korean peninsula starts with improving patient satisfaction.

Beneficiaries have a say in how they were treated by reporting their experiences and how satisfied they were with their quality of care through a Military Health System unified outpatient survey known as JOES.

The Joint Outpatient Experience Survey, or JOES, combines and standardizes long-standing methods used by the Army, Navy, Air Force and the Defense Health Agency to learn about beneficiary healthcare experiences with the goal of making them better.

Approximately 72 hours after an

appointment, a patient will receive the JOES survey to complete and should respond within a month by mail or electronically. The survey takes about five minutes to complete and gives healthcare providers and BAACH leadership the feedback necessary to improve quality of care, patient experience and satisfaction.

Patients will only receive one survey every 90 days.

"Patient participation in JOES is very important to us here at BAACH because our number one priority is improving our patients experience and their satisfaction," said patient Advocate Sarah Chang.

Chang wants patients to know that patient advocate officers are available to help with any issues they may have during or after their visit to any of our clinics.

"We are here to assist patients with any problem or concern, down to the smallest detail," she said. "If we show people that we care, they are going to take the opportunity to fill out the survey. It's everyone's responsibility to make sure our patients are provided the best possible service and care."

Positive surveys also have a direct impact on the facility. BAACH will receive additional funding for each completed survey with a high

satisfaction rating.

"That money comes back to this facility so the commander has the opportunity to improve the patient experience, purchase equipment and hire additional providers," Chang said.

Providing feedback can help foster a partnership between patients and their primary care managers, enabling BAACH to continually improve and achieve excellent healthcare and patient satisfaction. The survey looks at the experiences of eligible child and adult outpatients that had a recent visit at medical facilities.

The Patient Advocate representative for the BAACH is Sarah Chang at 737-1125 and Karen Harkins at the Master Sgt. Henry Jenkins Medical Treatment Facility at U.S. Army Garrison Humphreys at 737-5676.

# WE CARE **THINK** WHAT YOU



**JOES**

Take a few minutes to fill out the **Joint Outpatient Experience Survey (JOES)** when you get it by mail or email. **JOES** is a survey that asks questions about your military health care experience. It's secure and we won't share your personal information. Your **JOES** responses tell us what we're doing right and what we can do better.



armymedicine.mil







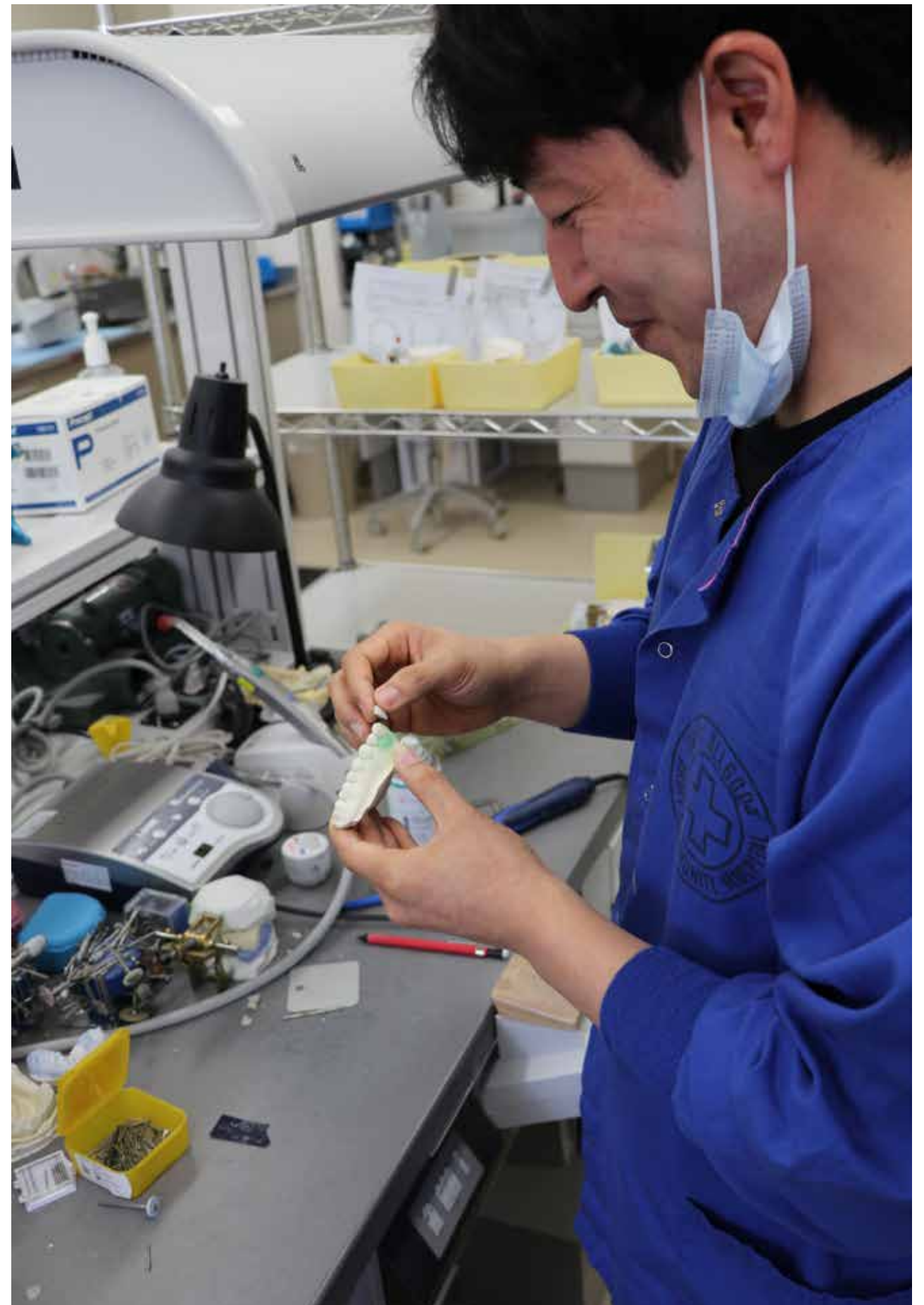
# Carius Dental Treatment Facility *Boasts* Unsung Artists



Looking for that perfect smile? Don't get too hung up on a gap tooth. Don't fall into the trap of damaging your oral health with excessive unnecessary treatments. In the long run, healthy teeth will lead to the best smile. For those dental beneficiaries throughout the peninsula, a special trio of dental laboratory technicians work long and hard to fabricate and provide dental aesthetics.

Nestled on the second floor of the Carius Dental Treatment Facility at U.S. Army Garrison Humphreys, three unsung Korean workers take great pride in their daily work. Known by their coworkers as true "artists," these periodontist lab technicians develop crowns, bridges, veneers, dentures and other dental appliances for beneficiaries throughout the peninsula.

Dental laboratory technicians use molds and impressions of patient's teeth to create the most accurate dentures and fixed bridges as possible. Dental laboratory technicians can specialize in areas such as orthodontic technician, crown and bridge technician, metal dental technician, and dental ceramist.





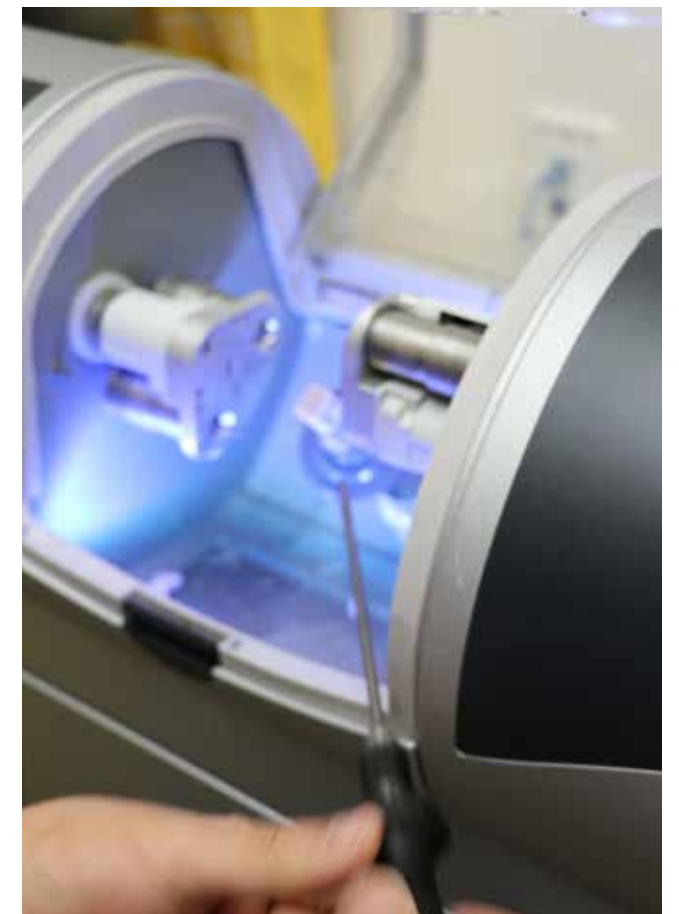


Dental laboratory technicians use traditional or digital impressions or molds of a patient's teeth to create crowns, bridges, dentures, and other dental appliances. They work closely with dentists, but have limited contact with patients and specializes in the aesthetic (cosmetic) restoration and replacement of teeth.

Maj. Dong S. Lee, Chief of Prosthodontics 618th Dental Company (Area Support) Dental Health Activity – Korea at U.S. Army Garrison Humphreys' Carius Dental Treatment Facility said, "Chun Sok Yi, Si Hyon Kim and, Maeng Chin Yu are truly artists, it is amazing how they can take a three dimensional image and turn it into a dental appliance."

The Carius lab technicians produce all types of prosthetics such as crowns, bridges, oral appliances and implants. Lee stated that the treatment facility is averaging over one hundred crowns a month.

Prior to the relocation to U.S. Army Garrison Humphreys, all requests were forwarded to the U.S. Army Dental Laboratory at Fort Gordon, Georgia. "It would take sometimes six to eight weeks to get the finished products back to Korea, now without new technology and capability to fabricate ourselves, the turnaround time is less than two weeks," said Lee.







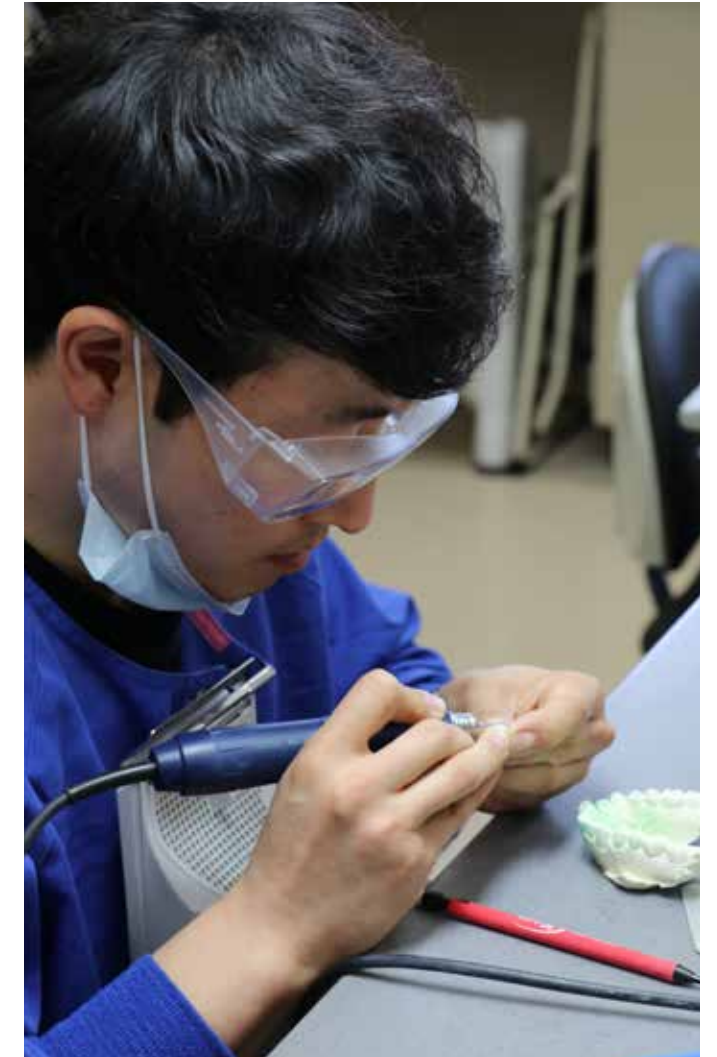
"I enjoy working here," said Chun Sok Yi. "It gives me great pride to be able to work with this modern equipment and create products, perfecting and improving oral health for a better quality of life."

The term "prostho" means replacement and "don-tist" means dealing with teeth. Essentially, prosthodontists are THE recognized experts when anything needs to be replaced in your mouth. This can range from a single tooth, multiple teeth, or all teeth and gums in the mouth. While many other dentists can do some of these treatments, prosthodontists are the specialists dedicated to this type of care.

Prosthodontists have advanced training in restoring and replacing teeth. Prosthodontists are considered the leaders of the dental treatment plan. They regularly lead teams of general dentists, specialists, and other health professionals to develop solutions for your dental needs.

Prosthodontics is a dental specialty recognized by the American Dental Association. It pertains to the diagnosis, treatment planning, rehabilitation, and maintenance of the oral function, comfort, appearance, and health of patients with clinical conditions associated with missing or deficient teeth and/or oral and maxillofacial tissues.

"People think these three are technicians, but they really are artists, because when people look at you they look at your smile. They do phenomenal work," said Lee.





# Celebrating Chuseok with Signature Foods

Courtesy of Korea Tourism Organization



huseok is one of the year's most important traditional holidays. It is celebrated on the 15th day of the eighth lunar month. Chuseok is often referred to as Korean Thanksgiving Day. It's a celebration of the harvest and thanksgiving for the bounty of the earth. Family members from near and far come together from all over the country to share food and stories and to give thanks to their ancestors. In 2018, Chuseok Day falls on September 24. The day before and the day after are also part of the holiday.



Chuseok is a symbol of the richness of Korea. There is even a saying, "Wish not for more or less but that every day would be like Chuseok." The holiday occurs during fall, the season of harvest, and is naturally the time when one eats the most while relaxing after the hard physical labor of bringing in the crops. Upon the arrival of Chuseok, families gather to make songpyeon (half-moon rice cake) and feast on japchae (stir-fried glass noodles and vegetables) and other representative traditional Korean holiday dishes.

To celebrate Chuseok like a Korean, try making one of these representative Korean foods. Experience the holiday at home by making and sharing the recipes with your family.



## Songpyeon - chewy and aromatic rice cake

Songpyeon is one of the quintessential dishes that appears at every Chuseok gathering. Songpyeon is a type of rice cake, made of rice dough filled with beans, sugar or other nutritious ingredients and then steamed. The rice cakes get their name and signature scent from being steamed over a bed of pine needles ("song" means pine in Korean). The shape and filling of songpyeon varies according to regions but the most common ones are bite-sized and in the shape of a half-moon.



### Making songpyeon

1. Mix hot water with non-glutinous rice flour to make the dough.
2. Flatten the dough in a round shape with a depression in the middle. Fill the depression with your ingredient of choice then fold in half and seal the edges together.
3. To make your songpyeon in a half-moon shape, start by forming a block shape. Press the top edges with your finger and thumb to create the half-moon shape.
4. Place a layer of pine needles on the bottom of the steamer, and put the completed songpyeon on top. Steam on high heat.



## Full-bodied flavor, jeon

A variety of jeon (pancake) can be seen during Korea's holiday seasons. Jeon is made by mixing the ingredients of choice with a light flour batter and then frying in a pan with some oil. The ingredient used will completely change the taste. Jeon can either be made with a single ingredient such as dong-tae jeon (pollack pancake) and hobak jeon (batter-fried summer squash), or a mixture of two to three ingredients such as hae-mul pajeon (seafood and green onion pancake) and kimchi jeon (kimchi pancake).



### Making jeon

1. Thoroughly clean the green onions and then cut into approximately 10cm-long pieces.
2. Mix egg, water and Korean pancake flour to make the batter.
3. Once the batter is complete, add the ingredients (chives, carrot, shrimp, squid, etc.) and mix well.
4. Pour the pancake mixture into an oiled pan and fry until the edges turn brown. Flip and repeat on the other side.





## Japchae – harmony of meat, vegetables, and noodles

Japchae is yet another dish that is often present during festive days in Korea. Japchae is a compound word of the Korean words “jap” meaning mix, and “chae,” from “chae-so” which means vegetable. Japchae is generally made by mixing various vegetables together with meat and glass noodles.

Japchae may seem like a relatively easy dish to cook, but it requires a lot of work. Each of the vegetable ingredients must be sliced into small pieces and lightly cooked, either boiled or stir-fried, separately before being stir-fried together one last time. It is a long process but you’ll know it’s worth it when you get to taste the harmony of flavors each ingredient brings.

### Making japchae

1. Cook glass noodles in a boiling water for 8 minutes.
2. Rinse the boiled glass noodles in cold water with your hands and drain the water after.
3. Cut and fry the meat and vegetable ingredients separately.
4. Mix the rinsed glass noodles with seasoning sauce and simmer. Remove from heat after noodles have absorbed the sauce.
5. Mix the seasoned noodles with the stir-fried vegetables to complete the dish.



## Tourists' favorite Korean dish, bulgogi

Bulgogi is a dish loved by Koreans and foreigners alike. This dish made of thinly sliced meat and vegetables mixed in a sweet marinade is the perfect choice for people who can't handle spicy foods. It is excellent in both taste and nutrition as it makes a good combination with fresh vegetables such as thinly sliced green onions.



### Making bulgogi

1. Slice the vegetables (carrots, green onions, etc.) and meat into bite-sized pieces.
2. Prepare the meat in a marinade made of water, soy sauce, garlic, pear (may substitute with pineapple), sesame oil and sugar.
3. Cook the marinated meat and vegetables in a pan over medium heat.



## Nutrient-rich vegetable dish, bibimbap

Bibimbap is perhaps the most well known Korean food among foreigners. The dish is visually appealing, thanks to the use of ingredients in the five traditional Korean cardinal colors (white, yellow, green, red and black). Because the dish features a variety of vegetables, it is great meal choice for the health-conscious diner.



### Making bibimbap

1. Slice the vegetables into bite-sized pieces. Also, boil the bean sprouts at this time.
2. Stir-fry the vegetables, in the order of lighter colored to darker colored ingredients. You may also choose to brown some meat or prepare thinly sliced fried egg for garnish at this time.
3. After stir-frying the vegetables, fry an egg sunny-side up.
4. Neatly arrange the ingredients atop a bowl of rice.



## Korea's signature item, spicy and crunchy kimchi

Kimchi is the most famous traditional Korean food and an icon that well-represents Korea itself, as it accompanies almost every meal served in the country. Depending on the ingredients and methods used to make kimchi, as well as the fermentation time given, each type of kimchi has its own unique taste. Kimchi generally starts out with a crispness that eventually mellows out into a deeper flavor over time.



### Making kimchi

1. Prepare a salted cabbage, radish and the seasoning ingredients (Korean red chili powder, fermented anchovy sauce, salted shrimp, ginger, garlic, sticky rice starch, anchovy powder and plum extract).
2. Mix the radish and the seasoning ingredients together. Add more Korean red chili powder for a deeper red color according to preference.
3. Holding the cabbage at a 45-degree angle, spread out the cabbage leaves one by one. Starting from the middle, coat each leaf and fill the space between with the seasoning. Repeat until you reach the outside layer.





# Regional Health Command-Atlantic's Largest Medical Facility First to Transition to Defense Health Agency

By Terry J. Goodman  
Regional Health Command-Atlantic Public Affairs



On October 1, 2018, the Defense Health Agency will be responsible for healthcare delivery at Womack Army Medical Center, Fort Bragg, North Carolina. U.S. Army Medical Command will be responsible for medical readiness of Soldiers assigned to Fort Bragg, North Carolina. The remaining military treatment facilities will transition to DHA over the next three years. (RHC-A Photos)



Healthcare delivery at Womack Army Medical Center will be the responsibility of the Defense Health Agency (DHA) beginning October 1 as result of fiscal year 2017 National Defense Authorization (NDAA) Act.

With this change, Regional Health Command-Atlantic (RHC-A), U.S. Army Medical Command's (MEDCOM) largest health region, will focus its efforts on medical readiness of all Soldiers assigned to Fort Bragg, North Carolina, while still supporting healthcare and readiness at its remaining 13 military treatment facilities (MTFs).

The readiness mission includes dental care of active duty Soldiers, public health services, veterinary services, and providing management and support to wounded, ill and injured Soldiers assigned to its seven warrior transition units.

Brig. Gen. Telita Crosland, RHC-A commanding general, understands the importance of getting the transition of healthcare at Womack right as the lessons learned will ensure the efficient transition over the next three years of healthcare at Army medical facilities and also at Navy and Air Force facilities.

"This is a tremendous and important undertaking that is taking place at Womack for the Army and Army Medicine" said Crosland, who served as the commander of Blanchfield Army Community Hospital, Fort Campbell, Kentucky. "Throughout this transition, the Womack team must continue to provide safe, quality healthcare to their patients. Col. (John) Melton is an excellent leader and physician. He understands that and will ensure

that patients continue to receive the medical care and services they expect from Womack."

In less than two months, DHA will be responsible for healthcare delivery and MEDCOM, through RHC-A, will be accountable for Soldier medical readiness. How will the two distinct organizations effectively separate and manage these two vital missions?

Originally, FY17 NDAA required two leaders, a medical director in charge of healthcare delivery and a service commander whose priority



is ensuring Soldiers are medically ready to fight and win.

To ensure that the two-leader concept was the best for the Army and more importantly Soldiers and patients, the Army held three tabletop exercises, or TTXs, in May and June at Defense Health Headquarters in Arlington, Virginia.

DHA, MEDCOM, RHC-A and Womack leaders and senior staff dove into multiple real-world scenar-

ios to determine the responsibilities of each to identify issues that may hinder the transition of healthcare to DHA or impact beneficiary healthcare or Soldier readiness.

It was during these TTXs that it was determined that one leader, responsible for both healthcare and readiness, will serve the Army, its Soldiers, retirees and their families the best. This leadership recommendation and other TTX findings were put to the test in July during a three-day rehearsal of concept at Fort Bragg.

After three-days of deliberation, participants selected the one-leader concept as the way-ahead for Womack and the other service medical facilities selected.

For Col. Melton, one of the primary advocates for the one-leader concept, this was a decision that makes sense for the Army and the other service medical facilities that will move to DHA.

"As the Womack Commander, I will continue to integrate both readiness and health to support the Fort Bragg Senior Commander and all tenant units," Melton said. Readiness of the force remains our number one priority. The transition to DHA will be transparent to all those that we support and care for. The delivery of safe, quality, and accessible care is foundational within our profession--this will not change 1 October."

Those facilities joining Womack are Naval Hospital Jacksonville, Florida, the 81st Medical Group, Keesler Air Force Base (AFB), Mississippi, the 628th Medical Group, Joint Base Charleston, South Carolina, and the 4th Medical Group, Seymour Johnson AFB, North Carolina. The remaining DoD medical facilities will transition to DHA by October 1, 2021.





# Influenza Season is around the Corner

Courtesy of Public Health Nursing

**T**he beginning of October each year marks the start of the influenza season, which is characterized by a drastic increase in influenza virus activity. The latest statistics from the Center for Disease Control and Prevention (CDC) estimates 1.9 million influenza-associated illnesses, 966,000 medical visits, and 67,000 hospitalizations were prevented by vaccination in one season alone. It is strongly recommended that everyone six months and older receive the annual influenza vaccine as the first and most important step in protecting against flu viruses. While there are many different influenza virus strains, the influenza vaccine is updated each year to pro-

It is strongly recommended that everyone six months and older receive the annual influenza vaccine as the first and most important step in protecting against flu viruses.

tect against the virus strains that research suggests will be most common. Just like back in the United States, here in Korea, the seasonal flu vaccine will be available at your local health care facility in early October.

As a second measure, you should also practice everyday preventive actions to stop the spread of germs. Try to avoid sick people whenever possible, wash your hands often with soap and water, try to avoid touching your eyes, nose, and mouth (germs easily spread this way), clean and disinfect surfaces and objects that may be contaminated with germs like influenza. If you become sick, limit contact with others as much as possible and cover your nose and mouth with a tissue when you cough or

sneeze. The CDC also recommends that you stay home for at least 24 hours after your fever is gone except to get medical care or for other necessities.

Lastly, if you get influenza and seek care early (within 48 hours of symptoms starting), antiviral drugs may be an option to make the illness milder and shorten the time you are sick. This will be at the discretion of your treating provider, as each situation needs to be evaluated by a medical professional before receiving antivirals. This means you need to know how to recognize influenza.

Flu-like symptoms are fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills and fatigue. Some people also may have vomiting and diarrhea. People may be infected with the flu, and have respiratory symptoms without a fever.

So remember, to do everything you can to protect yourself and your family against the flu this year, start with receiving the flu vaccine as soon as it is available.

For more information, ask your medical provider or visit the following website; <https://www.cdc.gov/flu/index.htm>

## 2018-2019 Influenza “Take one for the team” Campaign

### AREA I

PX Food Court	Oct. 26 Nov. 8	10 a.m. – 2 p.m. Noon- 4:30 p.m.
Immunization Clinic:	Mon. – Wed. 9 a.m. to 5 p.m. Thurs. 1 p.m. to 5 p.m. Fri. 8:30 a.m. to Noon	Closed Noon to 1 p.m.

### AREA II

PX Food Court	Oct. 26 Nov. 15	10 a.m. to 5 p.m. 10 a.m. to 5 p.m.
Commissary	Nov. 1	10 a.m. to 6 p.m.
K-16 Community Activities Center	Oct. 25	8 a.m. to 2 p.m.
Retiree Appreciation Day (DHL)	Nov. 17	9 a.m. to 3 p.m.
DODEA Schools: High School Gym	Nov. 7	8 a.m. to 3 p.m.
Elementary Gym	Nov. 8	8 a.m. to 3 p.m.

### AREA III

PX Food Court	Nov 3	9 a.m. to 4 p.m.
DODEA Schools: Middle/High	Nov. 8	8 a.m. to Noon
Elementary	Nov. 15	8 a.m. to Noon
Make-up date (all students)	Nov. 29	8 a.m. to Noon
Collier Fitness Center	Nov. 29	8 a.m. to Noon

### AREA IV

Walker PX Food Court	Oct. 18 Nov. 15	11 a.m. to 5 p.m. 11 a.m. to 5 p.m.
Walker Commissary	Oct. 25 Nov. 29	10 a.m. to 2 p.m. 10 a.m. to 2 p.m.
Retiree Appreciation Day (Wood Clinic)	Nov. 3	8:30 a.m. to 1 p.m.
DODEA Schools: Middle/High	Nov. 9	9 a.m. to 3 p.m.
Elementary	Nov. 8	9 a.m. to 3 p.m.

**NO FLU MIST AVAILABLE ONLY INJECTABLE.**  
**Post Vaccination wait time is 15 min for EVERYBODY.**  
All Active Duty, DoD civilians, KGS, KATUSA, Appropriate Contractors & Dependents are Welcome.





# United States Army

## Criminal Investigation Command

Media contact: CID Public Affairs Office  
571-305-4041

FOR IMMEDIATE RELEASE

### Army CID Announces New Crime Tips System

**QUANTICO, VA** (Aug. 21, 2018) – The Army community and American public now have the ability to use their computers and smartphones to submit tips about crimes, suspicious activity or threats to the U.S. Army's Criminal Investigation Command (CID) via a new digital crime tips system.

The CID crime tips system recently transitioned to a web-based and smartphone app submission method. The public can access the system via any Internet-connected device by visiting, <http://www.cid.army.mil/>. In addition to the web interface, the app is for submission of tips and is available for free download from the Apple Store and Google Play at <http://www.p3tips.com/app.aspx?ID=325>.

According to CID's implementation project manager, Special Agent Christopher L. Adams, the new system provides users a safe, secure and anonymous method to report criminal activity and security threats without concerns of retaliation or fear. He explained that whenever a person submits a tip online, the completed form is securely transferred directly to Army CID through a Secure Sockets Layer connection, which means that the tips are encrypted, entirely confidential and completely anonymous. Users can also attach images, videos and documents with their tips.

"This new system is the ideal solution for 'tipsters' to report criminal activities or suspicious activity anonymously. Tips received will be seamlessly assigned to various units for further investigation. Additionally, persons providing anonymous tips will have the ability to communicate with the CID Agents," Adams said. "After submitting a tip, a tip reference/ID number is created that allows the tipster to create a password to check the status of the submitted tip or check on the status of a reward – if applicable. So do not misplace your ID number, as it will be needed to check on the status of your tip."

There is also the multi-language feature for global use that allows tips to be auto-converted into English on the backend regardless of what language they were submitted. Tips will be responded to in English and auto-translated back to their source language during the two-way dialog process.

According to Christopher Grey, CID's spokesman, the previous methods of reporting a crime to CID will remain in effect until the new Crime Tips System is fully implemented.

"It is critical for people to say something when they see something and it literally can mean the difference between someone receiving the justice they deserve or victimizing another innocent person," Grey said. "Although we prefer people with information to use the new digital Crime Tips system, they can still report a crime through our current methods until these methods are phased out within the next 60 days: contact your local CID office, contact 1-844-ARMY-CID (844-276-9243) or email CID at [Army.CID.Crime.Tips@mail.mil](mailto:Army.CID.Crime.Tips@mail.mil)."



For more information on Army CID, visit [www.cid.army.mil](http://www.cid.army.mil).

### Veterans Records Request

To respond to the many requests across the Medical Command for clinical and medical treatment records the editorial staff of the PULSE65 offers the following guidance:

Veterans and Next-of-Kin may: REQUEST RECORDS ONLINE via the National Archives: <https://www.archives.gov/veterans/military-service-records>.

All others, including Veterans and next-of-kin, who choose not to submit an electronic request can mail a letter or Standard Form (SF) 180, Request Pertaining to Military Records to:

National Personnel Records Center  
1 Archives Drive  
St. Louis, MO 63138

OR

Fax a letter or Standard Form 180 to: 314-801-9195

When sending a request via postal mail or fax, please use the Standard Form (SF) 180, Request Pertaining to Military Records. Although not mandatory, using the SF-180 is the recommended method to send a request for military service information. This form captures all the necessary information to locate a record. Provide as much information on the form as possible and send copies of any service documents that you may have.

Follow the instructions for preparing the SF-180. Check the Records Location Table and submit your request to the appropriate address.

Costs: Generally there is no charge for basic military personnel and health record information provided to veterans, next-of-kin and authorized representatives. If your request involves a service fee, you will be notified as soon as that determination is made.

Veterans, or their next-of-kin, who have a strong interest in viewing their own files in person, rather than receiving document copies by mail, may request an appointment with the Federal Records Center Research Room, or hire an independent researcher to examine the records on their behalf.





# Poster Boosts Culture of Patient Safety

Courtesy of Brian Allgood Army Community Hospital  
Patient Safety Office

**T**he winners of the 2018 Army Patient Safety Awareness Week poster design contest were recognized during the 2018 MEDCOM Annual Patient Safety Summit August 2, 2018. Winners were announced earlier this year and each winning facility received a monetary award for their use in Patient Safety related activities. Prizes were \$1,500 for first place, \$1,000 for second place and \$750 for third place in each category.

The second place award for winning the MEDCOM Patient Safety Poster Competition was Maj. James Fabia, Capt. Orlando Torres, Staff Sgt. Stephen Holt and Sgt. Clinton Kesselring. The funds go towards the Patient Safety program at the Brian Allgood Army Community Hospital.

The Army Patient Safety Awareness Week Poster Contest is conducted annually. National Patient Safety Awareness Week is normally observed in the month of March. The contest consisted of two categories.

One category for posters supports the theme for National Patient Safety Awareness Week. The other category of posters supports general Patient Safety subjects.



## 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



Time 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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Overlooking Twin Lakes  
(Lake Tamblingan and  
Lake Buyanon)

# Family Adventures in Asia: Bali, Indonesia

By Cheryl Brown  
65th Medical Brigade Correspondent

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Excited? Are you kidding? Yes! We were SO EXCITED to go to Bali, Indonesia! My son, Wesley and daughter, Savannah and I couldn't wait to get there. Wesley was on a college summer break and Savannah took time off from work.

We made reservations for our dog at the U.S. Army Garrison Yongsan Pet Center. We booked an evening departure of two 4 ½ hr flights on Korean Air with one stop in Guangzhou, China going to Bali (Denpasar, Indonesia).

We then booked our lodging (with breakfast) at the Grand Inna Kuta Hotel on the beach. We could hear the low sound of crashing waves while we fell asleep. Kutas' beach is quite lovely with big waves, colorful tiny seashells and magnificent sunsets. Every morning we ate a filling breakfast near the infinity pool overlooking the morning surfers riding the crashing waves.



Entrance to Padang Padang Beach







Bali swing at Tegenungan Waterfalls

Kuta is a tourist area filled with endless streets and alleyways of open air, tiny, side-by-side, local shops, restaurants and spas. Also, interspersed were more upscale, air conditioned shops and restaurants. It's always fun to meander around the local tourist area looking for trinkets and good deals to bring home.

We quickly figured out how to download the local app (Grab) for inexpensive taxi rides anywhere on the island. We decided to go on day trips every other day.



Padang Padang Beach

Our first day trip was to Ubud, 35km from Kuta (1.5 hour drive, North East). Our destination: the Karsa Spa to celebrate Savannah's birthday. It's surrounded by rice fields and was just as beautiful, clean and floral-spicey smelling as the reviews we read. Unfortunately, they were booked so they referred us to another outdoor spa nearby. We made an evening appointment at the other spa then headed to the Tegenungan Waterfall for the afternoon. We followed a well maintained pathway and bamboo bridges down through the thick jungle. The waterfall was set in lush greenery with several tiers to climb on and take pictures. Savannah climbed onto the Bali Swing for a memorable swaying ride while the mist of the falls hung all around us. We finished our afternoon with





popsicles at a nearby restaurant then left for our 2-hour spa appointment. It included a full body massage with a flower bath. Wesley and Gede (our taxi driver) dropped us off while they explored Ubud on foot passing by the Monkey Sanctuary. While there, a small monkey jumped on Wesley's back pack holding on momentarily. Gede and Wesley waited for us to finish the spa so all we had to do was enjoy the ride back to our hotel.

On our "days off" from day trips we slept late, shopped, ate at local restaurants, took naps, walked on the beach, climbed on rocks in



the ocean during low tide, exchanged dollars for rupiah (\$1 = 14,610) and talked to very nice locals. We learned that Indonesia is 90% Muslim while Bali is 90% Hindu. Most of the tourists we met were from Australia plus some from Europe and South Korea. On one of our last days we observed 300 foreigners releasing 300 baby turtles into the ocean. It was spectacular watching those little babies make their way over the sand and ride the tide into the Indian Ocean.



Monkey at Padang Padang Beach entrance path

One morning (6:30AM) we were awakened by a 6.5 earthquake that rocked our beds for several seconds. I jumped up and looked out of the window over the hotel pool. The water was sloshing back-n-forth. We looked at each other, talked and sort of laughed about it, then went back to sleep for a couple more hours.

Our second day trip was to Padang Padang beach, 12km from Kuta (1 hour drive, South). This stunning short stretch of beach was at the bottom of a steep set of stairs preceded by a hollow stone entrance. We laughed while watching many monkeys at the entrance playfully stealing tourists flip flops with no intention of returning them.



Our third day trip was to Lovina, 90km from Kuta (3-hour drive, North). This was a spectacular day because the taxi driver drove us on the narrow mountain ridge through the central Bali Highlands. We passed numerous Hindu temples along the way and stopped at a clove farm where the air was filled with the sweet aroma of the drying flower buds. We later stopped at the top of the mountains overlooking the picturesque Balinese Twin Lakes (Lake Tamblingan and Lake Buyanon) on one side and the ocean on the other. The weather was quite cool; the locals wore sweaters, scarves and ski hats. We made one more stop to hold an 8-foot boa constrictor and a 7-pound bat. Then, we were on our way



Holding a hanging bat  
at the Twin Lakes



down the mountains to Lovina. Lovina is much quieter, less touristy with small villages and popular for its dolphin sighting trips. We walked on the black, volcanic, soft sand beach then ate lunch at a sea side cafe. While we waited for our lunch at least 200 brightly dressed people arrived chanting and beating drums. We learned that they were gathering for a Balinese Hindu cremation ceremony. It was fascinating getting a glimpse of their cultural traditions. On our way back to Kuta we stopped at Aling Aling waterfalls. A hiking guide (Koman) joined us and lead us to multiple falls. The side-by-side falls were nearly 40 meters high where some people were free jumping off the cliffs into a deep pools below. We followed Koman to several levels of waterfalls, pools and cliffs covered in moss and thick vines.

Our trip ended with a bang, or should I say, it ended with a quake. Yep, a 6.9 earthquake! The epicenter was on Lombok Island (one island east of Bali). We were in a taxi on our way to the airport. We were on a small,





A Balinese family separating clove flower buds from the stalks



Clove buds drying in the sun and raked frequently in order to develop a brown color

narrow single lane road surrounded by hundreds of shops, restaurants, spas and tourists. The taxi began shaking and kept shaking left and right as we came to a stop. Thousands of people ran out of all of the buildings and onto the streets. We could see people looking up, holding each other, crying and yelling. Nobody returned into the buildings as the earthquake ended. The traffic began to slowly move but the streets were filled with thousands of stunned, scared people on cell phones and talking to each



other about what just happened. We made our way to the airport where another aftershock shook the massive windows high in the terminal ceiling. During that very short aftershock hundreds of tourists began to talk very loudly and we heard one woman scream. We spent the next 3 hours waiting for our plane without incident.

It was a memorable trip with a dramatic ending. I'd go again.



# Bottoni Named RHC-P and Army Medicine Civilian Employee of the Year

By Leanne Thomas  
Tripler Army Medical Center



Dr. Craig Bottoni, right, chief of Sports Medicine, Tripler Army Medical Center (TAMC), performs an orthopedic evaluation for Spc. Ricardo Garofalo, left, U.S. Army health technician, at TAMC, June 14. Bottoni is the hospital's most senior sports medicine surgeon, a consultant throughout the Pacific region for complex sports issues, and the research director for the TAMC Orthopedic Residency Program, responsible for coordinating and supervising all research projects within the TAMC Orthopedic Department. Bottoni is the Regional Health Command - Pacific and the U.S. Army Medical Command (category III) civilian employee of the year. (Photo Credit: Leanne Thomas, Tripler Army Medical Center)

**A**n advocate for education, a devoted volunteer, and a world-renowned orthopedic surgeon,

Dr. Craig Bottoni, chief of Sports Medicine at Tripler Army Medical Center (TAMC), is the Regional Health Command Pacific (RHC-P) category III employee of the year, and most recently named the U.S. Army Medical Command (MEDCOM) employee of the year.

"Dr. Bottoni is a highly sought after

orthopedic surgeon whose reputation enhances the reputation for Tripler and military medicine as a whole," stated retired Capt. Claude Anderson, former chief, TAMC Orthopedic Surgery Services. "He is world-renowned for his clinical expertise and surgical skills."

The journey to becoming an orthopedic surgeon for Dr. Bottoni started at TAMC in 1991 as a recently graduating medical student. During this time, he completed a general surgery internship and then, following a tour as a general medical officer,

deployed to southwest Asia and entered Tripler's orthopedic surgery residency program. Dr. Bottoni also completed the John A. Feagin, Jr. Sports Medicine Fellowship at West Point, New York, and subsequently returned to Tripler as clinical staff.

From 2000-2006, while active duty, (then U.S. Army colonel select) Bottoni served as the chief of TAMC Sports Medicine before he entered into private practice. It was during this time that he realized the military health system is one of the last true practices of medicine where there is much less influenced by other factors, and where providers can focus solely on practicing medicine.

"I came back to Tripler for the opportunity to care for our military beneficiaries and their families. It is truly a unique opportunity," said Bottoni.

Today, as one of MEDCOM's most experienced sports medicine surgeons, Dr. Bottoni is also a consultant throughout the Pacific region for complex sports issues and the research director for the TAMC Orthopedic Residency Program responsible for coordinating and supervising all research projects within the TAMC Orthopedic Department.

Serving in this capacity, Dr. Bottoni represented Tripler as the chairman of the Medical Board of Trustees for the nonprofit organization, the Musculoskeletal Transplant Foundation (MTF). As part of his responsibilities, he served on the MTF Board of Directors contributing valuable insight of orthopedic surgery.

Dr. Bottoni's research project on shoulder injury was recognized as cutting-edge research in key areas of orthopedic sports medicine and selected for the 2018 American Orthopedic Society for Sports Medicine O'Donohue Award for Excellence in Clinical Research, the second time he has been chosen to receive this coveted honor.

His publication was selected in

2016 for the Hughston Award, the highest honor of the American Journal of Sports Medicine recognizing the most outstanding study published in the journal the previous year. He has previously received other prestigious research awards for projects completed at Tripler including the Excellence in Research Award, the Aircast Award for Clinical Science, and the Lloyd Taylor Award. In addition, he has won on multiple times, the Richardson Award for the best research presentation at the annual meeting of the Hawaii Orthopedic Association.

Dr. Bottoni expressed that he is deeply honored and humbled to receive the award, and described the profession of orthopedic surgery as an incredibly rewarding experience.

In recognition of the countless contributions and support to advance orthopedic sports medicine, Dr. Bottoni recently received the highest academic appointment, Professor of Surgery from F. E. Edward Hébert School of Medicine, Uniformed Services University of the Health Sciences.

Dr. Bottoni contributes the success of his accomplishments to his mentors from medical school, graduate medical education programs, and even to the TAMC residents and faculty, here.

"If you stop learning at any time, being a surgeon, or a doctor, that's when you are going to run into trouble," stated Bottoni.

Behind the scenes, Dr. Bottoni volunteers his time serving the military community beyond the walls of Tripler. He has also improved medical readiness and access-to-care initiatives for active duty populations and beneficiaries.

For over two decades, Dr. Bottoni has served as team physician for the Radford High School athletics program, a local high school with a majority of students being military dependents. This service provides timely access-to-care for the student-athletes, serving the local military community outside

of Tripler.

He also established the satellite sports medicine clinics at Schofield Barracks and Pearl Harbor, Hawaii. This expansion resulted in 5,000 active duty encounters since its conception and significantly less time wasted for surgical appointments by eliminating the need for active duty members to come to Tripler for their appointments. The satellite clinics have also decreased utilization and resources at the TAMC Orthopedic Clinic, allowing better access for other providers during these times.

As the only federal tertiary care center in the Pacific region, TAMC offers Dr. Bottoni a unique role as the primary referral coordinator for all of sports medicine injuries that are referred through the Pacific Asynchronous Tele-Health (PATH) system, a provider-to-provider teleconsultation platform utilized by military medical facilities throughout the Pacific region.

Dr. Bottoni coordinates the U.S. Pacific Command (PACOM) air evacuation and referral for sports medicine services to TAMC Orthopedics through the use of the PATH system, resulting in significantly less money spent on multiple trips, lodging, and unnecessary care or treatments on Oahu. This initiative has increased the return-to-duty status for most active duty service members and other beneficiaries.

"A war injury or a sports injury can leave people in the lowest of lows. But we support them through the long process of diagnosis, surgery, and rehabilitation. Watching them get back to full active duty or sports is a truly unique aspect of our profession," he said.

Recently named the MEDCOM employee of the year, Dr. Bottoni was recognized by the entire Army Medicine family for his commitment to excellence as a civilian staff member in the Orthopedic Surgery Department, significantly impacting the region, as well as, the Army Medicine enterprise as a whole.





Sgt. William T. Barton, a 121st Combat Support Hospital combat medic from San Antonio, Texas, climbs up and over a confidence course obstacle on the first day of the 2018 Eighth Army Best Medic Competition. Barton was a member of the winning team during the three day competition, July 11-13.

# Best Medic Competition Rains down on Camp Casey

Story and photos by Sgt. Larry B. Barnhill  
210th Field Artillery Brigade Public Affairs

**C**ompetitors were evaluated during the 72-hour event as they applied combat lifesaving skills in various realistic day and night, high-intensity scenarios.

These scenarios included (simulating) treating a casualty in a chemically contaminated area, carrying a litter, dragging a weighted SKEDCO rescue system, low crawling uphill, passing a stress-shoot range, passing a swim test, passing an obstacle course, carrying teammates more than 50 meters (simulating moving a casualty to safety), and a 4-mile, up hill march with weighted vests.

The top performer and winning team in the 2018 Eighth Army Best Medic Competition were both recognized during an award ceremony at the Camp Casey Theater July 13.

Capt. Jacob A. Orrino, a 121st Combat Support Hospital nurse from Anaconda, Montana prevailed as the competition's top performer.

"I was reasonably surprised by the Top Performer award and I have to give credit to my teammate SGT Barton for all his hard work and to the rest of the competitors who pushed me to perform at my best," said Orrino. "As Soldiers we need to train to excel past the demands of war. Some of us put in a little extra work when everybody else goes home and the results are showcased in events such as the Best Medic Competition," he added.

Orrino and teammate, Sgt. William T. Barton, a 121st CSH combat medic from San Antonio, Texas defeated the competition, winning the title of 2018 Eighth Army Best Medic and were awarded Army Comendation Medals.

"The first event was definitely harder than I expected, but I think you come to appreciate stuff that challenges you beyond what you expect yourself to do," said Barton.

"I was content since we could bring the trophy home and Sgt. Barton and I were able to represent the great

organizations we are a part of in the 65th Medical Brigade and 121st CSH," added Orrino. "However, knowing what the next level of competition is like, SGT Barton and I have a long road of hard work and training ahead of us as we prepare for the All Army Best Medic Competition in Texas in September," he continued.

In a close second, 1st Armored Brigade Combat Team, 3rd Infantry Division combat medics: Sgt. Tylery S. Griger of Hawkinsville, Georgia and Sgt. Shion Nagasaka of Greer, South Carolina received runner up honors and were awarded Army Achievement Medals.

In his remarks, Command Sgt. Maj. Richard E. Merritt, Eighth Army command sergeant major highlighted the importance of the Best Medic Competition in regards to mission readiness.

"This competition prepares you for the ultimate mission, which is that of combat," said Merritt. "What you are, as well as being 'docs,' combat medics, flight medics, and nurses, are Warriors, leading from the the front on the battlefield, keeping our men and women alive," he added.

Merritt reemphasized the importance of training as well as the necessity of sharing combat medical skills with subordinates.

"Pass these skills on and remember what you are really doing here today and what this competition is really about," said Merritt. "Training and preparing for combat is necessary for you and those Soldiers you will lead to prepare them for the worst day of their life," he continued.

Guest speaker, U.S. Marine Sgt. Maj. Anthony A. Spadaro, Pacific Command senior enlisted leader, emphasized how combat medics added to the effectiveness of our fighting force.

"They're combat multipliers because when I hear these types of individual efforts, I look at the collective efforts because how many times have we gone up to someone who is supposed to be a practitioner of these great arts for counsel?" asked Spadaro. "Be that man or woman that a Soldier is going to have the confidence to go up to and say 'doc, I need help,' and be able to translate that 'I need help' into something practiceable, something workable, or something achievable," he added.

Merritt closed his remarks by mentioning his appreciation for being present for the ceremony, as well as emphasizing the importance of maintaining proficiency.

"It honors me to be here today, in the presence of you warriors, our leaders, our families and our Korean friends," said Merritt. "It takes action to be an expert and to maintain that because you'll have to continue to earn that everyday of your life," he concluded.



Sgt. Caleb Sherrod, a combat medic assigned to 1st Battalion, 41st Field Artillery Regiment, 210th Field Artillery Brigade, fires his M4 Carbine Rifle during the stress shoot event of the 2018 Eighth Army Best Medic Competition July 11-13. The stress shoot tested each competitor's ability to accurately fire their M4 rifle and M9 pistol at targets after carrying a litter, dragging a weighted SKEDCO rescue system more than 150 meters, and low crawling uphill to a designated firing position.

## EDITOR'S NOTE

After completion of the Eighth Army competition, competitors went on to compete at the Regional Health Command-Pacific Best Medic competition at Joint Base Lewis-McChord, Wash. August 7, 2018. The competition brought the best medics across the Pacific Region - Washington, Hawaii, Alaska, Japan and Korea. Top performers in each respective unit participating in the competition are as follows:

### REGIONAL HEALTH COMMAND-PACIFIC:

- Sgt. 1st Class Adam Pohovey  
Madigan Army Medical Center
- 1st Sgt. Daniel Cummings  
Brian Allgood Army Community Hospital

### 7TH INFANTRY DIVISION:

- Spc. Ulysses Dubon  
2nd Stryker Brigade Combat Team
- 1st Lt. David McKeon  
296th Brigade Support Battalion

### 62ND MEDICAL BRIGADE:

- Sgt. Samuel Arnold  
520th MC
- Staff Sgt. Andrew Hardin  
520th MC

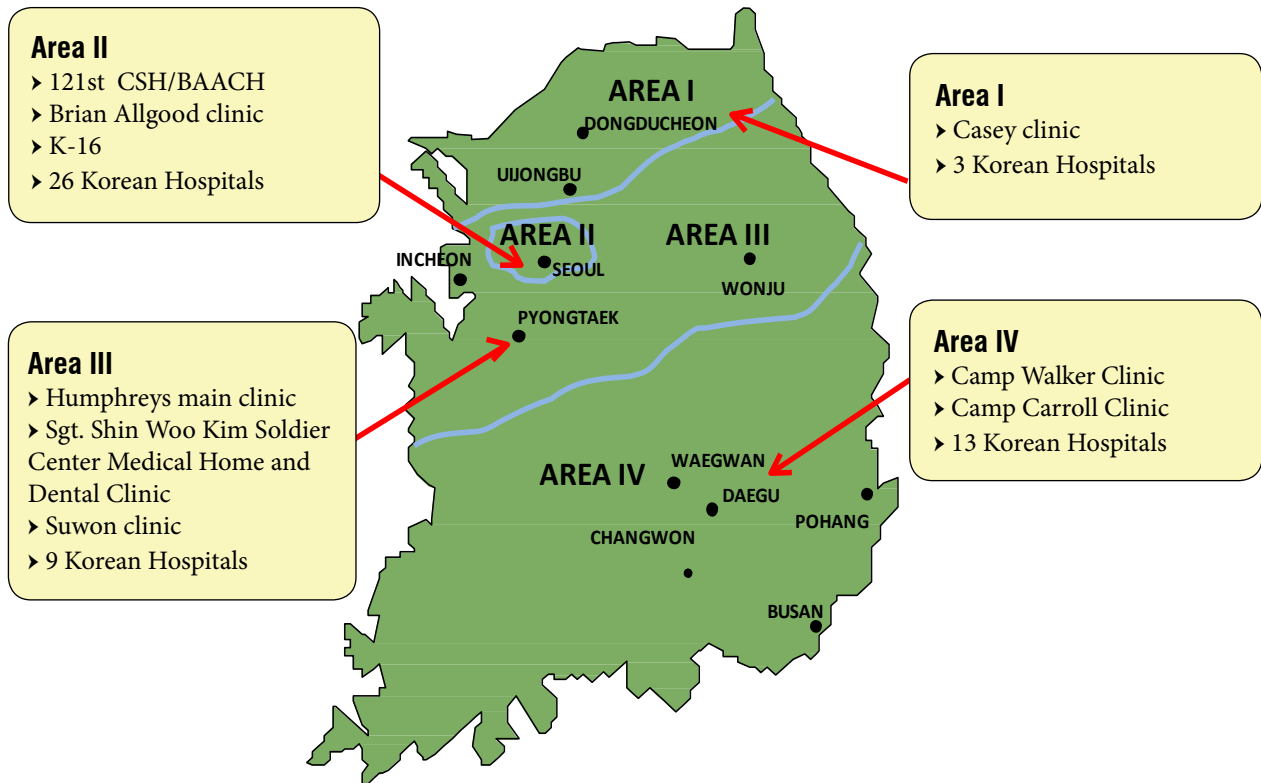
These winners from each unit will compete in the 2018 CSM Jack L. Clark Jr. Best Medic Competition at the Army Medical Command competition at Camp Bullis, Texas, in September.



# 65th Medical Brigade

## 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

### 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)

### 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

### Suwon Clinic

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

### MSG Henry L. Jenkins Patient Centered Medical Home

- 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)

### Camp Carroll Clinic

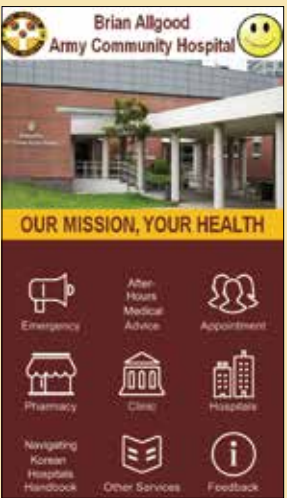
- Primary Care (18-65yrs)
- Pharmacy
- Laboratory
- X-ray
- Hearing exams
- Immunizations
- PHAs
- Occupational Health
- Public Health Nurse
- Physical Therapy (hiring)

### 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

### K-16 Clinic

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



iPhone/Android App



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

Making Appointments

- 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.



Emergency Services In and Around USAG Humphreys

**Ajou University Hospital**  
42 Km, 1089 Beds, New Trauma Center, Helipad, OB/GYN

**St. Vincent's Hospital**  
40 Km, 800 Beds, Dermatology, Woman's Clinic, OB/GYN

**Dankook University Hospital**  
30 Km, 800 Beds, NICU/Peds, Cardio, Neuro, Ortho, OB/GYN, Psych, MRI, Helipad, EENT

**Hallym University Dongtan Sacred Heart Hospital**  
41 Km, Emergency Medical Care and Specialty Clinics

**Osan AFB Hospital ER**  
20 Km, Limited After Hours Urgent Care Clinic

**St. Mary's Hospital**  
10 km, Emergency Room

**Good Morning Hospital**  
10 km, Emergency Room

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**



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

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)

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

VET CLINIC

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



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✓ **With 15 years of dental studies and training at the most prestigious schools and hospitals** (University of Pennsylvania School of Dental Medicine, University of Illinois at Chicago, NYU Medical Center), Dr. Kim has successfully treated thousands of patients of all ages and ethnic backgrounds.

✓ **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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- Speed Braces/ Clear Braces / Invisalign

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- Fillings, Crowns, Root Canal, Implants
- Cosmetic Dentistry : Veneers, Whitening



**Dr. JAY H KIM DMD, MS**  
U.S. Certified Orthodontic Specialist

- **University of Pennsylvania**  
School of Dental Medicine (DMD)
- **University of Illinois at Chicago**  
Orthodontic Specialty Residency/ MS
- **NYU Medical Center**  
Reconstructive Plastic Surgery: Fellowship
- **Catholic University of Korea**  
Director & Professor
- **Member of American Association of Orthodontists**



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- \* Subway # 7 Line (Exit .12)
- Find Us on **Facebook** "IVY dentalclinic"



#### 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 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**

#### 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 II

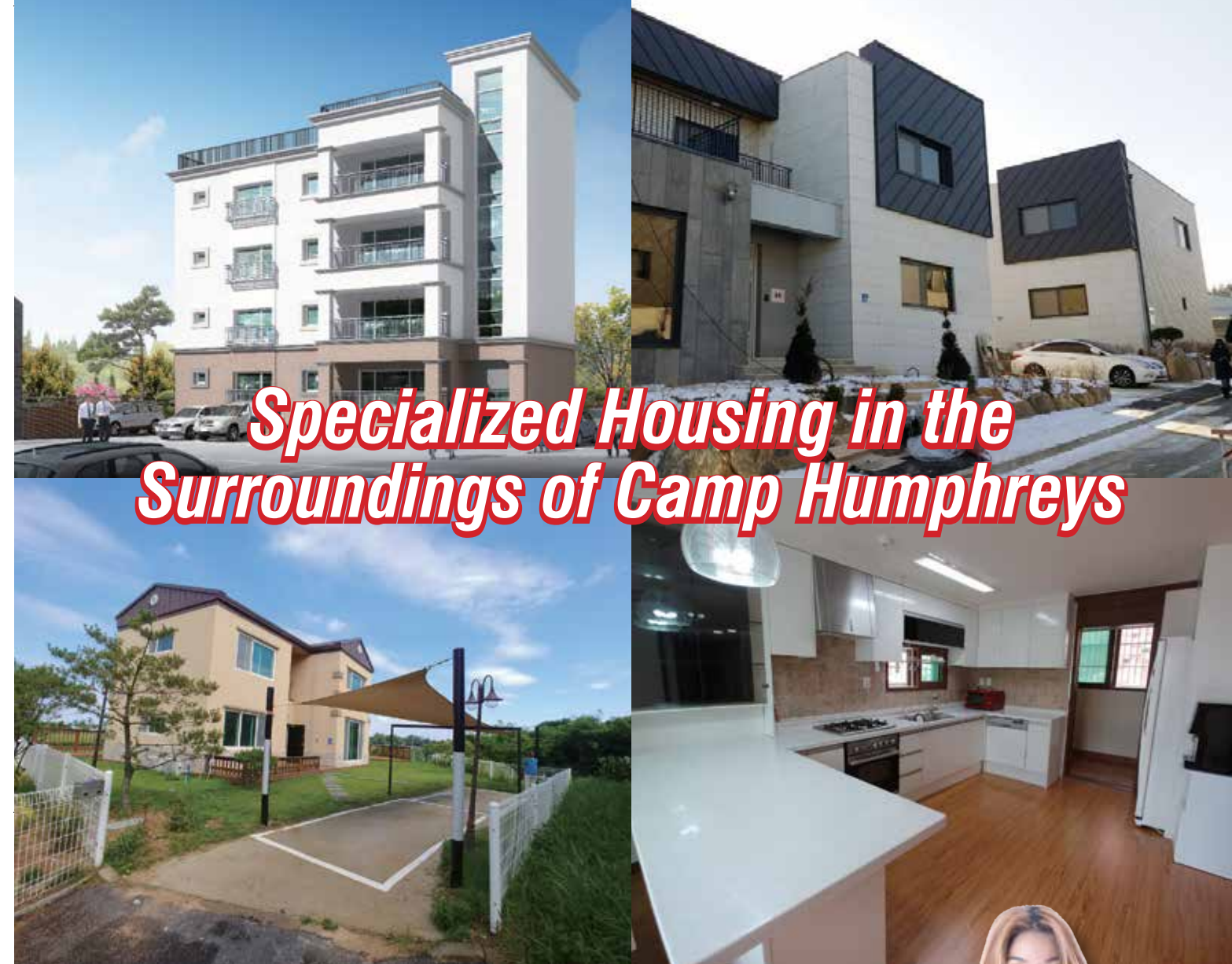
- AHS Korea **02-749-7915**
- Yeouido St. Mary's Hospital **02-3779-2212**
- Seoul St. Mary's Hospital **02-2258-6818**
- Drs. Woo&Hann's Skin and Laser Clinic **02-777-2991**
- The Mindcare Institute **070-8888-8277**
- Hangang Sacred Haert Hospital **02-2639-5025**
- Severance Hospital **02-2228-5819**
- 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**



An airman from 51st Security Forces Squadron inserts a chest decompression needle to relieve tension pneumothorax in a simulated casualty during the August 13-17, 2018 Joint Combat Life Saver course at Osan Air Base, Republic of Korea. Airmen and Soldiers participated in the five-day course, conducted by 35th Air Defense Artillery Brigade, which brought military members from various units to train on critical battlefield care. See story on pages 32-33. (Photo by StaffSgt. Todd Pouliot, 35th Air Defense Artillery Brigade Public Affairs Office)



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